Evidence-Based Practice[1]

What is evidence-based practice?

In the most general terms, evidence-based practice can be defined as the use of research to improve practice.

How is evidence-based practice defined?

Evidence-based (EB) practice is defined as the integration of the best available research with child abuse prevention program expertise within the context of the child, family, and community characteristics, culture, and preferences.[2] These approaches to prevention are validated by some form of documented scientific evidence. This includes findings established through scientific research, such as controlled clinical studies; however, other methods of establishing evidence are also valid.

Evidence-based practices may be considered "supported" or "well-supported," depending on the strength of the research design. (See the graphic below.)

How does evidence-informed *practice differ from evidence*-based *practice?*

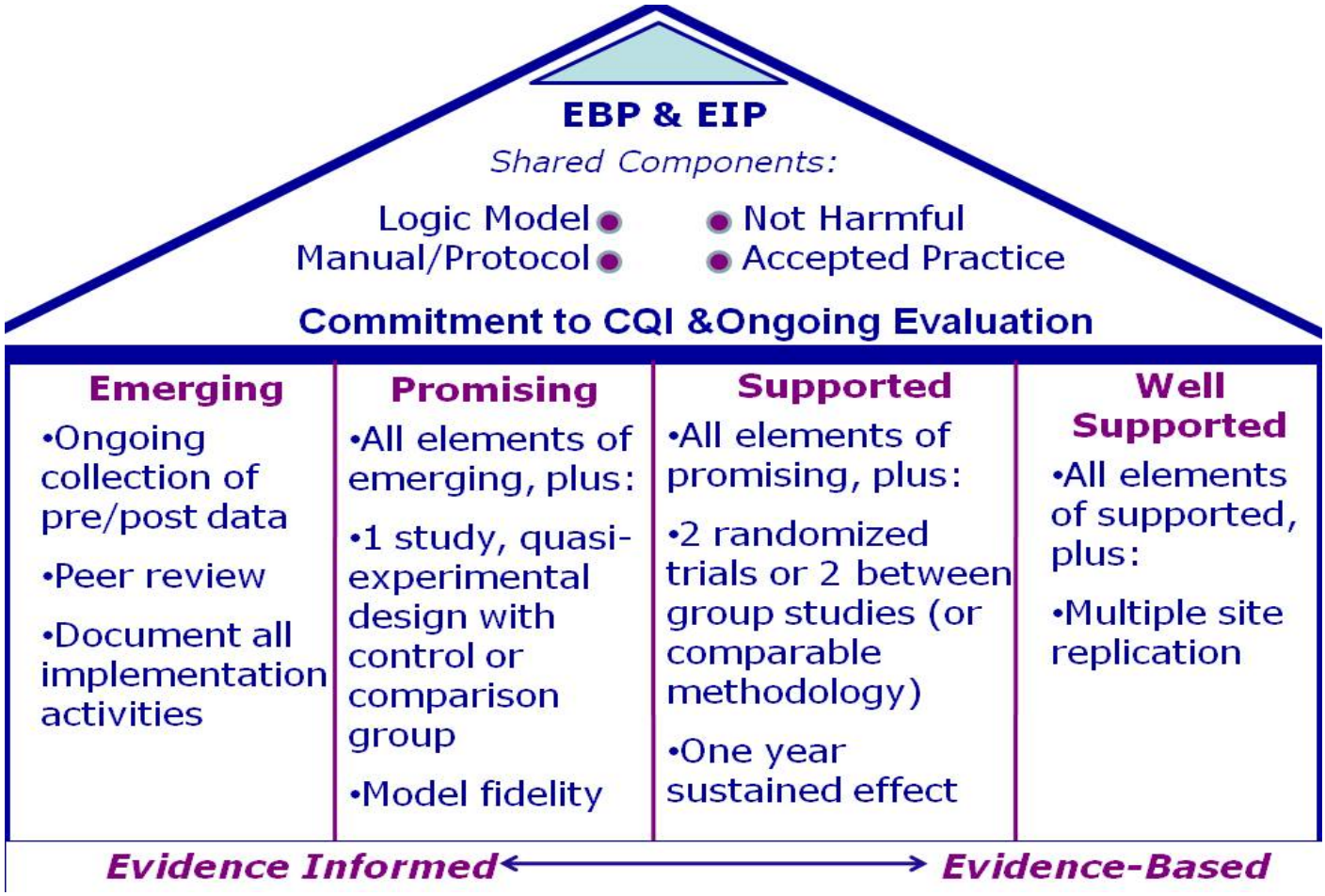
Evidence-informed (EI) practice is very similar to evidence-based, but the level of evidence supporting the programs or practices is not as strong— these programs are emerging or promising in their design. Evidence-informed practice allows for innovation, while still incorporating lessons learned from the existing research literature.

The following graphic helps to illustrate how programs rest somewhere on the continuum of EI to EB practices while meeting some basic standards. They should:

- Be based on a logic model
- Have a written manual or protocol
- Be generally accepted
- Shown to do no harm
- Demonstrate a commitment to ongoing evaluation and the establishment of a process for continuous quality improvement

[1] The information referenced in this section is taken from the FRIENDS National Resource Center for Community-Based Child Abuse Prevention (CBCAP), the training and technical assistance agency for federally-funded CBCAP agencies; http://friendsnrc.org/cbcap-priority-areas/evidence-base-practice-in-cbcap

[2] This definition was adapted from current definitions developed by the Institute of Medicine and the American Psychological Association.



*What are the differences between EB/EI **programs** and **practices**?*

An EB/EI *program* is a set of practices or a curriculum that is bundled together as a whole. This program is intended to be implemented with all of its pieces or "core components" in place.

EB/EI *practices* are individualized practices that can be implemented on their own. These can be thought of as "a la carte" options, because they can be implemented individually or grouped with other practices. Of course, programs should always evaluate their practices to see whether they are achieving the expected results.