Recommendations for Mitigating Threats to Scaling

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The economic model for scaling, presented and discussed in this volume, highlights three key players that have a role in scaling up programs: researchers, policy makers, and participants. Researchers create, test, and evaluate programs to understand their impact. While researchers may be motivated by the goal of benefitting eventual program participants, they also have incentives that come from academia to produce results, which can lead to experiments with unrepresentative populations or situations. Policy makers choose which programs to implement, with the goal of maximizing the benefit to individuals within constraints from time, available funding, and available resources. Finally, participants benefit from implemented programs and participate in research studies.

In addition to the policy makers and researchers highlighted in the economic model, chapters in this book examine the roles of program leaders (or the heads of organizations that implement programs), as well as funders of research and programs. Program staff and organization heads play a key role in the implementation of a program on the ground. Funders, like policy makers, play a key role in choosing which programs to implement by making decisions about the programs they will fund. In addition, funders choose which research studies and evaluations to support.

In this chapter, we highlight key recommendations for policy makers, researchers, program leaders, and funders to support the development of scalable interventions. Recommendations come from chapters throughout this book, as well as from an author convening at the University of Chicago in November 2019.
Recommendations for Researchers

The threats to scaling identified in the economic model can be partially addressed through using research designs that focus on more representative research participants and implementers and more representative programs. To achieve this, researchers should:

- **Design interventions and studies with an eye toward scaling.** Researchers should design studies that examine how an intervention might look in a real-world scenario, measure interventions outside of a lab setting, examine the core components and functions of interventions, and estimate the effects of scaling, including spillover effects. 
  See: Chapter 4, Chapter 7, Chapter 8, Chapter 10, Chapter 11, Chapter 12, Chapter 13, Chapter 14

- **Develop partnerships and co-create research agendas with policy makers, practitioners, and communities.** Partnerships with policy makers, practitioners, and members of the community where an intervention will be implemented can help researchers design studies that address priorities and needs on the ground. See: Chapter 11, Commentary 1, Chapter 12, Chapter 19, Chapter 21

- **Choose study participants that reflect an intervention’s target population.** Researchers should clearly identify selection criteria for participants, as well as the characteristics of participants that they theorize may affect program outcomes. Strong partnerships with practitioners and community members can help researchers better understand representativeness. See: Chapter 8, Commentary 1, Chapter 14

- **Document and describe properties of the population and situation involved in a study.** Researchers should document information about study elements, such as selection
criteria for study participants and qualifications of staff that implemented a program during a study, and publish this information alongside findings. See: Chapter 7, Chapter 8, Chapter 14

- **Publish null results, especially tight zeroes.** Information about interventions that do not achieve desired outcomes or replications to interventions is vital to understanding the contexts in which an intervention may not work. Pre-registering studies is one way to encourage the publication of null results. See: Chapter 7

- **Measure core components or mechanisms of change in an intervention.** Design studies to examine the core components theorized to produce outcomes to generate information on what needs to be included in a scaled intervention and what can be changed within resource constraints. See: Chapter 4, Chapter 7, Chapter 9, Chapter 11, Chapter 13, Chapter 18, Chapter 19

- **Develop fidelity, quality, outcomes, and adaptive measures that are feasible to conduct at scale.** These measures should factor in the cost and time it takes to train staff to implement the measures, the length of time required to measure fidelity and quality, the social validity or relevance of measurement for communities in which the intervention will be implemented, and the mechanisms of change for the target intervention. See: Chapter 4, Chapter 9, Chapter 15, Chapter 16, Commentary 2, Chapter 18

- **Share results in formats that are accessible to policy makers, practitioners, and others outside of academia.** To ensure actionable results, share findings in accessible formats, such as short research briefs that highlight key findings, publicly available case studies,
and presentations or meetings. Consider aspects of accessibility including languages represented by practitioners and community members and physical accessibility of meetings. See: Chapter 13

**Recommendations for Policy Makers**

Policy makers can mitigate challenges associated with scaling by considering the degree to which available evidence on an intervention aligns with their situation and by investing in the capacity needed to support intervention implementation. Policy makers should:

- **Compare the context of studies on an intervention to their own context.** Consider available information about the population of study participants, characteristics of the workforce that implemented the intervention, properties of the setting in which the intervention was studied, and potential economies or diseconomies of scale. See: Chapter 4, Chapter 7, Chapter 8, Chapter 9, Chapter 10, Chapter 11, Chapter 14

- **When possible, look at findings from replication studies prior to implementing or scaling a program.** Replication studies can provide insight on potential challenges to scaling, contexts in which an intervention had weaker effects than suggested by an initial pilot study, and modifications that may need to be made in new contexts. See: Chapter 7, Chapter 11

- **Invest in the workforce needed to sustain a scaled-up intervention.** Assess the strengths, needs, and availability of the existing workforce, as well as the intervention’s reliance on certain workforce characteristics, to understand and invest in the support it will need to implement and sustain an intervention. See: Chapter 9, Chapter 11, Chapter 18, Chapter 20
• **Invest in capacity within local, state, or federal implementing agencies to conduct ongoing evaluation.** Building this capacity will facilitate the ability to provide support to and evaluate implementation and outcomes of interventions. *See: Chapter 19*

• **Require funding and oversight agencies to collect and share fidelity statistics.** This will help agencies better understanding the degree to which interventions are being implemented with fidelity and understand potential challenges to achieving outcomes. *See: Chapter 9*

• **Develop partnerships and co-create agendas with researchers, practitioners, and communities.** Through these partnerships, policy makers can shape research agendas to align with priorities and needs on the ground, identify key questions, and highlight target outcomes for interventions. *See: Chapter 12, Chapter 19, Chapter 21*

**Recommendations for Program Leaders**

Program leaders and heads of organizations that implement interventions often have a deep understanding of the communities with which they work. Program leaders should:

• **Choose evidence-based interventions that match the contexts and needs of their communities.** Understanding properties of the population and situation in which an implementation was piloted can help inform intervention selection. *See: Chapter 4, Chapter 7, Chapter 8, Chapter 13, Chapter 14*

• **Facilitate practitioner and community buy-in.** Develop partnerships with practitioners and communities to understand needs and priorities related to programs. Consider prior beliefs practitioners and community members may have about an intervention or an outcome, as well as influences on decision making. *See: Chapter 3, Chapter 4*
• **Build in-house capacity to implement and sustain an intervention.** This includes capacity for program leaders to support a balance between fidelity and adaptations to an intervention, capacity to sustain fidelity and allow adaptation, and time for staff to participate in supports aimed at strengthening their ability to implement the intervention. *See: Chapter 9, Chapter 17, Chapter 18, Chapter 19*

• **Incorporate continuous quality improvement into implementation and decision making.** Implementing a new intervention is a learning process; continuously collecting data on program implementation and outcomes can inform decisions about how to improve the program over time. *See: Chapter 15, Chapter 18, Chapter 19, Chapter 20*

• **Follow a clear implementation process, rather than jumping in too quickly.** Ensure that the appropriate supports, including staff training, funding, and materials, are in place before diving into full implementation. *See: Chapter 4, Chapter 11, Chapter 18*

• **Consider de-implementation of ineffective or inappropriate programs and interventions.** When programs do not produce outcomes after a period of time or when new programs are shown to be more effective and efficient, consider de-implementing existing programs and shifting resources to new approaches. *See: Commentary 1, Chapter 15*

**Recommendations for Funders**

Funders can support scaling by choosing to fund studies that produce information relevant for scaling and funding programs that have a strong body of research supporting their efficacy. Funders should:

• **Fund studies that examine factors to inform scaling.** This includes:
- Studies that examine potential economies and diseconomies of implementing an intervention at scale. *See: Chapter 10*

- Replication studies, particularly those co-designed with researchers and policy makers. *See: Chapter 11, Chapter 14*

- Studies that enroll representative populations and contexts. *See: Chapter 8, Chapter 14*

- Research that examines core components and behavioral mechanisms of change. *See: Chapter 4, Chapter 13*

- Evaluations to learn about program impact.

- **Require researchers to pre-register their studies and report on the details of their study that have implications for scaling.** Pre-registering requires submitting pre-analysis plans to ensure researchers stick to their intended plan and report findings even when they are null; researchers should also report on details including the cost of implementing the intervention, the details of how the intervention was implemented, and the criteria researchers used to choose their sample of participants. *See: Chapter 7*

- **Fund program implementation with an eye toward scaling.** This includes:
  - Mechanisms to sustain programs across political changes. *See: Commentary 1, Chapter 20, Chapter 21*
  - Requirements for sharing data about outcomes and participation to better understand the populations and contexts for which an intervention produces outcomes.