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# Lessons Learned on Creating an eCompendium for EBPs for Latino Populations

Luis A. Vargas, Ph.D.

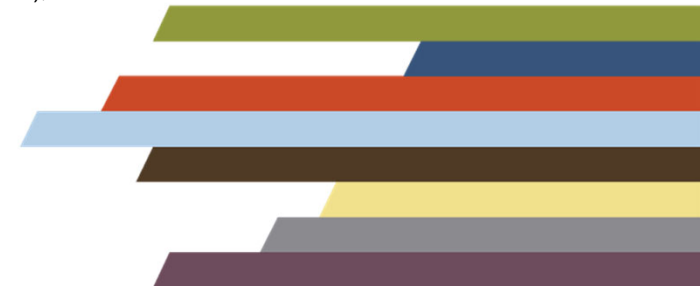
Consultant, National Latino Behavioral Health Association

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## **NLBHA's Mission**

The Mission and Goal of The National Latino Behavioral Health Association is to influence national behavioral health policy, eliminate disparities in funding and access to services, and improve the quality of services and treatment outcomes for Latino populations.

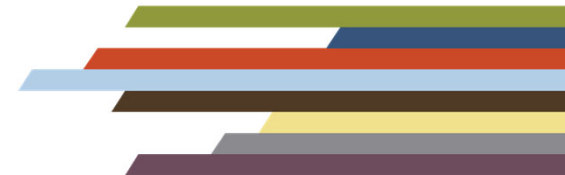
NLBHA Executive Director: Fredrick Sandoval, MPA

## **NH&L ATTC and PTTC Mission**

The mission of the National Hispanic and Latino Addiction and Prevention Technology Transfer Centers is to provide high-quality training and technical assistance to improve the capacity of the workforce serving Hispanic and Latino communities in behavioral health prevention, treatment, and recovery.

NH-L ATTC and PTTC Director: Pierluigi Mancini, Ph.D., MAC

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# Other Members of the National Latino Behavioral Health Association Subcommittee on the eCompendium and Guide on Evidence-Based Programs

- **Arturo Gonzalez, Ph.D. (Chair)**, Administrative, Governance, & Program Planning Consultant, National Latino Behavioral Health Association
- **Rebecca Maldonado Moore, Ph.D., LMSW**, Professor, Facundo Valdez School of Social Work, New Mexico Highlands University
- **Sandra Del Sesto, M.Ed., ACPS**, Consultant/Master Trainer at Educational Development Center, Waltham, MA



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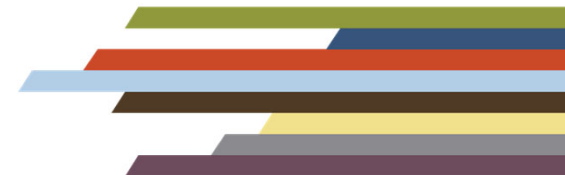
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# Why Create an eCompendium?

- Providers of EBPs face a major challenge in identifying and selecting culturally appropriate evidence-based programs (EBPs) for Latino communities.
- Current registries of EBPs provide very few EBPs that are culturally adapted, culture specific, or culturally informed/responsive to Latino populations.
- Most EBPs in registries are what we called “generic” programs; i.e., programs originally developed and implemented on primarily (with some representation of various minority ethnic/racial groups) or exclusively on non-ethnic-minority samples.
- Registries provide limited, easily accessible, information about EBPs that would be helpful in selecting EBPs that might be better suited to Latino populations.



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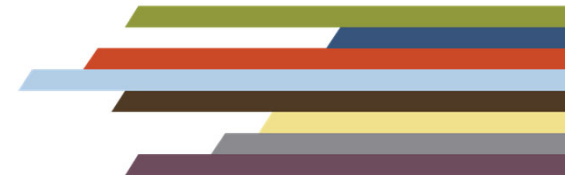
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## What Is the eCompendium?

- The eCompendium includes listings from 6 national and state registries.
- The registries from which programs were selected had to meet these requirements:
  - The criteria had to be comparable to other registries in terms of how the registry assessed the degree of strength of evidentiary support (e.g., good vs. adequate support).
  - The criteria used by the registry had to take into consideration effect size of significant findings (i.e., How much of a meaningful effect did the program actually have; was the positive result of the program substantively significant?).
  - The programs determined to be evidence based had to have evidence of a sustained effect on the participants after the end of the implementation of the program.
  - Only those registry programs that targeted alcohol or drug misuse, tobacco/nicotine use (including vaping), behavior or emotional functioning, suicide risk, or post-traumatic stress are included in the eCompendium.



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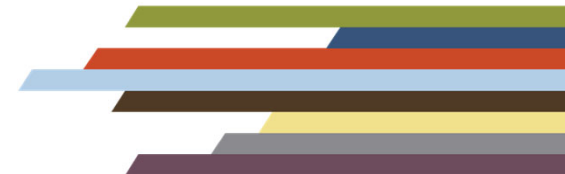
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# What Are the Registries from Which Programs Were Reviewed for Inclusion in the eCompendium?

- Four of the selected program registries included programs that can be implemented in a variety of settings (e.g., behavioral health clinics, community organizations, alcohol/drug abuse centers, etc.)
  - **Crime Solutions:** National Institute of Justice (<https://crimesolutions.ojp.gov>)
  - **Blueprints:** Blueprints for Healthy Youth Development (<https://www.blueprintsprograms.org>)
  - **CA Evidence-Based CH:** California Evidence-Based Clearinghouse for Child Welfare (<https://cebc4cw.org>)
  - **Social Programs:** Registry of Social Programs That Work (<https://evidencebasedprograms.org>)



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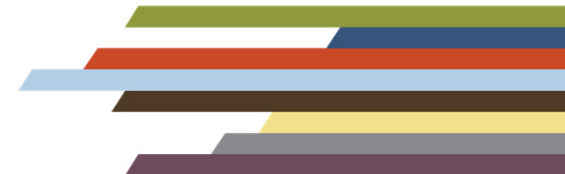
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# What Are the Registries from Which Programs Were Reviewed for Inclusion in the eCompendium?

- Two of the selected program registries were specific to school or school-district-wide settings
  - **CASEL:** Collaborative for Academic, Social, and Emotional Learning (<https://casel.org/guide/>)
  - **What Works CH:** What Works Clearinghouse (<https://ies.ed.gov/ncee/wwc>)



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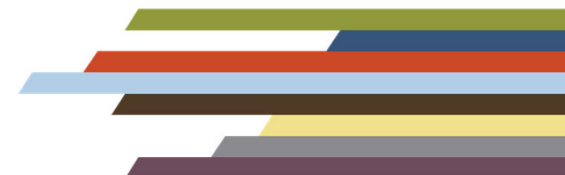
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# Categories and Descriptions Used for the Four Registries that List Programs that Can Be Implemented in a Variety of Settings

Category	Description
Focus Population	Families, parents, children, adolescents, or adults including brief description of the subpopulation (e.g., disadvantaged, divorced parents, etc.)
Program Name and Contact Information	E.g., Primary contact, website, developer, distributor, researcher
Target Problems or Risk Factors	E.g., Delinquency, alcohol and other drug problems, conduct or behavior problems, general risk
Level of Intervention	Universal, selective, or indicated
Setting	E.g., Behavioral health organization or agency, school, home, community, court, etc.
Latino program participants in the studies reviewed by the registry	Yes, No, or No Information.  If Yes: Minimal ( $\leq 15\%$ ), Moderate (16% to 30%), Substantial (31% to 55%), Primary (56% to 99%), Exclusively (100%), or # Unknown
Type of Program	Generic, Culturally Informed/Responsive, Culturally Adapted, or Culture Specific
Strength of Evidentiary Support	2-Star program (good evidentiary support) 1-Star program (adequate evidentiary support)
Cost of the Program	Yes or No (If Yes, URL in which registry the cost information can be found)
Availability of the program in Spanish and/or Portuguese	Yes or No (If Yes, name of the registry that provides this information)
Registry and Program Description	Link to the registry site that describes the program



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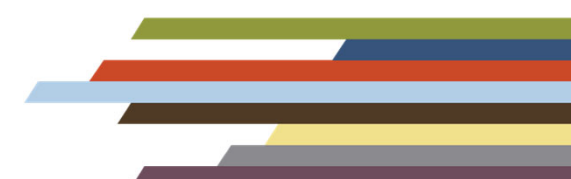
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# Categories and Descriptions Used for the Two Registries Specific to School or School-District-Wide Settings

Category	Description
<b>Grade Range Covered/Examined And Program Focus</b>	Indicates the grade ranges for which the program is intended and the grade range of the samples on which the strength of evidentiary support is based (e.g., K-6/K-3)  Also provides a brief description of the focus of the program (e.g., students at risk for emotional disturbance, students with disabilities, etc.)
<b>Program Name and Contact Information</b>	E.g., Primary contact, website, developer, distributor, researcher
<b>Targeted Behavioral Area of Effect of Prevention/Intervention</b>	E.g., Reduced conduct or behavior problems, improved social-emotional skills/functioning, reduced emotional distress, etc.
<b>Geographic Location</b>	Areas in which the studies to assess the program's effectiveness were conducted, either in broad terms, e.g., "Midwest" or "Northeast," or by state
<b>Population Density</b>	Density areas in which the studies to assess the program's effectiveness were conducted: urban, suburban, or rural
<b>Latinos in the School Population Examined</b>	Yes or No (if Yes, actual percentage of Latinos)
<b>Delivery Method</b>	School, Whole Classroom, Small Group, Individual
<b>Strength of Evidentiary Support</b>	2-Star program (good evidentiary support) 1-Star program (adequate evidentiary support)
<b>Cost of the Program</b>	Yes or No (If Yes, URL in which registry the cost information can
<b>Registry and Program Description</b>	Link to the registry site that describes the program



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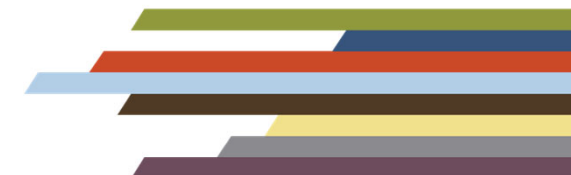
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## What Are the Lessons Learned?

- There is much more to engaging in a culturally responsive, evidence-based practice than simply selecting an EBP.
- An **evidence-based practice is the integration of research evidence** (based on experimental or quasi-experimental studies) **with experiential** (based on the professional insight, understanding, skill, and expertise accumulated over time) **and contextual** (based on factors that address whether a strategy is useful, feasible to implement, and accepted by particular community) **evidence**. (Types of evidence from: Puddy, R. W. & Witkins, N., *Understanding Evidence Part 1: Best Available Research Evidence. A Guide to the Continuum of Evidence Effectiveness*. Atlanta, GS: Centers for Disease Control and Prevention, 2011)
- **Experiential** and **contextual evidence** is available (but often not acknowledged) largely in the local communities in which these programs will be implemented.



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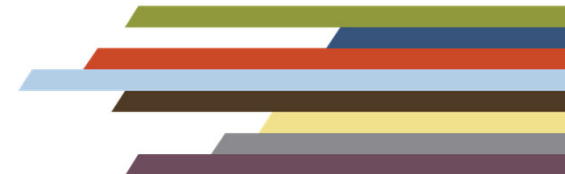
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# What Are the Lessons Learned?

- A conceptual framework is helpful in selecting and implementing an EBP in Latino communities.
- A Guide was necessary to provide this conceptual framework.
- The eCompendium assists and informs service providers, directors, administrators, and education leaders
  - in selecting a **research evidence-based** program that is the best **conceptual fit** (the degree to which a program is a good match for the task that needs to be done) to a Latino community, and
  - in engaging in a **preliminary process** of finding a good **practical fit** (the degree to which a program is a good match for the community for which it is intended); e.g., number of Latinos in study samples or geographical location where the program was implemented.

(c.f., Substance Abuse and Mental Health Services Administration, 2018, p. 5 for further information on conceptual and practical fit)



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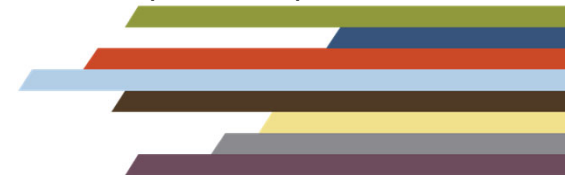
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# What Are the Lessons Learned?

- The Guide facilitates a decision-making process in reviewing and incorporating the **experiential** and **contextual evidence** that is available in a particular community; it describes a process for the user to find the best **practical fit** for the selected program for the community in which the program will be implemented.
- There is an over-emphasis on research evidence based on content/method/technique and a de-emphasis on experiential and contextual evidence; yet, all three types of evidence are essential to optimize the potential effectiveness of an EBP.



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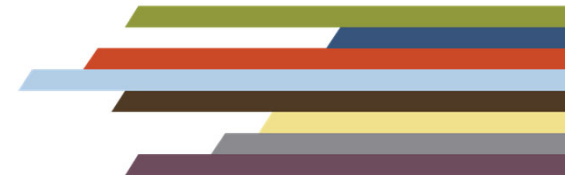
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# What Are the Lessons Learned?

- There is a lack of attention given to research-based, provider-participant relationship factors associated with positive outcomes of programs. Yet:
  - The program provider-participant relationship accounts for a substantial contribution to participant outcome independent of the specific program (i.e., content/method/technique).
  - The program provider-participant relationship appears to account for at least as much participant benefit as, and possibly more than, the particular program content/method/technique, particularly as pertains to intervention programs.
- Integrating provider-participant relationship training on these factors (e.g., alliance between provider and participant, collaboration between provider and participant, cohesion in participant group, provider empathy, and positive regard and affirmation by provider) are likely to maximize the effectiveness of an EBP.



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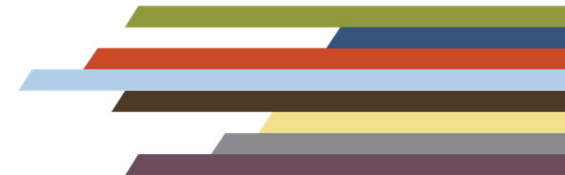
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# What Are the Lessons Learned?

- An important aspect of any EBP is that each is culturally based.
- In the case of generic programs, they are generally developed by European American researchers and implemented on largely European American samples.
- The theories on which these generic EPBs are based represent Western (i.e., European American) ways of thinking, communication styles, values, norms, and beliefs--all of which are culturally based.
- This cultural aspect is also a limiting factor in Latino-specific programs and Latino-adapted programs (e.g., a program that has demonstrated efficacy with Puerto Ricans from inner-city New York being considered for implementation with migrants originally from rural areas in Northern Mexico who are now farmworkers in Central California).



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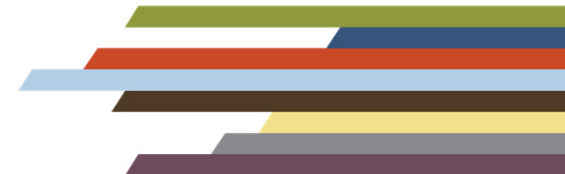
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## What Are the Lessons Learned?

- The use of generic EBPs on ethnic/cultural groups that differ considerably from the samples on which generic EBPs are based might result in the inadvertent yet surreptitious acculturation of the non-European American communities in which the generic EBPs are being implemented.
- For example, consider the ethical issues in the selection of a generic parenting program that focuses on parenting practices that promote the development in children of strong independence, self-efficacy, self-assertion, competitiveness, and individuation and discourages parenting practices that foster the development of communitarianism, collectivism, interdependence, and humility (e.g., not striving to stand out among peers) for implementation in a community of South American indigenous immigrants.



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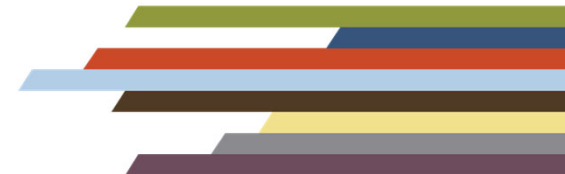
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## What Are the Lessons Learned?

- There is much more useful information that could be provided by registries to help users select generic programs that might be better suited to particular Latino communities (e.g., more detailed socio-demographic information).
- There are very few culturally adapted and culture-specific programs listed in the registries. In some cases, there are culturally adapted programs of generic EBPs in the literature but they are not mentioned or reviewed in the registries.
- Registries could provide information on more pertinent statistics, such as, effect sizes, confidence intervals, or odds ratios, that would be more useful in selecting an EBP, rather than only presenting statistical significance levels. (Only the *What Works Clearinghouse* does this.)
- It would be helpful to encourage researchers and registries to provide program outcomes that are de-aggregated by ethnic group and subgroup.



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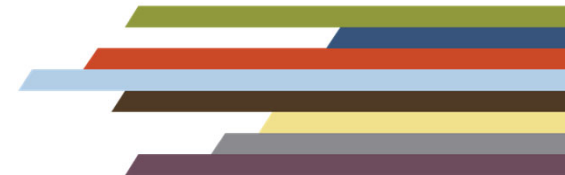
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[www.nlbha.org](http://www.nlbha.org)

[PTTCnetwork.org/hispaniclatino](http://PTTCnetwork.org/hispaniclatino)



Or directly at:

Pierluigi Mancini, PhD, MAC

[pierluigi@nlbha.org](mailto:pierluigi@nlbha.org)

678-883-6118

Dolka Zelaya, CPS

[dmzelaya@nlbha.org](mailto:dmzelaya@nlbha.org)

678-832-7033

Priscila Giamassi, MPM, CPS

[priscila@nlbha.org](mailto:priscila@nlbha.org)

678-822-1308



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