Making Replication Work: Building Infrastructure to Implement, Scale-up, and Sustain Evidence-Based Early Childhood Home Visiting Programs with Fidelity

Findings from the EBHV National Evaluation

In 2008, the Children’s Bureau (CB) in the Administration for Children & Families (ACF) in the U.S. Department of Health and Human Services (DHHS) entered into cooperative agreements with 17 organizations in 15 states to support the implementation of home visiting programs that have potential to prevent child maltreatment. Three goals were identified:

1. Support implementation with fidelity to the home visiting program models
2. Support scale-up of the home visiting models—replicating the program model in a new service area, adapting the model for a new target population, or increasing the enrollment capacity in an existing service area
3. Support sustainability of the home visiting model beyond the end of the funding period

Mathematica Policy Research and its partner, Chapin Hall at the University of Chicago, conducted a national cross-site evaluation of the Supporting Evidence-Based Home Visiting to Prevent Child Maltreatment (EBHV) initiative. Using a mixed-methods approach, the national cross-site evaluation was designed to (1) examine the degree to which system change occurred, (2) document the fidelity with which the program models were implemented, and (3) identify implementation strategies and challenges.

Key Findings

- Implementing agencies consistently met many fidelity standards, but struggled to maintain caseloads and deliver services at the intended intensity. Sustaining full caseloads for home visitors, retaining participants, delivering services at the intended dosage, and achieving consensus on goal setting proved challenging.
- Fidelity of implementation varied more by implementing agency than by home visiting model, demonstrating the significance of agency and local service network characteristics.
- Higher-risk families were more likely than those at lower risk to leave the program early. Younger, more economically disadvantaged and potentially more socially isolated participants (as suggested by their single-parent status) left multiyear home visiting programs early or, if enrolled in short-term programs, did not successfully complete them.
- Changes in the national and local contexts influenced the order in which infrastructure-building activities were carried out. Due to the roll-out of the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) and the economic downturn, the 17 subcontractors engaged in a new round of planning activities midway through the initiative (2011), and focused on stabilizing their funding for implementation.
- Building sustaining infrastructure was particularly important to subcontractors during the late implementation phase of the initiative (2012) and was significantly related to partners’ perceptions of whether the EBHV initiative’s subcontractor-specific goals were achieved.
- Partners’ reports of the quality of their collaboration with one another were associated with achieving the initiative’s goals of implementation with fidelity, scale-up, and sustainability.
Implications for the Field

The national cross-site evaluation offers important lessons to policymakers, state administrators, practitioners, and technical assistance providers as they undertake the implementation of MIECHV, as well as lessons for the field on the implementation of evidence-based programs in general.

- **Intensity.** Consistent with findings from previous evaluations, it is difficult to take home visiting programs to scale and implement them at the levels of intensity (dosage and duration) that the program model developers recommend.

- **Enrollment.** Even though implementing agencies had been operating home visiting programs for at least two years by the end of the evaluation (and many for much longer), more than half of home visitors carried caseloads at or above standards set by the national models.

- **Quality.** The quality of the relationship between the home visitor and the parent can influence the effectiveness of home visiting services and the extent and quality of parents’ engagement and involvement.

- **Flexibility.** Stakeholders working to build state and local systems to support evidence-based home visiting have to be flexible in the timing and approach for implementing infrastructure-building activities. The EBHV initiative and its evaluation are examples of how multifaceted, complex system-change initiatives can evolve and require adaptations to initial implementation and evaluation plans.

- **Process.** The disconnect between stakeholders’ perceptions of progress and findings on alternate measures of progress (the fidelity data on dosage, ratings on scale-up coded from site visit interviews, and survey questions on sustainability) points to the need for processes that provide information from the field to program administrators, managers, and partners; funders; policymakers; and other project stakeholders.

- **Collaboration.** The quality of the collaboration among partners was significantly associated with respondents’ perceptions of the progress made in achieving implementation with fidelity, scale-up, and sustainability.

Recommendations for Future Research

The EBHV evaluation points to the following recommendations for future research:

- More research is needed on aspects of collaboration that should be the focus of infrastructure-building initiatives at different stages of implementation and on the features of collaboration that lead to outcomes for families and children.

- In light of a trend toward increasing flexibility in home visiting schedules so the home visitors can follow the lead of the participants, more research is needed on the implications of varying levels of service delivery on the ability of programs to achieve targeted outcomes with families and children.

- More research is needed on relationship quality—in particular, the role of relationship quality in family engagement in and take-up of services.

The EBHV initiative was a unique opportunity for communities and states to build infrastructure to support the implementation with fidelity, scale-up, and sustainability of home visiting programs that have potential to prevent child maltreatment. The grounding of the EBHV initiative in implementation with fidelity highlighted the importance of effective replication and the use of data by program administrators, supervisors, and home visitors to achieve high quality implementation and, ultimately, family and child outcomes. The initiative focused on coordination of services and partnerships among individuals and institutions to facilitate addressing the complex needs of families. The EBHV national cross-site evaluation captured lessons learned regarding implementation of evidence-based home visiting programs that can inform the field as policymakers, state administrators, practitioners, technical assistance providers, and model purveyors continue to explore home visiting’s role in the broader context of early childhood services.

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