

IDEAS CENTER



The Center for the Implementation and Dissemination of Evidence-Based Practices among States

The IDEAS Center

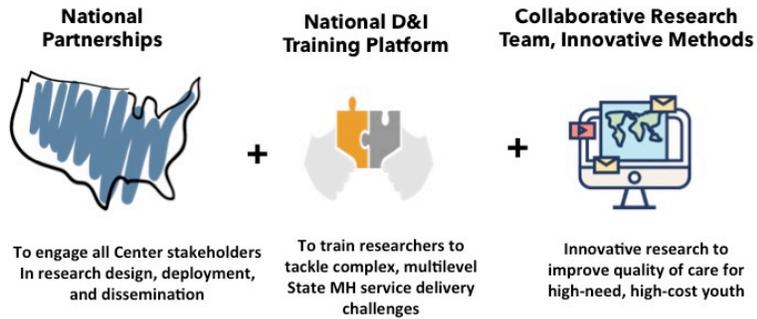
An NIMH ALACRITY Research Center

Welcome to the IDEAS Center! For over two decades, IDEAS researchers have developed and tested innovative interventions to overcome some of the toughest challenges to disseminating evidence-based practices (EBPs) in state systems serving children and families.

Our new transdisciplinary IDEAS research team combines the diverse talents of researchers at New York University, Washington University, The University of Chicago, The University of Southern California, Columbia University, and Drexel University.

IDEAS is unique: it is the only NIMH-funded ALACRITY Center and research team singularly-focused on combining *implementation science* and *policy-focused research* to improve the quality of state-delivered mental health care for *youth* and their *families*. This stakeholder-driven, policy-focused research has one goal: better care for kids and families.

Kimberly Hoagwood, PhD
and Mary McKay, PhD
IDEAS Center Co-Directors



Implementation Science + Policy-Focused Research to Improve the Quality of Mental Health Services Delivered to Youth and Families in State Systems

IDEAS, an NIMH-funded ALACRITY Research Center, builds on two decades of research to improve the implementation of evidence-based practices in state child mental health service systems. Our work ahead is laser-focused on better understanding how children’s mental health policy is made at the state level, and developing tools to better integrate research evidence into the policymaking process. By focusing squarely on this piece of the puzzle, we aim to more quickly close the research-to-practice gap via this focus on policy.

Our first research project, **Research Project 1: National Survey of State Policy Decision-making and Simulation**

(McKay and Purtle, Co-PIs), focuses on better understanding state policymakers’ decisionmaking processes in the child health, mental health, and substance use (via a NIDA HEAL supplement) policy arenas. This research project combines classic survey techniques with cutting-edge systems science to build a prototype agent-based model to identify modifiable targets – or levers that states can “push and pull” – to enhance the use of children’s mental health research evidence in state policymaking. In Fall 2019, Dr. Purtle consulted with three groups of Center stakeholders, including policymakers, state providers of mental healthcare, and parent advocates, to get feedback on the draft survey instrument, and ways to insure a



robust survey response rate. Stakeholder feedback was integrated into the survey before its launch in December. Results from Research Project 1 will improve our understanding of state mental health policymaking processes, and how to better disseminate research evidence in the policymaking arena; findings from this study will also be used to tailor the dissemination of findings from Research Projects 2 and 3, both focused on the high-need and high-cost youth served in state health and mental health systems.



Research Project 2 | A Brief Diagnostic Tool (Kiddie-CAT) for use in Emergency Departments

(Horwitz and Baroni, Co-PIs). This study is aimed at improving the mental health screening of youth presenting to emergency departments (ED's), and their referral to services in the community. The project will not only test this new tablet-based personalized screening tool, the K-CAT, but will also test a **disposition protocol** to increase ED providers' **confidence** in making mental health diagnoses, and **managing** suicidal thoughts and behaviors and severe depression in youth. The goal: facilitating the early identification of serious mental health problems in youth, and more quickly linking them to available services in the community.

Research Project 3 | A Focus on Family Engagement in First Episode Psychosis Treatment in OnTrackNY Program

(Hoagwood, Lindsey, Dixon, Co-PIs). Research shows that early, coordinated, specialty care improves outcomes for youth experiencing first episode psychosis (FEP). In New York State (NYS), the OnTrackNY program provides treatment for youth and young adults with FEP, ages 16-30, and their families. A key ingredient to recovery is ensuring that youth and their families remain engaged in treatment. The current study has several goals, including: (1) Define family engagement and examine existing family engagement rates at each OnTrackNY site; (2) Conduct focus groups with OTNY teams, using the new Rapid Assessment Procedure-Informed Clinical Ethnography (RAPICE) methodology to describe and understand OTNY implementation; (3) Survey OTNY families and conduct focus groups, using RAPICE methodology, to assess barriers and facilitators to participation in the OTNYS program; and (4) Using quantitative and qualitative data, together with OTNY partner sites, develop strategies to enhance family engagement in the OTNY program, and thus improve youth outcomes.

Training a Cadre of Diverse, Early Career Children's Mental Health Services Researchers

The IDEAS Center is firmly committed to training the next generation of children's mental health services researchers. Three early career researchers co-lead each of the Center's three main research studies (Drs. Purtle, Baroni, and Lindsey).

The complex, multilevel nature of delivering children's mental health services in state systems requires on-the-ground training of a racially and ethnically diverse set of translational scientists. Drs. Enola Proctor and John Landsverk, who collectively have trained a large cohort of early career dissemination and implementation scientists now working nationwide, will co-direct the Center's training efforts. They will leverage both the lessons learned and resources of the Implementation Research Institute (IRI) and a new NIMH-funded training

grant (McKay, PI; R25MH118935), both housed at the Brown School at Washington University, to train an additional cohort of diverse, early career researchers who can help accelerate the delivery of quality child mental health services in state systems nationwide.

