Creating a Culture of Evidence

Introduction

In botanical gardens around the country, one can often find a dazzling array of plants -- lush tropical orchids and spindly cacti, hillsides of tulips and lattices of roses. The range can be startling, the requirements to grow each plant diverse. One constant? In each and every acre or green house labor the gardeners, tending with clippers and hoes to plants exotic, fickle, and ordinary.

When we talk about evidence, we often envision a laboratory setting as ideal, imagining that we might run a test and receive results, a simple one-two process that, once complete, will tell us definitively whether a particular program—a plant, if you like—will grow and flourish in a particular setting under certain. But large-scale interventions, attacking multi-determined social problems, are more like gardens, affected by a hundred minute variables. After completing five case studies and dozens of interviews with practitioners across the field, we believe that the metaphor of a garden, rather than a laboratory test, better captures the cyclical, sustained, and people-centric work of evidence.

Our case studies profile various efforts to achieve more equitable outcomes for children and families: an asthma-reduction initiative at a children's hospital; two cradle-to-career pipelines built in struggling neighborhoods with history of disinvestment; an innovative reconfiguring of child protection practice; and a new approach to teaching remedial math in community colleges.

All of these efforts have produced results, in some cases remarkable ones. At the Carnegie Math Pathways, the percentage of students earning college math credit has tripled. The Harlem Children's Zone's pioneering programs have reached tens of thousands in East Harlem, and 95 percent of its Promise Academy's high school graduates were accepted to college in 2014. The Asthma Improvement Collaborative, at Cincinnati Children's Hospital, has reduced emergency-room admissions for asthma by 25 percent. In Catawba County, NC fewer children experience foster care re-entry.

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The interventions aim to help diverse populations: community college students, foster children, and teenagers in the fields of education, health, and well-being. The interventions themselves are diverse: some are newly designed and just finding their feet; others have been well-established for decades. The size of the interventions, too, varies: the Carnegie Math Pathways serves several thousand students; the Catawba County 'Success Coach' initiative, less than a hundred.

As might be expected with such a range, the methods of gathering and evaluating evidence vary widely. At the Harlem Children's Zone, they have over twenty different databases; at the Carnegie Math Pathways, networked learning across the country is key. As much as possible, we've tried to provide links and footnotes to allow practitioners to gather more information on their own. But for our purposes, what's important is that all the tools support the same goal of using and generating evidence in real time, in ways that promote refinement of strategies and further action in ways that allow others to benefit from the knowledge that is generated.

Returning to the notion of a diverse garden rather than a pristinely controlled laboratory, we contemplated the question, "What makes the difference as to whether a garden flourishes or not?" Often enough, people chalk it up to the gardener's "green thumb." So, too, in our case studies we observe that the gardeners—the leadership and staff—play a decisive role in creating a culture of evidence. But, as with a showcase garden, gardeners apply more than innate skills. They use the tools appropriate for the task and disciplined methods to track the results of their labor and intervening conditions so as to ensure gardens continue to thrive. These tools and methods are well known to both professional and weekend gardeners alike thanks to multiple texts and accessible examples of success.

In compiling these case studies, we sought to make the concept of a "culture of evidence" more accessible with illustrations of an approach we believe is necessary for complex strategies to improve equitable outcomes for families and communities. Thus, we went looking for the organizational features listed in Figure 1. We did not find every feature in each setting, but the presence of most of them in all cases led us to conclude that these features and how they are manifested in an organization are important to share and add to the knowledge base for initiative designers, administrators and evaluators.

Figure 1.
Features of a Culture of Evidence

→ Many sources of evidence inform intervention design

→ Results shape implementation

→ Goal-oriented networks accelerate knowledge development and dissemination

→ Attention to practice-based evidence and the experience of those most affected

→ A strong infrastructure supports continuous learning for improvement over time

→ Multiple evaluation methods fit diverse purposes

What we found is that the single most common feature – a critical element in all the initiatives studied – is perhaps also the feature that binds the rest into a coherent strategy. That is, a strong infrastructure for continuous learning connects all the other features. All efforts have made investment of personnel and fiscal resources to put a robust process in place. They all have at least one staff position dedicated to data and evidence review. These staff search for the evidence that will inform new directions, they analyze information gathered by the databases and look for trends that inform implementation and course corrections to stay focused on results. They are also the ones who conduct or commission multiple forms of evaluation to ensure diverse questions are being answered

with the right methods and they find ways to integrate qualitative data into their initiative reviews. These people work closely with initiative leadership to shape the on-going implementation agenda.

The directors and staff profiled here regularly make the rounds of their initiatives, reviewing data and charting next steps. All five profiled interventions use a regularly scheduled review meeting to monitor their progress and discuss potential programmatic or implementation changes. These meetings are essential for building a culture of evidence and supporting continuous learning as they directly engage all staff members while clearly delineating responsibilities for improvement.

At the Harlem Children's Zone, the program review meetings are structured after the CompStat review popularized by the New York City police department under Commissioner William Bratton. Rather than review wide swaths of data, the Director of Evaluation and the COO choose one or two students whose struggles may indicate larger structural or programmatic issues that need addressing. By diving into the particularities of a specific case, interviewing the involved teachers and staff, and soliciting feedback from others, the leader running HCZ Stat lifts up larger "takeaways" useful to all. These takeaways help the larger system become more equitable: rather than label some students as lazy or unsuccessful, the initiative adapts to better serve the needs of all students.

At Carnegie Math Pathways, program review meetings consist of a series of networked learning communities, linked by conference calls and an annual face-to-face meeting. The workers at Carnegie Mellon, in addition to providing evidence expertise, supply the larger infrastructure necessary to link fifty community colleges. Among other tasks, they schedule phone calls between faculty mentors and protégées; faculty and researchers; and among community college administrators. These calls not only help spread ideas, but contribute to a sense of community and larger purpose among educators scattered throughout the country.

A robust improvement infrastructure also includes outside experts as needed. "Evidence experts" from groups such as the National Implementation Network, Child Trends, and the Carnegie Foundation for the Advancement of Teaching have advised program staff, provided research about evidence-backed programs, conducted focus groups, and decided whether "off the shelf" programming fits with their population. Outside evaluators have also been called in to help interventions avoid biases when rendering judgments on their programs. Companies such as Mathematica perform outside consulting, as well as running randomized control trials where appropriate.

A strong infrastructure committed to continuous learning does not just happen. In nearly every interview completed across the five case studies, subjects, when asked what contributed to their intervention's rigorous approach to evidence, mentioned people—the other staff members, the leader, the donor.

Discussing the human element in social science endeavors can quickly become vague and subjective, yet despite this hazard, we believe one must understand it to understand why and how a diverse approach to evidence succeeds. The people make the difference.

Again and again in our conversations, the theme of creating a safe space to follow evidence emerged. Essential to rigorous evidence-work is a no-blame atmosphere that allows groups to analyze and respond to troubling data, rather than try to obscure it or pass around blame. Kwame Owusu-Kesse, the COO of the Harlem Children's Zone, emphasizes that during HCZ's review meetings, he asks who else has encountered a problem similar to the one under review. He encourages his staff to reflect on what systematic changes might be made, and how intervention's staff might be better supported. If you want people to listen to the evidence that's been collected, you need to convey that it is not about blame—not even when implementation, rather than design, is the issue.

A supportive and understanding donor that nonetheless holds the group accountable is also key. Catawba County, in North Carolina, is lucky enough to have found such a donor in The Duke Endowment (TDE). When TDE embarked on the Child Wellbeing Project, it had already collaborated with Catawba County on several projects before, which may have contributed to the mutual sense of trust. TDE had modest expectations for results ("We did not expect them [Catawba] to transform lives in two years…" Phil Redmond of The Duke Endowment recalls), but high hopes for engagement with the process of design and implementation. When it emerged that none of the off-the-shelf programming quite fit Catawba's population, necessitating more time and outside support as they designed their own programs, TDE was willing to give it. Phil Redmond, again: "We wanted them to . . . participate in the intervention, offer feedback, and engage candidly with us as a funder. If they said they would reach 30 families, but then weren't able to meet with that many, it was fine to adjust our expectations, because we really trusted each other.

Learn More

Each of the initiatives we have highlighted provide rich programmatic examples for those contemplating tackling similar long-standing, complex challenges. This is not the first time they have been highlighted. However, this may be the first time the "back story" has been told – the story of how leadership and staff keep their eyes on the ultimate results. We believe they make a contribution to the knowledge base for how to effectively use and generate evidence. We invite you to read further in our case studies to learn how specific interventions integrate evidence into all aspects of their work.

Acknowledgment