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Comments for the Commission on Evidence-Based Policymaking

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I.   Introduction

Co-chairs Abraham and Haskins and other members of the Commission on Evidence-Based Policymaking, thank you for inviting me to participate in today's panel, "Non-Governmental Demand for Evaluation: Capacity to Support Public Good Activities." I am happy to be a part of this panel because evaluating program impact in the non-profit social services sector is a focus of the Wilson Sheehan Lab for Economic Opportunities (LEO), a research lab at the University of Notre Dame I co-founded in 2012. At LEO, we aim to identify the innovative, effective and scalable programs and policies that reduce poverty and improve lives in the U.S. We are optimistic that this Commission's work will help us build the body of reliable evidence necessary to identify and promote effective social programs and policies.

When the Commission on Evidence-Based Policymaking was launched, it was charged with finding better ways for government to use data in policy decisions. Speaker Paul Ryan, one of the sponsors of the legislation that created the Commission, often notes the need for better information on what works in government. As he stated in a recent press release:

> "Right now, Washington measures success by how much it spends, not by how much it helps people. This commission will help change government's old ways of thinking and make better use of the data we get so that we can make more of a difference in people's lives."[1]

This call for more effective government programs was echoed by his co-sponsor, Senator Patty Murray:

> "We all agree that the government we have should work as well as possible, so I hope to further build on this foundation with continued bipartisan work to help improve the effectiveness of the federal government."[2]

While there is clearly a need for more information on the effectiveness of government programs to promote evidence-based policymaking—some estimates suggest as little as 1 percent of non-

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[1] Speaker Ryan's Press Office, "Speaker Ryan Names Appointees to Evidence-Based Policymaking Commission," June 2016. http://www.speaker.gov/press-release/speaker-ryan-names-appointees-evidence-based-policymaking-commission.

[2] Senator Patty Murray's Press Office,
http://www.murray.senate.gov/public/index.cfm/newsreleases?ID=B402B72B-547C-47EB-83B7-E64BFDD8A2EF.

defense discretionary dollars are backed by any hard evidence[3]—we need to do more than evaluate government programs. Many federal programs are shaped by what happens outside of government. Frequently, national initiatives are scaled-up versions of local programs run by non-governmental agencies such as non-profit social service providers. Moreover, the federal government spends billions of dollars supporting these social programs, which impacts the lives of millions of families across the country. These social programs have the potential to inform policymakers about which investments are most likely to move the needle on a large scale. To design better programs and initiatives in Washington, we need to know what works outside of Washington.

Unfortunately, typically even the most promising non-governmental programs are not rigorously evaluated, in large part because social service providers lack access to the resources and data necessary to measure impact. Even when programs are shown to be effective, it can be challenging for interested service providers to replicate this success. These are significant obstacles, but ones the Commission could help providers overcome.

II.   How Social Service Providers Shape National Policy

Social service providers play an essential role in developing and implementing innovative programs to reduce poverty and improve lives. These providers offer health programs, youth development programs, job training programs, emergency financial assistance, housing assistance, and other essential programs to communities across the country. According to the National Center for Charitable Statistics (NCCS), these programs amount to more than $200 billion annually.[4]

Many large, national programs were initially designed and implemented at the local level and scaled-up precisely because they were shown to be effective. For example, the Nurse-Family Partnership (NFP), a home visitation program for new, low-income mothers, started as a small intervention in Elmira, NY. Backed by several randomized controlled trial (RCT) evaluations showing that the program improved outcomes for both mothers and children, the NFP has been scaled-up and now serves more than 32,000 families in 42 states.[5,6]

However, programs such as the NFP are the exception. Local programs are often replicated and scaled-up with little or no evidence on program effectiveness. Once these programs are implemented on a large-scale, it becomes difficult to scale them back, even if new evidence shows that they may not be having the intended impact. Consider the case of the Even Start Literacy Program, a national initiative established in 1989 that was designed to improve both child and parent literacy. Three national evaluations showed that the program had little impact—children and parents in the treatment group "did not gain more than children and parents in the

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[3] Nussle, Jim and Peter Orszag (2014). "Let's Play Moneyball," in Moneyball for Government. J. Nussle, & P. Orszag, eds. Disruption Books.

[4] Total revenue in 2013 for the human services sector was estimated to be $214 billion; see Urban Institute, National Center for Charitable Statistics, Core Files (Public Charities, 2013). http://nccsweb.urban.org/PubApps/showDD.php#Core%20Data.

[5] http://toptierevidence.org/programs-reviewed/interventions-for-children-age-0-6/nurse-family-partnership.

[6] See Chapter 2 of Haskins, R., & Margolis, G. (2014). *Show Me the Evidence: Obama's Fight for Rigor and Results in Social Policy*. Brookings Institute Press.

control group."[7] Even after the release of these findings, more than $1 billion was allocated to the program, and it was more than 10 years before resources were redirected to alternative interventions.[8]

Evidence on what works best in the social services sector—and for whom and under what circumstances—can inform policy decisions at the national level even when a local program is not replicated. For example, the compelling evidence from the Perry Preschool Project has been critically important in shaping federal investments in early childhood programs. As Nobel Laureate James Heckman describes, "The economic case for expanding preschool education for disadvantaged children is largely based on evidence from the HighScope Perry Preschool Program."[9] Similarly, the documented success of the NFP is a primary reason the federal government has invested millions of dollars in other home visitation programs.

III.   Barriers to Evidence-Based Programming in the Social Services Sector

Despite the size of the social services sector and the importance that social programs play in the development of evidence-based policy at the national level, there is relatively little information about the impact and effectiveness of these social programs. In fact, many service providers launch new programs based on anecdotal evidence or scale-up programs before generating evidence of impact. Why is credible evidence so hard to come by? While there are many obstacles at play here, the three most important are: 1) limited access to the resources necessary to measure impact, 2) lack of data on key outcomes, and 3) little information about how to readily identify and replicate effective programs.

Limited Access to Resources: Many social service providers have limited access to the resources necessary to measure impact. Funding may be restricted to program implementation and exclude impact evaluations that could inform program design and improvement. Providers may not see opportunities to measure outcomes at reasonable costs and on reasonable timelines and, therefore, may not request evaluation resources from government grants, philanthropy, and other funders. In addition, providers may not know how to connect with researchers who have expertise in reliable evidence-building in the social services sector.

Lack of Data: Even when funding is available to support reliable evidence-building, social service providers may not collect or have access to the data necessary to evaluate outcomes. Many providers collect information about the clients they serve, tracking outputs such as the number of meals provided or number of beds filled in a homeless shelter. But collecting information on outcomes—the impact that the program had on the client rather than the services provided—is much less common. Outcome data can be more difficult to collect, particularly on intermediate and long-term outcomes achieved after a client has completed a program. In

[7] U. S. Department of Education, Planning and Evaluation Service, Elementary and Secondary Education Division, "Third National Even Start Evaluation: Program Impacts and Implications for Improvement," Washington, D.C., 20202. http://www2.ed.gov/rschstat/eval/disadv/evenstartthird/toc.html.

[8] Bridgeland, John and Peter Orszag (2013), "Can Government Play Moneyball?" *The Atlantic*, July/August. http://www.theatlantic.com/magazine/archive/2013/07/can-government-play-moneyball/309389/.

[9] Heckman, James, Seong Hyeok Moon, Rodrigo Pinto, Peter A. Savelyev, Adam Yavitz. "The rate of return to the HighScope Perry Preschool Program," *Journal of Public Economics* 94 (2010) 114–128

addition, few service providers have access to data on outcomes for a comparison group of individuals, which is necessary to isolate program impact.

Collecting outcome data in an evaluation can be an expensive proposition. Surveys can be used to collect information on outcomes, but an hour-long survey can cost upwards of $500. Fortunately, in many instances, administrative records already contain information on key outcomes such as employment, earnings, college persistence and completion, contact with the criminal justice system, and hospital admissions, among others. Moving to Opportunity and other large-scale impact evaluations have relied heavily on these kinds of administrative data. The challenge is that these data are typically not available to social service providers and their research partners for impact evaluation purposes.

Limited Information on Identifying and Replicating Effective Programs: Another barrier to evidence-based decision-making is that many social service providers looking to design new programs or improve existing programs do not have ready access to information about the most effective programs. Even when such information is available, it can be difficult for providers to sift through numerous studies and/or to separate strong evidence from weak evidence. In addition, there is often limited information about how to successfully implement and continuously evaluate programs with evidence of effectiveness.

As a result of these barriers, relatively few social programs have been rigorously evaluated or, where there is reliable evidence of effectiveness, replicated. Consequently, significant resources are expended on programs and initiatives that have little or no information about impact. Many of these programs are quite large and national in scope. For example, each year the U.S. Office of Refugee Resettlement (ORR) is responsible for helping tens of thousands of refugees resettle in the U.S. In 2014 alone, approximately 70,000 refugees were resettled.[10] To assist in the resettlement process, ORR contracts with Voluntary Agencies, typically private social service providers, to offer a variety of interventions designed to help refugees transition to life in the U.S., including case management and assistance with finding housing and applying for federal benefits. The government spends hundreds of millions of dollars annually to assist in these transitions, but there is very little information about how refugees fare beyond six months after initial resettlement. To what extent do refugees rely on government programs over time? How many refugees have found employment? Which components of resettlement services are the most effective for achieving established outcomes? These questions remain unanswered despite the fact that administrative data exist to answer them.

IV.   Building a Body of Reliable Evidence in Social Services

Despite these challenges, we are starting to see some progress. An increasing number of reliable impact evaluations have been implemented in the social services sector. Many of these studies have relied on administrative data. LEO partners with a variety of service providers across the country to evaluate the impact of their programs. For example, in a recent study, LEO examined

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[10] Evans, William and Daniel Fitzgerald (2016), "The Social and Economic Assimilation of Refugees: Evidence from the ACS," Wilson Sheehan Lab for Economic Opportunity Working Paper.

the impact of emergency financial assistance on preventing homelessness in Chicago.[11] Nearly every major city in the U.S. has a hotline to help individuals facing homelessness. However, there had never been a rigorous evaluation of the impact of these hotlines and emergency financial assistance on actually preventing homelessness and other negative outcomes. In partnership with the Homelessness Prevention Call Center and All Chicago, LEO was able to link data on emergency financial assistance with data on homelessness. Our results showed that emergency financial assistance reduced the likelihood of homelessness among eligible individuals in Chicago by more than 75 percent.

In other projects, LEO has used administrative data from the criminal justice system to examine the impact of a juvenile diversion program; administrative data on college enrollment and degree completion to measure the impact of a coaching and mentoring program targeting low-income community college students; and administrative data on mortality to measure the impact of a senior housing program. These evaluations were possible because LEO was able to access administrative data. As we have seen firsthand, studies such as these can help shape national policy on social issues and inform other service providers about best practices.[12]

V.   How the Commission Can Help

I am encouraged by this Commission's efforts to ensure that government policies and initiatives in the social services sector are backed by reliable evidence. As I have argued, in order to promote evidence-based policymaking, we need more evidence on what works best, for whom, and under what circumstances outside of government. There are a number of strategies to encourage the development of a stronger base of reliable evidence in the social services sector. Let me highlight a few:

Recommendation 1: Incentivize social service providers to measure program impact

The most innovative ideas for social programs frequently come from social service providers. To encourage these providers to build strong evidence on the impact of their programs, there should be federal funding for rigorous evaluation. This funding could be provided through either government agency initiatives and/or new legislation.

A current example of the federally-funded approach is the Department of Education's Investing in Innovation (i3) initiative, which has used a tiered-evidence model to distribute more than $1 billion in grants to improve student achievement. In this tiered-evidence approach, funds are allocated by merit-based competitions, as opposed to formula grants where geography or other factors are more important than rigorous evidence. The lowest tier ("Development") i3 grants provide support for promising initiatives that currently lack rigorous evidence. These grants

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[11] Evans, William, James Sullivan, and Melanie Wallskog (2016), "The Impact of Homelessness Prevention Programs on Homelessness," *Science*, 353(6300), 694-699.

[12] For example, the results from Seroczynski, A.D., William N. Evans, Amy D. Jobst, Luke Horvath and Giuliana Carozza (2016), "Reading for Life and Adolescent Re-Arrest: Evaluating a Unique Juvenile Diversion Program," *Journal of Policy Analysis and Management*, 35(3), 662–682, were a catalyst for the replication of the Reading for Life program in three other counties across the country, and these results were highlighted in a White House Council of Economic Advisors report, "Economic Perspectives on Incarceration and the Criminal Justice System," April 2016.

create a pipeline for innovative programs that, if proven effective, can be scaled-up for broader impact. The evidence requirement for the top tier ("Scale-up") i3 grants includes one or more well-designed and implemented RCTs or quasi-experimental studies.

Occasionally, funding to test new programs is made available through legislation. For example, Section 4022 of the 2014 Farm Bill authorized $200 million to support 10 pilot projects designed and implemented by state agencies to reduce the need for public services and encourage employment among SNAP participants. Each of these pilot projects is required to have an independent evaluation that compares outcomes for households participating in the pilot to a "control group" of households not participating in the pilot. The legislation also requires participating states to make administrative data available in order to track outcomes. Pilot initiatives like this should be more commonplace, and the funds should be made available to both state and local government agencies and private social service providers.

Recommendation 2: Make administrative data accessible and standardize the process by which social service provider data can be linked to administrative data

As the Commission works to make administrative data available for impact evaluations, it should make sure that these data are accessible to social service providers and their research partners. In particular, providers should be able to link micro-level data on program participants (and a comparison "control group") to administrative data for rigorous impact evaluations. In addition, clear and consistent protocols should be established for how service provider data can be linked to administrative data. For example, service providers should have a standardized list of data points to collect on program participants and a "control group" in order to successfully link their data to administrative data. There should also be a standardized process for addressing privacy concerns when linking and sharing data, including clear and consistent protocols for informed consent.

Examples of administrative datasets that would be particularly useful to social service providers include: earning records, utilization of public benefits, hospitalization and other health outcomes, health care utilization, arrest records and other criminal justice-related information, credit reports, and education records. Making these data available to social service providers and their research partners would facilitate numerous impact evaluations, incentivize more researchers to focus on policy-relevant studies, and provide policymakers with better evidence of program impact and effectiveness—all resulting in the design of more effective social service programs and policies and, in turn, improved and accelerated outcomes.

Recommendation 3: Disseminate credible evidence and facilitate the replication of proven programs

In order to design and implement evidence-based programs, social service providers need a way to easily track down and navigate the existing body of evidence on what works best, for whom, and under what circumstances. A national repository of well-designed, well-implemented impact evaluations would help to promote a broader culture of continuous evaluation and improvement in the social services sector. There are already several clearinghouses with important information

about effective programs, which can serve as a foundation for moving forward.[13] One important challenge here is helping stakeholders distinguish among the different tiers of evidence. This means that stakeholders need clear standards for what constitutes reliable evidence. Ideally, an independent entity would assess evaluations and identify those that are reliable.

However, reliable evidence alone is not enough to ensure that effective programs are implemented broadly—because providers rarely have access to information on how to successfully replicate these proven programs. Thus, reliable evidence should be complemented by guidelines and funding to replicate evidence-based programs in new settings and/or with new target audiences, including resources for continuous evaluation and improvement. Such support would help to ensure that the most effective programs are implemented broadly and with fidelity. Without fidelity, it will be harder to reproduce the results and impact from the initial program.

VI.   Conclusion

A critical first step to ensuring that government programs are backed by credible and reliable evidence is to understand what works best in the social services sector, for whom, and under what circumstances. While there is still relatively little reliable evidence on the effectiveness of non-governmental social service programs, the Commission can build on existing momentum to accelerate the pace and quality of evidence-building by (1) recommending that more resources be made available for reliable impact evaluations, (2) streamlining and standardizing access to key administrative data, and (3) expanding support for the replication of effective programs. These efforts would help to ensure that social programs are effective in promoting equality of opportunity and improving the lives of vulnerable populations in both the short- and long-term.

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[13] A well-designed model of how to synthesize a large body of evidence is the What Works Clearinghouse, which is run by the U.S. Department of Education's research arm: the Institute of Education Sciences (IES). The U.S. Department of Labor offers a similar service for labor topics through the Clearinghouse for Labor Evaluation and Research (CLEAR). Outside the government, the Coalition for Evidence-Based Policy provides a nice one stop shop for what works in social policy. In 2015, the Coalition was integrated into the Laura and John Arnold Foundation. Its key content will soon be migrated to http://www.arnoldfoundation.org/initiative/evidence-based-policy-innovation/, and will be regularly updated on that site.