



National Resource Center on Homelessness and Mental Illness

Program Evaluation

March 2004

*Resources listed herein are a selection of materials available on this topic. Many are available from your local library or inter-library loan. Unless otherwise noted, all other materials are available from the National Resource Center on Homelessness and Mental Illness. Photocopying charges are \$.10 per page; make checks payable to **Policy Research Associates, Inc.** If you have difficulty locating any of the materials listed in this bibliography, please contact the Resource Center at the phone number or e-mail address below.*

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Policy Research Associates, Inc., under contract to the Center for Mental Health Services

Program Evaluation

Order #: 12908

- Authors:** Adair, C., McDougall, G., Beckie, A., Joyce, A., Mitton, C., Wild, C., Gordon, A., Costigan, N.
- Title:** **History and Measurement of Continuity of Care in Mental Health Services and Evidence of Its Role in Outcomes.**
- Source:** Psychiatric Services 54(10): 1351-1356, 2003. (Journal Article: 5 pages)
- Abstract:** The objective of this study was to provide a brief history of the concept of continuity of care, to update evidence of its association with patient outcomes, and to identify optimal characteristics of a continuity-of-care instrument. Articles describing recent (1990 to 2002) empirical work on continuity of care were drawn from a broader set of 305 articles about continuity of care that were obtained from a systematic literature search. The authors state the literature shows that ideas about continuity of care have changed in concert with general service delivery changes over the decades. Since 1997, only eight studies have used operationally defined measures either to describe continuity of care in mental health services or to examine the association of continuity of care with outcomes for adults with severe and persistent mental illness. Only three groups of researchers have published articles on development of continuity-of-care measures. According to the authors, there is little evidence that continuity of care results in better client outcomes, which may be primarily attributable to the underdevelopment of measures. Measurement of continuity of care must become more sophisticated before key questions about the association of continuity of care with outcomes can be examined and before the effectiveness of interventions designed to improve continuity of care can be rigorously evaluated (authors).

Order #: 12879

- Authors:** AIDS Housing of Washington.
- Title:** **Tools for Outcome-Based Evaluation of HOPWA-Funded Programs.**
- Source:** Washington, DC: AIDS Housing of Washington, 2001. (Toolkit: 85 pages)
- Abstract:** The materials contained in this guide are intended to assist the Housing Opportunities for Persons With Aids (HOPWA) National Technical Assistance Program-funded HIV/AIDS housing agencies in implementing outcome-based program evaluation. This training curriculum also assists AIDS housing providers in defining program goals, selecting program indicators, and implementing data collection methods. Organized around HOPWA's five primary eligible activities, the tools are also designed to facilitate data collection and performance monitoring using the HOPWA program's Annual Progress Report forms. The program outcomes and indicators digest contains potential outcomes and indicators for housing information and referral; housing development; housing operations; rental assistance; and support services. This guide also contains a variety of sample materials, such as program logic models, program evaluation plans, and sample data collection tools. Finally, the guide includes a resource guide for further information about program evaluation methodology and implementation (authors).
- Available From:** AIDS Housing of Washington, 2014 East Madison, Suite 200, Seattle, WA 98122-2965, (206) 322-9444, www.aidshousing.org.

Program Evaluation

Order #: 12337

Authors: Andersen, A.

Title: Connecticut Supportive Housing Demonstration Program.

Source: New Haven, CT: The Corporation for Supportive Housing, 2002. (Report: 60 pages)

Abstract: An objective evaluation of the Connecticut Supportive Housing Demonstration Program begun in 1992. The Program is the joint effort of the State of Connecticut and the Corporation for Supportive Housing (CSH) to produce over 200 units of service-enriched permanent housing for homeless and at-risk populations. The evaluation is intended to determine if stable housing reduces the need for expensive health and social services over time, enhances the quality of life of the residents, and allows residents to pursue their employment and vocational needs. The evaluation also provides a financial analysis of the Program's cost and cost-effectiveness, as well as evaluating the financial stability of the projects participating in the Program. The aesthetic and economic impact of the siting process and perspectives on the development phase are also included.

Available From: Corporation For Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10173, (212) 986-2966, www.csh.org/index.cfm?fuseaction=Page.viewPage&pageID=600 (COST: \$15.00).

Order #: 11695

Authors: Banks, S., McHugo, G.J., Williams, V., Drake, R.E., Shinn, M.

Title: A Prospective Meta-Analytic Approach in a Multisite Study of Homelessness Prevention.

Source: New Directions for Evaluation (94)45-58, 2002. (Journal Article: 14 pages)

Abstract: This article focuses on The Collaborative Program to Prevent Homelessness, a multisite study designed to identify promising approaches to preventing homelessness among persons with substance abuse and mental disorders and to explore the relative effectiveness of these approaches. The article discusses this multisite study designed to explore the relative differences of several interventions developed to ameliorate homelessness among persons with mental illness and substance abuse disorders. The authors describe an innovative, prospective meta-analytic approach to the analysis of multisite data when cross-site variation does not allow for the pooling of data (authors).

Order #: 1892

Authors: Barrow, S.M., Hellman, F., Lovell, A.M., Plapinger, J.D., Struening, E.L.

Title: Evaluating Outreach Services: Lessons from a Study of Five Programs.

Source: In Cohen, N. (ed.), Psychiatric Outreach to the Mentally Ill. New Directions for Mental Health Services 52: 29-45. San Francisco, CA: Jossey Bass, 1991. (Book Chapter: 17 pages)

Abstract: Researchers systematically evaluated five innovative service programs for homeless people with mental illnesses in New York City. The study describes the population reached and served by different types of outreach programs, documents the services each program delivered, and compares the relative effectiveness of distinct program models. However, as the target population expanded and the resources available to homeless individuals shifted, the programs in the study responded with changes in services. These changes led the researchers to refocus their efforts on a more process-oriented understanding of how the form, content, and combination of service elements affected the outcomes of interest.

Available From: Jossey-Bass Inc., 10475 Crosspoint Blvd., Indianapolis, IN 46256, (877) 762-2974, www.josseybass.com.

Program Evaluation

Order #: 12695

Authors: Biegel, D., Kola, L., Ronis, R., Boyle, P., Delos-Reyes, C., Wieder, B., Kubeck, P.

Title: **The Ohio Substance Abuse and Mental Illness Coordinating Center of Excellence: Implementation Support for Evidence-Based Practice.**

Source: Research on Social Work Practice 13(4): 531-545, 2003. (Journal Article: 14 pages)

Abstract: This article describes the establishment and function of the Ohio Substance Abuse and Mental Illness Coordinating Center of Excellence. This center serves as a resource for programs providing care for individuals with co-occurring mental illness and substance abuse problems, through the provision of training and technical assistance, and of research related to evidence-based treatment models. The center is a partnership between the School of Applied Social Sciences and the School of Medicine at Case Western Reserve University, and is funded by the Ohio Departments of Mental Health and Alcohol and Drug Addiction Services (authors).

Order #: 10888

Authors: Biggar, H.

Title: **Homeless Children and Education: An Evaluation of the Stewart B. McKinney Homeless Assistance Act**

Source: Children and Youth Services Review 23(12): 941-969, 2001. (Journal Article: 15 pages)

Abstract: This paper explains the provisions and evaluates the worth of the Stewart B. McKinney Homeless Assistance Act of 1987 in relation to the education of homeless children. Children are the poorest group of Americans, and among those most devastated by poverty are homeless children. Numerous problems associate with homelessness for children, including academic problems: Homeless children tend to perform more poorly in school, repeat grades more often, and drop out of school more often than do other children. Risks at each state of a homeless child's development contribute to this poor academic performance, which engenders tremendous costs for homeless children and for society. The McKinney act upholds lofty principles, but there are crucial flaws in the act itself and in the enforcement of the act that critically undermine its worth. Based on this evaluation, recommendations for policymakers are offered (authors).

Order #: 3322

Authors: Boll, J.

Title: **Member Roles in Program Evaluation: A Case Study From A Psychosocial Clubhouse.**

Source: Psychiatric Rehabilitation Journal 19(1):79-82, 1995. (Journal Article: 4 pages)

Abstract: Although program evaluations can be used to improve the effectiveness and overall impact of social welfare programs, they are in many instances treated as a problem for organizations rather than a means to improvement. Top level administrators often see it as their job to "manage" audits and evaluations, so that programs appear to be achieving their objectives and funding remains intact. This concern often results in increased attention to paperwork - filling in missing records and reports, updating service plans and client consent forms, and compiling service statistics - and less attention to the clients themselves. The authors describe a case study of Laurel House, a psychosocial clubhouse in Stamford, Conn., to demonstrate that program evaluations can also be used to the benefit of an organization by helping it to clarify its mission and goals, improve the quality of its services, respond to new client needs, and enhance the opportunities for clients and staff to experience personal growth and role satisfaction (author).

Program Evaluation

Order #: 2247

Authors: Boothroyd, R.A., Evans, M.E., Shern, D.L., Forquer, S. L.

Title: **Quality Assurance and Evaluation of Psychiatric Rehabilitation Programs.**

Source: In R.W. Flexer and P.L. Solomon (eds.) *Psychiatric Rehabilitation in Practice*. Boston, MA: Andover Medical Publishers, 1993. (Book Chapter: 17 pages)

Abstract: This chapter discusses the development and implementation of quality assurance and program evaluation in psychiatric rehabilitation programs. The author reviews important changes that have occurred in the quality assurance and program evaluation fields as well as the changing role of psychiatric rehabilitation within the public mental health system. A heuristic model of mental health programs that integrates developments in both fields is presented. The chapter concludes with an example of a research demonstration project examining the effects of providing psychiatric rehabilitation to individuals with mental illness. The authors contend that an integrated approach to quality assurance and program evaluation improves program outcomes and enhances the general understanding of the effectiveness of psychiatric rehabilitation.

Order #: 6690

Authors: Brekke, J.S.

Title: **The Model-Guided Method for Monitoring Program Implementation.**

Source: *Evaluation Review* 11(3): 281-299, 1987. (Journal Article: 20 pages)

Abstract: Advocating the use of model-derived specifications in the monitoring of program implementation, this article presents the model-guided method. The method provides a test of the adequacy of a program's implementation, and its application to the evaluation of a community support program for the chronically mentally ill is presented. A procedure for field testing the reliability and validity of a monitoring instrument is outlined, and recommendations for using the model-guided method in other field applications are offered (author).

Order #: 3097

Authors: Bybee, D., Mowbray, C.T., Cohen, E.H.

Title: **Evaluation of a Homeless Mentally Ill Outreach Program: Differential Short-Term Effects.**

Source: *Evaluation and Program Planning* 18(1): 13-24, 1995. (Journal Article: 12 pages)

Abstract: Previously published research on interventions for homeless persons with mental illness has exhibited marked limitations in attrition, sample sizes, generalizability and outcome measures. This report presents results from an outreach and linkage project which concentrates on addressing these limitations. Successful outcomes in terms of the number housed were documented. However, significant changes in participant functioning levels were not. Three variables were significant predictors of residential stability at four months: recruitment source (shelter, psychiatric hospital or community mental health agency); client functioning; and hours of service from the homeless project. The latter finding suggests that project interventions contributed to positive changes in clients' residences. Implications of the results for future service and research efforts are discussed (authors).

Program Evaluation

Order #: 13052

Authors: Calsyn, R., Morse, G., Yonker, R., Winter, J., Peirce, K., Taylor, M.

Title: **Client Choice of Treatment and Client Outcomes.**

Source: Journal of Community Psychology 31(4): 339-348, 2003. (Journal Article: 10 pages)

Abstract: This article is based on a study in which participants suffered from severe mental illness and were homeless at baseline, and given their choice of five different treatment programs. The current study investigated two major questions: what is the impact of positive expectancies about the efficacy of the chosen program on number of contacts with the chosen program and client outcomes; and what is the impact of positive views about nonchosen programs (alternative choice variables) on contact with the chosen program and client outcomes. According to the authors, client outcomes assessed were psychotic symptoms, days homeless, and client satisfaction. Positive expectancy variables were the number of reasons for choosing a program and confidence that the program would help. Alternative choice variables were the number of nonchosen programs visited and the attractiveness of a nonchosen program. The authors state that only the number of reasons for choosing the program was significantly related to program contact with the chosen program. Both of the positive expectancy variables and program contact were significantly correlated with consumer satisfaction. In general, neither the positive expectancy variables nor the alternative choice variables predicted changes in psychotic symptoms nor days homeless (authors).

Order #: 8732

Authors: Campbell, G.J., McCarthy, E.

Title: **Conveying Mission Through Outcome Measurement: Services to the Homeless in New York City.**

Source: Policy Studies Journal 28(2): 338-352, 2000. (Journal Article: 15 pages)

Abstract: This article outlines the policy decision to implement a performance incentive program in a large social services agency. Specifically, it describes the evolution of services to people who are homeless in New York City, including the creation of the New York City Department of Homeless Services, the privatization of a majority of the shelter system, and the redefinition of the role of government in the provision of homeless services. The article explains how performance measurement is an integral part of this evolution, and the numerous challenges that this initiative has presented to management of the Department (authors).

Order #: 8886

Authors: Campbell, J.

Title: **Toward Collaborative Mental Health Outcomes Systems.**

Source: New Directions for Mental Health Services 71: 69-77, 1996. (Journal Article: 9 pages)

Abstract: A growing recognition that consumers are important health partners has created the need for collaborative systems of accountability in behavioral health services. This article discusses the importance of consumer involvement in outcomes research, and how collaborative systems can be created.

Order #: 912

Authors: Carling, P.J.

Title: **Supported Housing: An Evaluation Agenda.**

Source: Psychosocial Rehabilitation Journal 13(4): 95-104, 1990. (Journal Article: 10 pages)

Abstract: Supported housing has become an increasingly popular approach in mental health systems, in spite of the relative lack of clarity of the concept, and the lack of focused research and evaluation efforts. This article proposes a tentative operational definition, describes some of the dilemmas involved in evaluating supported housing programs, and presents a systematic strategy for designing evaluation studies of supported housing (author).

Program Evaluation

Order #: 805

Authors: Caton, C.L.M., Wyatt, R.J., Grunberg, J., Felix, A.

Title: **An Evaluation of a Mental Health Program for Homeless Men.**

Source: American Journal of Psychiatry 147(3): 286-289, 1990. (Journal Article: 4 pages)

Abstract: The authors report the results of a before-and-after evaluation of an on-site mental health day treatment program for homeless men. Thirty-two subjects were interviewed six or more months after placement from a crisis shelter to community housing in order to probe housing stability, aftercare treatment compliance, employment, rehospitalization, and criminal justice contacts. In the after phase, living on the street was virtually eliminated, use of shelters decreased sevenfold, aftercare utilization tripled, and contacts with the criminal justice system were halved. Psychiatric hospitalizations and unemployment were higher in the after phase. Findings are discussed in relation to the need to conduct controlled experiments of new psychosocial treatments for the homeless mentally ill (authors).

Order #: 2973

Authors: Center for Mental Health Services.

Title: **Lessons Learned: A Final Look at the First-Round McKinney Service Demonstration Projects for Homeless Adults with Severe Mental Illnesses.**

Source: Washington, DC: Center for Mental Health Services, 1994. (Report: 47 pages)

Abstract: This report summarizes what has been learned from the first-round McKinney demonstration projects for homeless adults with severe mental illnesses funded from 1987-90. The awards for this project were made to state mental health authorities, who contracted with a local agency or group of agencies to provide services. Projects were located in Chicago; Cleveland; Miami; New York City; Nashville; Columbia; Richmond; Portland; Flint; and Ann Arbor. Principal observations across the projects in four key areas -- the provision of services, the creation of housing, the integration of services, and project implementation -- are reviewed (authors).

Order #: 7240

Authors: Center for Mental Health Services.

Title: **Process Evaluation of the ACCESS Demonstration Projects for Homeless Persons with Mental Illness: Third Year Implementation Case Studies.**

Source: Washington, DC: Center for Mental Health Services, 1997. (Report: 390 pages)

Abstract: The purpose of the national evaluation of the Access to Community Care and Effective Services and Supports (ACCESS) demonstration program is to understand the implementation of different approaches to systems integration for homeless adults with severe mental illness, and to link systems integration strategies to client outcomes. The evaluation is conducted at both system and client levels to determine the extent to which systems integration takes place, its impact on access to services, and client outcomes that can be associated with systems integration. This report provides detailed implementation case studies of the 18 ACCESS projects encompassing the first three years of the demonstration program and presents new information on the third year of the ACCESS demonstration project (Oct. 1, 1995 - Sept. 30, 1996).

Available From: Center for Mental Health Services, PO Box 42557, Washington DC, 20015, (800) 789-2647, www.mentalhealth.org.

Program Evaluation

Order #: 12721

Authors: Center for the Study of Social Policy.

Title: **Homelessness: An Assessment of the District of Columbia's Community Care Grant Program.**

Source: Washington, DC: Center for the Study of Social Policy, 2003. (Report: 62 pages)

Abstract: This report provides an assessment of the District of Columbia's Community Care Grant (CCG) Program. The CCG Program is designed to be a creative resource of flexible financial assistance made available through neighborhood-based organizations for families who are either homeless or in danger of becoming homeless. This assessment documents the fundamental design and elements of the program, and identifies those aspects of the program that relate to successful outcomes for families. This assessment intends to provide useful information for future policy development and funding decisions for the District of Columbia, and other states. The authors provide detailed information on what homeless families face in Washington, D.C., and the devastating affects of gentrification and the shrinking low-rent housing market for low-income families. The authors also illustrate how tapping into and supporting neighborhood-based structures of community care is one viable means of meeting the District's challenge of helping its poorest and most vulnerable families to survive and thrive (authors).

Available From: Center for the Study of Social Policy, 1575 Eye Street, NW, Suite 500, Washington, DC 20005, (202) 371-1565, www.cssp.org.

Order #: 12605

Authors: Clark, C., Rich, A.

Title: **Outcomes of Homeless Adults with Mental Illness in a Housing Program and in Case Management Or**

Source: *Psychiatric Services* 54(1): 78-83, 2003. (Journal Article: 6 pages)

Abstract: In this article, the authors discuss and compare two types of service programs in ameliorating homelessness among individuals with severe mental illness. Homeless persons with severe mental illness were recruited into the study on their entry into one of two types of homeless service programs. The first was a comprehensive housing program, in which consumers received guaranteed access to housing, housing support services, and case management. The second was a program of case management only, in which consumers received specialized case management services. The authors state that persons with high psychiatric symptom severity and high substance use achieved better housing outcomes with the comprehensive housing program than with case management alone. The authors also state that persons with low and medium symptom severity and low levels of alcohol and drug use did just as well with case management alone. The article asserts that the effectiveness, and ultimately the cost, of homeless services can be improved by matching the type of service to the consumer's level of psychiatric impairment and substance use rather than by treating mentally ill homeless persons as a homogeneous group (authors).

Program Evaluation

Order #: 11667

Authors: Clark, C., Rich, A.,

Title: **Boley Homelessness Prevention Project: Final Report.**

Source: Tampa, FL: University of South Florida, 2000. (Report: 78 pages)

Abstract: An outcomes assessment of the Boley Homelessness Prevention Project was conducted with two comparison programs, the Homeless Outreach Support Team of the Suncoast Center for Community Mental Health Inc. and Project Return, Inc. The outcome evaluation was an assessment of the effectiveness of counseling and case management services with housing and housing and related services, as provided by Boley and Project Return, as compared to counseling and case management services alone, as provided by Suncoast. The results have possible planning and policy implications for services for homeless individuals. Initial substance use and psychiatric status appears to moderate the effects of the intervention on the housing variables. A similar pattern of results was observed for all three housing outcome variables: low alcohol and drug users and consumers with low frequency of psychiatric symptoms do just as well with counseling and case management alone as they do with housing and housing supports added. However, high users and high psychiatric severity consumers do significantly better with counseling and case management plus housing and housing supports. This suggests that the high end, more costly and supportive housing services should be focused on serving the most impaired individuals in the homeless population, while others with less impairment can benefit from case management and counseling alone (authors).

Available From: The Louis de la Parte Florida Mental Health Institute, University of South Florida Department of Community Mental Health, 13301 Bruce B. Downs Boulevard, Tampa, FL 33612, cclark@fmhi.usf.edu, www.fmhi.usf.edu/institute/pubs/pdf/cmh/boleyfinal2.pdf

Order #: 8245

Authors: Conrad, K.J., Matters, M.D., Hanrahan, P., Luchins, D.J. (eds.).

Title: **Homelessness Prevention in Treatment of Substance Abuse and Mental Illness: Logic Models and Implementation of Eight American Projects.**

Source: Alcohol Treatment Quarterly 17(1/2): 1999. (Journal:Entire Issue: 234 pages)

Abstract: In 1996 the Substance Abuse and Mental Health Services Administration (SAMHSA) funded eight, three-year knowledge development projects designed to prevent homelessness in high risk populations with problems of alcoholism, drug abuse, and/or mental illness. The projects selected are state-of-the-art representations of four types of homelessness prevention: (1) supportive housing; (2) residential treatment; (3) family support and respite; and (4) representative payee and money management. This issue presents articles that provide an overview of the SAMHSA program and descriptions of the eight projects.

Order #: 8246

Authors: Conrad, K.J., Randolph, F.L., Kirby, M.W., Bebout, R.R.

Title: **Creating and Using Logic Models: Four Perspectives.**

Source: Alcohol Treatment Quarterly 17(1/2): 17-31, 1999. (Journal Article: 15 pages)

Abstract: The use of logic models in program development, evaluation, and dissemination is becoming more commonly accepted as a means of facilitating communication, replication, quality improvement, and assessment. The purpose of this article is to describe what logic models are, and to convey to a diverse field the role and functioning of logic models in the conceptualization, delivery, management, and evaluation of programs. The authors provide his/her own perspective on the use of logic models so that it may be broadly useful to service providers, program administrators, and researchers.

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Order #: 11694

Authors: Cook, J.A., Carey, M.A., Razzano, L.A., Burke, J., Blyler, C.R.

Title: **The Pioneer: The Employment Intervention Demonstration Program.**

Source: New Directions for Evaluation (94): 31-42, 2002. (Journal Article: 12 pages)

Abstract: This article discusses the Employment Intervention Demonstration Program, which was funded in 1995, and was the first Substance Abuse and Mental Health Services Administration multisite evaluation study to require the use of a common data collection protocol that was developed collaboratively by the participating sites. The influence of the phase of research on the development of the program, the role of participants and stakeholders in shaping the common protocol, the dissemination of early findings, and the impact of the program on policy, are each discussed (authors).

Order #: 8204

Authors: Coughlin, K.M. (ed.)

Title: **1999 Behavioral Outcomes and Guidelines Sourcebook.**

Source: New York, NY: Faulkner & Gray, Inc., 1999. (Book: 722 pages)

Abstract: This book provides a comprehensive resource on outcome measurement and guidelines for mental health and substance abuse research. It includes details on over 100 key outcome measurement tools, in-depth coverage of major outcome initiatives, new behavioral practice guidelines and guideline revisions, a directory of measurement system vendors, a directory of behavioral practice guidelines, and detailed guidance on how to design behavioral outcomes management systems for various conditions, populations, and settings.

Available From: Thompson Media, 1 State Street Plaza, 27th Floor, New York, NY 10004, (212) 803-8200, www.thompsonmedia.com.

Order #: 11639

Authors: Cuffel, B.J., Bloom, J.R., Wallace, N., Hausman, J.W., Hu, T.

Title: **Two Year Outcomes of Fee-for-Service and Capitated Medicaid Programs for People with Severe Mental Illness.**

Source: Health Services Research 37(2): 341-359, 2002. (Journal Article: 19 pages)

Abstract: This article examines the effects of two models of capitation on the clinical outcomes of Medicaid beneficiaries in the state of Colorado. A large sample of adult, Medicaid beneficiaries with severe mental illness drawn from regions where capitation contracts were either awarded to local community mental health agencies, awarded to a joint venture between local community mental health agencies and a large, private managed behavioral health organization, or not awarded and care continued to be reimbursed on a fee-for-service basis. Study participants were interviewed by trained, clinical interviewers using a standardized protocol consisting of the GAF, BPRS, QOLI, and CAGE. Outcomes were comparable across most outcome measures. When outcome differences were evident, they tended to favor the capitation samples. Medicaid capitation in Colorado does not appear to have negatively affected the outcomes of people with severe mental illness during the first 2 years of the program. Furthermore, the type of capitation model was unrelated to outcomes in this study (authors).

Program Evaluation

Order #: 7908

Authors: Culhane, D., Eldridge, D., Rosenheck, R., Wilkins, C.

Title: **Making Homelessness Programs Accountable to Consumers, Funders and the Public.**

Source: In Fosburg, L.B., Dennis, D.L. (eds.), Practical Lessons: The 1998 National Symposium on Homelessness Research. Delmar, NY: National Resource Center on Homelessness and Mental Illness, 1999. (Book Chapter: 20 pages)

Abstract: This paper discusses how different types of performance measurement can be used to improve the accountability of homeless programs to consumers, funders, and to the public. A distinction is made between the kinds of data used in formal research projects and data that can be practically obtained in a practice setting. Consumer outcomes are discussed in terms of accountability to consumers, program outcomes in terms of accountability to funders, and systems outcomes in terms of accountability to the public. Cost-benefit analyses are also discussed as providing another critical dimension of accountability, to funders and the public (authors).

Available From: National Resource Center on Homelessness and Mental Illness, Policy Research Associates, Inc., 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, www.nrchmi.samhsa.gov.

Order #: 12720

Authors: Culhane, D., Hornburg, S.

Title: **Where to from Here? A Policy Research Agenda Based on the Analysis of Administrative Data.**

Source: In Culhane, D., Hornburg, S. (eds) Understanding Homelessness: New Policy and Research Perspectives, 1997. (Book Chapter: 20 pages)

Abstract: This chapter outlines a policy research agenda based on the analysis of administrative data. Computerized records of client characteristics and their related shelter utilization patterns offer researchers a rich source of longitudinal data that can enable a wide range of investigations, and that can be analyzed with a variety of administrative data to contribute to: enumerating and determining the characteristics of the homeless population; understanding the effect of homelessness on related public systems; gauging the effect of policy interventions on the use of homeless services; evaluating the effectiveness of system-level homeless service delivery; and measuring the performance of individual homeless service providers. The conclusion comments on several issues that policymakers might consider regarding the implementation of automated information systems among homeless service providers (authors).

Order #: 12523

Authors: Culhane, D.P., Poulin, S.R., Hoyt, L.M., Metraux, S.

Title: **The Impact of Welfare Reform on Public Shelter Utilization in Philadelphia: A Time-Series Analysis.**

Source: Cityscape Journal of Policy Development and Research (6)2: 173-185, 2003. (Journal Article: 12 pages)

Abstract: The use of public shelters in Philadelphia was examined both before and after the implementation of Act 35, Pennsylvania's response to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. Results indicate that family size and household head age increased after the implementation of Temporary Assistance for Needy Families, although not at consistent lags. A small negative effect on self-reported substance abuse and a small positive effect on the proportion of household heads with a disability were found, but at inconsistent lags. As is the case with most evaluations of welfare reform, it is difficult to separate the effects of welfare reform and Philadelphia's economy during the study period. To test the effect of Act 35's implementation while controlling for economic factors, a multivariate regression analysis of family shelter admissions was conducted along with variables for the unemployment rate and for the consumer price index for the cost of rental housing. This analysis revealed a significant positive effect of unemployment and housing costs on public shelter admissions among families and no effect of the implementation of welfare reform (authors).

Program Evaluation

Order #: 6903

Authors: Devine, J.A., Brody, C.J., Wright, J.D.

Title: **Evaluating an Alcohol and Drug Treatment Program for the Homeless: An Econometric Approach.**

Source: Evaluation and Program Planning 20(2): 205-215, 1997. (Journal Article: 11 pages)

Abstract: The New Orleans Homeless Substance Abusers Project (NOHSAP) was designed as a randomized field experiment to test the effectiveness of a residential alcohol and drug treatment program on the sobriety, employment, housing, and social integration of homeless substance abusers. However, program staff sabotaged randomization into treatment and control groups, and research attrition was also non-random. Non-random assignment to treatment and non-random research attrition threaten internal and external validity by biasing OLS estimates of the effects of treatment and necessitate use of econometric selection bias correction modeling techniques. Results of these corrected models are then used in subsequent estimates of treatment effects on a variety of outcome measures. After correction, positive treatment effects prove relatively modest. However, subsequent analysis suggests that NOHSAP exerted a critical indirect effect on outcomes by facilitating subject's participation in outside substance abuse groups (authors).

Order #: 5762

Authors: Devine, J.A., Wright, J.D., Brody, C.J.

Title: **An Evaluation of an Alcohol and Drug Treatment Program for Homeless Substance Abusers.**

Source: Evaluation Review 19(6): 620-645, 1995. (Journal Article: 25 pages)

Abstract: This article evaluates a residential alcohol/drug treatment program for the homeless. The evaluation documents numerous deviations from the program as designed and other implementation problems. Foremost among these was that the project was designed as a randomized experiment, but randomization was sabotaged by the treatment staff. Non-random research attrition constituted another potential source of bias. The authors employ econometric modeling techniques to correct for these selection biases. Consistent with the drug treatment literature, evidence suggests that people retained in treatment for more than a few months exhibit more positive outcomes than those staying for shorter periods (authors).

Order #: 11652

Authors: Dickey, B., Wagenaar, H.

Title: **Evaluating Mental Health Care Reform: Including the Clinician, Client, and Family Perspective.**

Source: The Journal of Mental Health Administration 21(3): 313-319, 1994. (Journal Article: 7 pages)

Abstract: This article suggests one direction that theory building might take to develop a stronger conceptual foundation needed to test the effect of clients on reforms in the financing and organization of mental health care delivery systems. The authors recommend that health status outcomes be measured from three perspectives: the client, who can best support his or her own subjective experience of illness; the clinician, who is the best source of information about the client's disease; and the family, which is the best source of information about the effects on member's health status of caring for a mentally ill family member. The authors also recommend that measurement of health status should be multidimensional (authors).

Program Evaluation

Order #: 12979

Authors: Dykeman, M., MacIntosh, J., Seaman, P., Davidson, P.

Title: **Development of a Program Logic Model to Measure the Processes and Outcomes of a Nurse-Managed Community Clinic.**

Source: Journal of Professional Nursing 19(4): 197-203, 2003. (Journal Article: 7 pages)

Abstract: Evaluation is an essential process that permits assessing the effectiveness and efficiency of planned programs. In implementing a new nurse-managed Community Health Clinic targeting services for the homeless and underserved, the stakeholders considered an evaluation process integral to the planning stage of the clinic as a whole as well as of all the different programs being offered. The program logic model was chosen and modified to guide evaluation. Work to develop the evaluation model and its components began before the clinic opened. This article describes the development of the modified program logic model, how it was modified, and the rationale for its modifications. The article highlights the process of developing the evaluation model because authors found limited descriptions of the process in the literature. The evaluation process itself will be evaluated on an ongoing basis to determine if it is capturing the evaluation needs of the clinic project accurately (authors).

Order #: 11679

Authors: Enelow, A.J., Leo, R.J.

Title: **Evaluation of the Vocational Factors Impacting on Psychiatric Disability.**

Source: Psychiatric Annals 32(5): 293-297, 2002. (Journal Article: 5 pages)

Abstract: In this article, the authors state that psychiatric disorders that interfere with an individual's ability to perform prior work, such as an accountant or physician, does not necessarily preclude performance in any other work available, like housekeeping, or sales. To make these determinations, adjudicators employed by the SSA look at an individual's history of education, prior work achievements and vocational factors to ascertain whether there are other aspects of work the individual is capable of, which will, in turn, best facilitate adjudication of disability claims through the SSA. The article also states that the psychiatrist may be instrumental in encouraging the patient to undertake vocational training and educational experiences that may foster independence and autonomy (authors).

Order #: 7400

Authors: Essock, S.M., Drake, R.E., Burns, B.J.

Title: **A Research Network to Evaluate Assertive Community Treatment: Introduction.**

Source: American Journal of Orthopsychiatry 68(2): 176-178, 1998. (Journal Article: 3 pages)

Abstract: A research collaboration on Assertive Community Treatment (ACT) was begun almost a decade ago to re-evaluate the efficacy of the model both in terms of quality of care and cost-effectiveness. In this article, the research network, as well as a new research series, is described, and directions for future research are suggested. The authors recommend studies on services within ACT, stating that services research studies are most likely to influence policy if they are readily interpretable within a context of related studies.

Program Evaluation

Order #: 665

Authors: Etheridge, R.M., Dennis, M.L., Lubalin, J.S., Schlenger, W.E.

Title: **Implementation Evaluation Design for NIMH McKinney Mental Health Services Demonstration Projects for Homeless Mentally Ill Adults. Volume I: Implementation Evaluation Design.**

Source: Research Triangle Park, NC: Research Triangle Institute, 1989. (Report: 157 pages)

Abstract: This is the first of a four-volume report that presents a design for evaluating the implementation of nine NIMH McKinney demonstration projects for homeless mentally ill adults funded in 1988. This volume describes the background, rationale, and details of the proposed implementation evaluation design.

Available From: Research Triangle Institute, P.O. Box 12194, Research Triangle Park, NC 27709, (919) 485-2666, www.rti.org.

Order #: 12704

Authors: Evanson, R., Binner, P., Cho, D., Schicht, W., Topolski, J.

Title: **An Outcome Study of Missouri's CSTAR Alcohol and Drug Abuse Programs.**

Source: Journal of Substance Abuse Treatment 15(2): 143-150, 1998. (Journal Article: 8 pages)

Abstract: In this article, the Comprehensive Substance Abuse Treatment and Rehabilitation (CSTAR) program is described, and a study of its services is presented. The CSTAR program is a community program with wrap around services and intensive case management. A retrospective study of 280 clients at 10 facilities was done, and results analyzed separately by General Programs, Women with Children Programs, and Adolescent programs. A small sample of clients who were early in their treatment was re-interviewed 90 days later. The article states that data was also examined according to length of stay in the program, and results were consistently positive, increasing with length of time in the program (authors).

Order #: 7533

Authors: Feins, J.D., Fosburg, L.B., Barron, C., Kay, N., Baker, D.

Title: **Evaluation of the Emergency Shelter Grants Program. Volume II: Site Profiles.**

Source: Washington, DC: U.S. Department of Housing and Urban Development, 1994. (Report: 230 pages)

Abstract: The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This volume of the evaluation presents profiles of the 15 intensive-study sites, in order to develop a sense of how ESG-supported services and facilities fit into the larger picture of local assistance for homeless individuals and families.

Available From: HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, <http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

Program Evaluation

Order #: 7532

Authors: Feins, J.D., Fosburg, L.B., Locke, G.

Title: **Evaluation of the Emergency Shelter Grants Program. Volume I: Findings.**

Source: Washington, DC: U.S. Department of Housing and Urban Development, 1994. (Report: 227 pages)

Abstract: The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This report presents an analysis of the growth and current status of the ESG, its implementation, its impacts, and recommendations to make the program more effective. The data for these analyses come from the grantee census, grantee surveys, recipient surveys, provider surveys, and site visits. Although short on data on client-level outcomes, the results of this evaluation show positive outcomes for the organizations involved in the ESG, for the facilities they operate, and for the local systems of providing aid to the homeless population.

Available From: HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,
<http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

Order #: 7534

Authors: Feins, J.D., Fosburg, L.B., Locke, G.

Title: **Evaluation of the Emergency Shelter Grants Program. Volume III: Technical Appendices.**

Source: Washington, DC: U.S. Department of Housing and Urban Development, 1994. (Report: 175 pages)

Abstract: The focus of the Emergency Shelter Grants Program (ESG) since its inception and incorporation into the McKinney Act has been to help states and localities provide facilities and services to meet the needs of homeless people, sheltering them but at the same time aiding in their transition from temporary shelter to permanent homes. This volume consists of two appendices. Appendix A contains supplementary tables corresponding to each of the Department of Housing and Urban Development's specific research questions for the evaluation. Appendix B provides detail on the sample design, survey response, and data collection methods used for the evaluation study.

Available From: HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691,
<http://webstore.huduser.org/catalog/index.php?cPath=2&page=1&sort=3d> (COST: \$5.00).

Order #: 12700

Authors: Felton, B.

Title: **Innovation and Implementation in Mental Health Services for Homeless Adults: A Case Study.**

Source: Community Mental Health Journal 39(4): 309-322, 2003. (Journal Article: 14 pages)

Abstract: This case study examines a newly implemented evidence-based practice in which an existing agency was invited to move into the neighboring county to introduce its "housing first" practice with seriously mentally ill homeless adults. Using a constructivist methodology to elicit the narratives of key actors and observers about the implementation and its attendant controversy, this study found three issues at the core of actors' experiences: mode of presentation, use of an outside agency and the questioned uniqueness of the new practice. According to the author, barriers rather than facilitators dominated participants' interpretations of events despite significant researcher-observed facilitators (author).

Program Evaluation

Order #: 11610

Authors: Fenton, W., Hoch, J., Herrell, J., Mosher, L., Dixon, L.

Title: **Cost and Cost-Effectiveness of Hospital vs. Residential Crisis Care for Patients Who Have Serious Mental Illness.**

Source: Archives General Psychiatry 59: 357-364, 2002. (Journal Article: 8 pages)

Abstract: This study evaluates the cost and cost-effectiveness of a residential crisis program compared with treatment received in a general hospital psychiatric unit for patients who have serious mental illness in need of hospital-level care and who are willing to accept voluntary treatment. Residential crisis programs may be a cost-effective approach to providing acute care to patients who have serious mental illness and who are willing to accept voluntary treatment. Where resources are scarce, access to needed acute care might be extended using a mix of hospital, community-based residential crisis, and community support services (authors).

Order #: 12726

Authors: Finkel, M., Khadduri, J., Main, V., Pistilli, L., Solari, C., Winkel, K., Wood, M.

Title: **Costs and Utilization in the Housing Choice Voucher Program: Draft Final Report.**

Source: Cambridge, MA: Abt Associates, Inc., 2002. (Report: 88 pages)

Abstract: This report provides insights into the factors that affect Housing Choice Voucher (HCV) program utilization rates and costs in a sample of sites nationwide. The data for this study was derived from existing computerized HUD files, other secondary data sources, and primary data collected on site at a sample of 48 Public Housing Authorities (PHAs). According to the authors, the bulk of the information was gathered during on-site interviews with voucher program staff as part of a one-to-two-day visit made to each of the study sites between December 2001 and April 2002. Aspects of each PHA's local housing market, participant characteristics and PHA policies are discussed, in an effort to assess their impacts on subsidy costs and voucher utilization. This report provides HUD with information to support program decision-making and helps identify areas for technical assistance that can improve utilization rates and assist PHAs in using their increased flexibility to optimize lead programs (authors).

Available From: Abt Associates, Inc., 55 Wheeler Street, Cambridge, MA 02138, (617) 492-7100, www.abtassoc.com.

Order #: 11776

Authors: Finlayson, M., Baker, M., Rodman, L., Hertzberg, G.

Title: **The Process and Outcomes of a Multimethod Needs Assessment at a Homeless Shelter.**

Source: American Journal of Occupational Therapy 56(3): 313-321, 2002. (Journal Article: 9 pages)

Abstract: This article used literature reviews, local documents and reports, participant observations, focus groups, and reflective journals to guide the development of an occupational performance skills program at one homeless shelter in south Florida. Through these methods, the role of occupational therapy was extended beyond direct service to include program and resource development, staff education, advocacy, and staff-resident mediation. The findings of this needs assessment and the actions taken as a result of this work point to the huge potential for occupational therapists and students to work together with staff and residents of homeless shelters (authors).

Program Evaluation

Order #: 7211

Authors: Fosburg, L., Locke, G., Peck, L., Finkel, M.

Title: National Evaluation of the Shelter Plus Care Program.

Source: Washington, DC: U.S. Department of Housing and Urban Development, 1997. (Report: 175 pages)

Abstract: This report presents the results of the National Evaluation of the U.S. Department of Housing and Urban Development's (HUD) Shelter Plus Care Program (S+C), based on the experience of Fiscal Year 92 grantees in using FY 92 and, for some, FY 93 funding. The report gives an overview of S+C and describes program implementation, participant characteristics, supportive services, housing, and program outcomes. The report finds that S+C participants overall have made increases in their participation in services and in employment or volunteer work. A number of recommendations are made for S+C participants and for HUD policy.

Available From: HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, www.huduser.org/publications/hsgspec/shelter.html (COST: \$15.00).

Order #: 3084

Authors: Fosburg, L.B., Locke, G.P. and Holin, M.J.

Title: Evaluation of the Shelter Plus Care Program: Volumes I and II.

Source: Washington, DC: U.S. Department of Housing and Urban Development, 1994. (Report: 339 pages)

Abstract: This report provides information about the Shelter Plus Care program, including program characteristics and the implementation status, 18 months after grant award announcements. The National Affordable Housing Act of 1990 amended Title IV of the Stewart B. McKinney Homeless Assistance Act to create the program. The objective of this program is to permanently house hard-to-serve homeless persons with disabilities, who are currently living on the streets or in emergency shelters, by providing rental assistance funded by the U.S. Department of Housing and Urban Development (HUD) that must be matched with an equal or greater dollar value of supportive services from other federal, state, local or private funding sources.

Available From: U.S. Department of Housing and Urban Development 451 7th Street, SW, Washington, DC 20410, (202) 708-1112, www.hud.gov.

Order #: 10536

Authors: Geller, J.L., Fisher, W.H., McDermeit, M.

Title: A National Survey of Mobile Crisis Services and Their Evaluation.

Source: Psychiatric Services 46(9): 893-905, 1995. (Journal Article: 13)

Abstract: Although mobile crisis services have been widely accepted as an effective approach to emergency service delivery, no systematic studies have documented the prevalence or effectiveness of these services. This survey gathered national data on the use and evaluation of mobile crisis services. A total of 39 states have implemented mobile crisis services, dispatching teams to a range of settings. Although respondents reported that use of mobile crisis services is associated with favorable outcomes for patients and families and with lower hospitalization rates, the survey found that few service systems collect evaluative data on the effectiveness of these services. The claims of efficacy made for mobile crisis services, which have led to their widespread dissemination, are based on little or no empirical evidence. More rigorous evaluation of new and existing modes of service delivery is needed.

Program Evaluation

Order #: 951

- Authors:** Goldman, H.H., Lehman, A.F., Morrissey, J.P., Newman, S.J., Frank, R.G., Steinwachs, D.M.
- Title:** **Design for the National Evaluation of the Robert Wood Johnson Foundation Program on Chronic Mental Illness.**
- Source:** Hospital and Community Psychiatry 41(11): 1217-1221, 1990. (Journal Article: 5 pages)
- Abstract:** The Robert Wood Johnson Foundation (RWJ) and the National Institute of Mental Health (NIMH) chose a group of co-investigators from several universities, coordinated by the University of Maryland Mental Health Policy Studies Program, to conduct a national evaluation of the RWJ Program on Chronic Mental Illness. This article describes the overall design of the evaluation and serves as a reference point for other investigators in the field and for subsequent publications reporting on the evaluation. In addition, it illustrates how a services demonstration can provide an opportunity for a program of research conducted by a large number of investigators at multiple sites, funded by several sources, and integrated into a national evaluation.

Order #: 7205

- Authors:** Gueron, J.M.
- Title:** **Learning about Welfare Reform: Lessons from State Based Evaluations.**
- Source:** New Directions for Evaluation 76: 79-94, 1997. (Journal Article: 16 pages)
- Abstract:** This article summarizes the origins, context, and main themes of many of the major studies on work-focused welfare reforms conducted in the past 20 years. The article also looks ahead at some of the likely challenges and opportunities for further evaluations. The author describes the evaluations of welfare reform experiments conducted by the Manpower Demonstration Research Corporation and also includes a number of lessons learned, methods, and results. The author states that in the past two decades a solid body of research about the effectiveness of welfare reform has been produced, but that this reform continues to change. The author concludes that evaluators should continue to develop research strategies so that they may respond to new policies and provide accurate and vigorous program evaluations.

Order #: 12666

- Authors:** Guydish, J., Ponath, C., Bostrom, A., Campbell, K., Barron, N.
- Title:** **Effects of Losing SSI Benefits on Standard Drug and Alcohol Outcome Measures.**
- Source:** Contemporary Drug Problems 30(1-2): 169-194, 2003. (Journal Article: 25 pages)
- Abstract:** This article discusses the elimination of drug addiction and alcoholism (DA&A) as an impairment category for Supplemental Security Income (SSI), which allowed a six-month period for DA&A recipients to request an eligibility redetermination, and terminated all SSI DA&A benefits on January 1, 1997. The authors conducted a multi-site cohort study of persons affected by this change, in which participants were interviewed prior to the benefits termination date and reinterviewed over a two-year follow-up period. The authors assessed the impact of loss of SSI DA&A benefits on Addiction Severity Index (ASI) composite scores, which are often used to reflect treatment outcomes in seven areas (psychological, social, alcohol, drug, legal, employment, and medical). The authors classified participants as either on SSI or off SSI during follow up and analyzed ASI composite scores treating time as a linear-effect, including baseline composite scores as covariates (authors).

Program Evaluation

Order #: 8131

Authors: Hargreaves, W.A., Shumway, M., Hu, T.W., Cuffel, B.

Title: **Cost-Outcome Methods for Mental Health.**

Source: San Diego, CA: The Academic Press, 1997. (Book: 239 pages)

Abstract: This book presents economic concepts of cost and discusses the various approaches to cost-outcome studies as they apply to mental health services. It includes sections on designing these studies; measuring costs, interventions, and outcomes; analyzing study results; and using the findings to guide policy and practice. It presents principles and application examples in nontechnical language, and it discusses the details of design, measurement, and analysis to guide the application of these methods to problems in mental health services research (authors).

Available From: Elsevier, 11830 Westline Industrial Drive, St. Louis, MO 63146, (800) 545-2522, www.elsevier.com.

Order #: 11692

Authors: Herrell, J.M., Straw, R.B.

Title: **Conducting Multiple Site Evaluations in Real-World Settings.**

Source: New Directions for Evaluation (94): 1-105, 2002. (Journal:Entire Issue: 106 pages)

Abstract: In this issue of New Directions for Evaluation, the focus is on various multiple-sites, like The Employment Intervention Demonstration Program (1995), The Collaborative Program to Prevent Homelessness (1996), and the Center for Mental Health Services Housing Initiative. Each article takes a detailed look at it's respective site, and outlines various approaches to multi-site study (authors).

Order #: 12356

Authors: Hinden, B., Biebel, K., Nicholson, J., Henry, A., Stier, L.

Title: **Step Toward Evidence-Based Practices for Parents with Mental Illness and Their Families.**

Source: Rockville, MD: Center for Mental Health Services, 2002. (Report: 68 pages)

Abstract: This report focuses on the data from two studies undertaken by the Center for Mental Health Services (CMHS), in an effort to take steps toward evidence-based practices for parents with mental illness and their families by identifying and systematically describing existing interventions. In the first study, the authors identify programs and conduct in-depth phone interviews with administrators and providers to describe, compare and contrast programs along selected dimensions. In the second study, the authors define explicit logic models with hypothetical links between target populations, practices, processes and outcomes for selected programs, using data obtained in comprehensive site visits. The data from these two studies is used to identify core program components, key ingredients, and relevant outcomes (authors).

Available From: Center for Mental Health Services, 5600 Fishers Lane, Room 17C-02, Rockville, MD 20857, (800) 790-2647, www.mentalhealth.org.

Program Evaluation

Order #: 11876

Authors: Howard, P.B., El-Mallakh, P.

Title: **Training Consumers to Collect Data in Mental Health Services System Evaluation Research.**

Source: Journal of Psychosocial Nursing 39(5): 32-39, 2001. (Journal Article: 8 pages)

Abstract: In this article, the authors describe The Consumer Satisfaction Research Associate Training Program, which was designed for the education and supervision of recovered consumers who collected data during four studies at three psychiatric hospitals. The educational program had didactic and laboratory components. Consumer research associates collected quantitative and qualitative data using a survey tool for face-to-face interviews. The article discusses participant recruitment and management of confidential records, which were included in the role. The authors assert that data collected by research associates from consumers who are in treatment can enhance the validity and trustworthiness of satisfaction surveys. The authors also state that nurses can plan an important role in the research process by serving as staff resources for consumers who collect data in various service system settings (authors).

Order #: 8154

Authors: Human Services Research Institute.

Title: **Report of the Roundtable on Multicultural Issues in Mental Health Services Evaluation.**

Source: Cambridge, MA: Human Services Research Institute, 1996. (Conference Summary: 128 pages)

Abstract: This document contains 11 papers produced in conjunction with a roundtable meeting to discuss multicultural issues in mental health services evaluation. The papers cover topics including general cultural competency and services research subjects, as well as specific examinations of services research for African-American adolescents, Asian-Americans, and Hispanic populations.

Available From: Human Services Research Institute, 2336 Massachusetts Avenue, Cambridge, MA 02140, (617) 876-0426, <http://tecathsri.org/multicultural.asp>

Order #: 6991

Authors: Humphreys, K., Hamilton, E.G., Moos, R.H., Suchinsky, R.T.

Title: **Policy-Relevant Program Evaluation in a National Substance Abuse Treatment System.**

Source: The Journal of Mental Health Administration 24(4): 373-385, 1997. (Journal Article: 13 pages)

Abstract: This article discusses recent trends in public and private substance abuse services and offers suggestions on how the evaluation of such services can inform clinical practice and policy making. The author focuses on the Department of Veterans Affairs (VA), which operates the largest substance abuse treatment system in the United States. The author discusses how there has been a reversal in the growth trend seen at the VA in these services since 1994, and how these services may shrink further as the system becomes more decentralized and adopts managed care strategies from the private sector. Drawing from the experiences of evaluating the VA system and working with federal policy makers, the author presents examples and suggestions for making evaluations of substance abuse treatment systems more useful in policy discussions and in day-to-day clinical practice (authors).

Program Evaluation

Order #: 7202

Authors: Hunter, J.K., Crosby, F., Ventura, M.R., Warkentin, L.

Title: **Factors Limiting Evaluation of Health Care Programs for the Homeless.**

Source: Nursing Outlook 45(5): 224-228, 1997. (Journal Article: 5 pages)

Abstract: This study seeks to identify key information needed to evaluate health care for the homeless programs as well as actual and potential barriers to data collection. A survey was conducted of 93 administrators of health care programs for the homeless to obtain qualitative data. The themes that emerged from the research were obstacles related to the physical settings in which health care was provided, the nature of homelessness, unavailability of resources, and lack of convenient and efficient data systems. The authors conclude that while some of these factors will remain, improvements in evaluation can be made by developing a standard for data collection, improving communication between agencies and health care providers, and by making data more accessible.

Order #: 7638

Authors: Huxley, P.

Title: **Social Indicators of Outcome at the System Level.**

Source: In Knudsen, H.C., and Thornicroft, G. (eds.), Mental Health Service Evaluation. New York, NY: Cambridge University Press, 228-244, 1996. (Book Chapter: 17 pages)

Abstract: This chapter considers the evaluation of service systems, with particular reference to non-health outcomes. The nature of the mental health service system is considered and system-level analysis is subdivided into idiographic, normative, and legislative types. Examples of measures developed for this kind of evaluation are given. The mental health service system interacts with many other social systems, and illustrations are given from the interfaces with work, criminal justice, housing and health care systems, together with some suggested measures (author).

Order #: 6906

Authors: Huz, S., Andersen, D., Richardson, G., Boothroyd, R.

Title: **A Framework for Evaluating Systems Thinking Interventions: An Experimental Approach to Mental Health Systems Change.**

Source: System Dynamics Review 13(2): 149-169, 1997. (Journal Article: 21 pages)

Abstract: This article proposes a framework to address questions that are important to understanding the impact of systems thinking interventions, and presents preliminary findings from a pilot test that evaluated such interventions in New York State. Researchers from SUNY Albany and The New York State Office of Mental Health have been engaged in testing the experimental approach to be repeated in four counties with four control counties also selected and observed via pre- and post-intervention measures. The overall context of the project focuses on integration of mental health and vocational rehabilitation services. The experiment is designed to evaluate measurable outcomes, including shifts in goal structures and change strategies of the management team, shifts in relative alignment of the management team as a whole, perceived success of the intervention, and changes in systems and procedures necessary to improve client services (authors).

Program Evaluation

Order #: 12999

Authors: Hyde, P.S., Falls, K., Morris, J.A., Schoenwald, S.K.

Title: **Turning Knowledge into Practice: A Manual for Behavioral Health Administrators and Practitioners About Understanding and Implementing Evidence-Based Practices.**

Source: Boston, MA: The Technical Assistance Collaborative, Inc., 2003. (Manual: 127 pages)

Abstract: This manual introduces concepts about evidence-based practices and evidence-based practice to practicing clinicians, behavioral health program leaders, and consumers and families. It is developed to provide information, suggest ways of thinking and getting started, and points to additional resources as evolving evidence-based practices become a routine part of service delivery and management. This manual is meant to be used as a tool to stimulate thinking and to move toward a systemic and sustained process of constantly improving practices (authors).

Available From: The Technical Assistance Collaborative, Inc., 535 Boylston Street, Suite 1301, Boston, MA 02116, (617) 266-5657, www.tacinc.org/cms/admin/cms/_uploads/docs/EBPmanual.pdf.

Order #: 3253

Authors: Kamis-Gould, E., Hadley, T.R., Rothbard, A.B., Lovelace, J., Eppler, J.A.

Title: **A Framework for Evaluating the Impact of State Hospital Closing.**

Source: Administration and Policy in Mental Health 22(5): 497-509, 1995. (Journal Article: 13 pages)

Abstract: This article provides a framework for evaluating shifting services for persons with serious mental disorders from state hospitals to community settings. A case study of the closing of a state psychiatric hospital in Pittsburgh, PA, and the scaling down of other facilities in the area is used as an illustration. The proposed framework provides answers to long-term management questions and information from policy development through the use of integrated systems and client-specific outcome data. Databases, client outcome scales, and the design of the evaluation are described (authors).

Order #: 7743

Authors: Knapp, M.S.

Title: **Methodological Issues in Evaluating Integrated Services Initiatives.**

Source: New Directions for Evaluation 69: 21-33, 1996. (Journal Article: 13 pages)

Abstract: This article explores the conceptualization and design of studies that evaluate integrated services initiatives. The article also examines special problems posed by integrated services for evaluators. The author states that integrated services are difficult to evaluate due to their complexity and flexibility, the nature of collaborative or integrated effort, and the convergence of different disciplines. The author suggests approaches for further evaluation of how these initiatives work and discusses what they are accomplishing.

Program Evaluation

Order #: 7640

Authors: Knudsen, H.C., Thornicroft, G. (eds.)

Title: **Mental Health Service Evaluation.**

Source: New York, NY: Cambridge University Press, 1996. (Book: 399 pages)

Abstract: This book comprehensively reviews mental health service evaluations, including the most recent developments in research design, method, and measurement. At the level of both whole systems and individual programs within mental health services, the issues are illustrated with practical descriptions of comprehensive evaluation projects. The book is divided into six parts. Part one introduces the background of community services and provides an overview of research levels and designs which are further illustrated in part two. Part three focuses on technical measurement issues and new developments in statistical applications. Special problems and system-level research are highlighted in part four. Parts five and six then address program-level evaluation projects, including user outcomes and needs assessment, and finally consider the implications in health economics.

Available From: Cambridge University Press, 40 West 20th Street, New York, NY 10011, (212) 924-3900, <http://us.cambridge.org/>.

Order #: 8885

Authors: Leff, H.S., Campbell, J., Gagne, C., Woocher, L.S.

Title: **Evaluating Peer Providers.**

Source: In Mowbray, C.T., Moxley, D.P., Jasper, C.A., and Howell, L. (eds.), *Consumers as Providers in Psychiatric Rehabilitation*. Columbia, MD: International Association of Psychosocial Rehabilitation Services, 1997. (Book Chapter: 14 pages)

Abstract: This chapter examines the issue of evaluating peer providers in mental health services. The authors suggest that future evaluations of peer providers should couple traditional evaluation methods with participatory approaches to evaluation that include peer providers and the consumers they serve in the evaluation process. The authors believe that using this approach will result in evaluations that empower peer providers and consumers, and overcome peer provider and consumer resistance to evaluation. The remainder of the chapter is divided into two parts. The first discusses a desired evaluation process, combining participatory approaches and traditional evaluation methods. The second presents a conceptual model of evaluation content for guiding future study of the effectiveness of peer providers.

Order #: 12136

Authors: Leff, H.S., Mulkern, V.

Title: **Lessons Learned About Science and Participation from Multisite Evaluations.**

Source: *New Directions for Evaluation* 94: 89-100, 2002. (Journal Article: 12 pages)

Abstract: In this article, the authors discuss their observations on the problems encountered during the execution of multisite evaluations (MSEs) conducted during a study involving five publicly funded mental health and substance abuse treatment programs. They also discuss potential solutions within the context of two underlying principles at work in MSEs, which are often in conflict when seeking potential remedies. These two principles that shaped these programs are that services should be science-based and that they should have broad participation by stakeholders (authors).

Program Evaluation

Order #: 12171

Authors: Lewis, J., Payton-Bernard, A., Kane-Willis, K.

Title: Lakefront SRO Job Training and Placement Evaluation.

Source: Chicago, IL: Roosevelt University, 2002. (Report: 94 pages)

Abstract: The report is based on an evaluation of Lakefront SRO's experience providing onsite employment services to public housing residents in and around two public housing developments on the south side of Chicago, compared with similar programs at Lakefront's SRO (Single Room Occupancy) buildings. Low staff-to-client ratios and intensive follow-up are the keys to helping clients get and keep jobs. Among the findings highlighted in the report are: interventions that aid in high employment outcomes; using training and employment preparation resources effectively; mental health issues faced by clients; and impact of gender on social service delivery.

Available From: Roosevelt University, 430 South Michigan Avenue, Chicago, IL 60605, (312) 341-3500, www.roosevelt.edu/ima/pdfs/housing-employment.pdf

Order #: 7984

Authors: Marshall, M.

Title: Evaluating Services for Homeless People with Mental Disorders: Theoretical and Practical Issues.

Source: In Bhugra, D. (ed.), Homelessness and Mental Health. New York, NY: Cambridge University Press, 280-296, 1996. (Book Chapter: 17 pages)

Abstract: This chapter is divided into two sections. The first section is a survey of the types of evaluation studies that have been conducted on services for homeless people with mental disorders. The survey pays particular attention to the problems that have arisen in carrying out these studies. Examples from the United Kingdom are used where available. The second section considers how far evaluative studies have provided evidence for the effectiveness of hostels for the homeless.

Order #: 11386

Authors: McGlynn, E., Boynton, J., Morton, S., Stecher, B., Hayes, C., Vaccaro, J., Burnam, M.

Title: Treatment for the Dually Diagnosed Homeless: Program Models and Implementation Experience: Los Angeles.

Source: Alcoholism Treatment Quarterly 10: 171-186, 1993. (Journal Article: 16 pages)

Abstract: This paper describes a research demonstration project currently underway in Los Angeles county. The study is a randomized evaluation of treatment strategies for people who are homeless with serious mental and substance use disorders. This paper describes the study population, the treatment philosophy underlying the programs being studied, the design of the two treatment programs, and implementation experiences occurring during the first year of project operations. The existing residential program staff was able to adapt to treating a different client population. Considerable challenges were encountered in implementing the new nonresidential program. Implementation of the randomized design and longitudinal follow-up have been successful (authors).

Program Evaluation

Order #: 12558

Authors: McHugo, G.J., Drake, R.E., Teague, G.B., Xie, H.

Title: **Fidelity to Assertive Community Treatment and Client Outcomes in the New Hampshire Dual Disorder Study.**

Source: Psychiatric Service 50(6): 818-824, 1999. (Journal Article: 7 pages)

Abstract: This study examined the association between fidelity of programs to the assertive community treatment model and client outcomes in dual disorders programs. Assertive community treatment programs in the New Hampshire dual disorders study were classified as low-fidelity programs (three programs) or high-fidelity programs (four programs) based on extensive longitudinal process data. The study included 87 clients with a dual diagnosis of severe mental illness and a comorbid substance use disorders. Sixty-one clients were in the high-fidelity programs, and 26 were in the low-fidelity programs. Client outcomes were examined in the domains of substance abuse, housing, psychiatric symptoms, functional status, and quality of life, based on interviews conducted every six months for three years. The results show that clients in the high-fidelity assertive community treatment programs showed greater reductions in alcohol and drug use and attained higher rates of remission from substance use disorders than clients in the low-fidelity programs. Clients in high-fidelity programs had higher rates of retention in treatment and fewer hospitalization admissions than those in low-fidelity programs. The authors conclude that faithful implementation of, adherence to, the assertive community treatment model for persons with dual disorders was associated with superior outcomes in the substance use domain (authors).

Order #: 13166

Authors: McIntire, J.L., Layzer, J., Weisberg, L.

Title: **On Firmer Ground: Housing for Homeless and Near-homeless Families: An Evaluation of Washington State's Pilot Programs for Homeless and Near-homeless Families.**

Source: Seattle, WA: University of Washington Institute for Public Policy and Management, 1992. (Report: 144 pages)

Abstract: This report is based on two pilot programs in Washington State that assisted homeless families with children: a homelessness prevention program and a transitional rental assistance program. The key findings of the independent evaluation are that it was successful, cost effective, and targeted. Available evidence indicates that the programs were very successful in preventing homelessness among families facing imminent eviction, and in stabilizing homeless families in permanent housing. These programs were found to be between two to three times as cost effective as emergency shelter expenditures, even among the most conservative assumptions. These programs targeted assistance to the very poorest families with children - families whose incomes average up to seventy-five percent of the poverty level. The evaluation of both pilots is based on client information, interviews with program staff and clients, and exit interviews with client families (authors).

Available From: University of Washington Institute for Public Policy and Management, Daniel J. Evans School of Public Affairs, Parrington Hall, Room 109, University of Washington, P.O. Box 353055, Seattle, WA 98195, (206) 543-4900, www.evans.washington.edu

Order #: 2429

Authors: McLean, A.

Title: **The Role of Consumers in Mental Health Services Research and Evaluation: A Report and Concept Paper.**

Source: Washington, DC: Community Support Program, Center for Mental Health Services, 1994. (Report: 71 pages)

Abstract: In late 1988, the Community Support Program (CSP), which is now part of the Center of Mental Health Services (CMHS), began funding 13 consumer-run service demonstration projects in 13 states. The purpose of this report is to provide an overview of information concerning the role of consumers in research and evaluation. The author first reviews the relevant literature and then assesses the role of consumers in the evaluation process of the 13 demonstration projects (author).

Program Evaluation

Order #: 1919

Authors: Mercier, C., Fournier, L. and Péladeau, N.

Title: Program Evaluation of Services for the Homeless.

Source: Evaluation and Program Planning 15:417-426, 1992. (Journal Article: 10 pages)

Abstract: This paper reviews the research strategies (types of evaluations, designs, and indicators) that have been developed to assess programs for chronic alcohol use disorders and mentally ill homeless. The findings from previous evaluations are then summarized and their consequences for evaluation studies of services for the homeless are considered (authors).

Order #: 2503

Authors: Miller, J.V., Donahue, S.A., Felton, H.C., Shern, D.L.

Title: Supported Housing Program Evaluation: Fourth Year Final Report.

Source: Albany, NY: New York State Office of Mental Health, 1993. (Report: 98 pages)

Abstract: This report discusses findings regarding data collected about 2,379 individuals participating in the New York State Supported Housing Program. The report addresses the accessibility and quality of the program using feedback from both the provider and the recipient perspective. Accessibility is assessed by comparing the Supported Housing population to other New York State Office of Mental Health service recipients. Quality is assessed by the level of consumer choice and consumer satisfaction (authors).

Available From: Bureau of Evaluation and Services Research, New York State Office of Mental Health, 44 Holland Avenue, Albany, NY 12229, (518) 474-1684. (FREE)

Order #: 6583

Authors: Mowbray, C.T. and Herman, S.E.

Title: Using Multiple Sites in Mental Health Evaluations: Focus on Program Theory and Implementation Issues.

Source: New Directions for Program Evaluation 50: 45-57, 1991. (Journal Article: 13 pages)

Abstract: The article explains that because the mental health field lacks accepted causal theories and proven interventions, a demonstration project approach using multisite evaluation (MSE) offers many advantages in the development of program initiatives. The authors advocate special emphasis on program theory and implementation evaluation in order to measure and interpret whether the program is working as it should at each site. A modified research, development, and diffusion approach is presented as a solution.

Order #: 1896

Authors: Mowbray, C.T., Cohen, E., Bybee, D.

Title: Services to Individuals Who Are Homeless and Mentally Ill: Implementation Evaluation.

Source: In Rog, D. (ed.) Evaluating Programs for the Homeless New Directions for Program Evaluation. San Francisco: Jossey Bass, 1991. (Book Chapter: 16 pages)

Abstract: This chapter reports an implementation-environment evaluation of Mental Health Linkage, a two-site, research demonstration project for homeless mentally ill adults, funded by the National Institute of Mental Health (NIMH). This analysis evaluates the extent to which the model could be implemented as planned, describes implementation barriers, suggests how these barriers can be avoided in replications, and identifies intervening variables that may help guide and interpret future outcome analyses (authors).

Program Evaluation

Order #: 2411

Authors: Mowbray, C.T., Cohen, E., Bybee, D.

Title: **The Challenge of Outcome Evaluation in Homeless Services: Engagement as an Intermediate Outcome Measure.**

Source: Evaluation and Program Planning 16: 337-346, 1993. (Journal Article: 10 pages)

Abstract: After a discussion of the difficulties of outcome evaluation of services for homeless people, the authors examine engagement as an intermediate outcome measure. The validity and usefulness of engagement as a way to evaluate program performance and as a guide to improving implementation are discussed. The authors contend that for services to individuals who are homeless, engagement is an important intermediary predictor of a successful intervention.

Order #: 7230

Authors: Mowbray, C.T., Collins, M.E., Plum, T.B., Masterton, T., Mulder, R.

Title: **Harbinger I: The Development and Evaluation of the First PACT Replication.**

Source: Administration and Policy in Mental Health 25(2): 105-123, 1997. (Journal Article: 19 pages)

Abstract: Harbinger of Grand Rapids, in Kent County, Michigan, was the first replication of the Program in Assertive Community Treatment (PACT) model that sought fidelity and included an experimental design for assessing effectiveness. This article presents the design and results from an initial 30-month and a follow-up 66-month evaluation of Harbinger. The 30-month evaluation showed significant differences favoring Harbinger versus the control group on independent living, employment, and client functioning. At 66-months, there were fewer experimental-control group differences. The discussion focuses on next steps in ACT research, utilizing program theory to better establish the mechanisms for successful intervention models (authors).

Order #: 1653

Authors: Mowbray, C.T., Tan, C.

Title: **Evaluation of an Innovative Consumer-Run Service Model: The Drop-In Center.**

Source: Innovations & Research 1(2): 19-24, 1992. (Journal Article: 6 pages)

Abstract: This article describes the development and operation of demonstration projects designed to implement consumer-run drop-in centers. Results focus on the extent to which the centers meet programmatic expectations, collecting retrospective satisfaction and impact assessments from participants, and examining differences in operations across the six centers studied. The evaluation found that the centers were meeting their mandates to provide acceptance, social support, and problem-solving assistance. The intended target population of persons with serious mental illness was being served. High levels of satisfaction were found, as well as participants feeling that they actually ran their centers (authors).

Program Evaluation

Order #: 12898

Authors: Nabors, L., Sumajin, I., Zins, J., Rofey, D., Berberich, D.

Title: Evaluation of an Intervention for Children Experiencing Homelessness.

Source: Child and Youth Care Forum 32(4): 211-227, 2003. (Journal Article: 16 pages)

Abstract: This study evaluated a two-part intervention provided during a summer program for children experiencing homelessness. First, teachers and the mental health team implemented a behavior management system to reinforce positive classroom behaviors. Second, a team of undergraduate and graduate students delivered mental health promotion services during classroom and small group activities. Mothers' and teachers' ratings indicated that the children's emotional and behavioral functioning was within normal limits and did not change over the course of the program. Mothers reported higher than normal levels of family distress. Lower school achievement was related to poor behavioral and emotional functioning and attrition. Strategies to ensure that low achievers and children with behavior problems do not drop out of summer programs need to be developed; shelters or schools may be optimal settings for providing family-focused interventions for this population (authors).

Order #: 11715

Authors: National Association of Mental Health Planning and Advisory Councils.

Title: Managed Care and the Role of Mental Health Planning and Advisory Councils.

Source: Alexandria, VA: National Association of Mental Health Planning and Advisory Councils, 2000. (Report: 32 pages)

Abstract: This report used case examples, focused presentations, and group discussions to enable planning councils to understand, review, monitor and evaluate the operations of managed care in the public sector more effectively. This regional conference targeted planning council members and other advocates from Arizona, Colorado, Idaho, Montana, New Mexico, Utah and Wyoming (authors).

Available From: National Association of Mental Health Planning and Advisory Councils, 2001 N. Beauregard Street, 12th Floor, Alexandria, VA 22311, (703) 838-7522, www.namhpac.org/pages/resources/ConfReport.pdf

Order #: 2500

Authors: National Association of State Mental Health Program Directors Research Institute, Inc.

Title: Fourth Annual National Conference on State Mental Health Agency Services Research and Program Evaluation.

Source: Alexandria, VA: NASMHPD Research Institute, Inc. 1993. (Conference Summary: 473 pages)

Abstract: This document contains the conference proceedings of the Fourth Annual National Conference on State Mental Health Agency Services Research and Program Evaluation, held during October 1993 in Annapolis, Md. Some of the topics covered by presenters included: the closing of state hospitals in Massachusetts; intensive case management in the Philadelphia system; results from a Community Support Program (CSP) Research Demonstration Project in Michigan; substance abuse treatment within the state psychiatric hospital; consumer/survival involvement in research; the Texas Supported Housing Program; race, gender and mental health service utilization in adolescents; the CMHS McKinney Research Demonstration Project for Adults who are homeless and have a mental illness; assessment and referral of persons with dual disorders; and managing Medicaid mental health costs in New Hampshire.

Available From: NASMHPD Research Institute, Inc., 66 Canal Center Plaza, Suite 302, Alexandria, VA 22314, (703) 739-9333, www.nasmhpd.org. (COST: \$10.00)

Program Evaluation

Order #: 13071

Authors: National Health Care for the Homeless Council.

Title: **Providing Treatment for Homeless People With Substance Use Disorders: Case Studies of Six Program**

Source: Nashville, TN: National Health Care for the Homeless Council, 2003. (Report: 46 pages)

Abstract: The National Health Care for the Homeless Council conducted a study of programs recognized for providing effective substance abuse treatment for people who are homeless. Council staff visited six of twenty programs nominated by administrators and clinicians in the field. Though each program is unique in its approach, some common themes emerged. Treatment for people who are homeless and have substance use disorders needs to be appropriate, accessible, and effective. Based on the experience of the six programs profiled, these expectations are best met by prioritizing access to appropriate housing and providing comprehensive, well-integrated, client-centered services with uniquely qualified staff (authors).

Available From: National Health Care for the Homeless Council, HCH Clinicians' Network, P.O. Box 60427, Nashville, TN 37206, (615) 226-2292, www.nhchc.org/Advocacy/FactSheets/CA05RCASESTUDIES-FINAL5.pdf.

Order #: 3337

Authors: National Institute on Alcohol Abuse and Alcoholism.

Title: **Community Demonstration Grant Projects for Alcohol and Drug Abuse Treatment of Homeless Individuals: Final Evaluation Report, Vol. 1-4.**

Source: Rockville, MD: National Institute on Alcohol Abuse and Alcoholism, 1992. (Report: 1000 pages)

Abstract: The National Institute on Alcohol Abuse and Alcoholism's (NIAAA) Community Demonstration Program received funding in 1988 through the Stewart B. McKinney Homeless Assistance Act of 1987. This funding was used to support nine community-based grant projects providing services to homeless individuals with alcohol and other drug problems located in eight cities including: Anchorage, AK; Boston, MA; Los Angeles, CA; Louisville, KY; Minneapolis, MN; New York City; Oakland, CA; and two projects in Philadelphia, PA. This four volume report provides an overview of the findings from the national evaluation of this program, demographics on client characteristics, results of the outcome evaluation, case studies of the nine demonstration sites, and descriptions of the specific treatment interventions.

Order #: 12513

Authors: National Mental Health Association.

Title: **Can't Make the Grade: NMHA State Mental Health Assessment Project.**

Source: Alexandria, VA: National Mental Health Association, 2003. (Report: 32 pages)

Abstract: The National Mental Health Association (NMHA) originally embarked on the State Mental Health Assessment Project to evaluate and grade the level of state policymakers' overall investment in mental health services. But in the course of conducting their research, they found they had to revise their goal. No state can earn passing marks for its mental health system, because all have failed to invest adequately in mental health services. Few states even track how mental health is funded across state agencies. In view of these facts, instead of grading the mental health system as a whole, NMHA has evaluated states based on the priority they have given to mental health in three policy areas. When it comes to investing in mental health, states just can't make the grade (authors).

Available From: National Mental Health Association, 2001 North Beauregard Street, 12th Floor, Alexandria, VA 22311, (703) 684-7722, www.nmha.org/cantmakethegrade/report.pdf

Program Evaluation

Order #: 12055

Authors: Noordsy, D., Torrey, W., Mueser, K., Mean, S., O'Keefe, C., Fox, L.

Title: **Recovery from Severe Mental Illness: An Intrapersonal and Functional Outcome Definition.**

Source: International Review of Psychiatry 14(4): 318-326, 2002. (Journal Article: 9 pages)

Abstract: The goal of this article is to put forward usable and measurable definitions of recovery to allow evaluation of recovery to become a routine outcome measure in clinical research. The authors merged their previous definitions, broke them down into measurable components, and attempted to craft a definition that can serve research, clinical care and consumer education. The three criterion of recovery as defined by the authors are hope, taking personal responsibility, and getting on with life (authors).

Order #: 8483

Authors: Orwin, R.G., Mogren, R.G., Jacobs, M.L., Sonnefeld, L.J.

Title: **Retention of Homeless Clients in Substance Abuse Treatment: Findings from the National Institute on Alcohol Abuse and Alcoholism Cooperative Agreement Program.**

Source: Journal of Substance Abuse Treatment 17(1-2): 45-66, 1999. (Journal Article: 22 pages)

Abstract: A National Institute on Alcohol Abuse and Alcoholism Cooperative Agreement Program offered the first opportunity to systematically study program retention in a multisite study of interventions for homeless persons with alcohol and other drug problems. This article presents results from analyses conducted across 15 interventions and implemented at eight Cooperative Agreement sites. Key findings were: 1) retention problems with homeless clients are as or more pervasive than in the general addicted population; 2) the provision of housing increases retention, but the increases tend to be nullified when the housing is bundled with high-intensity services; 3) homeless clients leave treatment programs for a multitude of reasons; and 4) midcourse corrections to increase retention are frequently successful. The discussion focuses on service components related to retention, the importance of attention to phase transitions, and the importance of being programmatically responsive when serving this population (authors).

Order #: 5996

Authors: Orwin, R.G., Sonnefeld, L.J., Garison-Mogren, R., Smith, N.G.

Title: **Pitfalls in Evaluating the Effectiveness of Case Management Programs for Homeless Persons.**

Source: Evaluation Review 18(2): 153-207, 1994. (Journal Article: 55 pages)

Abstract: The authors explain that it is generally believed that homeless individuals, particularly those with substance abuse problems or mental illness, are unable to access the full range of available benefits and community services on their own. In recent years community service providers have increasingly looked toward case management as the intervention of choice for solving this problem. The results of the studies discussed, which focused on homeless clients with alcohol and other drug problems, are consistent with studies of case management services for homeless people who have mental illness. This article identifies several phenomena that potentially explain the apparent lack of positive effects and suggests that the reasons for negative findings may lie as much with the evaluations as with the interventions. These phenomena include bias due to differential attrition from measurement, lack of intervention intensity, lack of distinction between groups, contextual factors, and additional design and measurement issues. Suggestions for improving future evaluations of case management effectiveness are offered (authors).

Program Evaluation

Order #: 7633

- Authors:** Orwin, R.G., Sonnefeld, L.J., Jacobs, M.L., Oram, S., Garrison-Mogren, R., Blasinsky, M., Cordray, D.S., Pion, G., Perl, H.I.
- Title:** **Cross-Site Synthesis of Intervention Designs and Implementation Analyses from the NIAAA Cooperative Agreement Program for Homeless Persons with Alcohol and Other Drug Problems.**
- Source:** New York, NY: Presented at the American Psychological Association Annual Meeting, 1995. (Presentation: 102 pages)
- Abstract:** This paper presents a cross-site synthesis of intervention designs and implementation analyses from the national evaluation of the National Institute on Alcohol Abuse and Alcoholism's Cooperative Agreements for Research Demonstration Projects on Alcohol and Other Drug Abuse Treatment for Homeless Persons. It represents the first phase of the national evaluation's analyses and findings; subsequent phases include cross-site syntheses of participation retention and outcome data, respectively. The paper includes sections on the methods of the study, an overview of proposed projects, implementation problems and attempted solutions, synthesis of participant-level services data, and the accuracy of the implementation compared to the proposed intervention.

Order #: 13388

- Authors:** Patterson, R., Wood, M., Lam, K., Patrabanish, S., Mills, G., Sullivan, S., Amare, H., Zandniapour, L.
- Title:** **Evaluation of the Welfare to Work Voucher Program.**
- Source:** Washington, DC: HUD User, 2004. (Report: 202 pages)
- Abstract:** This report presents interim findings as to the impact of the Welfare to Work Voucher Program on the quality of a family's residential location, on employment and earnings, and on receipt of public assistance. The analysis, based on a six-site research sample of 8,732 families, makes use of outcome measures derived from tract-level Census data and person-level administrative data. The impact estimates in this report encompass a follow-up period that is five quarters in duration for all sites, and longer for some sites, reflecting the timing of random assignment and the availability of outcome measures (authors).
- Available From:** HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, www.huduser.org/publications/pubasst/welfrwrk.html.

Order #: 13125

- Authors:** Peterson, L., Gray, D.
- Title:** **Raising the Roof on Research: A Case Study Analysis of the Roofless Women's Action Research Mobilization (RWARM).**
- Source:** Boston, MA: Women's Institute for Housing and Economic Development, 1998. (Report: 25 pages)
- Abstract:** This report analyzes the Roofless Women's Action Research Mobilization (RWARM) project from the College of Public and Community Service (CPCS) at the University of Massachusetts, Boston. This project explored both causes and solutions to women's homelessness via a participatory action research approach. The RWARM study had six process goals and three outcome goals and consisted of three interrelated procedures: collective investigation, collective analysis, and collective action. RWARM researchers completed 150 interviews of homeless women in Massachusetts, and analyzed all responses (authors).
- Available From:** Women's Institute for Housing and Economic Development, 14 Beacon Street, 6th Floor, Boston, MA 02108, (617) 367-0520, www.wihed.org. (COST: \$10)

Program Evaluation

Order #: 8924

Authors: Petrosino, A.

Title: Mediators and Moderators in the Evaluation of Programs for Children.

Source: Evaluation Review 24(1): 47-72, 2000. (Journal Article: 26 pages)

Abstract: This article examines the role of mediators and moderation in the evaluation of programs for children. The terms are defined and examples presented. Using bibliometric analysis, the author examines how evaluators use mediators and moderators in treatment studies in education, juvenile justice, health care, child protection, and mental health. The author states that the use of mediators and moderators is sporadic at best. An agenda for improvement is outlined that includes greater use of program theory and intensive case studies to find out why researchers in prevention and health promotion incorporate mediators and moderator more effectively in their evaluation (author).

Order #: 12203

Authors: Potter, M.

Title: Older Homeless Sexual Minorities: Preliminary Data and Program Evaluation (DRAFT).

Source: Seattle, WA: University of Washington, 1997. (Unpublished Paper: 25 pages)

Abstract: This study reviews a project providing outreach, engagement, and services for older, homeless sexual minorities, a group about which little is known. Stemming from the author's involvement as a mental health practitioner at a shelter for men over 50, nine clients are identified for assessment and services. Data collected during this process is presented, including one case study. A case for sexual minority specific case management is made and a reduction in client needs at assessment versus needs after case management of 75% is demonstrated. Further results show an incidence of mental illness among participants of 89%, substance abuse of 45% and medical complaints of 89%. Causes of homelessness and contributing factors of sexual minority status are also explored (author).

Available From: Marc Potter, MSW, Health Care for the Homeless Downtown Emergency Service Center, 507 Third Avenue, Box 359945, Seattle, WA 98104, (206) 464-1570, marcp@u.washington.edu.

Order #: 10456

Authors: Prince, P.N., Prince, C.R.

Title: Subjective Quality of Life in the Evaluation of Programs for People with Serious and Persistent Mental Illness.

Source: Clinical Psychology Review 21(7): 1005-1036, 2001. (Journal Article: 31 pages)

Abstract: Despite the widespread application of the concept of quality of life in mental health evaluation, it has been observed that subjective quality of life measures do reliably capture changes expected to result from intervention efforts. Moreover, because the domains selected to assess subjective life quality are typically generated by investigators or health professionals, the validity of subjective quality of life measures has also been questioned. Although it represents a conceptual shift from investigator-generated domains to client-elicited domains, it is suggested that a client-elicited approach to measuring subjective quality of life may provide fruitful avenues for resolving some of the conceptual and practical issues associated with understanding and measuring the impact of community based programs on clients with serious mental illness (authors).

Program Evaluation

Order #: 11717

Authors: Proscio, T.

Title: **Monmouth County Supportive Housing Collaboration: Two-Year Evaluation.**

Source: New York, NY: Corporation for Supportive Housing, 2001. (Report: 60 pages)

Abstract: This report is an evaluation of the effort made by the state of New Jersey, Monmouth County, and the Corporation for Supportive Housing, to improve interagency and intergovernmental cooperation around the creation of supportive housing for Monmouth County residents with special needs. The author evaluates the first two years of this three year initiative, focusing on the formation of two panels; a state working committee of senior managers from four participating state agencies, and the second, a combination of state and local participants, their choice of mission and settling of agendas, and the process by which they solicited and selected projects to support. It concludes with some recommendations with which the members could decide how or whether, to continue the initiative in the final year, and beyond (author).

Available From: Corporation For Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10173, (212) 986-2966, <http://documents.csh.org/pdfs/MonmouthEvalFeb02.pdf>

Order #: 11875

Authors: Ralph, R.O.

Title: **How to Involve Consumers in Research and Demonstration Evaluation Projects.**

Source: Portland, ME: Edmund S. Muskie Institute of Public Affairs, University of Southern Maine, 1994. (Unpublished Paper: 8 pages)

Abstract: This paper, which was presented at the Ohio Program Evaluator's Group Evaluation Exchange Conference in Columbus, examines the failure of institutions to clearly state the roles, activities and payment of consumers in projects. The author asserts that although institutions have encouraged the involvement of mental health consumers in research and demonstration evaluation projects, they have fallen short in expressing the reasons why they are valuable as participants. The author states that the purpose of this paper is to provide some perspectives and suggestions as to how, when and where to include and involve mental health consumers in research and demonstration projects (author).

Order #: 12255

Authors: Randolph, F., Blasinsky, M., Morrissey, J.P., Rosenheck, R.A., Coccozza, J., Goldman, H.H.

Title: **Overview of the ACCESS Program.**

Source: Psychiatric Services 53(8): 945-948, 2002. (Journal Article: 4 pages)

Abstract: In this article, the authors provide an overview of the ACCESS program which evaluated the integration of service systems and its impact on outcomes for homeless persons with severe mental illness. The ACCESS program provided funds and technical assistance to nine community sites to implement strategies for system change that would promote systems integration. These experimental sites, along with nine comparison sites, also received funds to support outreach and assertive community treatment for 100 clients a year for four years at each site. Data on changes in systems integration were obtained from interviews with key informants from relevant organizations in each community (authors).

Program Evaluation

Order #: 11542

Authors: Ridgley, M.S., Mulkern, V., Giard, J., Shern, D.

Title: **Critical Elements of Public-Sector Managed Behavioral Health Programs for Severe Mental Illness in Five States.**

Source: Psychiatric Services 53(4): 397-399, 2002. (Journal Article: 3 pages)

Abstract: The term "managed care" may be used to describe a wide variety of arrangements that have different structures, functions, and effects on the care of people who have behavioral health disorders. The evaluation of public-sector managed care plans has been hindered by a lack of systematic vocabulary for describing them and a lack of instruments to operationalize this vocabulary into a set of measurement procedures. The authors developed and pilot tested an instrument to be used in categorizing public-sector managed care arrangements. The instrument was used to collect descriptive data on managed care plans in the Managed Behavioral Health Care in the Public Sector study. In this multisite study, a competitive process was used to fund 21 sites in order to evaluate managed behavioral health services for four target populations. Preliminary descriptive data are reported from five SAMHSA sites at which the impact of managed care on adults with severe mental illness was studied (authors).

Order #: 11198

Authors: Robert Wood Johnson Foundation.

Title: **Estimating the Costs of Parity for Mental Health: Methods and Evidence.**

Source: Princeton, NJ: Robert Wood Johnson Foundation, 2002. (Report: 19 pages)

Abstract: This report summarizes the lessons from a workshop held by the Robert Wood Johnson Foundation in May 2001 to help federal officials in designing their evaluation of the implementation of parity in the Federal Employee Health Benefit Program. At the workshop, actuaries, economists, and key governmental officials examined the methods and evidence for estimates of the costs of parity for mental health (authors).

Available From: Robert Wood Johnson Foundation, P.O.Box 2316, College Road East and Route 1, Princeton, NJ 08543, (888) 631-9989, www.rwjf.org/app/rw_publications_and_links/publicationsPdfs/parity_report.pdf.

Order #: 8117

Authors: Roberts, R.N., Wasik, B.H.

Title: **Evaluating the 1992 and 1993 Community Integrated Service Systems Projects.**

Source: New Directions for Evaluation 69: 34-50, Spring 1996. (Journal Article: 17 pages)

Abstract: This article describes the federal evaluation of 41 Community Integrated Service Systems (CISS) projects, focusing on issues in conducting a national, cross-site evaluation and the findings of the implementation study of the first two years of the initiative. An initial review of the individual project proposals and evaluation plans before development of the evaluation framework suggested the diversity of the 41 community-based efforts and the lack of common objectives and outcome measures. This finding, confirmed in a subsequent and more detailed analysis, required the development of an evaluation framework for describing the implementation of the overall effort. A framework was developed that relied less on individually collected project data and more on data that allowed for a cross-site analysis. The article concludes with lessons learned from the planning and execution of this evaluation plan relevant to national evaluation efforts (authors).

Program Evaluation

Order #: 1656

Authors: Rog, D.J.

Title: **Evaluating Programs for the Homeless.**

Source: San Francisco, CA: Jossey-Bass Publishers, 1991. (Book: 95 pages)

Abstract: The purpose of this book is to offer an introduction to the challenges involved in evaluating interventions for homeless persons. The book is divided into two parts, the first focusing on research about homelessness and the second providing descriptions of major demonstration programs and their evaluations. Part One highlights the research developments on homelessness over the past decade. Part Two describes the evaluations of four programs geared to different subgroups within the homeless population. The interventions discussed in these chapters range from health clinics to specialized treatment programs for alcohol abuse and/or mental illness, to comprehensive system-level initiatives designed to improve service-delivery systems (author).

Available From: Jossey-Bass, Inc., 10475 Crosspoint Blvd., Indianapolis, IN 46256, (877) 762-2975, www.josseybass.com. (COST: \$17.95).

Order #: 1894

Authors: Rog, D.J.

Title: **The Evaluation of the Homeless Families Program: Challenges in Implementing a Nine-City Evaluation**

Source: In Rog, D. (ed.) Evaluating Programs for the Homeless. New Directions for Program Evaluation 52: 47-59. San Francisco, CA: Jossey Bass, 1991. (Book Chapter: 13 pages)

Abstract: The Robert Wood Johnson Foundation, in collaboration with the U.S. Department of Housing and Urban Development, initiated the Homeless Families Program to identify effective service approaches that could be replicated in other cities and communities. As part of this initiative, the foundation is funding a descriptive evaluation of the nine-city demonstration. This chapter describes the purpose, design, and potential of the Homeless Families Program evaluation. The chapter begins with a brief overview of the program, followed by a description of the evaluation design, methods, and proposed analyses. The chapter highlights the challenges of implementing the evaluation design and the lessons learned thus far, and it closes with a discussion of potential project and policy implications of the evaluation (author).

Order #: 11696

Authors: Rog, D.J., Randolph, F.L.

Title: **A Multisite Evaluation of Supported Housing: Lessons Learned from Cross-Site Collaboration.**

Source: New Directions for Evaluation (94): 61-87, 2002. (Journal Article: 27 pages)

Abstract: This article illustrates the benefits of prior research, a phased approach, and strong collaboration in tackling difficult multisite issues. The authors focus on The Center for Mental Health Services Housing Initiative, a multisite study that explicitly planned to build on the existing knowledge base of supported housing for individuals with serious mental illness. The authors describe how the readiness for study of a supported housing intervention model affected the development of a multisite evaluation; they also describe the advantages of conducting a multisite study even when there are barriers to implementation (authors).

Program Evaluation

Order #: 6791

Authors: Rogers, E.S.

Title: **Cost-Benefit Studies in Vocational Services.**

Source: Psychiatric Rehabilitation Journal 20(3): 25-33, 1997. (Journal Article: 9 pages)

Abstract: In this era of cost containment and managed care, the benefits and costs of vocational interventions for persons with psychiatric disability are receiving increased scrutiny. In response to this scrutiny, evaluators, providers, and agencies are turning to cost-benefit studies. The purpose of this article is, first, to examine the basic steps involved in cost-benefit studies in a way that will be understandable to program administrators, policy makers, and practitioners. Second, a review of cost-benefit studies on vocational programs for persons with psychiatric disability will be undertaken and the results summarized (author).

Order #: 8832

Authors: Rogers, E.S., Palmer-Erbs, V.

Title: **Participatory Action Research: Implications for Research and Evaluation in Psychiatric Rehabilitation.**

Source: Psychosocial Rehabilitation Journal 18(2): 3-12, 1994. (Journal Article: 10 pages)

Abstract: The authors state that the consumer/ex-patient movement has moved the field of psychosocial rehabilitation to new ground with respect to the consumers' role in service planning and evaluation. In a similar fashion, a methodology called Participatory Action Research (PAR) offers a paradigm for involving consumers in rehabilitation research and program evaluation efforts. The development of this paradigm is discussed as are the benefits and potential drawbacks to using this approach, the way in which PAR differs from traditional research, and the implications for policymakers, researchers, and evaluators (authors).

Order #: 12846

Authors: Rosenheck, R.

Title: **Stages in the Implementation of Innovative Clinical Programs in Complex Organizations.**

Source: Journal of Nervous and Mental Disease 189(12): 812-821, 2001. (Journal Article: 10 pages)

Abstract: In this article, the authors state that organizational processes can have an important impact on the introduction of innovative treatments into practice. Conceptual frameworks from organization theory and experiences implementing several hundred specialized mental health programs in the Department of Veterans Affairs (VA) over the past 15 years are used to illustrate stages and processes in the implementation of new treatment models. Four phases in the implementation of new treatments in complex organizational settings are described: a) the decision to implement, b) initial implementation, c) sustained implementation, and d) termination or transformation. Key strategies for moving research into practice include constructing decision-making coalitions, linking new initiatives to legitimate goals and values, quantitative monitoring of implementation and performance, and the development of self-sustaining communities of practice as well as learning organizations. Effective dissemination of new treatment methods requires different organizational strategies at different phases of implementation (authors).

Program Evaluation

Order #: 12137

Authors: Roy-Byrne, P., Sherbourne, C., Craske, M.G., Stein, M.B., Katon, W., Sullivan, G., Means-Christensen, A., Bystriksy, A.

Title: **Moving Treatment Research From Clinical Trials to the Real World.**

Source: Psychiatric Services 54(3): 327-332, 2003. (Journal Article: 6 pages)

Abstract: This article describes an approach to designing studies to combine elements from both efficacy and effectiveness research. Their operationalization is illustrated by using the design of an ongoing effectiveness treatment study of panic disorder in primary care. Experts in both efficacy and effectiveness research collaborated to address the methodologic and data collection issues that need to be considered in designing a first-generation effectiveness study. Elements of the overall study design, setting or service delivery context, inclusion and inclusion criteria, recruitment and screening, assessment tools, and intervention modification are discussed to illustrate the thinking behind the rationale for decisions about these different design components (authors).

Order #: 6843

Authors: Scallet, L.J.

Title: **What Policy Makers Want: A Guide for Evaluators.**

Source: Washington, DC: Center for Mental Health Services, April 1997. (Guide: 56 pages)

Abstract: This guide is a resource for evaluators that explores in detail strategies for communicating with different policymaker audiences, including federal legislators and staff, federal executive agencies, and state legislators and staff, to become more effective sources of policy information. The author examines the importance of knowing the different interests, responsibilities, and pressures affecting policymakers in different positions. The author also provides suggestions for improving communication with policymakers by making things clear, brief, simple, timely, relevant, familiar, and routine.

Available From: Center for Mental Health Services, P.O Box 42557, Washington, DC 20015, (800) 789-2647, www.mentalhealth.org.

Order #: 7225

Authors: Scheid, T.L., Greenley, J.R.

Title: **Evaluations of Organizational Effectiveness in Mental Health Programs.**

Source: Journal of Health and Social Behavior 38(4): 403-426, 1997. (Journal Article: 24 pages)

Abstract: This paper presents a conceptual framework for understanding the evaluation of the effectiveness of mental health services. The authors suggest that organizations are deemed "successful" by their constituents when they conform to institutional demands and expectations that are both internally and externally generated. The study assessed institutional conformity by examining evaluations of effectiveness by 269 mental health providers in 29 different mental health programs. The authors state this research demonstrates that organizational processes of institutional conformity (when program objectives meet the demands of external constituents) and goal congruence (objectives meet with expectations of internal constituents) are critical to positive evaluations of effectiveness (authors).

Program Evaluation

Order #: 8828

Authors: Schumacher, J.E., Milby, J.B., Engle, M., Raczynski, J.M., Michael, M.

Title: **Linking Practice and Science in the Substance Abuse Treatment of Homeless Persons.**

Source: Journal of Applied Behavioral Science 36(3): 297-313, 2000. (Journal Article: 17 pages)

Abstract: This article describes the collaboration between a university and a community health care agency in substance abuse treatment for homeless persons. The Homeless I Project represents the successful linking of practice and science in the development, delivery, and evaluation of innovative interventions for substance abuse and homelessness in a community setting. Positive outcomes of the collaboration included productive research and service delivery components, important project and community linkages, national research and service delivery linkages, service enhancements, development of an innovative abstinence-contingent work therapy and housing program; significant participation rates, and continued practice and research. Obstacles and solutions relating to integrating science and practice, overcoming community resistance, and maintaining linkages are presented (authors).

Order #: 13306

Authors: Schutt, R.K., Hough, R.L., Goldfinger, S.M., Lehman, A.F., Shern, D., Valencia, E., Wood, P.

Title: **Predicting Housing Loss Among Mentally Ill Persons: A Multi-city Experimental Study.**

Source: Boston, MA: University of Massachusetts Boston, 1998. (Unpublished Paper: 38 pages)

Abstract: This paper focuses on factors affecting the risk of experiencing homelessness among single adults with mental illnesses. The risk of experiencing homelessness is a product of both individual and structural factors. Housing affordability, social and health service availability, as well as economic dislocation and other structural factors cause variation in homelessness over time and between areas. Substance abuse, mental illness and other personal factors influence the likelihood that specific individuals will experience homelessness in specific environments. Simultaneous variation and reciprocal causation limit the ability of most research on homelessness to identify the relative importance of these factors. This paper combines data from five parallel studies designed to test the effectiveness of housing and service interventions for persons with severe mental illness who are homeless (authors).

Available From: Russell K. Schutt, Ph.D., Professor of Sociology and Director, Graduate Program in Applied Sociology, University of Massachusetts Boston, 100 Morrissey Blvd., Boston, MA 02125, (617) 287-6253, www.faculty.umb.edu/russell_schutt

Order #: 7203

Authors: Schwandt, T.A.

Title: **The Landscape of Values in Evaluation: Charted Terrain and Unexplored Territory.**

Source: New Directions for Evaluation 76: 25-39, 1997. (Journal Article: 15 pages)

Abstract: The purpose of this article is to provide a descriptive and evaluative reading of values and ethics in the contemporary landscape of evaluation. Topics discussed include: Values as Properties or Attributes of Stakeholders' Perspectives; Values as Applied Ethics: Professional Conduct; Values as Applied Ethics: Values as Relevant Subject Matter in Evaluation; Values in the Applications of Evaluations; and Values Constituting the Ethical Aim of Evaluation. The author concludes that, for evaluators, ethical and value questions, such as why and to what purpose evaluations are performed, should take precedence over technical questions, such as how to evaluate (author).

Program Evaluation

Order #: 11097

Authors: Segal, S., Silverman, C.

Title: **Determinants of Client Outcomes in Self-Help Agencies.**

Source: Psychiatric Services 53(3): 304-309, 2002. (Journal Article: 5 pages)

Abstract: This study assessed the relationship between the outcomes of clients of client-run self-help agencies and attendance at the agency, satisfaction with agency, psychological disability, and organizationally mediated empowerment, that is, the provision of opportunities for clients to meaningfully participate in decisions about their care and the care of others in the agency. The outcomes assessed were independent social functioning, assisted social functioning, and personal empowerment. The significant ingredient promoting positive outcomes for clients of self-help agencies appears to be the provision of opportunities for clients to meaningfully participate in decisions about their care and the care of others in the organization (authors).

Order #: 1820

Authors: Shore, M.F., Cohen, M.D.

Title: **Observations from the Program on Chronic Mental Illness.**

Source: Health Affairs 11(3): 227-233, 1992. (Journal Article: 7 pages)

Abstract: The Robert Wood Johnson Foundation (RWJF) Program on Chronic Mental Illness launched in December 1986, was the foundation's first multisite national venture into mental health care. The impressions of the national program office staff and the staff at the nine demonstration sites regarding the system of care, leadership, politics of change, and the findings are discussed.

Order #: 12003

Authors: Siegel, C., Haugland, G., Chambers, E.D.

Title: **Cultural Competency Methodological and Data Strategies to Assess the Quality of Services in Mental Health Systems of Care: A Project to Select and Benchmark Performance Measures of Cultural Competency.**

Source: Orangeburg, NY: Nathan Kline Institute for Psychiatric Research, 2002. (Report: 89 pages)

Abstract: This is the final report of the work of a two-part project to select and benchmark performance measures of cultural competency. The populations of focus are the four major racial/ethnic groups of African American, Hispanic American, Asian American, and American Indian, as it has built on prior work related to these groups. Project participants included representatives from each of these groups. However, the products of the project have been developed to be applicable to all cultural groups. In practice, the cultural competency of a behavioral care organization is exhibited in the ways behavioral health care services are adapted and delivered to meet the unique needs of cultural groups. The importance of cultural patterns, values, strengths and language, as well as the unique situational experiences of members of a culture are recognized, and service approaches based on these variables are modified (authors).

Available From: Nathan Kline Institute for Public Research, 140 Old Orangeburg Road, Orangeburg, NY 10962, (845) 398-5500, www.rfmh.org/csipmh/other_cc.pdf.

Program Evaluation

Order #: 2778

Authors: Smith, J.C.H., Fosburg, L.B.

Title: **Evaluation Design Report: Evaluation of the McKinney Demonstration Projects for Homeless Adults with Mental Illness.**

Source: Bethesda, MD: National Institute of Mental Health, 1990. (Report: 173 pages)

Abstract: This report details the proposed design for the national evaluation of the McKinney Demonstration Program for Homeless Adults with Mental Illness. Nine comprehensive service system projects funded in 1988 by the National Institute of Mental Health (NIMH) will be evaluated.

Available From: National Institute of Mental Health, 6001 Executive Blvd., Room 8184, MSC 9663, Bethesda, MD 20892, (301) 443-4513, www.nimh.nih.gov.

Order #: 11644

Authors: Sosin, M.R.

Title: **Outcomes and Sample Selection: The Case of a Homelessness and Substance Abuse Intervention.**

Source: British Journal of Mathematical and Statistical Psychology 55(1): 63-91, 2002. (Journal Article: 29 pages)

Abstract: This article explores ways of correcting for sample selection bias, with advanced correction strategies, focusing on experiments in which clients refuse assignment into treatment conditions. The sample selection modeling strategy, which is highly recommended but seldom applied to random sample psychosocial experiments, and some alternatives are discussed. Data from an experiment on homelessness and substance abuse are used to compare sample selection, conventional control variable, instrumental variable, and propensity score matching correction strategies. The empirical findings suggest that the sample selection modeling strategy provides reliable estimates of the effects of treatment, that it and some other correction strategies are awkward to apply when there is a post-assignment rejection, and that the varying correction strategies provide widely divergent estimates. In light of these findings, researchers might wish to compare estimates across multiple correction strategies (author).

Order #: 5997

Authors: Stecher, B.M., Andrews, C.A., McDonald, L., Morton, S.C., McGlynn, E.A., Petersen, L.P., Burnam, M.A.

Title: **Implementation of Residential and Nonresidential Treatment for the Dually Diagnosed Homeless.**

Source: Evaluation Review 18(6): 689-717, 1994. (Journal Article: 19 pages)

Abstract: This article describes a study where an implementation analysis conducted as part of a two-year experimental study of residential and nonresidential treatment programs for the dually diagnosed homeless found significant differences in client engagement and retention, as well as unexpected variations in the treatment conditions. Fully 40% of subjects assigned to either treatment failed to become engaged for even one day, although a significantly higher percentage of those assigned to the residential program than to the nonresidential program graduated from the first three-month phase of treatment. The analysis revealed significant differences in the type and amount of services provided by the two treatment programs, as well as potentially important difficulties in program management. The authors contend that such process data are valuable tools for understanding client outcomes and interpreting experimental results (authors).

Program Evaluation

Order #: 6275

Authors: Steinwachs, D.M., Fischer, E.P., Lehman, A.F.

Title: **Outcomes Assessment: Information for Improving Mental Health Care.**

Source: New Directions in Mental Health Services 71: 49-57, 1996. (Journal Article: 9 pages)

Abstract: This article describes efforts in two states to obtain outcomes information from persons who have mental illnesses. In Maryland, outcomes for persons with a diagnosis of schizophrenia have been obtained from a sample survey of persons with serious mental illness covered by Medicaid. In Arkansas, outcomes data are compared for patients discharged from two different treatment systems. Together these studies illustrate fundamental strategies for using outcomes information (authors).

Order #: 13008

Authors: Stevens, D.E.

Title: **Evaluation of a Comprehensive Intervention Strategy in Public Housing.**

Source: Rockville, MD: National Institute of Justice, National Criminal Justice Reference Service, 2001. (Report: 140 pages)

Abstract: This report describes the methodology and presents the findings from an evaluation of an intervention strategy designed to reduce substance use/abuse and its related sequelae in a sample of at-risk families living in a public housing project in New Haven, CT. The key components of the intervention were an innovative on-site comprehensive services model that included both clinical (substance abuse treatment and family support services) and non-clinical components (e.g., extensive outreach and community organizing as well as job training and placement and GED certification), as well as high profile police involvement. Goals of the intervention were to significantly increase the proportion of residents participating in and completing intervention services, as well as a reduction in substance-related activities and crime post-intervention (author).

Available From: National Institute of Justice, National Criminal Justice Reference Service, Box 6000, Department F, Rockville, MD 20849, www.ncjrs.org/pdffiles1/nij/grants/193424.pdf.

Order #: 11693

Authors: Straw, R.B., Herrell, J.M.

Title: **A Framework for Understanding and Improving Multisite Evaluations.**

Source: New Directions for Evaluation (94): 5-15, 2002. (Journal Article: 11 pages)

Abstract: This article discusses definitional and conceptual issues related to multiple site evaluation studies, presents a conceptual framework for understanding such studies, and poses questions for determining the appropriateness of particular types of multiple site evaluations for specific purposes. The authors also provides a framework for developing new ways to improve multisite studies. The article briefly describes the range of evaluation activities characterized as multisite evaluations and presents a framework for addressing important issues in planning and conducting multisite evaluations (authors).

Program Evaluation

Order #: 13028

Authors: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

Title: **Emerging Treatment Models for Persons Who Are Homeless with Co-Occurring Mental Illnesses and Substance Use Disorders.**

Source: Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, 2003. (Issue Brief (DRAFT): 8 pages)

Abstract: This issue brief is one in a series reviewing the promising practices that have emerged from recent research and SAMHSA sponsored evaluations. Service providers and policymakers in mental health and substance use treatment are becoming more aware of the need for an integrated treatment approach for persons with co-occurring disorders. Many of the individuals in need of mental health services have additional substance use issues. Substance use issues are common among persons who are homeless and have mental illnesses. Effective services for this population must address consumers' multiple service needs while engaging them on their own terms. Research over the past two decades has shown the benefits of an integrated approach to mental health and substance use treatments (authors).

Available From: National Resource Center on Homelessness and Mental Illness, 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, www.nrchmi.samhsa.gov.

Order #: 12357

Authors: Substance Abuse and Mental Health Services Administration.

Title: **Overview of Addiction Treatment Effectiveness.**

Source: Rockville, MD: Substance Abuse and Mental Health Services Administration, 1997. (Report: 117 pages)

Abstract: This report describes specific treatment approaches, treatment settings, and treatment components and services and provides an analysis of the effectiveness of each. This report also includes abstracts of representative research studies used to support treatment effectiveness. The authors prepared the report by conducting comprehensive literature searches, reviewing meta-analyses, examining literature reviews, and reviewing several hundred research articles (authors).

Available From: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, (800) 729-6686, <http://store.health.org/catalog/ProductDetails.aspx?ProductID=13223>.

Order #: 12260

Authors: Substance Abuse and Mental Health Services Administration.

Title: **Science-Based Prevention Programs and Principles 2002: Effective Substance Abuse and Mental Health Programs for Every Community.**

Source: Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002. (Report: 249 pages)

Abstract: This report provides the latest information about model programs and important syntheses of research and evaluation findings across multiple prevention programs. It describes a comprehensive system that the Substance Abuse and Mental Health Services Administration is using to ensure optimal use of these programs in communities across America. The authors suggest that officials at all levels of government, prevention researchers, practitioners, parents, educators, community youth workers and faith leaders, will find this report useful in bringing the most effective prevention practice to those with whom they work and care most about (authors).

Available From: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847, (800) 729-6686, <http://store.health.org/catalog/productDetails.aspx?ProductID=16512>.

Program Evaluation

Order #: 7636

Authors: Sullivan, F.J.

Title: Evaluation and Public Policy.

Source: In Knudsen, H.C., and Thornicroft, G. (eds.), Mental Health Service Evaluation. New York, NY: Cambridge University Press, 50-64, 1996. (Book Chapter: 15 pages)

Abstract: This chapter describes the information needs and interests of the public policy community, and the importance of the political process in maintaining and enhancing mental health programs. The role of outcome data -- reflecting a full array of measures -- is discussed. The complexity of systems of care in the context of both multiple levels of government and multiple sources of support for services is described, along with several examples of state planning activities. The chapter concludes with a discussion of advocacy in the political process with a focus on mental health consumers' and families' interests, and the role of research and evaluation committees.

Order #: 12662

Authors: Swartz, J., Tonkin, P., Baumohl, J.

Title: The Methodology of the Multi-Site Study of the Termination of Supplemental Security Income Benef for Drug Addicts and Alcoholics.

Source: Contemporary Drug Problems 30(1-2): 77-122, 2003. (Journal Article: 45 pages)

Abstract: This article describes the quantitative and qualitative methodologies used in a nine-site, two-year study of the effects of terminating Supplemental Security Income (SSI) for drug addiction and alcoholism (DA&A). According to the authors, the quantitative component of the study involved a longitudinal survey, and provided reasonably valid data in the areas of demographics, employment/income, medical/psychiatric status, drug and alcohol use, legal involvement, family/social functioning, food and hunger, housing, and victimization. The qualitative component examined the lives of a subsample to help clarify important issues that could not be addressed within the more structured protocol and format of the longitudinal survey. The article also presents details on the survey instrument design, the results of validation studies of selected survey items, and data collection protocols across study sites (authors).

Order #: 3142

Authors: Talbott, J.A.

Title: Evaluating the Johnson Foundation Program on Chronic Mental Illness: An Interview With Howard Goldman.

Source: Psychiatric Services 46(5):501-503, 1995. (Journal Article: 3 pages)

Abstract: The Robert Wood Johnson (RWJ) Foundation's Program on Chronic Mental Illness was designed to test the impact of local mental health authorities on the organization of services and clinical outcomes. Nine cities were selected as sites for the program, which was the largest privately funded demonstration ever conducted in the mental health arena. A series of evaluation studies of the program's impact have been conducted since the program's implementation in 1985. This article discusses some the major findings of these RWJ studies. Key among these findings is that local mental health authorities are implementable and workable within an integrated service delivery system.

Program Evaluation

Order #: 887

Authors: Teague, G.B., Schwab, B. and Drake, R.E.

Title: **Evaluation of Services for Young Adults With Severe Mental Illness and Substance Use Disorders.**

Source: Alexandria, VA: National Association of State Mental Health Program Directors, 1990. (Report: 163 pages)

Abstract: The monograph brings together three principal perspectives concerning persons with serious mental illness and substance use disorders. The first perspective is that of the clinical and program issues pertinent to the dually diagnosed population. The second perspective is that of program evaluation. The third perspective is the experience to date of 13 demonstration programs for young adults with serious mental illnesses and substance use disorders.

Available From: National Association of State Mental Health Program Directors, Canal Center Plaza, Suite 302, Alexandria, VA 22314, (703) 739-9333. (COST: \$22.82)

Order #: 7404

Authors: Teague, T.B., Bond G.R., Drake, R.E.

Title: **Program Fidelity in Assertive Community Treatment: Development and Use of a Measure.**

Source: American Journal of Orthopsychiatry 68(2): 216-232, 1998. (Journal Article: 17 pages)

Abstract: Effective replication of the Assertive Community Treatment (ACT) model and research on critical elements require explicit criteria and measurement. A measure of program fidelity to ACT, the Dartmouth ACT Scale, and the results of its application to 50 ACT-like programs, grouped into four types, are presented in this article. While most of the ACT programs remained generally similar to the model, most differed significantly in at least some criteria. The authors state that these criteria and the overall measure discerned a variety of ACT and ACT-like programs, and also discerned these from conventional programs.

Order #: 13222

Authors: Torrey, W.C., Drake, R.E., Dixon, L., Burns, B.J., Flynn, L., Rush, A.J., Clark, R.E., Klatzker, D.

Title: **Implementing Evidence-Based Practices for Persons with Severe Mental Illnesses.**

Source: Psychiatric Services 52(1): 45-50, 2001. (Journal Article: 6 pages)

Abstract: This article summarizes perspectives on how best to change and sustain effective practice from the research literature and from the experiences of administrators, clinicians, family advocates, and services researchers. The authors describe an implementation plan for evidence-based practices based on the use of toolkits to promote the consistent delivery of such practices. The toolkits will include integrated written material, web-based resources, training experiences, and consultation opportunities. Special materials will address the concerns of mental health authorities (funders), administrators of provider organizations, clinicians, and consumers and their families (authors).

Program Evaluation

Order #: 13055

Authors: Tsemberis, S., Moran, L., Shinn, M., Asmussen, S., Shern, D.

Title: **Consumer Preference Programs for Individuals who are Homeless and Have Psychiatric Disabilities: A Drop-In Center and a Supported Housing Program.**

Source: American Journal of Community Psychology 32(3/4): 305-317, 2003. (Journal Article: 8 pages)

Abstract: In this article, the authors illustrate Fairweather's approach to Experimental Social Innovation and Dissemination with two experimental studies of programs to reduce homelessness for 168 and 225 people with mental illness and often substance abuse. Literally homeless participants were randomly assigned to programs that emphasized consumer choice or to the usual continuum of care, in which housing and services are contingent on sobriety and progress in treatment. A drop-in center that eliminated barriers to access to services was more successful than control programs in reducing homelessness, but after 24 months only 38% of participants had moved to community housing. A subsequent apartment program, in which individuals in the experimental condition moved to subsidized apartments directly from the street, with services under their control, had 79% in stable housing (compared to 27% in the control group) at the end of 6 months. According to the authors groups in this study did not differ on substance abuse or psychosocial outcomes (authors).

Order #: 12079

Authors: Tyrer, P., Simmonds, S.

Title: **Treatment Models for Those with Severe Mental Illness and Comorbid Personality Disorder.**

Source: British Journal of Psychiatry 182(44): 15-18, 2003. (Journal Article: 4 pages)

Abstract: This article compares the outcomes of different treatment models for those dually diagnosed with personality disorder and severe mental illness. The outcome of patients with this combined diagnosis was compared in a systematic review of three randomized controlled trials in which different forms of community outreach treatment or intensive case treatment were compared with standard care. According to the authors, the results from the three studies showed that the outcome of comorbid diagnoses was worse than that of single diagnoses. Although assertive approaches reduced in-patient care, they sometimes did so at the expense of increasing social dysfunction and behavioral disturbance. The article states that for those with comorbid severe mental illness and personality disorder, the policy of assertive outreach and care in community settings may be inappropriate for both public and patients unless modified to take account of the special needs of this group (authors).

Order #: 11544

Authors: United States Department of Housing and Urban Development.

Title: **Evaluation of Continuums of Care for Homeless People.**

Source: Washington, DC: U.S. Department of Housing and Urban Development, 2002. (Report: 216 pages)

Abstract: This report is a significant addition to current knowledge about homelessness. It provides important insights into local responses to the problem and identifies issues that must be resolved as the nation grapples with the difficult and serious problem of homelessness. The completed study provides a rich array of information on the activities of high-performing Continuums of Care and documents the extent of progress of the studied communities along many dimensions of a comprehensive approach to homelessness prevention and remediation. On balance, the report concludes that for the high-performing communities studied, HUD's implementation of the Continuum of Care funding process stimulated increased communication within local communities in their response to homelessness. As a result, respondents generally agreed that more people have received more services and participate in more and better coordinated programs than before as a consequence of the Continuum of Care approach. In the most advanced communities, the response has moved beyond planning to obtain HUD funding to the far broader goal of attempting to integrate all available funding and services to try to end homelessness (authors).

Available From: HUD USER, P.O. Box 23268, Washington, DC 20026, (800) 245-2691, www.huduser.org/publications/pdf/continuums_of_care.pdf

Program Evaluation

Order #: 13035

Authors: United States Department of Housing and Urban Development.

Title: **Moving to Opportunity for Fair Housing Demonstration Program: Interim Impacts Evaluation.**

Source: Washington, DC: U.S. Department of Housing and Urban Development, 2003. (Report: 341 pages)

Abstract: This program provides insights into what benefits can be achieved by improving the neighborhoods of poor families. The program provided thousands of poor adults and children an opportunity to use HUD vouchers to move out of public housing in high poverty neighborhoods to lower poverty neighborhoods. Using rigorous scientific methods, this study looks at the impact these moves have had on housing, health, employment, education, mobility, welfare receipt, and delinquency. The results presented in this report show the impacts of moving to lower poverty approximately 5-years after the move. Within this relatively short timeframe, moving to lower poverty has had significant positive impacts on: personal safety; housing quality; mental health and obesity among adults; and mental health, staying in school, delinquency, and risky behavior among teenage girls. There are, however, apparently some negative effects on boys' behavior, and no statistically significant effects on employment outcomes for adults or educational achievement for children. Only marginal improvements were found in the quality of schools attended (authors).

Available From: U.S. Department of Housing and Urban Development, 451 7th Street S.W., Washington, DC 20410, (202) 708-1112, www.huduser.org/publications/fairhsg/mtoFinal.html

Order #: 10592

Authors: United States Department of Housing and Urban Research.

Title: **Evaluation of Supportive Housing Programs for Persons with Disabilities. Volume II: Case Studies and Technical Appendices.**

Source: Washington, DC: U.S. Department of Housing and Urban Research, 1996. (Journal Article: 185 pages)

Abstract: This report includes a description of 30 site visits for HUD's supportive housing evaluation study. Topics discussed are the research methods and sample collection, the North Carolina model for housing development, resident satisfaction, and findings from a postcard survey. Findings describe overall characteristics of projects funded by these programs as of January 1994. Construction/ occupancy status, size, and location of the universe of Section 162 projects and Section 811 projects are described.

Order #: 8194

Authors: United States General Accounting Office.

Title: **Homelessness: Coordination and Evaluation of Programs are Essential.**

Source: Washington, DC: U.S. General Accounting Office, 1999. (Report: 149 pages)

Abstract: The General Accounting Office (GAO) was asked to conduct a series of studies examining federal programs to assist the homeless population, both targeted and nontargeted programs. In this first study, GAO identifies and describes characteristics of the federal programs targeted for people who are homeless and key nontargeted programs; identifies the amounts and types of funding for these programs in FY97; and determines if agencies have coordinated their efforts to assist people who are homeless and developed outcome measures for their targeted programs.

Available From: U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800, www.gao.gov/archive/1999/rc99049.pdf. (COST: FREE) (GAO/RCED-99-49)

Program Evaluation

Order #: 8198

Authors: United States General Accounting Office.

Title: **Homelessness: State and Local Efforts to Integrate and Evaluate Homeless Assistance Programs.**

Source: Washington, DC: U.S. General Accounting Office, 1999. (Report: 56 pages)

Abstract: To provide greater assistance to homeless people and to meet their complex needs, states and localities are trying to link and integrate homeless assistance programs with mainstream social service systems. Some state and localities are also beginning to use outcome measures to better manage their programs and to help ensure that their limited resources are being targeted to the most successful programs. This report describes some notable examples of efforts by states and localities to: link and integrate their homeless assistance programs with mainstream systems; and measure and evaluate outcomes for their homeless assistance programs.

Available From: U.S. General Accounting Office, 441 G Street, NW, Washington, DC 20548, (202) 512-4800, www.gao.gov.

Order #: 7163

Authors: United Way of America.

Title: **Measuring Program Outcomes: A Practical Approach.**

Source: Alexandria, VA: United Way of America, 1996. (Manual: 170 pages)

Abstract: While the concept of outcome measurement is still relatively new and many issues are still unresolved, this manual lays the groundwork for what will be a continually evolving and increasingly necessary operation in the years ahead. This comprehensive manual offers a step-by-step guide to measuring outcomes. Topics covered include: (1) getting ready; (2) choosing outcomes; (3) specifying indicators for your outcomes; (4) preparing to collect data; (5) trying out your system; (6) analyzing and reporting your findings; (7) improving your system; and (8) using your findings.

Available From: United Way of America, 701 North Fairfax Street, Alexandria, VA 22314, (703) 836-7112, www.unitedway.org.

Order #: 11331

Authors: Washington, T.A.

Title: **The Homeless Need More Than Just a Pillow, They Need a Pillar: An Evaluation of a Transitional Housing Program.**

Source: Families in Society 83(2): 183-188, 2002. (Journal Article: 5 pages)

Abstract: Current programs serving the homeless population use the systems approach, focusing on the person in the situation. These programs, which are known as transitional housing programs, seek to empower individuals through comprehensive services, such as education, job development, leadership skills, resources, and referrals. This study evaluated the comprehensive services offered at a transitional housing program through the eyes of former residents. Qualitative interviews were conducted with ten successful participants of the program. Analysis of the interview data suggested that the formal and informal services offered empowered the participants by offering life skills classes, resources and referrals, and counseling. Implications for social work practice are discussed (author).

Program Evaluation

Order #: 2337

Authors: Waxman, H.M.

Title: **An Inexpensive Hospital-Based Program for Outcome Evaluation.**

Source: Hospital and Community Psychiatry 45(2): 160-162, 1994. (Journal Article: 3 pages)

Abstract: This article describes the philosophy and basic infrastructure of an in-house, low-cost outcome evaluation program developed for a private psychiatric hospital in Philadelphia. The data collection system, including software, collection instruments and the evaluation procedure, are presented as well as the advantages and disadvantages of the program. The author contends that the program has a variety of benefits including low cost, greater staff participation, improved treatment programs, and greater autonomy in accounting for patient outcomes (author)

Order #: 11625

Authors: Williams, V.F., Banks, S.M., Robbins, P.C., Oakley, D., Dean, J.

Title: **Final Report on the Cross-Site Evaluation of the Collaborative Program to Prevent Homelessness.**

Source: Delmar, NY: Policy Research Associates, 2001. (Report: 202 pages)

Abstract: This report focuses on cross-site evaluation in terms of the cross-site data collection and analysis efforts of the Collaborative Program to Prevent Homelessness (CPPH), an initiative designed to document and evaluate effective homelessness prevention strategies for adults who are formerly homeless or at risk for becoming homeless. The purpose of this report is to describe both the process used for developing the shared methods and measures that comprise the cross-site portion of the program and to summarize the key findings. It is organized into four chapters. Chapter I Provides an overview of the interventions that made up the CPPH, the evolving CMHS/CSAT approach to cross-site evaluations and the organizational structure of the cross-site initiative. Chapter II describes the cross-site methods including the evaluation design, similarities, and differences among the interventions, key outcome domains, instrument development, data collection, and management procedures, as well as the development and application of the cross-site analytic framework. Chapter III describes the key findings and Chapter IV discusses their significance and limitations, as well as recommendations and lessons learned (authors).

Available From: Policy Research Associates, 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, www.prainc.com.

Order #: 11873

Authors: Windle, C., Paschall, N.C.

Title: **Client Participation in CMHC Program Evaluation: Increasing Incidence, Inadequate Involvement.**

Source: Community Mental Health Journal 17(1): 66-76, 1981. (Journal Article: 11 pages)

Abstract: This article looks at the client satisfaction surveys and client complaint systems used by more CMHC's since the Amendments of 1975 required centers to evaluate "acceptability of service". The article states that clients are seldom actively involved in designing or administering these evaluations. The authors argue that greater control by clients is merited on technical and political grounds, and would increase the likelihood that program improvements would result from assessments of acceptability (authors).

Program Evaluation

Order #: 7635

Authors: Wing, J.K.

Title: Research Designs for the Evaluation of Services.

Source: In Knudsen, H.C., and Thornicroft, G. (eds.), Mental Health Service Evaluation. New York, NY: Cambridge University Press, 37-49, 1996. (Book Chapter: 13 pages)

Abstract: The intention of this chapter is to show that research highly relevant for the evaluative comparison of alternative patterns of service can be successfully carried out even though strictly controlled designs are rarely applicable. The author contends that such research would be based firstly on the routine application of methods of clinical audit, secondly on routine monitoring using high-quality data, and finally on the sampling frames provided by the resulting epidemiologically based mental health information systems. Examples are taken mainly from the United Kingdom. The author concludes that the planning of services could be both improved and speeded up by the adoption of an audited recording system based on a minimum of routinely collected clinical data collected once only by the clinicians themselves. Such systems would also support more practically applicable evaluative research (author).

Order #: 12663

Authors: Wittenburg, D., Stapleton, D., Tucker, A., Harwood, R.

Title: An Assessment of the Representativeness of the SSI DA&A Study Panels.

Source: Contemporary Drug Problems 30(1-2): 123-136, 2003. (Journal Article: 13 pages)

Abstract: In this article, the authors used data derived from SSA administrative records to compare the composition of study panels, study samples, and the national population of former recipients of Supplemental Security Income (SSI) for drug addiction and alcoholism (DA&A). The authors found that the panels represented the selected samples in the nine-study sites in terms of demographics, SSI program status, and medical eligibility. The article states that the selected samples did vary in how well they represented their target populations, and compared with the national DA&A population, the SSI Study respondents were more likely to be black, to abuse both drugs and alcohol, to be more concentrated in the 30-49 age range, and to have been medically eligible for SSI in January and June 1997 (authors).

Order #: 8360

Authors: Young, A.S., Grusky, L., Jordan, D., Belin, T.R.

Title: Routine Outcome Monitoring in a Public Mental Health System: The Impact of Patients Who Leave Care.

Source: Psychiatric Services 51(1): 85-91, 2000. (Journal Article: 7 pages)

Abstract: An interest exists in using patient outcome data to evaluate the performance of publicly financed mental health organizations. Because patients leave these organizations at a high rate, the impact of patient attrition on routinely collected outcome data was examined. In one county mental health system, routinely collected data on a wide range of outcomes were examined, and a random sample of patients who left treatment was interviewed. Of the 1,769 patients in ongoing treatment during a one-year period, 554 (31%) were lost to follow-up. Among a random sample of 102 patients who left treatment, two had died and 47 were interviewed. Compared with patients who left treatment, patients who stayed were older, more likely to have schizophrenia, less likely to be married, more likely to be living in an institution, more satisfied with their relationships with friends and family, and less likely to have legal problems. Average outcomes improved both for patients who stayed and for patients who left. Patients who left and could be located for follow-up were less severely ill and showed the greatest improvement and the best outcomes. Patients who left and could not be located may have been more severely ill at baseline. Outcomes appear to vary substantially by whether patients stay in care and whether they can be located after leaving care. Public mental health systems that wish to evaluate treatment quality using outcome data should attend carefully to which patients are being assessed. Biases can result from convenience sampling and from patients leaving care. (authors)