



Center for Evidence-Based Practice:
Young Children
with Challenging Behavior

www.challengingbehavior.org

Recommended Practices

Being an Evidence-Based Practitioner

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A great deal of attention has been devoted in recent years to the notion of “evidence-based practice”. Along with numerous other fields, early intervention has been affected by this focus. Efforts have been made to identify interventions and programs that do or do not qualify as “evidence-based” (see Horner, Carr, Halle, McGee, Odom, & Wolery, 2005), and practitioners themselves are being evaluated in terms of the extent to which they practice evidence-based procedures. The following provides an explanation of what it means to be an evidence-based practitioner.

Evidence-based practice refers to the use of interventions, strategies, and supports that have research documenting their effectiveness. Practices that are evidence-based are ones that have been demonstrated as effective within multiple research studies that document similar outcomes. A particularly useful definition of evidence-based practices was offered by Dunst, Trivette, and Cupsek (2002): *Practices that are informed by research in which the characteristics and consequences of environmental variables are empirically established and the relationship directly informs what a practitioner can do to produce a desired outcome.*

An evidence-based practitioner is an individual involved in interventions and supports for young children who identifies and uses evidence-based practices. Evidence-based practitioners include teachers, therapists, counselors, social workers, and anyone else who deliberately attends to the empirical basis for the practices they use in their work with children.

Selection of practices that are evidence-based

While there is no set formula for determining which intervention strategy to use to meet a particular intervention need, we suggest that the following questions can help to narrow the field:

- ① Has the intervention been evaluated in a peer-reviewed journal?
- ① Has the intervention been replicated across investigators, settings, and participants?
- ① Are there alternative interventions that are less restrictive, better researched, or perhaps more effective or efficient?
- ① Is the intervention within the existing skill set of practitioners, or do they need prior training and consultation?
- ① Has the intervention been shown to produce outcomes like the ones intended?
- ① How will we evaluate the intervention if we decide to implement?





Resources

Center on Evidence-Based Practice: Young Children with Challenging Behavior. <http://www.challengingbehavior.org>

Center on the Social and Emotional Foundations for Early Learning. <http://www.csefel.uiuc.edu>

Research and Training Center on Early Childhood Development. <http://www.researchtopractice.info>

Why be an evidence-based practitioner?

There are many reasons to be an evidence-based practitioner. The use of evidence-based practices enables one:

- ① To maximize beneficial child and family outcomes. While evidence-based practices do not guarantee success with a particular child and family, they greatly increase the likelihood that favorable outcomes will ensue.
- ② To be consistent with recommended practices in the field. Several organizations, including DEC (Division for Early Childhood of the Council for Exceptional Children) and NAEYC (National Association for the Education of Young Children), have carefully examined the available research and formulated recommendations, and these recommendations tend to be aligned with evidence-based practice.
- ③ To provide data to respond to accountability demands. Increasingly practitioners are called upon to justify their interventions and activities; evidence-based practitioners have the benefit of having data to support their positions and practices.
- ④ To expand one's own skills and competence. By being knowledgeable about the empirical support for one's practices and by keeping current regarding new developments, evidence-based practitioners regularly adjust their practices and improve their abilities to deliver effective interventions and supports.
- ⑤ To enhance political and fiscal support for early intervention. Evidence-based practice carries with it credibility and demonstrated results which facilitates support from administrators, policy makers, and funders.
- ⑥ To provide consumers with a clear rationale for nature of services. The availability of relevant, supportive data is a valuable source of information for families and agencies seeking the best answers for challenges associated with intervention options. The evidence-based practitioner is able to assist consumers by providing access to data.

What do evidence-based practitioners do?

Evidence-based practitioners engage in the following ongoing activities that are consistent with and necessary for the use of evidence-based practice:

- ① To maintain awareness of evidence-based practices through ongoing education, including reading current professional journals, books, and other materials; accessing web sites devoted to evidence-based practice (such as www.challengingbehavior.org); and participating in workshops on evidence-based practices.
- ② To select overall curricula that have peer-reviewed data to support use with a particular population of children.
- ③ To employ daily data collection systems that track children's progress and use this information to plan and refine instruction.
- ④ To provide families with support, information, and training sufficient to meet their desires for participation in their child's educational program
- ⑤ To remain open to changes in service delivery based on new ideas, new data, and trends in the field that are evidence-based.
- ⑥ To access learning opportunities to enhance instructional, administrative, and interpersonal skills that are evidence-based.
- ⑦ To promote the use of evidence-based practices by the staff you supervise. Supervisors should encourage staff to learn about evidence-based practices, try new evidence-based approaches, and engage in an array of continuous professional development activities.

Barriers to being an evidence-based practitioner and some solutions to overcoming them

CHALLENGES	STRATEGIES
Perception that “it takes too much time”	Do the test. Most people find that the initial added effort ultimately saves time and reduces frustration. Being evidence-based is about working smarter not harder.
Lack of team consensus; disciplinary squabbles	Take the time needed to create a vision for your team. Agree and act on a small proportion of an evidence-based agenda. As you experience success, expand your agenda. One, three, and five-year plans can be very helpful here.
Strongly held ideologies, practices, and theories that may be in conflict with evidence-based practices	Conduct frequent, structured meetings to discuss beliefs and attitudes; enlist the support of someone proficient in facilitating discussions about beliefs; ensure that concerns are not tied to misunderstanding of terms (establish consensual terms); recognize that beliefs are affected by information; provide resources and opportunities to talk with people who have implemented the practice; provide incentives and recognition for attempts at using evidence-based practices.
Lack of training opportunities and/or technical assistance around evidence-based practices	Identify resources on evidence-based strategies; create staff development plans; implement collaborative training and TA with staff families, consultants, trainers, and leaders; and develop vision and commitment to using evidence-based practices and resources.
Lack of administrative support	Become informed about evidence-based practices, and begin to implement where you can; share your success with the implementation of evidence-based practices or understanding of the practice with your colleagues; create enthusiasm for the adoption of evidence-based practices with colleagues, and then approach your administrator.

Concluding Thoughts

While we believe that there are compelling reasons to engage in evidence-based practices, such as those enumerated above, we would be remiss if we did not acknowledge the following caveats.

Ⓢ While considerable research is now available in many areas of early intervention and support, this research is often limited with respect to diverse populations of children and families.

- Ⓢ What can be considered as evidence-based is, in some areas of intervention, a rapidly evolving standard.
- Ⓢ Supporting evidence-based practices is everyone’s business – direct service providers, administrators, policy makers, and consumers.