



OPRE Report 2012-09

Catalog of Research: Programs for Low-Income Couples

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CATALOG OF RESEARCH: PROGRAMS FOR LOW-INCOME COUPLES OVERVIEW

In the past few decades, research showing the advantages to children of being raised by both parents in healthy, stable relationships has led to an increase in couple-based programs designed to enhance relationship or co-parenting skills. In response to interest in such programming, the Office of Planning, Research, and Evaluation within the Administration for Children and Families, U.S. Department of Health and Human Services (HHS), engaged Mathematica Policy Research to conduct the Strengthening Families Evidence Review (SFER) to identify and review studies of family-strengthening programs. This catalog focuses on studies of programs that served low-income couples; a separate catalog presents studies of programs that served low-income fathers.

This catalog compiles information from 55 studies of 39 programs. Each study description provides details on the research, such as study design and characteristics of those included in the sample, and of the programs, such as structure, staffing and operations. The descriptions are based on the information provided by the study authors and may not include complete information on individual programs.

Most of the studies analyze participant outcomes—for example, status of and satisfaction with relationships—but vary in the strength of their evidence for determining whether the programs themselves caused the reported outcomes. To help readers assess the strength of the evidence on outcomes, we rated the studies based on the likelihood that the estimated effects are the result of the program rather than other factors, such as natural change over time. The ratings categories—high, moderate, low, and unrated—are based on each study’s design, execution, and analysis.¹ Studies that only focus on aspects other than participant outcomes, such as program operations and implementation, are unrated.

A high rating means the study is well-designed and executed, and the estimates of effects or impacts reported can be attributed to the program. A study with a moderate rating is fairly well designed and executed but has some weaknesses, which means the authors have not been able to rule out definitively that the estimated effects are not due at least in part to factors other than the program. A study is assigned a low rating when there are weaknesses in the study design or analytical methods that mean the study cannot isolate potential effects of the program from other factors—that is, we do not know if the outcomes are a result of the program, participant characteristics, or other influences.

Of the 55 studies, 8 have high or moderate ratings, 18 have low ratings, and the remaining 29 are unrated studies, either because they do not include participant outcomes or they are additional sources and overlap with a rated study. Studies that received a high rating provide strong evidence that the program studied led to outcomes that can be attributed to program services and were different from what would have occurred without the program. Although there is no clear evidence

¹ The ratings criteria are similar to those used in others evidence reviews conducted for HHS on home visiting and teen pregnancy prevention (see <http://homevee.acf.hhs.gov> and <http://www.hhs.gov/ash/oah/oah-initiatives/tpp/tpp-database.html>, respectively). SFER, however, is more inclusive and includes research on program implementation or that reports outcomes in the absence of rigorous impact research methods.

that programs in studies with low ratings or those that are unrated led to outcomes of interest, the studies provide information on services and approaches that have been implemented, and descriptive information about operational successes and challenges (e.g., those related to recruitment and retention). The programs they assess are potentially promising or innovative but have not yet undergone evaluations that establish the extent to which they result in positive outcomes for participants.

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