

Handout #2: Evidence-Based Practice

Q: What are evidence-based programs?

A: Programs that have proven to be effective at different levels of research

When you look for an evidence-based program to adapt, be aware that they have been through different levels of research. Even research-tested intervention programs (RTIPs) you can find on Cancer Control PLANET (<http://cancercontrolplanet.cancer.gov/>) vary among Levels 1, 2, 3, and 4. In the breakdown listed below, a Level 1 program has the strongest evidence. A Level 5 program has acceptable evidence. A Level 1 program may be more effective than a Level 5 program, but a program that meets Level 5 requirements may be a useful model.

Level 1

A program that:

- Is funded by a peer-reviewed grant. This means that a panel of experts had to approve the intervention and evaluation study design before it received grant funds for planning, implementation, and evaluation.
- Has findings published in a peer-reviewed journal
- Is part of a systematic review. This means that other researchers have tested similar programs.
- Uses strategies listed in the Guide to Community Preventive Services (Community Guide) (<http://www.thecommunityguide.org/>). The Community Guide summarizes “systematic reviews.” It looks for the best practices for effective programs.

Level 2

A program that:

<ul style="list-style-type: none">• Is funded by a peer-reviewed grant. This means that a panel of experts had to approve the intervention and evaluation study design before it received grant funds for planning, implementation, and evaluation.• Has findings published in a peer-reviewed journal• Is part of a systematic review. This means that other researchers have tested similar programs.• Uses strategies listed in other systematic reviews, such as Cochrane (http://www.cochrane.org/index2.htm). However, it is not recommended by the Community Guide.	OR	<ul style="list-style-type: none">• Has findings published in a peer-reviewed journal but is not funded by a peer-reviewed grant• Is part of a systematic review. This means that other researchers have tested similar programs.• Uses strategies listed by the Community Guide (http://www.thecommunityguide.org/)
--	----	--

Level 3

A program that:

- Has findings published in a peer-reviewed journal but is not funded by a peer-reviewed grant
- Is part of a systematic review. This means that other researchers have tested similar programs.
- Uses strategies listed by other systematic reviews, such as Cochrane (<http://www.cochrane.org/index2.htm>). However, it is not recommended by the Community Guide.

Level 4

A program that:

- Is funded by a peer-reviewed grant. This means that a panel of experts had to approve the implementation and evaluation study design before it received funds for planning, implementation, and evaluation.
- Has findings published in a peer-reviewed journal
- Uses strategies that have been proven effective in a single study. But they have not been tested in other research studies or been evaluated as part of a systematic review.

Level 5

A program that:

- Has findings published in a peer-reviewed journal but was not evaluated and funded by a peer-reviewed grant.
- Uses strategies that have been proven effective in a single study. But they are not supported by other research or part of a systematic review.

Q: Why would one use an evidence-based program?

A: We promote the use of these interventions because we know that they had some effect on the community in which they were first conducted. They are therefore a good starting place.

They may be more cost effective. Using such a program shortens the time it takes to develop a new program, reduces the amount of research needed, and helps to focus the evaluation.

Rather than creating a new intervention, program planners are encouraged to use evidence-based programs and methods and to carefully adapt them to fit the needs of their audience and the capacity of their organization. Some of these programs can be found in Step 4 of Cancer Control PLANET: <http://cancercontrolplanet.cancer.gov/>.

Q: What does “research-tested” mean?

A: Research-tested is a feature of evidence-based practice. It means that the program was tested in a peer-reviewed and funded research study. A program may not be as effective once it leaves

the research setting if there are changes in parts of the program used, the environment, or the population served. However, the research-tested program serves as a good starting place.

Q: What is Cancer Control PLANET?

A: Cancer Control PLANET (<http://cancercontrolplanet.cancer.gov/>) is a Web portal to data and resources. These resources can help planners, program staff, and researchers plan, conduct, and evaluate cancer control programs. The five steps to planning a cancer control program, as found on Cancer Control PLANET (<http://cancercontrolplanet.cancer.gov/>), are:

Step 1: Assess the program priorities by looking at the cancer burden on a local, State, or national level.

Step 2: Find program and research partners to help with your efforts.

Step 3: Look for interventions that work by reviewing strategies and approaches that have been shown to be effective.

Step 4: Find RTIPs and products to adapt for your audience.

Step 5: Review resources needed to plan, implement, and evaluate a program.

Q: How are the evidence-based programs on PLANET rated and by whom?

A: Programs on Cancer Control PLANET (<http://cancercontrolplanet.cancer.gov/>) have been reviewed by a panel of topic experts in the field. Programs are rated on 17 criteria. The following six are being reported at this time:

- Dissemination capability
- Cultural appropriateness
- Age appropriateness
- Gender appropriateness
- Integrity
- Program utility.

For more detailed information on the program ratings used, please visit the National Registry of Effective Programs and Practices (NREPP):

<http://www.modelprograms.samhsa.gov/template.cfm?page=nreppen>.

Q: When should I use an evidence-based/research-tested intervention program rather than developing my own?

A: Evidence-based programs such as the RTIPs on Step 4 of PLANET (<http://cancercontrolplanet.cancer.gov/>) have been shown to be effective in the populations and settings in which they were studied. You are more likely to have success by using or adapting an RTIP which has been tested in the field than by creating a new program for the same population held in the same setting.

Creating a new program may be the best solution if:

- There are no research-tested cancer control programs that would be suitable for your populations or settings.
- None can be adapted to fit those needs without sacrificing the utility of the program.

However, in creating a new program, it would be wise to:

- Review the research on similar programs. (A summary of these are in the Guide to Community Preventive Services on Cancer Control PLANET Step 3 (<http://cancercontrolplanet.cancer.gov/>).)
- Involve local cancer control research experts in the design and evaluation of your new program. (See Cancer Control PLANET Step 2 (<http://cancercontrolplanet.cancer.gov/>) for State and regional contacts who can help you find researchers in your area.) Your new program can become listed on RTIPs if it is tested in a peer-reviewed study and published in a peer-reviewed journal.