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Volume 49
January–December 2011

Annual Cumulation

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INTRODUCTION

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MG	Monograph
TR	(Technical) Reports
CF	Conference Proceedings
CT	Testimony
DB	Documented Briefings
RGSD	Dissertations
RP	Reprints
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RB	Research Briefs
CP	Corporate Publications
WR	Working Papers
EP	External Publications
WB	Working Paper Briefs

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Selected RAND Abstracts is divided into an index section and an abstract section.

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Each issue of *SRA* contains author, subject, and title indexes covering all the material abstracted in the current volume.

Author Index. The entries under the authors' names give the document numbers and titles of their publications abstracted in this volume of *SRA*.

Title Index. Each title is followed by its document number.

Suffix Index. The suffix following each document number indicates the sponsor of the research.

Subject Index. Each publication is indexed under one or more appropriate subjects. The lines that follow the subject headings are titles. The document number following the modifier refers the user to the abstract appearing in the abstract section.

Note that in all sections, titles and headings are alphabetized by first letter—including "A" and "The."

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A
United States Army

A/AF
United States Army and the United States Air Force

ACE
American Council on Education;Lumina Foundation for Education

AF
United States Air Force

AHF
AIDS Healthcare Foundation

AIHS
Alberta Innovates - Health solutions

ALLF
The Allstate Foundation

ANT
Airey Neave Trust

AOUSC
Administrative Office of the United States Courts

ASPE
Assistant Secretary of Planning and Evaluation

AUS
Australian Department of Defence

AUS
Australian Department of Defence

BD
BBSRC and Defra

BTS
Bureau of Transport Statistics, Transport for NSW

CF/AARP
Centro Fox and AARP

CHSWC
California Commission on Health and Safety and Workers[1] Compensation and Zenith Insurance Company

CHSWC
Commission on Health, Safety and Workers[1] Compensation

CIGNA
CIGNA Healthcare

CMS
Centers for Medicare and Medicaid Services

CSG

Council of State Governments

DFT

UK Department for Transport

DH

Department of Health within the PRP project "An 'On-call¹ Facility for International Healthcare Comparisons"

DH

Department of Health (England)

DH

UK Department of Health Funded Centre for Policy Research in Science and Medicine (PRISM)

DHHS

U.S. Department of Health and Human Services

DOE

United States Department of Energy

DOJ

U.S. Department of Justice¹s Office of Juvenile Justice and Delinquency Prevention

DOL

U.S. Department of Labor

DOSS

The Dossia Consortium

DTRA

Defense Threat Reduction Agency

EC

European Commission Directorate-General for Health and Consumers

EC

European Commission

EC

European Commission Directorate General Information Society and Media

EC

European Commission Directorate General Home Affairs

EC

Internal Market and Services

EMKF

Ewing Marion Kauffman Foundation

FF

Ford Foundation

FLC

Financial Literacy Center

FPS

Fund for Public Schools

HO

Home Office

IFG

Institute for Government

IFPMA

International Federation of Pharmaceutical Manufacturers and Associations

JFCOM

U.S. Joint Forces Command

KBV
Kassenärztliche Bundesvereinigung (KBV)

LAFANS
L.A. Family and Neighborhood Survey

MAC
Migration Advisory Committee

MCIA
Marine Corps Intelligence Activity

MEGR
Greek Ministry of Education, Lifelong Learning and Religious Affairs

MO/FR
French Ministry of Defence

MOJ
Ministry of Justice

NASA
National Aeronautics and Space Administration

NAVY
United States Navy

NAVY
United Kingdom's Ministry of Defence

NAVY
Australia's Department of Defence

NAVY

United States Navy, the United Kingdom's Ministry of Defence, and Australia's Department of Defence

NETL

National Energy Technology Laboratory

NIAAA
National Institute on Alcohol Abuse and Alcoholism

NIDA

National Institute on Drug Abuse

NIDA/NIAAA
National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism

NIHRSDO
National Institute for Health Research Service Delivery and Organisation

NIJ

National Institute of Justice

NIST
National Institute of Standards and Technology

NMFA

National Military Family Association

NPIA

Workforce Programmes unit of the National Policing Improvement Agency

NQF
National Quality Forum

NSF
National Science Foundation

NYSHF
New York State Health Foundation

OPTA

Dutch Independent Telecommunications and Post Regulator (OPTA)

OSD
The Office of the Secretary of Defense

OSD/NAVY
Office of the Secretary of Defense and the United States Navy

PPC
Pittsburgh Parks Conservancy

QF
Qatar Foundation for Education, Science, and Community Development

RC
RAND Corporation

RCUH
University of Hawai'i

RE
RAND Europe

RGF
Responsible Gambling Fund

RS
National Institute for Health Research, the Canadian Institutes of Health Research, the Heart and Stroke Foundation of Canada, and the National Heart Foundation of Australia

RWJ/TQF

Robert Wood Johnson Foundation and The Quantum Foundation

SAMUELI

Samueli Institute

SANF

Sandler Foundation

SRF

Smith Richardson Foundation

SRI

SRI International

SU

Stabilisation Unit (UK)

TCE

The California Endowment

TPP

The Pittsburgh Promise

TUV

Tulane University

UCESRC

U.S.-China Economic and Security Review Commission

USFI
United States Forces–Iraq

USMC
United States Marine Corps

VHA

U.S. Department of Veterans Affairs

WB
Word Bank

WF
Wallace Foundation

WFHF/DCKF/STF
William and Flora Hewlett Foundation, the Dirk and Charlene Kabcenell Foundation, and the Stuart Foundation

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The War Within: Suicide Prevention in the U.S. Military
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Toward Standardization of Benefit-Cost Analyses of Early Childhood Interventions
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Trends and Educational Differentials in Marriage Formation Among Taiwanese Women
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Victory Has a Thousand Fathers: Evidence of Effective Approaches to Counterinsurgency, 1978-2008
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Views from the Homefront: How Military Youth and Spouses Are Coping with Deployment
RB-9568-NMFA

Views from the Homefront: The Experiences of Youth and Spouses from Military Families
TR-913-NMFA

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RB-9634-TCE

What Are You Prepared to Do? NATO and the Strategic Mismatch Between Ends, Ways, and Means in Afghanistan — and in the Future
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What Can We Learn from the Dutch Cannabis Coffeeshop System?
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What Context Features Might Be Important Determinants of the Effectiveness of Patient Safety Practice Interventions?
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What Do Iranians Think? A Survey of Attitudes on the United States, the Nuclear Program, and the Economy
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What is the Cost of Married Women's Paid Work?
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What Is the Impact of Using Evidence-Based Treatments for Posttraumatic Stress Disorder and Depression in Veterans?
RB-9600

What Is the Impact of Workplace Policies to Promote Influenza Vaccination Among Health Care Personnel?
RB-9591

What New York City's Experiment with Schoolwide Performance Bonuses Tells Us About Pay for Performance
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What Should Be Stocked in War Reserve? A New Method for Allocating Resources
RB-9624-A

What's My Account Really Worth? The Effect of Lifetime Income Disclosure on Retirement Savings
WR-873

What's My Account Really Worth? The Effect of Lifetime Income Disclosure on Retirement Savings
WR-873-1

Where Do Poor Women in Developing Countries Give Birth? A Multi-Country Analysis of Demographic and Health Survey Data
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Where in Social and Sexual Networks Should HIV Interventions Target? Identifying Similarities in Social Contexts Characteristics and Mutual Disclosure Behaviors of HIV Status and MSM Identity Across Social and Sexual Networks
RGSD-285

Where Might the U.S. Army Budget Go, and How Might It Get There?
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Who Knew? Awareness of Being Recommended for Influenza Vaccination Among US Adults
EP-201100-266

Why Are Many Emergency Departments in the United States Closing?
RB-9607

Why Do Some Irish Drink So Much? Family, Historical and Regional Effects on Students' Alcohol Consumption and Subjective Normative Thresholds
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Why Farmers Sometimes Love Risks: Evidence from India
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Will Adoption of Electronic Health Records Improve Quality in U.S. Hospitals?
RB-9570

Within-day Temporal Patterns of Smoking, Withdrawal Symptoms, and Craving
EP-201100-26

Workplace Efforts to Promote Influenza Vaccination Among Healthcare Personnel and Their Association with Uptake During the 2009 Pandemic Influenza A (H1N1)
EP-201100-36

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CF-297-FLC

Year of the Air Force Family: 2009 Survey of Active-Duty Spouses
TR-879-AF

ABSTRACTS

CONFERENCE PROCEEDINGS

CF-279-OSD

New Opportunities and Challenges for Taiwan's Security. Roger Cliff, Phillip C. Saunders, Scott Harold. 2011

On November 7, 2009, the RAND Corporation, the Institute for National Strategic Studies at National Defense University, and the Council for Advanced Policy Studies in Taipei held the conference "Cross-Strait Relations: New Opportunities and Challenges for Taiwan's Security," which brought together leading experts on political and military issues from both the United States and Taiwan. The goal was to consider how a range of political, economic, and military factors are likely to shape Taiwan's security over the coming decade. The conference featured panels on the implications of recent improvements in relations between Taiwan and mainland China, the potential role of confidence-building measures in improving cross-Strait stability and security, the effect of changes in the military balance on cross-Strait relations, and longer-term (five to ten or more years in the future) challenges to security in the Taiwan Strait and possible responses to those challenges. The panelists' papers, presented in these proceedings, included examinations of current cross-State tensions and the feasibility of confidence-building measures, U.S.-Taiwan and U.S.-China relations, political change and military capabilities in Taiwan and China, deepened cross-Strait rapprochement, and challenges to Taiwan's defense program and potential Chinese military operations in the Strait.

http://www.rand.org/pubs/conf_proceedings/CF279.html

CF-282-ALLF

The Nongovernmental Sector in Disaster Resilience: Conference Recommendations for a Policy Agenda. Joie D. Acosta, Anita Chandra, Sally Sleeper, Benjamin Springgate. 2011

Nongovernmental organizations (NGOs) are instrumental in communities' resilience to natural and man-made disasters. But, despite national progress, the plans and processes for their involvement are not well-defined. This report summarizes three interrelated conference sessions that RAND researchers convened during the Louisiana Association of Nonprofit Organizations annual conference in August 2010. The purpose of the three sessions was to generate a national policy agenda that summarizes the challenges to involving NGOs in disaster response and recovery and to identify potential policy and program recommendations to address these challenges, with a specific emphasis on two types of populations, which were most in need after recent disasters: displaced and returning individuals and individuals with mental health needs. Panelists and conference attendees were asked to identify recommendations that would assist NGO involvement in disaster response and recovery. Those recommendations were then summarized by RAND researchers and were categorized into five areas: defining and formalizing roles for NGOs, structure and integration of governmental and nongovernmental organizations in common plans, information sharing, service capacity, and resource allocation. Based on the conference discussion, this report also contains RAND recommendations for future research to inform implementation of the policy agenda.

http://www.rand.org/pubs/conf_proceedings/CF282/

CF-283-FLC

Financial Literacy Research Consortium: Annual Conference 2010. Aileen Heinberg, Antoinette Schoar, Arie Kapteyn, David Laibson, Mary C. Daly, Mathew Greenwald, Michael S. Barr, Punam Keller, Timothy Flacke, Kim Rheinlander, Pamela Herd, Jonathan Zinman, Steven Sass, Eric Johnson, J. Michael Collins, Alicia H. Munnell, Karen Holden, Geoffrey Wallace, Lisa R. Szykman, Nicole Montgomery, William Gale, Wendy Way, Julie R. Agnew, Jennifer Turnham, Amar Parikh, Katherine Dahlem, Peter Roden. 2011

These videos offer the presentations of the first annual conference of the Financial Literacy Research Consortium, entitled New Insights and Advances in Financial Literacy: Translation, Dissemination, Change. The event on Nov. 18 and 19, 2010 brought together scholars from the Consortium to present their work and discuss how programs, educational products, and policies can best promote financial planning and financial security. The event was sponsored by the Social Security Administration and hosted by the Financial Literacy Center (RAND, Dartmouth College, and the Wharton School), with participation from the Center for Financial Literacy (Boston College) and the Center for Financial Security (University of Wisconsin).

http://www.rand.org/pubs/conf_proceedings/CF283/

CF-288-SAMUELI

Regulation of Dietary Supplements in the Military: Report of an Expert Panel. Ian D. Coulter, Sydne Newberry, Lara Hilton. 2011

The U.S. military has had a longstanding interest in the potential for dietary supplements to enhance performance and optimize health. However, at the same time, they are concerned about the safety dietary supplements, particularly under the conditions faced by some military personnel, and no service-wide policies exist to guide their use. In 2008, RAND Health and the Samueli Institute, under the sponsorship of the U.S. Army, assembled a panel of experts on the use of dietary supplements for performance enhancement and on regulatory issues affecting dietary supplements and conducted an informal 1-day workshop to consider the following questions: (1) What types of policies and regulations currently exist regarding the use of dietary supplements in civilian sector groups such as among athletes and those whose jobs demand high levels of physical or cognitive performance? (2) What types of policies currently exist in the commercial domain around the point-of-sale for dietary supplements? (3) What kind of regulations does the military currently have in place (with respect to the use and purchase of dietary supplements)? (4) If it so chose, what could the military do to regulate the use of dietary supplements? This report summarizes the panel's deliberations.

http://www.rand.org/pubs/conf_proceedings/CF288.html

CF-290-CCEG

For Whom the Whistle Blows: Advancing Corporate Compliance and Integrity Efforts in the Era of Dodd-Frank. Michael D. Greenberg. 2011

The Dodd-Frank Wall Street Reform and Consumer Protection Act, signed into law in July 2010, includes a new mechanism for offering financial awards to internal corporate “whistleblowers” who report instances of fraud to the U.S. Securities and Exchange Commission (SEC). Final whistleblower rules enacted by the SEC under the statute have been controversial, particularly in neglecting to require that corporate insiders make use internal corporate reporting channels as a prerequisite to eligibility for any subsequent bounty under Dodd-Frank. On May 11, 2011, RAND convened thought leaders and stakeholders from the government, industry, academic, and nonprofit sectors to discuss the potential impact of the Dodd-Frank whistleblower rules on corporations, the importance of internal compliance and reporting processes both for corporations and the regulatory community, and steps that might be taken to strengthen internal compliance and reporting in the era of Dodd-Frank. These proceedings summarize key issues and topics from the symposium and identify major points of agreement and disagreement among the participants. The proceedings also feature three invited papers presented at the symposium.

http://www.rand.org/pubs/conf_proceedings/CF290.html

CF-293-OSD

The Future of Gulf Security in a Region of Dramatic Change: Mutual Equities and Enduring Relationships. David Aaron, Frederic Wehrey, Brett Andrew Wallace. 2011

On June 20, 2011, in Washington, D.C., 100 participants attended a conference titled “Gulf

Security in a Region of Dramatic Change: Mutual Equities and Enduring Partnerships." In these conference proceedings, the authors document the presentations delivered by experts on Persian Gulf affairs, the question-and-answer sessions that followed each of the four panels, and the concluding remarks.Given the dynamic and fluid nature of events throughout the Arab world in the preceding six months, the conference focused on the security implications of a rapidly changing Gulf region and their potential effects on U.S. Central Command. The four panel topics were the Arab Spring, the prospects for and implications of a more-unified Gulf Cooperation Council, how Gulf militaries and their relationships with the United States may be affected by political changes, and how present-day events may influence or alter the threat posed by Iran.

http://www.rand.org/pubs/conf_proceedings/CF293.html

CF-297-FLC

Workshop on Emerging Research in Financial Literacy and Videos. Annamaria Lusardi, Christopher B. Bumcrot, Mathew Greenwald, Olivia S. Mitchell, Robert Clark, Arie Kapteyn. 2011

These videos offer presentations from "Emerging Research on Financial Literacy: a Workshop," held by the Financial Literacy Center, a joint center of the RAND Corporation, Dartmouth College, and the Wharton School. With support from the Social Security Administration, the event on September 8, 2011, brought together Center scholars with policymakers and practitioners in the financial literacy field.

http://www.rand.org/pubs/conf_proceedings/CF297.html

CF-298-SAMUELI

Multicomponent Dietary Supplements for the Military. Ian D. Coulter, Sydne Newberry. 2011

The U.S. military has had a long-standing interest in the potential for dietary supplements to enhance performance and optimize health among military service personnel. In particular, the military is interested both in exploring the potential of these supplements to help service members adapt to occupational and environmental stressors and in ensuring that manufacturers of dietary supplements for military use adhere to the highest possible standards. In 2009, RAND Health assembled a panel of experts on the design, manufacture, and testing of dietary supplements and conducted an informal, one-day workshop on the manufacture and testing of multicomponent dietary supplements for the military. These conference proceedings summarize workshop discussions on (1) issues pertaining to the assessment and regulation of supplement efficacy and safety and to the special needs of the military, (2) cases illustrating processes that might serve as examples to guide military policy on supplement development and testing, and (3) processes for prioritizing the desired health and performance outcomes.

http://www.rand.org/pubs/conf_proceedings/CF298.html

CORPORATE PUBLICATIONS

CP-1 (2010)

2010 RAND Annual Report: Focus on Making a Difference. 2011

The RAND Corporation is a nonprofit institution that helps improve policy and decisionmaking through research and analysis. RAND's 2010 Annual Report--with its focus on multinational challenges, healthy societies, armed forces and resources, education, financial stability, safety and justice, infrastructure and environment, and terrorism--demonstrates the scope of that research and illustrates the ways RAND disseminates its findings and recommendations as widely as possible to benefit the public good.

http://www.rand.org/pubs/corporate_pubs/CP1-2010.html

CP-22 (12/10)

RAND Review, Vol. 34, No. 3, Winter 2010. Keith Crane, James Dobbins, Laurel E. Miller, M. Christine DeVita, Richard Buddin, Daniel F. McCaffrey,

Paul Sorensen, Liisa Ecola, Martin Wachs, James A. Thomson, John Godges, Paul Steinberg, Mary E. Vaiana. 2011

The cover story describes actions that could yield positive outcomes in Haiti in three to five years. Another feature story proposes a new way to fund transportation infrastructure: a tax on the number of miles traveled rather than on the gallons of fuel consumed. A third feature story considers alternative ways of measuring teacher effectiveness. News items discuss the effects of childhood psychological problems, the health of older Americans and their peers in England, helping the U.S. military save money, and the ability of U.S. space systems to deter attacks. Other stories discuss the RAND Palestine Initiative, one foundation's involvement in research, and a series of events designed to set politics aside.

http://www.rand.org/pubs/corporate_pubs/CP22-2010-12.html

CP-22 (4/11)

RAND Review, Vol. 35, No. 1, Spring 2011. Bernard D. Rostker, Susan D. Hosek, Mary E. Vaiana, Soeren Mattke, Jeremy M. Wilson, Laura Werber, James A. Thomson, John Godges, Clifford A. Grammich, Gordon T. Lee, Paul Steinberg. 2011

The cover story describes RAND research that led to the U.S. military's revocation of its "Don't Ask, Don't Tell" policy regarding gays in the military. Another feature story discusses police recruitment, retention, and workforce planning. A third feature story considers the potential of home health care technologies. News items discuss noninvasive breast cancer, state health insurance exchanges, the U.S. military's investment in alternative fuels, taxing crude oil rather than gasoline, setting prices for alcoholic beverages in the United Kingdom, and averting the risks of satellites colliding with space debris. Other stories report on healthier ways of addressing serious mental illness, RAND Health's work on reducing health care costs, and a speech by U.S. Deputy Secretary of State James Steinberg on U.S. foreign policy.

http://www.rand.org/pubs/corporate_pubs/CP22-2011-04.html

CP-22 (9/11)

RAND Review, Vol. 35, No. 2, Summer 2011. Brian Michael Jenkins, John Godges, Arturo Munoz, Eric V. Larson, K. Jack Riley, Lloyd Dixon, Fred Kipperman, Robert T. Reville, James A. Thomson, Clifford A. Grammich, Gordon T. Lee, Paul Steinberg, Shelley H. Wiseman. 2011

Five essays reflect on America ten years after 9/11, propose a shift toward Afghan-led solutions for Afghanistan, outline a diplomatic strategy to counter al Qaeda's narrative, suggest ways to ensure air passenger security at a reasonable cost, and recommend new compensation polices for victims of terrorist attacks. A special centerpiece graphically illustrates how a decade of war has affected sevicemembers and their families. News items discuss health reform benefits and costs across five states, the effect of employer-based insurance on entrepreneurship, employment and income inequality in Europe, geoengineering as a response to climate change, parent-teen talks about sex, and New Orleans families after Hurricane Katrina. Other articles highlight RAND perspectives on the recent upheavals in the Arab World; a speech by John Deasy, superintendent of the Los Angeles Unified School District; and a farewell message from James A. Thomson, president and chief executive officer of the RAND Corporation.

http://www.rand.org/pubs/corporate_pubs/CP22-2011-09.html

CP-401 (1/11)

2010 Year in Review. James A. Thomson. 2011

The RAND Corporation has a straightforward mission: helping to improve policy and decisionmaking through research and analysis. To help us gauge how well we are carrying out this mission, President and CEO Jim Thomson and Executive Vice President Michael Rich ask three sets of questions: (1) Are we addressing issues at or near the top of the national and international policy agenda? Are we helping to shape that agenda? In doing that, do our products and services meet the high standards of quality and objectivity that

are RAND's core values? (2) Is our research and analysis reaching key decisionmakers and the broader public, thereby improving the quality of the policy debate? (3) Have our products and services contributed to improvements in policy and decisionmaking? The 2010 Year in Review offers a year-end assessment of RAND's recent achievements.

http://www.rand.org/pubs/corporate_pubs/CP401-2011-01.html

CP-413 (5/11)

Standards for High-Quality Research and Analysis. 2011

The name RAND is synonymous with high-quality, objective research and analysis at the top of the policy agenda. This brochure describes the quality standards for RAND research. RAND's standards for high-quality research and analysis articulate long-standing RAND concepts and values regarding the characteristics of high-quality studies. They serve both as a guide for those who conduct, manage, support, and evaluate the research activities at RAND and as the set of principles by which RAND research units and programs shape their individual quality assurance processes. They help to ensure that RAND accomplishes its mission of improving policy and decisionmaking through research and analysis.

http://www.rand.org/pubs/corporate_pubs/CP413-2011-05.html

CP-485 (4/11)

Saving the Government Money: Examples from RAND's Federally Funded Research and Development Centers. 2011

RAND houses three federally funded research and development centers (FFRDCs): the Arroyo Center, sponsored by the U.S. Army; the National Defense Research Institute, sponsored by the Office of the Secretary of Defense and other elements of the Department of Defense; and Project AIR FORCE, sponsored by the U.S. Air Force. These centers apply research capital they have developed over the years to help decisionmakers solve problems and often save money as well. This publication lists and briefly summarizes some RAND projects undertaken over the past ten years that have helped save the government money or that have identified ways to do so. Amounts saved are estimated. Benefits of these projects include savings achieved or under way, e.g., in studies of intratheater airlift and getting supplies to units in Iraq; savings projected if RAND recommendations are implemented by the government, e.g., in studies of fighter aircraft production and destroying chemical weapons; savings realizable but contingent on other circumstances; and savings enabled by RAND's independent verification.

http://www.rand.org/pubs/corporate_pubs/CP485-2011-04.html

CP-489 (2/11)

The RAND-Qatar Policy Institute: Capabilities Brochure. 2011

A collaboration between the RAND Corporation and the Qatar Foundation, the RAND-Qatar Policy Institute (RQPI) analyzes complex policy problems and helps policymakers create enduring solutions. This publication provides an overview of RQPI, including the research questions examined by the institute, its approach to client relations and quality assurance, its research capabilities, and the public policy areas on which RQPI is focused.

http://www.rand.org/pubs/corporate_pubs/CP489-2011-02.html

CP-489/2 (9/11)

RAND in the Middle East. 2011

This publication describes the work, organization, and capabilities of the RAND Corporation in the Middle East.

http://www.rand.org/pubs/corporate_pubs/CP489z2-2011-09.html

CP-500 (8/11)

RAND Advisory Boards brochure. 2011

Imagination. Energy. Intellect. Agility. These are the traits of great policy leaders—and of the doctoral students, faculty, and supporters who make up the Pardee RAND Graduate School (PRGS). For more than four decades, PRGS has provided

a unique educational experience. The curriculum is renowned for its rigor and breadth. And PRGS' location at the RAND Corporation's headquarters campus offers unparalleled access to world-class policy experts and experience. Every day at PRGS, students are called upon to be the answer to the challenges they see around them. Help shape the future of public policy and support the Pardee RAND Graduate School.

CP-508 (11/10)
American Life Panel brochure. 2011

The ALP (American Life Panel) consists of 5,000 respondents who are regularly interviewed over the Internet. The majority of the panel members have their own Internet access. The remaining panel members have been provided with Internet access by RAND through the provision of an Internet Player and a subscription. The basic rate for use of the Internet panel for research surveys is $3 per respondent per minute interview time.

http://www.rand.org/pubs/corporate_pubs/CP508-2010-11.html

CP-509 (11/10)
Multimode Interviewing Capability brochure. 2011

MMIC (Multimode Interviewing Capacity) is an open source comprehensive information system under development by the RAND Corporation. MMIC integrates various traditional modes of collecting interview data, including telephone interviewing, self-administered surveys, and personal interviewing. MMIC is used to manage the whole data collection process from questionnaire design, sample management, and fieldwork monitoring to final dataset production.

http://www.rand.org/pubs/corporate_pubs/CP509-2010-11.html

CP-530 (5/11)
Research Careers at the RAND Corporation. 2011

This overview describes research careers at the RAND Corporation. RAND hires outstanding individuals for a wide array of research and research support roles, including full-time researchers, research assistants, graduate student summer associates, research communications analysts, project associates, and computer programmers. Researchers enjoy a flexible, team-oriented work environment in which they choose projects related to their areas of expertise and interest.

http://www.rand.org/pubs/corporate_pubs/CP530-2011-05.html

CP-531 (2010)
Spotlight on 2010: Unlocking Innovation and Learning. 2011

With European governments seeking smart, sustainable solutions to increasingly complex challenges, innovation and learning become essential tools for good policymaking. RAND Europe's annual review, Spotlight on 2010, features many research projects that illustrate the value of learning and knowledge sharing to improve policymaking. It also provides an overview of RAND Europe's activity in 2010.

http://www.rand.org/pubs/corporate_pubs/CP531-2010.html

CP-559 (2011)
RAND Publications Catalog. 2011

The RAND Corporation is committed to finding effective solutions to important policy issues, and that mission is more important now than ever before. Concerns about health care, education, the global economic crisis, and ongoing security challenges in the Middle East and elsewhere present problems for governments and private sectors around the world. For more than 60 years, RAND has worked to help confront challenges such as these by providing objective analysis of important problems and the possible solutions to them. RAND's commitment to making a difference is evident in the broad variety of insightful and influential titles highlighted within this catalog. The downloadable catalog features links to these publications on the RAND website.

http://www.rand.org/pubs/corporate_pubs/

CP559/

CP-593 (2011)

Selected RAND Abstracts: A Guide to RAND Publications, Volume 48, January - December 2010. 2011

Selected RAND Abstracts (SRA) is a complete guide to all unclassified RAND publications for a given calendar year. Each volume contains author, subject, and title indexes covering all the material abstracted in that volume. The abstracts are arranged by type of publication and publication number. In addition, the SRA contains information about ordering RAND documents and obtaining annual subscriptions to RAND unclassified publications.

http://www.rand.org/pubs/corporate_pubs/CP593.html

CP-622-AUS

Industry and Infrastructure for Future Submarines: An International Perspective. John Birkler. 2011

The Royal Australian Navy plans to retire its Collins-class submarines, when their service lives expire. Their replacement: 12 new vessels known as the Future Submarine. These replacements will be designed to travel farther, stay on patrol longer, support more missions, and provide more capabilities than the Collins vessels. Acquiring these new submarines will be the largest, most complex defense procurement in Australia's history. However, because Australia has not designed a submarine in the modern era, the effort will be challenging. This paper draws from RAND's considerable international submarine experience to discuss the benefits of long-range planning, ways to improve efficiency, the need to sustain hard-to-replace resources, the importance of testing, and potential policy implications for Australia. The paper was originally presented at the Submarine Institute of Australia's 5th Biennial Conference 2010, in Perth, Australia, in November 2010.

http://www.rand.org/pubs/corporate_pubs/CP622/

CP-625

The Tenth Year: A Briefing on Terrorism Issues to New Members of the 112th Congress. Brian Michael Jenkins. 2011

The United States has not experienced another major terrorist attack since September 11, 2001, which many had feared. However, few in 2001 would have imagined that, ten years later, the United States would still be threatened by the same jihadist terrorist enterprise. Its effort to defeat and dismantle this global network while protecting itself against further attacks has become its longest campaign. On January 8, 2011, Brian Michael Jenkins briefed newly elected members of Congress on a spectrum of foreign policy, national security, and domestic issues, with a particular focus on domestic terrorism prevention and transportation security in the post-9/11 era.

http://www.rand.org/pubs/corporate_pubs/CP625.html

CP-630 (9/11)

PRGS "Be the Answer" case statement booklet. 2011

Imagination. Energy. Intellect. Agility. These are the traits of great policy leaders—and of the doctoral students, faculty, and supporters who make up the Pardee RAND Graduate School (PRGS). For more than four decades, PRGS has provided a unique educational experience. The curriculum is renowned for its rigor and breadth. And PRGS' location at the RAND Corporation's headquarters campus offers unparalleled access to world-class policy experts and experience. Every day at PRGS, students are called upon to be the answer to the challenges they see around them. Help shape the future of public policy and support the Pardee RAND Graduate School.

http://www.rand.org/pubs/corporate_pubs/CP630-2011-09.html

CP-635

Air Travel Security Since 9/11. K. Jack Riley. 2011

The Transportation Security Administration

plans to deploy additional whole-body image scanning machines in airports around the country, and it intends to continue the use of pat downs to supplement the scans. In light of concerns about the cost, safety, effectiveness, and privacy of these procedures, the author explores air travel security performance since 9/11, identifies missed opportunities and innovations, and considers potential next steps. This paper is based on a speech delivered at the Airport Revenue News Conference on February 28, 2011, at National Harbor, Md.

http://www.rand.org/pubs/corporate_pubs/CP635/

CP-636

Are words enough in a crisis? Anais Reding, Kristin Weed, Jeremy J. Ghez. 2011

Can military forces get their messages across more effectively? RAND Europe examines NATO's new Strategic Communication concept.

http://www.rand.org/pubs/corporate_pubs/CP636/

CP-639/2 (9/11)

Focus on the Rising Cost of Health Care handout. 2011

Reining in health care costs has become a central policy challenge for government and a pressing concern for American businesses, families, and individuals. A substantial body of RAND research has focused on evaluating existing and potential policies to lower health care costs; examining the cost implications of healthy and unhealthy behaviors, with an eye toward promoting health and preventing disease; and improving health system value, reducing waste, and improving the quality of care.

http://www.rand.org/pubs/corporate_pubs/CP639z2-2011-09.html

CP-642

RAND Health Quarterly: Volume 1, Number 1. 2011

RAND Health Quarterly is an online journal sharing the results of recent RAND research areas across a broad spectrum of health-related issues. Our work spans a wide range of topics each year, including health policy and health economics; health care delivery, quality, and patient safety; clinical care; global health; mental health; health promotion and disease prevention; public health and emergency preparedness; military health; research methods; and science policy.

http://www.rand.org/pubs/corporate_pubs/CP642.html

CP-643 (8/11)

African First Ladies Brochure. 2011

Brochure for a week-long, intensive course designed for staff and advisors of African First Ladies to develop strategies to manage an effective First Lady's Office and to improve executive decisionmaking through a policy-analysis framework.

http://www.rand.org/pubs/corporate_pubs/CP643-2011-08.html

CP-652

Remarks at the Rotary Club of Beverly Hills. Michael D. Rich. 2011

This paper captures a speech delivered to the Beverly Hills Rotary Club in September 2010. It covers the history of RAND and talks about a significant challenge for RAND in the future: How to carry out the mission in a world in which policy debate and civic discourse are increasingly polarized.

http://www.rand.org/pubs/corporate_pubs/CP652.html

CP-659

Proposed Directions of Change to the Common Rule for Protecting Human Research Participants: RAND Responses. Tora K. Bikson, Susan Adler, Sandra H. Berry, Rebecca L. Collins, Christopher R. Corey, Michael D. Greenberg, Patrick P. Gunn, Brian A. Jackson, Scott Joiner, Susan G. Straus. 2011

In July 2011, an Advance Notice of Proposed Rulemaking (ANPRM) was published in the Federal Register titled "Human Subjects Research

Protections: Enhancing Protections for Research Subjects and Reducing Burden, Delay, and Ambiguity for Investigators." The notice proposes several directions of change in the Common Rule that regulates Institutional Review Board (IRB) protection of human research participants. Members of RAND's Human Subjects Protection Committee, which serves as its IRB, prepared comments responding to the ANPRM and sent them to the Federal Register on October 25, 2011. This document contains that response. Because a large percentage of comments are likely to come from institutions heavily oriented toward clinical-biomedical research, RAND's purpose in publishing its response is to help ensure that the social-behavioral science implications of the proposed changes are also taken into consideration.

http://www.rand.org/pubs/corporate_pubs/CP659.html

TESTIMONY

CT-354

Anti-Access Measures in Chinese Defense Strategy. Roger Cliff. 2011

Testimony presented before the U.S. China Economic and Security Review Commission on January 27, 2011.

http://www.rand.org/pubs/testimonies/CT354.html

CT-355

Chinese Use of Cyberwar as an Anti-Access Strategy: Two Scenarios. Martin C. Libicki. 2011

Testimony presented before the U.S. China Economic and Security Review Commission on January 27, 2011.

http://www.rand.org/pubs/testimonies/CT355.html

CT-356

Joint Anti-Access Operations: China's “System-of-Systems” Approach. Cortez A. Cooper. 2011

Testimony presented before the U.S. China Economic and Security Review Commission on January 27, 2011.

http://www.rand.org/pubs/testimonies/CT356.html

CT-357

The J-20 Episode and Civil-Military Relations in China. Andrew Scobell. 2011

Written testimony submitted to the U.S. China Economic and Security Review Commission on March 10, 2011.

http://www.rand.org/pubs/testimonies/CT357.html

CT-358

The Muslim Brotherhood in the West: Characteristics, Aims and Policy Considerations. Lorenzo Vidino. 2011

Testimony presented before the House Permanent Select Committee on Intelligence, subcommittee on Terrorism, HUMINT, Analysis, and Counterintelligence on April 13, 2011.

http://www.rand.org/pubs/testimonies/CT358.html

CT-359

The Al Qa'ida Threat in Pakistan. Seth G. Jones. 2011

Testimony presented before the House Homeland Security Committee, Subcommittee on Counterterrorism and Intelligence on May 3, 2011.

http://www.rand.org/pubs/testimonies/CT359.html

CT-360

Opportunities for Alternative Fuels Production. James T. Bartis. 2011

Testimony presented before the House Energy and Commerce Committee, Subcommittee on Energy and Power on May 5, 2011.

http://www.rand.org/pubs/testimonies/CT360.html

CT-361

Transitioning to Afghan-Led Counterinsurgency. Seth G. Jones. 2011

Testimony presented before the Senate Foreign Relations Committee on May 10, 2011.
http://www.rand.org/pubs/testimonies/CT361.html

CT-362

The Future of Al Qa'ida. Seth G. Jones. 2011

Testimony presented before the House Foreign Affairs Committee, Subcommittee on Terrorism, Nonproliferation and Trade on May 24, 2011.
http://www.rand.org/pubs/testimonies/CT362.html

CT-363

Alternative Fuel Provisions in HR 909: The Roadmap for America's Energy Future. James T. Bartis. 2011

Testimony presented before the House Energy and Commerce Committee, Subcommittee on Energy and Power on June 3, 2011.
http://www.rand.org/pubs/testimonies/CT363.html

CT-364

Testimony on S. 937 The American Alternative Fuels Act of 2011. James T. Bartis. 2011

Testimony presented before the Senate Energy and Natural Resources Committee on June 7, 2011.
http://www.rand.org/pubs/testimonies/CT364.html

CT-364/1

Testimony on S. 937 The American Alternative Fuels Act of 2011: Addendum. James T. Bartis. 2011

Document submitted on June 29, 2011 as an addendum to testimony presented before the Senate Energy and Natural Resources Committee on June 7, 2011.
http://www.rand.org/pubs/testimonies/CT364z1.html

CT-365

Al Qaeda After Bin Laden: Implications for American Strategy. Brian Michael Jenkins. 2011

Testimony presented before the House Armed Services Committee, Subcommittee on Emerging Threats and Capabilities on June 22, 2011.
http://www.rand.org/pubs/testimonies/CT365.html

CT-365/1

Al Qaeda After Bin Laden: Implications for American Strategy: Addendum. Brian Michael Jenkins. 2011

Document submitted on November 1, 2011 as an addendum to testimony presented before the House Armed Services Committee, Subcommittee on Emerging Threats and Capabilities, on June 22, 2011.
http://www.rand.org/pubs/testimonies/CT365z1.html

CT-366

Getting Better at Strategic Communication. Christopher Paul. 2011

Testimony presented before the House Armed Services Committee, Subcommittee on Emerging Threats and Capabilities on July 12, 2011.
http://www.rand.org/pubs/testimonies/CT366.html

CT-367

Insights from Early RAND Research on Deployment: Effects on U.S. Service Members and Their

Families. James Hosek. 2011

Testimony presented before the Senate Veterans' Affairs Committee on July 27, 2011.
http://www.rand.org/pubs/testimonies/CT367.html

CT-369

Iran's Human Rights Abuses. Alireza Nader. 2011

Testimony presented before the House Foreign Affairs Committee, Subcommittee on The Middle East and South Asia on September 22, 2011.
http://www.rand.org/pubs/testimonies/CT369.html

CT-370

Suicide Prevention Efforts and Behavioral Health Treatment in the Veterans Health Administration. Katherine E. Watkins. 2011

Testimony presented before the House Veterans' Affairs Committee, Subcommittee on Health on December 2, 2011.
http://www.rand.org/pubs/testimonies/CT370.html

CT-371

Is Al Qaeda's Internet Strategy Working?. Brian Michael Jenkins. 2011

Testimony presented before the House Homeland Security Committee, Subcommittee on Counterterrorism and Intelligence on December 6, 2011.
http://www.rand.org/pubs/testimonies/CT371.html

DOCUMENTED BRIEFINGS

DB-512-USMC

Targets for Marine Corps Purchasing and Supply Management Initiatives: Spend Analysis Findings. Nancy Y. Moore, Clifford A. Grammich, Mary E. Chenoweth, Judith D. Mele. 2011

There are several purchasing and supply management initiatives the U.S. Marine Corps (USMC) can take, or, indeed, has already taken, to improve performance and reduce costs. Data on both direct and indirect purchases indicate corporate contracts grouping several individual sole-source contracts may allow the Marine Corps to leverage its purchasing power for more favorable terms and conditions. The Marine Corps also may wish to partner with other Department of Defense (DoD) agencies in efforts to leverage DoD-wide purchases. Moore et al. provide a first review of how USMC purchases with leading suppliers compares with those of other DoD purchasers and discuss who should provide leadership, by supplier and commodity.
http://www.rand.org/pubs/documented_briefings/DB512.html

DB-602-RE

Assessing the illegal trade in cultural property from a public policy perspective. Siobhan Ni Chonaill, Anais Reding, Lorenzo Valeri. 2011

The aim of this research is to explore new ways of curtailing the illegal trade in culturalproperty. Despite a range of legislative and policy interventions, the trade in illicit art andantiquities continues to flourish, resulting in damage to the arts, scholarship and heritage.Through an exploration of existing intervention tools, two case studies and a set of keyinformant interviews, this study demonstrates the existing difficulties in curtailing themarket in cultural property and explores the potential for new policy interventions. Morespecifically, we map the supply chain for the illegal trade in cultural property and explorethe failures of current policy interventions through two case studies, the Medici tradingcartel and the Beit collection robberies. We conclude with a number of research and policy conclusions.
http://www.rand.org/pubs/documented_briefings/DB602/

DB-605-AF

Assessing the U.S. Air Force Unified Engagement Building Partnerships Seminars. Jennifer D. P. Moroney, Jeffrey Engstrom. 2011

The U.S. Air Force's Building Partnerships Seminars support Unified Engagement, a biannual war game. During these seminars, countries that do not formally participate in the larger wargame engage in tabletop exercises, providing inputs for supporting exercise scenarios. RAND assessed two of these seminars to identify ways to enhance the program. The recommendations that emerged were a need for authoritative documentation, such as an Air Force instruction; measurable objectives for each seminar to aid assessment; identification and involvement of other potential stakeholders at the outset of planning; development of after-action reports; and follow-up mechanisms, such as post-event interviews and participant surveys. This briefing also demonstrates the use of RAND's security cooperation assessment framework.

http://www.rand.org/pubs/documented_briefings/DB605.html

DB-613-DH

Complex trauma research in the UK: A rapid review of the funding landscape. Molly Morgan Jones, Jonathan Grant. 2011

At the request of the English Department of Health, a rapid review of research funding in the field of complex trauma in the UK is needed. The information gathered will feed into ongoing strategic discussions between DH and the Ministry of Defence (MoD). RAND Europe will map the research landscape in the UK, with a focus on areas of excellence and the nature of funding (public and private), conduct a series of interviews with leading experts, and undertake a strategic assessment of the wider state of research in this area. A brief assessment of the international landscape will also be provided to assist in the identification of gaps and overlaps. The report draws several conclusions, the most notable of which is that complex trauma research is arguably a 'niche' and 'orphan' area of research in the UK with approximately £15m of funding per annum. The UK lacks capacity and capability in several areas of complex trauma research, though individual research fields sectors within complex trauma (i.e. regenerative medicine or orthopaedic research) are strong. Complex trauma research in the UK could benefit from better integration between military and civilian sectors to maximise synergies and research strengths in each.

http://www.rand.org/pubs/documented_briefings/DB613/

DB-616-RE

Health Innovation Transfer from South to North. Caroline Viola Fry, Sonja Marjanovic, Ohid Yaqub, Joanna Chataway. 2011

This report presents findings from an exploratory study of health innovations being transferred from South to North. This was an independent project conducted over the summer of 2010. Normally, technology transfer refers to a process where developed countries forge ahead in technology development, while laggard countries adopt technologies in their wake. This briefing examines technologies explicitly developed for developing country settings, which then may have an application in the UK National Health Service (NHS). This allows for a revealing and unusual insight into technology transfer by examining the barriers and enablers to adoption in the UK NHS. Multiple methods were used including a literature review and case studies involving document reviews, key informant interviews and a survey. The study found several sets of factors that are key to adoption, many of them highly contextual. It concludes that further research is needed to understand how generalised these findings can be, and to ascertain whether a 'reverse innovation' trend is emerging.The briefing will be of interest to policymakers who are finding that their concerns are beginning to overlap with those of developing countries (such as sensitivity to cost). The briefing also will be of interest to researchers wishing to understand the development and adoption of new technologies.

http://www.rand.org/pubs/documented_briefings/DB616.html

DB-619-A

Using Field Data to Improve Authorized Stockage List Push Packages. Marygail K. Brauner, Arthur Lackey, John Halliday. 2011

The study was motivated by performance concerns. Readiness problems associated with newly fielded systems are relevant to both combat effectiveness and public perception. When new equipment comes into the Army, it is often fielded on a unit-by-unit basis. This is true whether fielding an entirely new weapon system like the M777 light-weight howitzer or an upgrade of a weapon system such as the CROWS (Common Remotely Operated Weapon Station). So the “initial” fielding can take many years. Prior to the initial fielding, the program manager works with the vendor to develop initial parts lists for sustainment—commonly called push packages. Although new equipment fielding typically occurs over time, empirical demand data from the earliest fielding are not systematically used to update the push package. This report demonstrates the feasibility of using demands from earlier fieldings to improve push packages as equipment is fielded to successive units.

http://www.rand.org/pubs/documented_briefings/DB619.html

DB-631-MEGR

A rapid review of the Greek research and development system. Jonathan Grant, Tom Ling, Dimitris Potoglou, Deirdre May Culley. 2011

The Ministry of Education, Lifelong Learning and Religious Affairs commissioned RAND Europe to undertake a rapid review of the Greek research and development (R&D) system. This report was commissioned to identify the scope for reform and improvement within the Greek R&D system. This review is based on a SWOT analysis of the strengths, weaknesses, opportunities and threats relating to the Greek research system. The analysis was informed by expert interviews, workshops with the Research Centres' leadership, document and literature review, review of external evaluations undertaken in 2005, desk-based research and a bibliometric analysis. Based on our analysis we make two key observations: (1) The Greek R&D system is in need of reform, which should begin in the near future. The SWOT analysis identified a number of shortcomings in the current system that need to be addressed. A clear message coming from our workshops is that ⊠doing nothing is not an option'. There is a widely held view that the threats to the system are significant and imminent. (2) A tangible and realistic reform agenda can be formulated. Based on the SWOT analysis, we outline a blueprint for a future strategy for the R&D system, including a set of underlying principles and seven ⊠ideas' to be considered in putting together an agenda for reform.

http://www.rand.org/pubs/documented_briefings/DB631.html

DB-632-A

Strategic Distribution Platform Support of CONUS Army Units. Marc Robbins. 2011

Home station units depend upon a reliable distribution system to deliver the supplies they need to train and prepare for possible deployments. With forces returning home from Iraq, and with a drawdown anticipated to begin in Afghanistan after July 2011, along with repositioning of forces in Europe and Korea to the continental United States (CONUS), support to Army forces in CONUS will be of increasing concern. The Department of Defense—and the Army—will be under increasing pressure to do more with less and will require a distribution system that helps maintain readiness and supports training goals with timely delivery of needed supplies, and does so at the lowest cost possible. A critical part of that support will come from scheduled truck service from the Strategic Distribution Platforms (SDPs) that dominate the volumes going to Army units. Although this system is relatively strong, there are ways it can be made more robust and comprehensive by adding new units and posts to the truck network and taking other steps to reduce “leakage” from the truck network.

http://www.rand.org/pubs/documented_briefings/DB632.html

EXTERNAL PUBLICATIONS

EP-201000-178

Food Prices and the Dynamics of Body Weight. Dana P. Goldman, Darius N. Lakdawalla, Yuhui Zheng. 2011

A popular policy option for addressing the growth in weight has been the imposition of a fat tax on selected foods that are deemed to promote obesity. Understanding the public economics of fat taxes requires an understanding of how or even whether individuals respond to changes in food prices over the long-term. The authors study the short- and long-run body weight consequences of changing food prices, in the Health and Retirement Study (HRS). The authors found very modest short-term effects of price per calorie on body weight, and the magnitudes align with the previous literature. The long-term effect is much bigger, but it takes a long time for the effect to reach the full scale. Within 30 years, a 10% permanent reduction in price per calorie would lead to a BMI increase of 1.5 units (or 3.6%). The long term effect is an increase of 1.9 units of BMI (or 4.2%). From a policy perspective, these results suggest that policies raising the price of calories will have little effect on weight in the short term, but might curb the rate of weight growth and achieve weight reduction over a very long period of time.

http://www.rand.org/pubs/external_publications/EP201000178.html

EP-20110-193

Small Firms' Actions in Two Areas, and Exchange Premium and Enrollment Impact. Christine Eibner, Carter C. Price, Raffaele Vardavas, Amado Cordova, Federico Girosi. 2011

The Affordable Care Act changed the regulations governing small firms' health insurance premiums. However, small businesses can avoid many of the new regulations by self-insuring or maintaining grandfathered plans. If small firms with healthy and lower-cost enrollees avoid the regulations, premiums for coverage sold through insurance exchanges could be unaffordable. In this analysis we used the RAND Comprehensive Assessment of Reform Efforts microsimulation model to predict the effects of self-insurance and grandfathering exemptions on coverage and premiums available through the exchanges. We estimate that Affordable Care Act regulations restricting employers' ability to offer grandfathered plans will result in lower premiums on plans available through the exchanges and will have small negative effects on enrollment in the exchanges. Our results suggest that these regulations are essential to keeping premiums on the Small Business Health Options Program (SHOP) exchanges affordable. Our analysis also found that Affordable Care Act regulations limiting self-insurance will reduce enrollment in the exchanges somewhat, without substantially affecting exchange premiums.

http://www.rand.org/pubs/external_publications/EP20110193.html

EP-20110-193

Small Firms' Actions in Two Areas, and Exchange Premium and Enrollment Impact. Christine Eibner, Carter C. Price, Raffaele Vardavas, Amado Cordova, Federico Girosi. 2011

The Affordable Care Act changed the regulations governing small firms' health insurance premiums. However, small businesses can avoid many of the new regulations by self-insuring or maintaining grandfathered plans. If small firms with healthy and lower-cost enrollees avoid the regulations, premiums for coverage sold through insurance exchanges could be unaffordable. In this analysis we used the RAND Comprehensive Assessment of Reform Efforts microsimulation model to predict the effects of self-insurance and grandfathering exemptions on coverage and premiums available through the exchanges. We estimate that Affordable Care Act regulations restricting employers' ability to offer grandfathered plans will result in lower premiums on plans available through the exchanges and will have small negative effects on enrollment in the exchanges. Our results suggest that these regulations are essential to keeping premiums on the Small Busi-

ness Health Options Program (SHOP) exchanges affordable. Our analysis also found that Affordable Care Act regulations limiting self-insurance will reduce enrollment in the exchanges somewhat, without substantially affecting exchange premiums.

http://www.rand.org/pubs/external_publications/EP20110193.html

EP-201100-01

Evidentiary Validation of FM 3-24: Counterinsurgency Worldwide, 1978-2008. Christopher Paul, Colin P. Clarke. 2011

Discusses the demonstrated efficacy of the COIN principles embodied in FM 3-24, historical evicence and data collected from 30 case studies for recent resolved insurgencies. The vast majority of governments and COIN forces that adhered to multiple tenets of the field manual prevailed over the insurgencies they opposed.

http://www.rand.org/pubs/external_publications/EP20110001.html

EP-201100-02

Comparative Effectiveness of Ductal Carcinoma in Situ Management and the Roles of Margins and Surgeons. Andrew W. Dick, Melony E. Sorbero, Gretchen Ahrendt, Azadeh T. Stark. 2011

BACKGROUND: The high incidence of ductal carcinoma in situ (DCIS) and variations in its treatment motivate inquiry into the comparative effectiveness of treatment options. Few such comparative effectiveness studies of DCIS, however, have been performed with detailed information on clinical and treatment attributes. METHODS: We collected detailed clinical, nonclinical, pathological, treatment, and long-term outcomes data from multiple medical records of 994 women who were diagnosed with DCIS from 1985 through 2000 in Monroe County (New York) and the Henry Ford Health System (Detroit, MI). We used ipsilateral disease-free survival models to characterize the role of treatments (surgery and radiation therapy) and margin status (positive, close [<2 mm], or negative [>2 mm]) and logistic regression models to characterize the determinants of treatments and margin status, including the role of surgeons. All statistical tests were two-sided. RESULTS: Treatments and margin status were statistically significant and strong predictors of long-term disease-free survival, but results varied substantially by surgeon. This variation by surgeon accounted for 15%-35% of subsequent ipsilateral 5-year recurrence rates and for 13%-30% of 10-year recurrence rates. The overall differences in predicted 5-year disease-free survival rates for mastectomy (0.993), breast-conserving surgery with radiation therapy (0.945), and breast-conserving surgery without radiation therapy (0.824) were statistically significant (Pdiff < .001 for each of the differences). Similarly, each of the differences at 10 years was statistically significant (P < .001). CONCLUSIONS: Our work demonstrates the contributions of treatments and margin status to long-term ipsilateral disease-free survival and the link between surgeons and these key measures of care. Although variation by surgeon could be generated by patients' preferences, the extent of variation and its contribution to long-term health outcomes are troubling. Further work is required to determine why women with positive margins receive no additional treatment and why margin status and receipt of radiation therapy vary by surgeon.

http://www.rand.org/pubs/external_publications/EP20110002.html

EP-201100-03

Developing Medical Record-Based Performance Indicators to Measure the Quality of Mental Healthcare. Katherine E. Watkins, Marcela Horvitz-Lennon, Leah B. Caldarone, Lisa R. Shugarman, Brad Smith, Thomas E. Mannle, Jr.. 2011

Recent attention has focused on validity and feasibility of different approaches to developing performance indicators for the purposes of quality improvement and value-based purchasing. This paper presents the methodology used to develop a comprehensive set of performance indicators that will be used for a national evaluation of the mental healthcare provided by the Veterans Health Administration. The paper report on the

indicators' technical specifications and the United States Public Health System Task Force defined strength of supporting evidence. Indicators were reviewed iteratively for meaningfulness, utility, feasibility, and supporting evidence until a final set of measures of acceptable validity and feasibility was produced with technical specifications. Fifty-seven mental health performance indicators that use information from both the medical record and administrative data (hybrid indicators) and 31 administrative-data only indicators are presented. Of the 57 hybrid indicators, 13 indicators are supported by Agency for Healthcare Research and Quality grade I evidence, 5 indicators are grade II, and 39 indicators are grade III. This paper describes the methodology used to develop 88 performance indicators of the quality of mental health and substance abuse treatment, and presents the technical specifications associated with each indicator.

http://www.rand.org/pubs/external_publications/EP20110003.html

EP-201100-04

Is Choice of Physician and Hospital an Essential Benefit. Robert H. Brook. 2011

The Patient Protection and Affordable Care Act1 requires that the federal government define an essential benefit package for those individuals who will obtain insurance through the new health insurance exchanges. The Secretary of the Department of Health and Human Services has asked the Institute of Medicine to assist in this activity. But how should an essential benefit be designed in an era when health care is far more expensive, the number of tests and procedures is significantly greater, and evidence-based medicine is the slogan of the day?

http://www.rand.org/pubs/external_publications/EP20110004.html

EP-201100-05

The Association Between Perceptions of Social Support and Maternal Mental Health: A Cumulative Perspective. Sarah O. Meadows. 2011

The question of how to best measure family processes so that longitudinal experiences within the family are accurately captured has become an important issue for family scholars. Using the Fragile Families and Child Wellbeing Study (N = 2,158), this article focuses on the association between trajectories of perceived supportiveness from biological fathers and mothers' mental health problems 5 years after a birth. The relationship status between mothers and biological fathers is significantly related to her perceptions of his supportiveness, with married mothers reporting the highest levels of supportiveness followed by mothers in cohabiting unions, romantic non-coresidential unions, and, finally, mothers not in a romantic relationship. Controlling for both time-varying and time-invariant maternal and relationship characteristics, a positive slope of perceived supportiveness from biological fathers is associated with fewer subsequent mental health problems 5 years after the birth. The discussion calls attention to alternate modeling strategies for longitudinal family experiences.

http://www.rand.org/pubs/external_publications/EP20110005.html

EP-201100-06

Neighborhood Archetypes for Population Health Research: Is There No Place Like Home?. Margaret M. Weden, Chloe E. Bird, Jose J. Escarce, Nicole Lurie. 2011

This study presents a new, latent archetype approach for studying place in population health. Latent class analysis is used to show how the number, defining attributes, and change/stability of neighborhood archetypes can be characterized and tested for statistical significance. The approach is demonstrated using data on contextual determinants of health for US neighborhoods defined by census tracts in 1990 and 2000. Six archetypes (prevalence 13-20%) characterize the statistically significant combinations of contextual determinants of health from the social environment, built environment, commuting and migration patterns, and demographics and household composition of US neighborhoods. Longitudinal analyses based on the findings demonstrate notable stability (76.4% of neighborhoods catego-

rized as the same archetype ten years later), with exceptions reflecting trends in (ex) urbanization, gentrification/downgrading, and racial/ethnic reconfiguration. The findings and approach is applicable to both research and practice (e.g. surveillance) and can be scaled up or down to study health and place in other geographical contexts or historical periods.

http://www.rand.org/pubs/external_publications/EP20110006.html

EP-201100-07

Victory Has a Thousand Fathers: Evidence of Effective Approaches to Counterinsurgency, 1978-2008. Christopher Paul, Colin P. Clarke, Beth Grill. 2011

Contemporary discourse on counterinsurgency is voluminous and often contentious, but to date there has been a dearth of systematic evidence supporting the various counterinsurgency (COIN) approaches advocated by various discussants. This analysis is based on all insurgencies worldwide begun and concluded between 1978 and 2008; 30 insurgencies in total. Among other things, the analysis offers strong support for 13 commonly offered approaches to COIN, and strong evidence against three. Further, the data show that good COIN practices tend to "run in packs" and that the balance of selected good and bad practices perfectly predicts insurgency outcomes. Data confirm the importance of popular support, but show that the ability to interdict tangible support (such as new personnel, materiel, and financing) is the single best predictor of COIN force success.

http://www.rand.org/pubs/external_publications/EP20110007.html

EP-201100-08

Aftershocks: The Impact of Clinic Violence on Abortion Services. Mireille Jacobson. 2011

Between 1973 and 2003, abortion providers in the United States were the targets of over 300 acts of extreme violence. Using unique data on attacks and on abortions, abortion providers, and births, we examine how anti-abortion violence has affected providers' decisions to perform abortions and women's decisions about whether and where to terminate a pregnancy. We find that clinic violence reduces abortion services in targeted areas. Once travel is taken into account, however, the overall effect of the violence is much smaller.

http://www.rand.org/pubs/external_publications/EP20110008.html

EP-201100-09

Prevalence and Correlates of Sexual Dysfunction Among Women with Bladder Pain Syndrome/interstitial Cystitis. Laura M. Bogart, Marika Suttorp, Marc N. Elliott, Sandra H. Berry. 2011

OBJECTIVES: To examine the prevalence and correlates of general and bladder pain syndrome/interstitial cystitis (BPS/IC)-specific sexual dysfunction among women in the RAND Interstitial Cystitis Epidemiology study using a probability sample survey of U.S. households. Sexual dysfunction can contribute to a reduced quality of life for women with bladder pain syndrome/interstitial cystitis (BPS/IC). METHODS: We telephoned 146 231 households to identify women who reported bladder symptoms or a BPS/IC diagnosis. Those who reported either underwent a second-stage screening using the RAND Interstitial Cystitis Epidemiology study high-specificity symptom criteria. The criteria were pain, pressure, or discomfort in pelvic area; daytime urinary frequency >10 times or urgency due to pain, pressure, or discomfort (not fear of wetting); pain that worsened as the bladder filled; bladder symptoms did not resolve after antibiotic treatment; and patients never treated with hormone injections for endometriosis. Women who met the RAND Interstitial Cystitis Epidemiology criteria (n = 1469) completed measures of BPS/IC-specific and general sexual dysfunction symptoms, bladder symptom severity, general physical health, depression, medical care-seeking, and sociodemographic characteristics. RESULTS: Of those with a current sexual partner (75%), 88% reported >1 general sexual dysfunction symptom and 90% reported >1 BPS/IC-specific sexual dysfunction symptom in the past 4 weeks. In the multivariate models, BPS/IC-specific sexual dysfunction was significantly associated with more severe BPS/IC symptoms, younger age, worse depression symptoms, and

worse perceived general health. Multivariate correlates of general sexual dysfunction included non-Latino race/ethnicity, being married, and having depression symptoms. CONCLUSIONS: The results of our study have shown that women with BPS/IC symptoms experience very high levels of sexual dysfunction. Also, sexual dysfunction covaries with symptoms.

http://www.rand.org/pubs/external_publications/EP20110009.html

EP-201100-10

Economic Analysis of Physical Activity Interventions. Shin-Yi Wu, Deborah Cohen, Yuyan Shi, Marjorie L. Pearson, Roland Sturm. 2011

BACKGROUND: Numerous interventions have been shown to increase physical activity but have not been ranked by effectiveness or cost. PURPOSE: This study provides a systematic review of physical activity interventions and calculates their cost-effectiveness ratios. METHODS: A systematic literature review was conducted (5579 articles) and 91 effective interventions promoting physical activity were identified, with enough information to translate effects into MET-hours gained. Cost-effectiveness ratios were then calculated as cost per MET-hour gained per day per individual reached. Physical activity benefits were compared to U.S. guideline-recommended levels (1.5 MET-hours per day for adults and 3.0 MET-hours per day for children, equivalent to walking 30 and 60 minutes, respectively). RESULTS: The most cost-effective strategies were for point-of-decision prompts (e.g., signs to prompt stair use), with a median cost of $0.07/MET-hour/day/person; these strategies had tiny effects, adding only 0.2% of minimum recommended physical activity levels. School-based physical activity interventions targeting children and adolescents ranked well with a median of $0.42/MET-hour/day/person, generating an average of 16% of recommended physical activity. Although there were few interventions in the categories of "creation or enhanced access to places for physical activity" and "community campaigns," several were cost effective. The least cost-effective categories were the high-intensity "individually adapted behavior change" and "social support" programs, with median cost-effectiveness ratios of $0.84 and $1.16 per MET-hour/day/person. However, they also had the largest effect sizes, adding 35%-43% of recommended physical activity, respectively. Study quality was variable, with many relying on self-reported outcomes. CONCLUSIONS: The cost effectiveness, effect size, and study quality should all be considered when choosing physical activity interventions.

http://www.rand.org/pubs/external_publications/EP20110010.html

EP-201100-100

Advancing the Science of Patient Safety. Paul G. Shekelle, Peter J. Pronovost, Stephanie Taylor, Sydney Dy, Robbie Foy, Susanne Hempel, John Ovretveit, Lisa V. Rubenstein, David W. Bates, Naihua Duan, Donna O. Farley, Kathleen N. Lohr, Gery W. Ryan, Stephen M. Shortell. 2011

Despite a decade's worth of effort, patient safety has improved slowly, in part because of the limited evidence base for the development and widespread dissemination of successful patient safety practices. The Agency for Healthcare Research and Quality sponsored an international group of experts in patient safety and evaluation methods to develop criteria to improve the design, evaluation, and reporting of practice research in patient safety. This article reports the findings and recommendations of this group, which include greater use of theory and logic models, more detailed descriptions of interventions and their implementation, enhanced explanation of desired and unintended outcomes, and better description and measurement of context and of how context influences interventions. Using these criteria and measuring and reporting contexts will improve the science of patient safety.

http://www.rand.org/pubs/external_publications/EP201100100.html

EP-201100-101

The Role of the Self in Smoking Initiation and Smoking Cessation: A Review and Blueprint for

Research at the Intersection of Social-Cognition and Health. William G. Shadel, Daniel Cervone. 2011

The self-concept is recognized as important to both smoking initiation and cessation. However, most of the extant research has viewed the self-concept as a static, monolithic construct. It has not drawn on contemporary social-cognitive theories of the self-concept, which view the self-concept as a dynamic, multi-faceted cognitive structure that regulates behavior in context. This paper discusses a contemporary social cognitive framework that can be used to understand the role of the self-concept in smoking.

http://www.rand.org/pubs/external_publications/EP201100101.html

EP-201100-102

The Group Matters: A Review of Processes and Outcomes in Intelligence Analysis. Susan G. Straus, Andrew M. Parker, James B. Bruce. 2011

The work of intelligence analysts is fundamentally cognitive in nature. Intelligence analysis consists largely of identifying problems, generating and evaluating hypotheses, identifying and assessing open source and classified information, recognizing patterns in large sets of data, aggregating information, and providing results in the form of judgments, forecasts, and insights to policymakers. These activities are often conducted by individuals; however, intelligence agencies and experts have called increasingly for the use of teams in intelligence analysis. This article reviews the research literature on group-level phenomena (that is, process losses) that are most relevant to the work of intelligence analysts, including productivity losses in brainstorming, the common knowledge effect, group polarization, confirmation bias, overconfidence, and pressures toward uniformity. We describe how features of intelligence analysis teams' tasks, context, and structure affect these processes, present methods to minimize these process losses and increase process gains, and discuss directions for future research. Although our focus is on intelligence analysis teams, these processes and interventions are relevant to a range of analytical teams that share common characteristics.

http://www.rand.org/pubs/external_publications/EP201100102.html

EP-201100-103

Can Health Care Information Technology Save Babies?. Amalia R. Miller. 2011

Electronic medical records (EMRs) facilitate fast and accurate access to patient records, which could improve diagnosis and patient monitoring. Using a 12-year county-level panel, we find that a 10 percent increase in births that occur in hospitals with EMRs reduces neonatal mortality by 16 deaths per 100,000 live births. This is driven by a reduction of deaths from conditions requiring careful monitoring. We also find a strong decrease in mortality when we instrument for EMR adoption using variation in state medical privacy laws. Rough cost effectiveness calculations suggest that EMRs are associated with a cost of $531,000 per baby's life saved.

http://www.rand.org/pubs/external_publications/EP201100103.html

EP-201100-104

Encryption and the Loss of Patient Data. Amalia R. Miller. 2011

Fast-paced IT advances have made it increasingly possible and useful for firms to collect data on their customers on an unprecedented scale. One downside of this is that firms can experience negative publicity and financial damage if their data are breached. This is particularly the case in the medical sector, where we find empirical evidence that increased digitization of patient data is associated with more data breaches. The encryption of customer data is often presented as a potential solution, because encryption acts as a disincentive for potential malicious hackers, and can minimize the risk of breached data being put to malicious use. However, encryption both requires careful data management policies to be successful and does not ward off the insider threat. Indeed, we find no empirical evidence of a decrease in publicized instances of data loss associated with the use of

encryption. Instead, there are actually increases in the cases of publicized data loss due to internal fraud or loss of computer equipment.

http://www.rand.org/pubs/external_publications/EP201100104.html

EP-201100-105

Contact and Communication with Healthcare Providers Regarding Influenza Vaccination During the 2009-2010 H1N1 Pandemic. Katherine M. Harris. 2011

OBJECTIVE: The existence of two vaccines - seasonal and pandemic - created the potential for confusion and misinformation among consumers during the 2009-2010 vaccination season. We measured the frequency and nature of influenza vaccination communication between healthcare providers and adults for both seasonal and 2009 influenza A(H1N1) vaccination and quantified its association with uptake of the two vaccines. METHODS: We analyzed data from 4,040 U.S. adult members of a nationally representative online panel surveyed between March 4th and March 24th, 2010. We estimated prevalence rates and adjusted associations between vaccine uptake and vaccination-related communication between patients and healthcare providers using bivariate probit models. RESULTS: 64.1% (95%-CI: 61.5%-66.6%) of adults did not receive any provider-issued influenza vaccination recommendation. Adults who received a provider-issued vaccination recommendation were 14.1 (95%-CI: -2.4-30.6) to 32.1 (95%-CI: 24.3-39.8) percentage points more likely to be vaccinated for influenza than adults without a provider recommendation, after adjusting for other characteristics associated with vaccination. CONCLUSIONS: Influenza vaccination communication between healthcare providers and adults was relatively uncommon during the 2009-2010 pandemic. Increased communication could significantly enhance influenza vaccination rates.

http://www.rand.org/pubs/external_publications/EP201100105.html

EP-201100-106

A Framework for Classifying Patient Safety Practices: Results from an Expert Consensus Process. Sydney Dy, Stephanie Taylor, Robbie Foy, Peter J. Pronovost, John Ovretveit, Lisa V. Rubenstein, Susanne Hempel, Paul G. Shekelle. 2011

OBJECTIVE: Development of a coherent literature evaluating patient safety practices has been hampered by the lack of an underlying conceptual framework. The authors describe issues and choices in describing and classifying diverse patient safety practices (PSPs). METHODS: The authors developed a framework to classify PSPs by identifying and synthesising existing conceptual frameworks, evaluating the draft framework by asking a group of experts to use it to classify a diverse set of PSPs and revising the framework through an expert-panel consensus process. RESULTS: The 11 classification dimensions in the framework include: regulatory versus voluntary; setting; feasibility; individual activity versus organisational change; temporal (one-time vs repeated/long-term); pervasive versus targeted; common versus rare events; PSP maturity; degree of controversy/conflicting evidence; degree of behavioural change required for implementation; and sensitivity to context. CONCLUSION: This framework offers a way to classify and compare PSPs, and thereby to interpret the patient-safety literature. Further research is needed to develop understanding of these dimensions, how they evolve as the patient safety field matures, and their relative utilities in describing, evaluating and implementing PSPs.

http://www.rand.org/pubs/external_publications/EP201100106.html

EP-201100-107

Invisible Wounds, Visible Savings? Using Microsimulation to Estimate the Costs and Savings Associated with Providing Evidence-Based Treatment for PTSD and Depression to Veterans of Operation Enduring Freedom and Operation Iraqi Freedom. Beau Kilmer, Christine Eibner, Jeanne S. Ringel. 2011

This research used microsimulation modeling to

estimate the social costs of depression and post-traumatic stress disorder (PTSD) for the 261,827 troops deployed on June 30, 2008, for Operations Enduring Freedom and Iraqi Freedom. Given current standards of care, roughly half of these individuals will be treated for these conditions in the 2 years after they return, and 30% of those treated will receive evidence-based treatment (EBT). Our results suggest that the 2-year social costs of depression and PTSD for this cohort will be $923 million. Policy simulations evaluating the savings associated with universal access to EBT suggest that such access would generate cost savings of $138 million (15%).

http://www.rand.org/pubs/external_publications/EP201100107.html

EP-201100-108

Lapse-induced Surges in Craving Influence Relapse in Adult Smokers: An Experimental Investigation. William G. Shadel, Steven Martino, Claude Messan Setodji, Daniel Cervone, Deborah M. Scharf, Regina A. Shih. 2011

OBJECTIVES: Nearly all smokers who lapse experience a full-blown relapse, but the mediating mechanisms that contribute to this relationship are not well understood. A better understanding of these mechanisms would help to advance more effective relapse prevention treatments for smokers. The purpose of this study is to experimentally evaluate the effects of a programmed smoking lapse on smoking relapse and the effects of post-lapse changes in craving on relapse. METHOD: Adult smokers (n = 63) who quit smoking with a brief cognitive–behavioral intervention and self-help materials were randomly assigned to one of two experimental conditions after 48 h of abstinence: No lapse (a no-smoking control/30-min waiting period) or lapse (smoking two cigarettes of their favored brand during a 30-min period). All participants were then followed daily for 14 days. Craving and biochemically verified self-reported abstinence were assessed on each follow-up day. Time (days) to relapse (7 consecutive days of smoking) was the main dependent measure. RESULTS: Results of Cox regression analysis revealed that participants in the lapse condition relapsed more quickly than participants in the no-lapse condition (hazard ratio [HR] = 2.12, 95% confidence interval [CI] = [1.03, 4.35]). These effects were attributable, in part, to episodic increases in craving among participants in the lapse condition only (HR = 12.42, 95% CI =[2.00, 77.1]). CONCLUSIONS: Previously abstinent smokers who lapse are at risk for increased cigarette cravings and consequently, full-blown relapse. These results have implications for both cognitive–behavioral treatments for relapse prevention and for medications designed to help smokers manage cravings.

http://www.rand.org/pubs/external_publications/EP201100108.html

EP-201100-109

Evaluation of the NCPDP Structured and Codified Sig Format for E-Prescriptions. Hangsheng Liu, Q Burkhart, Douglas S. Bell. 2011

OBJECTIVE: To evaluate the ability of the structure and code sets specified in the National Council for Prescription Drug Programs Structured and Codified Sig Format to represent ambulatory electronic prescriptions. DESIGN: We parsed the Sig strings from a sample of 20,161 de-identified ambulatory e-prescriptions into variables representing the fields of the Structured and Codified Sig Format. A stratified random sample of these representations was then reviewed by a group of experts. For codified Sig fields, we attempted to map the actual words used by prescribers to the equivalent terms in the designated terminology. MEASUREMENTS: Proportion of prescriptions that the Format could fully represent; proportion of terms used that could be mapped to the designated terminology. RESULTS: The fields defined in the Format could fully represent 95% of Sigs (95% CI 93% to 97%), but ambiguities were identified, particularly in representing multiple-step instructions. The terms used by prescribers could be codified for only 60% of dose delivery methods, 84% of dose forms, 82% of vehicles, 95% of routes, 70% of sites, 33% of administration timings, and 93% of indications. LIMITATIONS: The

findings are based on a retrospective sample of ambulatory prescriptions derived mostly from primary care physicians. CONCLUSION: The fields defined in the Format could represent most of the patient instructions in a large prescription sample, but prior to its mandatory adoption, further work is needed to ensure that potential ambiguities are addressed and that a complete set of terms is available for the codified fields.

http://www.rand.org/pubs/external_publications/EP201100109.html

EP-201100-11

High Prevalence of Wuchereria Bancrofti Infection as Detected By Immunochromatographic Card Testing in Five Districts of Orissa, India, Previously Considered to Be Non-Endemic. Alessandro Tarozzi, Aprajit Mahajan, Joanne K. Yoong, Brian Blackburn. 2011

India accounts for over one-third of the world's burden of lymphatic filariasis (LF). Although most coastal districts of Orissa state (eastern India) are LF-endemic, the western districts of Orissa are considered non-endemic. During a large-scale insecticide-treated bed net/microfinance trial, we tested one randomly selected adult (age 15-60 years) for LF from a random sample of microfinance-member households in five districts of western Orissa, using immunochromatographic card testing (ICT). Overall, 354 (adjusted prevalence 21%, 95%CI 17-25%) of 1563 persons were ICT positive, with district-wide prevalence rates ranging from 15-32%. This finding was not explained by immigration, as only 3% of subjects had ever lived in previously known LF-endemic districts. These results therefore suggest ongoing autochthonous transmission in districts where LF control programs are not operational. Our results highlight the importance of broad, systematic surveillance for LF in India and call for the implementation of LF control programs in our study districts.

http://www.rand.org/pubs/external_publications/EP20110011.html

EP-201100-110

Racial and Ethnic Service Use Disparities Among Homeless Adults with Severe Mental Illnesses Receiving ACT. Marcela Horvitz-Lennon, Sharon-Lise T. Normand, Margarita Alegria, Wesley K. Thompson. 2011

Objective: Case management-based interventions aimed at improving quality of care have the potential to narrow racial and ethnic disparities among people with chronic illnesses. The aim of this study was to assess the equity effects of assertive community treatment (ACT), an evidence-based case management intervention, among homeless adults with severe mental illness. Methods: This study used baseline, three-, and 12-month data for 6,829 black, Latino, and white adults who received ACT services through the ACCESS study (Access to Community Care and Effective Services and Support). Zero-inflated Poisson random regression models were used to estimate the adjusted probability of use of outpatient psychiatric services and, among service users, the intensity of use. Odds ratios and rate ratios (RRs) were computed to assess disparities at baseline and over time. Results: No disparities were found in probability of use at baseline or over time. Compared with white users, baseline intensity of use was lower for black users (RR=.89; 95% confidence interval [CI]=.83-.96) and Latino users (RR=.65; CI=.52-.81]). Intensity did not change over time for whites, but it did for black and Latino users. Intensity increased for blacks between baseline and three months (RR=1.11, CI=1.06-1.17]) and baseline and 12 months (RR=1.17, CI=1.11-1.22]). Intensity of use dropped for Latinos between baseline and three months (RR=.83, CI=.70-.98). Conclusions: Receipt of ACT was associated with a reduction in service use disparities for blacks but not for Latinos. Findings suggest that ACT's equity effects differ depending on race-ethnicity.

http://www.rand.org/pubs/external_publications/EP201100110.html

EP-201100-111

Training Addiction Counselors to Implement CBT for Depression. Kimberly A. Hepner, Sarah B. Hunter, Susan M. Paddock, Katherine E. Wat-

kins. 2011

Many clients in publicly funded substance abuse treatment programs suffer from depression yet lack access to effective mental health treatment. This study sought to examine whether addiction counselors could be effectively trained to deliver group CBT for depression and to ascertain client perceptions of the treatment. Five counselors were trained in the therapy and treated 113 clients with depression symptoms. Counselors demonstrated high fidelity to the therapy and client perceptions of the therapy were positive. Our results suggest that training addiction counselors to deliver group CBT for depression is a promising integrated treatment approach for co-occurring depression and substance disorders.

http://www.rand.org/pubs/external_publications/EP201100111.html

EP-201100-112

What Are You Prepared to Do? NATO and the Strategic Mismatch Between Ends, Ways, and Means in Afghanistan — and in the Future. David R. Johnson. 2011

This article examines ISAF (International Security Assistance Force) operations in Afghanistan as a way to get at the strategic disconnects in ends, ways, and means that the author believes are endemic to large-scale protracted stability and COIN (counterinsurgency) operations against adversaries who do not pose palpable existential threats to the members of an alliance. The article focuses mainly on the period that followed President Barack Obama's December 2009 announcement of a civilian and military "surge" in Afghanistan through the early stages of the ISAF offensive in Marjah, which began in February 2010. The article concludes that the fundamental strategic issue is that the Allies are not willing (or able) to devote enough resources to achieve their stated objectives. No matter how much the "Ways" might be improved, the "Means" are not sufficient to attain the "Ends." Thus, what is needed is a more realistic understanding of what ISAF can accomplish in Afghanistan and what NATO might be expected to accomplish in future operations.

http://www.rand.org/pubs/external_publications/EP201100112.html

EP-201100-113

Incorporating Uncertainty Analysis Into Life Cycle Estimates of Greenhouse Gas Emissions from Biomass Production. David R. Johnson, Henry H. Willis, Aimee E. Curtright, Constantine Samaras. 2011

Before further investments are made in utilizing biomass as a source of renewable energy, both policy makers and the energy industry need estimates of the net greenhouse gas (GHG) reductions expected from substituting biobased fuels for fossil fuels. Such GHG reductions depend greatly on how the biomass is cultivated, transported, processed, and converted into fuel or electricity. Any policy aiming to reduce GHGs with biomass-based energy must account for uncertainties in emissions at each stage of production, or else it risks yielding marginal reductions, if any, while potentially imposing great costs. This paper provides a framework for incorporating uncertainty analysis specifically into estimates of the life cycle GHG emissions from the production of biomass. We outline the sources of uncertainty, discuss the implications of uncertainty and variability on the limits of life cycle assessment (LCA) models, and provide a guide for practitioners to best practices in modeling these uncertainties. The suite of techniques described herein can be used to improve the understanding and the representation of the uncertainties associated with emissions estimates, thus enabling improved decision making with respect to the use of biomass for energy and fuel production.

http://www.rand.org/pubs/external_publications/EP201100113.html

EP-201100-114

Deterring the Smuggling of Nuclear Weapons in Container Freight Through Detection and Retaliation. Henry H. Willis. 2011

Concerns about terrorists smuggling nuclear bombs into the United States in container freight have led to demands for 100% inspection at ei-

ther U.S. or foreign ports. However, under some circumstances, it may be possible to deter nuclear smuggling attempts with less than 100% inspection. Based on publicly available data, we quantify a game-theoretic model of terrorist decision making to understand the role of nuclear detection technologies in deterring nuclear terrorism. The results suggest that unless the defender imposes high retaliation costs on the attacker, 100% inspection is likely to be needed, and deterrence with partial inspection may not be achievable in practice even though it is possible in theory. On the other hand, when the defender can credibly threaten the attacker with costly retaliation, partial inspection may be sufficient to deter nuclear smuggling attempts. Sensitivity analysis of these results indicates that these observations are robust to assumptions about specific parameters in the model. Thus, for policy debates about how to prevent nuclear terrorism, consideration of the diplomatic stance on retaliation is as important as, or maybe even more important than, debate about the optimal percentage of containers to inspect.

http://www.rand.org/pubs/external_publications/EP201100114.html

EP-201100-115

Mediators of Maternal Depression and Family Structure on Child BMI: Parenting Quality and Risk Factors for Child Overweight. Sylvie Mrug, Marc N. Elliott, Mark A. Schuster, Laura M. Bogart, Luisa Franzini, Frank A. Franklin. 2011

Risk factors for child obesity may be influenced by family environment, including maternal depression, family structure, and parenting quality. We tested a path model in which maternal depression and single parent status are associated with parenting quality, which relates to three risk factors for child obesity: diet, leisure, and sedentary behavior. Participants included 4,601 5th-grade children and their primary caregivers who participated in the Healthy Passages study. Results showed that associations of maternal depression and single parenthood with child BMI are mediated by parenting quality and its relation to children's leisure activity and sedentary behavior. Interventions for child obesity may be more successful if they target family environment, particularly parenting quality and its impact on children's active and sedentary behaviors.

http://www.rand.org/pubs/external_publications/EP201100115.html

EP-201100-116

Sex and Relationships on the Street: How Homeless Men Judge Partner Risk on Skid Row. Ryan Andrew Brown, David P. Kennedy, Joan S. Tucker, Suzanne L. Wenzel, Daniela Golinelli, Samuel Wertheimer, Gery W. Ryan. 2011

Homeless men in the U.S. represent a large and growing population, and have elevated rates of HIV/AIDS and sexual risk behaviors, including unprotected sex with women. We conducted qualitative interviews (n = 30) with homeless men using shelters and meal lines in downtown Los Angeles (Skid Row) to better understand how such men view the risks of sexual encounters with female partners. Men living on Skid Row perceived multiple risks, including HIV and unwanted pregnancy as well as emotional trauma, loss of resources, exacerbation of drug addiction, and physical attack. Respondents described using visual and behavioral cues, social reputation, geographical location, feelings of trust, perceived relationship seriousness, and medically inaccurate "folk" beliefs to judge whether partners were risky and/or condom use was warranted. Medically inaccurate beliefs suggest the potential utility of evidence-based interventions to change such beliefs. We also consider implications for relationships on the street and housing interventions.

http://www.rand.org/pubs/external_publications/EP201100116.html

EP-201100-117

An Effectiveness Trial of Group Cognitive Behavioral Therapy for Patients with Persistent Depressive Symptoms in Substance Abuse Treatment. Katherine E. Watkins, Sarah B. Hunter, Kimberly A. Hepner, Susan M. Paddock. 2011

CONTEXT: Although depression frequently co-occurs with substance abuse, few individuals en-

tering substance abuse treatment have access to effective depression treatment. OBJECTIVE: The Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT) study is a community-based effectiveness trial that compared residential substance abuse treatment with residential treatment plus group cognitive behavioral therapy for depression delivered by substance abuse treatment counselors. We hypothesized that intervention clients would have improved depression and substance use outcomes compared with those of clients receiving usual care. DESIGN: A nonrandomized controlled trial using a quasi-experimental intent-to-treat design in which 4 sites were assigned to alternate between the intervention and usual care conditions every 4 months for 2½ years. SETTING: Four treatment programs in Los Angeles County. PARTICIPANTS: We screened 1262 clients for persistent depressive symptoms (Beck Depression Inventory-II score >17). We assigned 299 clients to receive either usual care (n = 159) or usual care plus the intervention (n = 140). Follow-up rates at 3 and 6 months after the baseline interview were 88.1% and 86.2%, respectively, for usual care and 85.7% and 85.0%, respectively, for the intervention group. INTERVENTION: Sixteen 2-hour group sessions of cognitive behavioral therapy for depression. MAIN OUTCOME MEASURES: Change in depression symptoms, mental health functioning, and days of alcohol and problem substance use. RESULTS: Intervention clients reported significantly fewer depressive symptoms (P < .001 at 3 and 6 months) and had improved mental health functioning (P < .001 at 3 months and P < .01 at 6 months). At 6 months, intervention clients reported fewer drinking days (P < .05) and fewer days of problem substance use (P < .05) on days available. CONCLUSIONS: Providing group cognitive behavioral therapy for depression to clients with persistent depressive symptoms receiving residential substance abuse treatment is associated with improved depression and substance use outcomes. These results provide support for a new model of integrated care.

http://www.rand.org/pubs/external_publications/EP201100117.html

EP-201100-118

Understanding Variations in Medicare Consumer Assessment of Health Care Providers and Systems Scores: California as an Example. Donna O. Farley, Marc N. Elliott, Amelia M. Haviland, Amy Heller. 2011

OBJECTIVE: To understand reasons why California has lower Consumer Assessment of Healthcare Providers and Systems (CAHPS) scores than the rest of the country, including differing patterns of CAHPS scores between Medicare Advantage (MA) and fee-for-service, effects of additional demographic characteristics of beneficiaries, and variation across MA plans within California. STUDY DESIGN/DATA COLLECTION: Using 2008 CAHPS survey data for fee-for-service Medicare beneficiaries and MA members, we compared mean case mix adjusted Medicare CAHPS scores for California and the remainder of the nation. PRINCIPAL FINDINGS: California fee-for-service Medicare had lower scores than non-California fee-for-service on 11 of 14 CAHPS measures; California MA had lower scores only for physician services measures and higher scores for other measures. Adding race/ethnicity and urbanity to risk adjustment improved California standing for all measures in both MA and fee-for-service. Within the MA plans, one large plan accounted for the positive performance in California MA; other California plans performed below national averages. CONCLUSIONS: This study shows that the mix of fee-for-service and MA enrollees, demographic characteristics of populations, and plan-specific factors can all play a role in observed regional variations. Anticipating value-based payments, further study of successful MA plans could generate lessons for enhancing patient experience for the Medicare population.

http://www.rand.org/pubs/external_publications/EP201100118.html

EP-201100-119

A Model Health Care Delivery System for Medicaid. Arthur L. Kellermann. 2011

Combining the best elements of academic medical centers and community health centers

could deliver high-quality, cost-effective care to low-income Americans while training the next generation of health care professionals.

http://www.rand.org/pubs/external_publications/EP201100119.html

EP-201100-12

Strengthening Connections Between Transportation Investments and Economic Growth. Martin Wachs. 2011

This paper elaborates upon and deepens the ongoing policy discussion of relationships between investments in transportation infrastructure and the nation's short- and long-term economic well-being. Transportation infrastructure investment programs are not all equally effective at creating jobs or economic growth. Poorly targeted transportation dollars represent a wasted opportunity that the country can ill afford given its current fiscal predicament. On the other hand, accelerating the return of robust and sustained economic expansion will be imperative and can be advanced by the sound investment of scarce resources.

http://www.rand.org/pubs/external_publications/EP20110012.html

EP-201100-120

Positive Income Shocks and Accidental Deaths Among Cherokee Indians: A Natural Experiment. Ryan Andrew Brown. 2011

BACKGROUND: Several studies in low-income populations report the somewhat counterintuitive finding that positive income gains adversely affect adult health. The literature posits that receipt of a large portion of annual income increases, in the short term, risk-taking behaviour and/or the consumption of health-damaging goods. This work implies the hypothesis that persons with an unexpected gain in income will exhibit an elevated risk of accidental death—the fifth leading cause of death in the USA. We test this hypothesis directly by capitalizing on a natural experiment in which Cherokee Indians in rural North Carolina received discrete lump sum payments from a new casino. METHODS: We applied Poisson regression to the monthly count of accidental deaths among Cherokee Indians over 204 months spanning 1990–2006. We controlled for temporal patterns in accidental deaths (e.g. seasonality and trend) as well as changes in population size. RESULTS: As hypothesized, the risk of accidental death rises above expected levels during months of the large casino payments (relative risk = 2.62; 95% confidence interval = 1.54–4.47). Exploratory analyses of ethnographic interviews and behavioural surveys support that increased vehicular travel and consumption of health-damaging goods may account for the rise in accident proneness. CONCLUSIONS: Although long-term income gains may improve health in this population, our findings indicate that acute responses to large income gains, in the short term, increase risk-taking and accident proneness. We encourage further investigation of natural experiments to identify causal economic antecedents of population health.

http://www.rand.org/pubs/external_publications/EP201100120.html

EP-201100-121

Safety and Health Protection Efforts in the Police Service. Tom LaTourrette. 2011

This article reviews RAND Corporation research on police officer safety and health and provides some recommendations for improving police officer safety and health protection efforts.

http://www.rand.org/pubs/external_publications/EP201100121.html

EP-201100-122

Diagnostics as Essential Tools for Containing Antibacterial Resistance. Rosanna W. Peeling, Stuart S. Olmsted, Mark W. Perkins. 2011

Antibacterial drugs are overused and often inappropriately selected. This exacerbates drug resistance and exacts a high burden from acute respiratory tract, bloodstream, sexually-transmitted, diarrheal and other infections. Appropriate use of existing diagnostic tests, and developing better ones, could avert these costs and would avoid selective pressure from unnecessary antibacterial use. Product profiles of resistance-averting tests would specify WHO 'ASSURED' (Affordable, Sensitive, Specific, User-friendly, Rapid and Robust,

Equipment-free and Deliverable) criteria and request susceptibility as well as etiological information. Advances in genomics, nanoscience, microfluidics and bioengineering, as well as innovative funding paradigms can help to overcome research and development barriers for such diagnostics if they are deliberately and forcefully applied. Rapid uptake of new tests requires timely translation of research on cost-benefit analyses into policy, value-based subsidies and reimbursements, as well as behavioral change of health care providers and users.

http://www.rand.org/pubs/external_publications/EP201100122.html

EP-201100-123

Use of Colony-Stimulating Factors with Chemotherapy: Opportunities for Cost Savings and Improved Outcomes. Arnold Potosky, Jennifer Malin, Benjamin Kim, Elizabeth A. Chrischilles, Jane Weeks. 2011

Myeloid colony-stimulating factors (CSFs) decrease the risk of febrile neutropenia (FN) from high-risk chemotherapy regimens administered to patients at 20% or greater risk of FN, but little is known about their use in clinical practice. We evaluated CSF use in a multiregional population-based cohort of lung and colorectal cancer patients (N = 1849). Only 17% (95% confidence interval [CI] = 8% to 26%) patients treated with high-risk chemotherapy regimens received CSFs, compared with 18% (95% CI = 16% to 20%) and 10% (95% CI = 8% to 12%) of patients treated with intermediate- (10%-20% risk of FN) and low-risk (<10% risk of FN) chemotherapy regimens, respectively. Using a generalized estimating equation model, we found that enrollment in a health maintenance organization (HMO) was strongly associated with a lower adjusted odds of discretionary CSF use, compared with non-HMO patients (odds ratio = 0.44, 95% CI = 0.32 to 0.60, P < .001). All statistical tests were two-sided. Overall, 96% (95% CI = 93% to 98%) of CSFs were administered in scenarios where CSF therapy is not recommended by evidence-based guidelines. This finding suggests that policies to decrease CSF use in patients at lower or intermediate risk of FN may yield substantial cost savings without compromising patient outcomes.

http://www.rand.org/pubs/external_publications/EP201100123.html

EP-201100-124

The ER, 50 Years on. Arthur L. Kellermann. 2011

A 1958 study from Hartford Hospital showed that ER use had increased nearly 400% between 1940 and 1955 in many U.S. communities. Today, despite many changes in emergency care, ER visits continue to increase at twice the rate of population growth.

http://www.rand.org/pubs/external_publications/EP201100124.html

EP-201100-125

Human Papillomavirus Vaccine Uptake Among 9- to 17-Year-Old Girls: National Health Interview Survey, 2008. Charlene A. Wong, Zahava Berkowitz, Christina G. Dorell, Rebecca Anhang Price, Jennifer Lee, Mona Saraiya. 2011

BACKGROUND: Since 2006, the human papillomavirus (HPV) vaccine has been routinely recommended for preadolescent and adolescent girls in the United States. Depending on uptake patterns, HPV vaccine could reduce existing disparities in cervical cancer. METHODS: HPV vaccination status and reasons for not vaccinating were assessed using data from the 2008 National Health Interview Survey. Households with a girl aged 9-17 years were included (N = 2205). Sociodemographic factors and health behaviors associated with vaccine uptake were assessed using multivariate logistic regression. RESULTS: Overall, 2.8% of 9- to 10-year-olds, 14.7% of 11- to 12-year-olds, and 25.4% of 13- to 17-year-olds received at least 1 dose of HPV vaccine; 5.5% of 11- to 12-year-olds and 10.7% of 13- to 17-year-olds received all 3 doses. Factors associated with higher uptake in multivariate analysis included less than high school parental education, well-child check and influenza shot in the past year, and parental familiarity with HPV vaccine. Parents'

primary reasons for not vaccinating were beliefs that their daughters did not need vaccination, that their daughters were not sexually active, or had insufficient vaccine knowledge. More parents with private insurance (58.0%) than public (39.8%) or no insurance (39.5%) would pay $360-$500 to vaccinate their daughters. CONCLUSIONS: Less than one quarter of girls aged 9-17 years had initiated HPV vaccination by the end of 2008. Efforts to increase HPV uptake should focus on girls in the target age group, encourage providers to educate parents, and promote access to reduced-cost vaccines.

http://www.rand.org/pubs/external_publications/EP201100125.html

EP-201100-126

Racial/ethnic Differences in US Health Behaviors: A Decomposition Analysis. Tamara Dubowitz, Melonie Heron, Ricardo Basurto-Davila, Chloe E. Bird, Nicole Lurie, Jose J. Escarce. 2011

OBJECTIVE: To quantify contributions of individual sociodemographic factors, neighborhood socioeconomic status (NSES), and unmeasured factors to racial/ethnic differences in health behaviors for non-Hispanic (NH) whites, NH blacks, and Mexican Americans. METHODS: We used linear regression and Oaxaca decomposition analyses. RESULTS: Although individual characteristics and NSES contributed to racial/ethnic differences in health behaviors, differential responses by individual characteristics and NSES also played a significant role. CONCLUSIONS: There are racial/ethnic differences in the way that individual-level determinants and NSES affect health behaviors. Understanding the mechanisms for differential responses could inform community interventions and public health campaigns that target particular groups.

http://www.rand.org/pubs/external_publications/EP201100126.html

EP-201100-127

Growing Internet Use May Help Explain the Rise in Prescription Drug Abuse in the United States. Anupam B. Jena, Dana P. Goldman. 2011

The rising availability through the Internet of commonly abused prescription drugs has raised public health concerns. We examined whether the growth of US prescription drug abuse may be explained by the parallel growth in high-speed Internet use. We find that for every 10 percent increase in high-speed Internet use at the state level, associated treatment facility admissions for prescription drug abuse rose by 1 percent. Admissions for abuse of alcohol, cocaine, and heroin, which are not readily purchased online, had minimal or negative growth during the same period. The results suggest that better surveillance of online prescription drug sales is warranted, and aggressive efforts to curb illegitimate online pharmacies may be necessary.

http://www.rand.org/pubs/external_publications/EP201100127.html

EP-201100-128

Preparedness Exercises 2.0: Alternative Approaches to Exercise Design That Could Make Them More Useful for Evaluating — and Strengthening — Preparedness. Brian A. Jackson, Shawn McKay. 2011

Preparedness exercises play central roles in both the building and assessment of organizational readiness for future incidents. Though processes for designing and evaluating exercises are well established, there are opportunities to improve the value of exercises for strengthening preparedness and as tools for gathering assessment data. This article describes the application of systems analytical approach adapted from engineering that examines response operations as systems with potential failure modes that could hurt performance at future incidents. This methodology, which has been applied previously to preparedness measurement, is explored here as a tool for exercise design to focus it more tightly on key potential problem areas and to make it easier to use exercise data to explore preparedness for incidents that could differ considerably from the specific exercised scenario.

http://www.rand.org/pubs/external_publications/EP201100128.html

EP-201100-13

Immunization Disparities By Hispanic Ethnicity and Language Preference. Amelia M. Haviland, Marc N. Elliott, Katrin Hambarsoomian, Nicole Lurie. 2011

BACKGROUND: Seasonal influenza and pneumococcal immunization rates are substantially lower for older Hispanics than for non-Hispanic whites. METHODS: Beneficiary-reported past-year influenza and lifetime pneumococcal immunization for English- and Spanish-preferring Hispanic beneficiaries were compared with those for non-Hispanic whites in cross-sectional bilingual survey data using data from 244 618 randomly sampled community-dwelling respondents (age 65 years) with the 2008 Medicare Consumer Assessment of Healthcare Providers and Systems survey (a 62% response rate). Weighted logistic regression estimated immunization disparities with and without adjustment for health status, sociodemographic variables related to access, and location. Hierarchical models examined the role of specific geographic factors in immunization disparities. RESULTS: Pneumococcal immunization rates for Spanish- and English-speaking Hispanics were substantially lower than those for non-Hispanic whites (40% and 56% vs 74%; P < .001 for both comparisons). Influenza immunization rates for Spanish- and English-speaking Hispanics were also lower than for non-Hispanic whites (64% and 68% vs 76%; P < .001 for both comparisons). Health status-adjusted differences were similar; additional adjustment for sociodemographics reduced pneumococcal disparities by approximately one-third and influenza disparities by approximately half, but all disparities remained significant. Pneumococcal disparities were consistently smaller for patients in managed care plans. Influenza disparities were greater both in linguistically isolated areas and in "new destination" areas without long-standing Hispanic populations. CONCLUSIONS: Hispanic seniors, especially when Spanish-preferring and in linguistically isolated "new destinations," such as the Southeast, continue to be immunized at markedly lower rates than non-Hispanic whites, even after adjustment for health and sociodemographics. Individual physicians and policymakers may be able to assist this vulnerable group by addressing cultural and linguistic barriers to immunization.

http://www.rand.org/pubs/external_publications/EP20110013.html

EP-201100-130

Update to The Sigma Scan. Stephanie Diepeveen, Barbara Janta, Harun Dogo, James Forsaith, Mihaly Fazekas, Simo Goshev, Tony G. Thompson-Starkey, Anais Reding, Ohid Yaqub, Janice S. Pedersen, Helen Ridsdale, Svitlana Kobzar, Stijn Hoorens. 2011

This external publication is an online database of short Horizon Scanning Centre think-pieces. RAND Europe updated 25% of the papers on this database, to incorporate more recent policy issues, evidence, and developments. The Sigma Scan is a searchable set of brief papers exploring potential future issues and trends over the next 50 years which may have an impact on UK public policy. The papers cover a wide range of subjects, from climate science to social science, space exploration, economics and human rights.

http://www.rand.org/pubs/external_publications/EP201100130.html

EP-201100-131

Psychosocial Resources, Threat, and the Perception of Distance and Height: Support for the Resources and Perception Model. Douglas Yeung. 2011

Threatening things are often perceptually exaggerated, such that they appear higher, closer, of greater duration, or more intense than they actually are. According to the Resources and Perception Model (RPM) psychosocial resources can prevent this exaggeration, leading to more accurate perception. Two studies tested RPM. Study 1 showed that the perceived closeness of a threatening object (a live tarantula) but not an innocuous object (a cat toy) was moderated by induced self-worth. Further, the more self-worth that participants experienced, the less close the tarantula appeared

to them. Study 2 showed that greater levels of self-esteem reduced perceived height, but only among participants prevented from holding a protective handrail while looking down. Together, these studies confirm that resources moderate the physical perception of both distance and height, that resources moderate perception of threats but not nonthreats, that different resources have similar moderating effects, and that psychosocial resources can supplant physical resources..

http://www.rand.org/pubs/external_publications/EP201100131.html

EP-201100-132

Evaluating Translational Research: A Process Marker Model. Mark Graham. 2011

OBJECTIVE: We examine the concept of translational research from the perspective of evaluators charged with assessing translational efforts. One of the major tasks for evaluators involved in translational research is to help assess efforts that aim to reduce the time it takes to move research to practice and health impacts. Another is to assess efforts that are intended to increase the rate and volume of translation. METHODS: We offer an alternative to the dominant contemporary tendency to define translational research in terms of a series of discrete "phases." RESULTS: We contend that this phased approach has been confusing and that it is insufficient as a basis for evaluation. Instead, we argue for the identification of key operational and measurable markers along a generalized process pathway from research to practice. CONCLUSIONS: This model provides a foundation for the evaluation of interventions designed to improve translational research and the integration of these findings into a field of translational studies.

http://www.rand.org/pubs/external_publications/EP201100132.html

EP-201100-133

Preliminary Healthy Eating Outcomes of SNaX, a Pilot Community-Based Intervention for Adolescents. Laura M. Bogart, Marc N. Elliott, Kimberly E. Uyeda, Jennifer Hawes-Dawson, David J. Klein, Mark A. Schuster. 2011

PURPOSE: We used principles of community-based participatory research to develop and pilot test a 5-week intervention for middle school students, Students for Nutrition and eXercise (SNaX). SNaX aimed to translate school obesity-prevention policies into practice with peer advocacy of healthy eating and school cafeteria changes. METHODS: A total 425 seventh graders (63% of all seventh graders) in the intervention school were surveyed at baseline regarding cafeteria attitudes and sugar-sweetened beverage consumption; of the 425 students, 399 (94%) were surveyed again at 1-month post-intervention. School cafeteria records were obtained from two schools: the intervention school and a nonrandomized selected comparison school with similar student socio-demographic characteristics. RESULTS: A total of 140 students in the intervention school were trained as peer advocates. In the intervention school, cafeteria attitudes among peer advocates significantly improved over time (approximately one-third of a standard deviation), whereas cafeteria attitudes of non-peer advocates remained stable; the improvement among peer advocates was significantly greater than the pre-post-change for non-peer advocates ($b = .71$, $p < .001$). Peer advocates significantly reduced their sugar-sweetened beverage intake (sports and fruit drinks), from 33% before intervention to 21% after intervention ($p = .03$). Cafeteria records indicated that servings of fruit and healthier entrées (salads, sandwiches, and yogurt parfaits) significantly decreased in the comparison school and significantly increased in the intervention school; the magnitude of changes differed significantly between the schools ($p < .001$). CONCLUSIONS: As compared with the non-peer advocates, peer advocates appeared to benefit more from the intervention. Future research should consider engaging parents, students, and other key community stakeholders to determine acceptable and sustainable cafeteria changes.

http://www.rand.org/pubs/external_publications/EP201100133.html

EP-201100-134

Prevalence of Symptoms of Bladder Pain Syndrome/Interstitial Cystitis Among Adult Females in the United States. Sandra H. Berry, Marc N. Elliott, Marika Suttorp, Laura M. Bogart, Michael A. Stoto, Leroy M. Nyberg. 2011

PURPOSE: Bladder pain syndrome/interstitial cystitis is a poorly understood condition that can cause serious disability. We provide the first population based symptom prevalence estimate to our knowledge among United States adult females. MATERIALS AND METHODS: We developed and validated 2 case definitions to identify bladder pain syndrome/interstitial cystitis symptoms. Beginning in August 2007 we telephoned United States households, seeking adult women with bladder symptoms or a bladder pain syndrome/interstitial cystitis diagnosis. Second stage screening identified those subjects who met case definition criteria. Each completed a 60-minute interview on the severity and impact of bladder symptoms, health care seeking and demographics. Data collection ended in April 2009. Using population and nonresponse weights we calculated prevalence estimates based on definitions spanning a range of sensitivity and specificity. We used United States Census counts to estimate the number of affected women in 2006. The random sample included 146,231 households, of which 131,691 included an adult female. Of these households 32,474 reported an adult female with bladder symptoms or diagnosis, of which 12,752 completed the questionnaire. RESULTS: Based on the high sensitivity definition 6.53% (95% CI 6.28, 6.79) of women met symptom criteria. Based on the high specificity definition 2.70% (95% CI 2.53, 2.86) of women met the criteria. These percentages translated into 3.3 to 7.9 million United States women 18 years old or older with bladder pain syndrome/interstitial cystitis symptoms. Symptom severity and impact were comparable to those of adult women with established diagnoses. However, only 9.7% of the women reported being assigned a bladder pain syndrome/interstitial cystitis diagnosis. CONCLUSIONS: Bladder pain syndrome/interstitial cystitis symptoms are widespread among United States women and associated with considerable disability. These results suggest bladder pain syndrome/interstitial cystitis may be underdiagnosed.

http://www.rand.org/pubs/external_publications/EP201100134.html

EP-201100-135

A Table-Top Game to Teach Technological and Tactical Planning in a Graduate Terrorism and Counterterrorism Course. Brian A. Jackson. 2011

Although processes of tactical decision-making and technology choice occur in both terrorist groups and the security organizations opposing them, these topics are difficult to teach in a classroom setting. A table-top game is described where students play the role of a terrorist group seeking to attack an urban subway and then act as security planners charged with protecting it. The key trade-offs—risk that their plot will be discovered on the terrorist side, and the need to balance effective security measures with their public acceptability on the defense side— are built into the game through point systems that capture the basic dynamics that exist in such situations. Implementation of the game in a graduate-level security studies course is discussed. The game was effective in making abstract threat analysis and security planning concepts more tangible and also facilitated knowledge sharing within groups of students with different levels of knowledge about terrorism and counterterrorism.

http://www.rand.org/pubs/external_publications/EP201100135.html

EP-201100-136

Healthy Partnerships: How Governments Can Engage the Private Sector to Improve Health in Africa. Connor Spreng. 2011

Healthy Partnerships: How Governments Can Engage the Private Sector to Improve Health in Africa assesses how governments and the private health sector are working together in forty-five African countries. The Report finds that governments and the private health sector can and should improve the way they work together in order to meet health goals in Africa. It offers specific recommendations for governments, the private

sector, and other stakeholders. The results open a window on to the landscape of private health care in Africa. Health systems across Africa are in urgent need of improvement. The public sector should not be expected to shoulder the burden of directly providing the needed services alone, nor can it, given the current realities of African health systems. Therefore to achieve necessary improvements, governments will need to rely more heavily on the private health sector. Indeed, private providers already play a significant role in the health sector in Africa and are expected to continue to play a key role, and private providers serve all income levels across sub- Saharan Africa's health systems. The World Health Organization (WHO) and others have identified improvements in the way governments interact with and make use of their private health sectors as one of the key ingredients to health systems improvements. Across the African region, many ministries of health are actively seeking to increase the contributions of the private health sector. However, relatively little is known about the details of engagement; that is, the roles and responsibilities of the players, and what works and what does not. A better understanding of the ways that governments and the private health sector work together and can work together more effectively is needed. This Report assesses and compares the ways in which African governments are engaging with their private health sectors. Engagement is defined, for the purposes of this report, to mean the deliberate, systematic collaboration of the government and the private health sector according to national health priorities, beyond individual interventions and programs. With effective engagement, one of the main constraints to better private sector contributions can be addressed, which in turn should improve the performance of health systems overall.

http://www.rand.org/pubs/external_publications/EP201100136.html

EP-201100-137

Clinical Decision Support and Malpractice Risk. Michael D. Greenberg. 2011

Clinical decision support (CDS) refers to electronic technology used to enhance clinical decision making. An important feature of CDS in computerized physician order entry (CPOE) involves automated warnings issued whenever potential drug interactions or other contraindications arise. In practice, many CDS systems have often been overinclusive in the warnings they generate, such that physician "alert fatigue" may undermine the utility the systems offer. One paradoxical result of overly abundant warnings may be to exacerbate malpractice risk for physicians who either ignore or turn off CDS alerts. Technology vendors, on the other hand, may nevertheless resist any efforts to curtail CDS alerting, because of their own fears regarding tort liability. Taken together, the results may be perverse: namely, the proliferation of CDS systems that providers are reluctant to use, and that do not achieve the safety benefits that those systems are capable of offering. From a policy perspective, the basic challenge is to ensure that liability concerns do not derail the clinical value of new CDS technology. The first step toward ameliorating the problem is to develop an expert-consensus list of which drug-drug interactions (DDI) should be reported by CDS systems. The second step involves endorsement of the consensus DDI list by relevant professional societies and certification or endorsement of related CDS technologies by regulators like the Office of the National Coordinator for Health Information Technology, the Centers for Medicare & Medicaid Services, and the Joint Commission. Legislation to create a liability safe harbor for physicians who use CDS is another option. Whether a legislative exemption from tort liability would actually be prudent or practical remains to be seen. What does seem clear, however, is that CDS represents a situation in which malpractice and products liability can lead to a perverse equilibrium: One in which the law has a detrimental effect on technology, and in which patients, physicians, and institutions are all made worse off as a result.

http://www.rand.org/pubs/external_publications/EP201100137.html

EP-201100-138

Identifying Continuous Quality Improvement Publications: What Makes an Improvement Intervention 'CQI'?. Susanne Hempel, Yee-Wei Lim, Robbie Foy, Marika Suttorp, Paul G. Shekelle, Lisa V. Rubenstein. 2011

BACKGROUND: The term continuous quality improvement (CQI) is often used to refer to a method for improving care, but no consensus statement exists on the definition of CQI. Evidence reviews are critical for advancing science, and depend on reliable definitions for article selection. METHODS: As a preliminary step towards improving CQI evidence reviews, this study aimed to use expert panel methods to identify key CQI definitional features and develop and test a screening instrument for reliably identifying articles with the key features. We used a previously published method to identify 106 articles meeting the general definition of a quality improvement intervention (QII) from 9427 electronically identified articles from PubMed. Two raters then applied a six-item CQI screen to the 106 articles. RESULTS: Per cent agreement ranged from 55.7% to 75.5% for the six items, and reviewer-adjusted intra-class correlation ranged from 0.43 to 0.62. 'Feedback of systematically collected data' was the most common feature (64%), followed by being at least 'somewhat' adapted to local conditions (61%), feedback at meetings involving participant leaders (46%), using an iterative development process (40%), being at least 'somewhat' data driven (34%), and using a recognised change method (28%). All six features were present in 14.2% of QII articles. CONCLUSIONS: We conclude that CQI features can be extracted from QII articles with reasonable reliability, but only a small proportion of QII articles include all features. Further consensus development is needed to support meaningful use of the term CQI for scientific communication.

http://www.rand.org/pubs/external_publications/EP201100138.html

EP-201100-139

Minimally Important Differences of the UCLA Scleroderma Clinical Trial Consortium Gastrointestinal Tract Instrument. Dinesh Khanna, Daniel E. Furst, James R. Seibold, Maureen D. Mayes, Vivien Hsu, Philip J. Clements, Terri Getzug, Ron D. Hays. 2011

OBJECTIVE: To provide minimally important difference (MID) estimates for the UCLA Scleroderma Clinical Trial Consortium Gastrointestinal Tract 2.0 (UCLA SCTC GIT 2.0) in a longitudinal observational cohort. METHODS: We administered the UCLA SCTC GIT 2.0 to 115 patients with systemic sclerosis (SSc) at 2 timepoints 6 months apart. The UCLA SCTC GIT 2.0 has 7 multi-item scales: Reflux, Distension/Bloating, Diarrhea, Fecal Soilage, Constipation, Emotional Well-being, and Social Functioning and a total GIT score. All scales are scored from 0 [better health-related quality of life (HRQOL)] to 3 (worse HRQOL) except the diarrhea and constipation scales (ranges 0–2 and 0–2.5, respectively). Patients also rated their overall and upper and lower GIT involvement during the second visit using a response scale with options "much better; somewhat better; almost the same; somewhat worse; or much worse." The minimally changed group was defined by those reporting they were somewhat better or somewhat worse compared to first visit. RESULTS: Study participants were 84% female and 81% white with a mean disease duration of 6.9 years. The MID estimates for improvement ranged from 0.07 for the Social Functioning scale to 0.36 for the Emotional Well-being scale. For worsening, the MID estimates ranged from 0.06 for the Fecal Soilage scale to 0.21 for the Social Functioning scale. CONCLUSION: We provide MID estimates for the UCLA SCTC GIT 2.0 scales. This information can aid in interpreting scale scores in future randomized controlled trials and observational studies.

http://www.rand.org/pubs/external_publications/EP201100139.html

EP-201100-14

Making Congestion Pricing Equitable. Liisa Ecola, Thomas Light. 2011

Transportation policy makers increasingly consider congestion pricing a promising option for addressing urban traffic congestion problems.

Although some congestion pricing projects have been undertaken in the United States, many proposals have been rejected because of concerns that congestion pricing is inequitable. This paper identifies and assesses ways of making congestion pricing equitable. The authors review notions of equity applicable to congestion pricing and explore the equity issues that arise in the context of cordon and area pricing systems and high-occupancy toll lanes.

http://www.rand.org/pubs/external_publications/EP20110014.html

EP-201100-140

Anaplastic Large Cell Lymphoma and Breast Implants: A Systematic Review. Benjamin Kim, Kevin C. Chung, Christopher Schnyer, Soeren Mattke. 2011

BACKGROUND: In recent years, there have been growing concerns about a possible association of non-Hodgkin's lymphoma (NHL)-in particular, anaplastic large cell lymphoma (ALCL)-and breast implants. The purpose of this study was to identify and analyze all reported cases of NHL occurring in patients with breast implants. METHODS: We conducted a systematic literature review of reported cases of NHL in patients with breast implants. Publications were identified with a search algorithm, forward searches, and expert nominations. After references were reviewed and assessed for inclusion or exclusion, case-based data were independently abstracted, reconciled, and adjudicated by multiple investigators. The data were then synthesized and analyzed. RESULTS: Of 884 identified articles, only 83 were relevant to NHL involving the breast and 34 were included in our study. Thirty-six cases of NHL in patients with implants were found, of which 29 (81%) were ALCLs. Although detailed clinical information was lacking in many cases, ALCL oftentimes involved the capsule and/or presented as an unexplained seroma or mass, was negative for Anaplastic Lymphoma Kinase (ALK) expression, and had a relatively indolent clinical course when it developed adjacent to a breast implant. CONCLUSIONS: A form of ALCL, which clinically behaves more like the less-aggressive cutaneous form of ALK-negative ALCL rather than the more-aggressive systemic form, may be associated with breast implants. Future research on the epidemiology and biology of this rare disease is clearly needed to better understand its nature.

http://www.rand.org/pubs/external_publications/EP201100140.html

EP-201100-141

Are We Prepared? Using Reliability Analysis to Evaluate Emergency Response Systems. Brian A. Jackson, Henry H. Willis. 2011

The evaluation of government programmes designed to prepare for future contingencies is an ongoing challenge for analysts and public managers. Despite significant focus in emergency management, the existing approaches have difficulty linking preparedness inputs to their effect on performance at future response operations. Adapting techniques from the analysis of technical systems, an approach for assessing response reliability – the likelihood that a response system will be able to deliver response capabilities at or above a specific level at a future incident – is described. The approach bases evaluation on the systematic assessment of the likelihood and consequences of events that would disrupt operations and reduce response performance. By doing so, it provides a clearer method for assessing the cost effectiveness of different preparedness policies and evaluating the performance of past investments in preparedness programmes.

http://www.rand.org/pubs/external_publications/EP201100141.html

EP-201100-142

Resource Allocation, Emergency Response Capability, and Infrastructure Concentration Around Vulnerable Sites. Henry H. Willis. 2011

Public and private decision-makers continue to seek risk-based approaches to allocate funds to help communities respond to disasters, accidents, and terrorist attacks involving critical infrastructure facilities. The requirements for emergency response capability depend both upon risks within

a region's jurisdiction and mutual aid agreements that have been made with other regions. In general, regions in close proximity to infrastructure would benefit more from resources to improve preparedness because there is a greater potential for an event requiring emergency response to occur if there are more facilities at which such events could occur. Thus, a potentially important input into decisions about allocating funds for security is the proximity of a community to high concentrations of infrastructure systems that potentially could be at risk to an industrial accident, natural disaster, or terrorist attack. In this paper, we describe a methodology for measuring a region's exposure to infrastructure-related risks that captures both a community's concentration of facilities or sites considered to be vulnerable and of the proximity of these facilities to surrounding infrastructure systems. These measures are based on smoothing-based nonparametric probability density estimators, which are then used to estimate the probability of the entire infrastructure occurring within any specified distance of facilities in a county. The set of facilities used in the paper to illustrate the use of this methodology consists of facilities identified as vulnerable through the California Buffer Zone Protection Program. For infrastructure in surrounding areas we use dams judged to be high hazards, and BART tracks. The results show that the methodology provides information about patterns of critical infrastructure in regions that is relevant for decisions about how to allocate terrorism security and emergency preparedness resources.

http://www.rand.org/pubs/external_publications/EP201100142.html

EP-201100-143

Facts, Facts, Facts: What Is a Physician to Do. Robert H. Brook. 2011

This commentary argues that it is timely to reengage physicians in the discussion of international comparative data about health care and to ask why the United States is so provincial in designing the systems by which care is delivered.

http://www.rand.org/pubs/external_publications/EP201100143.html

EP-201100-144

Suicide Risk Management: Development and Analysis of a Telephone-Based Approach to Patient Safety. Duncan G. Campbell, Cory Bolkan, Edmund Chaney, Bradford Felker, Scott E. Sherman, Lisa V. Rubenstein. 2011

Research-based queries about patients' experiences often uncover suicidal thoughts. Human subjects review requires suicide risk management (SRM) protocols to protect patients, yet minimal information exists to guide researchers' protocol development and implementation efforts. The purpose of this study was to examine the development and implementation of an SRM protocol employed during telephone-based screening and data collection interviews of depressed primary care patients. We describe an SRM protocol development process and employ qualitative analysis of de-identified documentation to characterize protocol-driven interactions between research clinicians and patients. Protocol development required advance planning, training, and team building. Three percent of screened patients evidenced suicidal ideation; 12% of these met protocol standards for study clinician assessment/intervention. Risk reduction activities required teamwork and extensive collaboration. Research-based SRM protocols can facilitate patient safety by (1) identifying and verifying local clinical site approaches and resources and (2) integrating these features into prevention protocols and training for research teams.

http://www.rand.org/pubs/external_publications/EP201100144.html

EP-201100-145

Homophily and Contagion as Explanations for Weight Similarities Among Adolescent Friends. Kayla De La Haye, Garry Robins, Philip Mohr, Carlene Wilson. 2011

PURPOSE: To determine whether weight-based similarities among adolescent friends result from social influence processes, after controlling for the role of weight on friendship selection and other confounding influences. METHODS: Four waves

of data were collected from a grade 8 cohort of adolescents (N = 156, mean age = 13.6 years) over their initial 2 years of high school. At each wave, participants reported on their friendship relations with grade-mates and had their height and weight measured by researchers to calculate their body mass index (BMI). Newly developed stochastic actor-oriented models for social networks were used to simultaneously assess the role of weight on adolescents' friendship choices, and the effect of friends' BMIs on changes in adolescent BMI. RESULTS: Adolescents' BMIs were not significantly predicted by the BMI of their friends over the 16 months of this study. Similarities in the weights of friends were found to be driven predominantly by friendship selection, whereby adolescents, particularly those who were not overweight, preferred to initiate friendships with peers whose weight status (overweight/nonoverweight) was the same as their own. CONCLUSIONS: Weight-based similarities among friends were largely explained by the marginalization of overweight adolescents by their peers, rather than by the "contagion" of excess weight among friends. These findings highlight the importance of adequately modeling friendship selection processes when estimating social influence effects on adiposity.

http://www.rand.org/pubs/external_publications/EP201100145.html

EP-201100-146

How Physical Activity Shapes, and Is Shaped By, Adolescent Friendships. Kayla De La Haye, Garry Robins, Philip Mohr, Carlene Wilson. 2011

The current study explored the role of school-based friendship networks in adolescents' engagement in physical activity (PA). It was hypothesized that similar participation in PA would be a basis for friendship formation, and that friends would also influence behavior. Whether these processes were mediated through cognitive mechanisms was also explored. Self-reported participation in PA, cognitions about PA, and friendship ties to grade-mates were measured in two cohorts of Australian grade eight students (N = 378; M age = 13.7) three times over the 2008 school year. Interdependence between the friendship networks and PA was tested using stochastic actor-based models for social networks and behavior. The results showed that participants tended to befriend peers who did similar amounts of PA, and subsequently emulated their friends' behaviors. Friends' influence on PA was not found to be mediated through adolescents' cognitions about PA. These findings show that there is a mutually dependent relationship between adolescent friendship networks and PA; they highlight how novel network-based strategies may be effective in supporting young people to be physically active.

http://www.rand.org/pubs/external_publications/EP201100146.html

EP-201100-147

Using Geographic Information Systems to Match Local Health Needs with Public Health Services and Programs. Tamara Dubowitz, Malcolm V. Williams, Elizabeth D. Steiner, Margaret M. Weden, Lisa Miyashiro, Dawn Jacobson, Nicole Lurie. 2011

Local health departments (LHDs) play an important role in ensuring essential public health services. Geographic information system (GIS) technology offers a promising means for LHDs to identify geographic gaps between areas of need and the reach of public health services. We examined how large LHDs could better inform planning and investments by using GIS based methodologies to align community needs and health outcomes with public health programs. We present a framework to drive LHDs in identifying and addressing gaps or mismatches in services or health outcomes.

http://www.rand.org/pubs/external_publications/EP201100147.html

EP-201100-148

Use of Prescription Drug Samples and Patient Assistance Programs, and the Role of Doctor–patient Communication. Walid F. Gellad, Haiden A. Huskamp, Angela Li. 2011

BACKGROUND: Cost-related underuse of medications is common among older adults, who seldom discuss medication costs with their physi-

cians. Some older adults may use free drug samples or industry-sponsored patient assistance programs (PAP) in hopes of lowering out-of-pocket costs, although the long-term effect of these programs on drug spending is unclear. OBJECTIVE: To examine older adults' use of industry-sponsored strategies to reduce out-of-pocket drug costs and the association between doctor–patient communication and use of these programs. DESIGN: Cross-sectional analysis of a 2006 nationally representative survey of Medicare beneficiaries. PARTICIPANTS: 14,322 community-dwelling Medicare beneficiaries age ≥65. MAIN MEASURES: We conducted bivariate and multivariate analyses of the association between receipt of free samples and participation in PAPs with sociodemographic characteristics, health status, access to care, drug coverage, medication cost burden, and doctor–patient communication. KEY RESULTS: 51.4% of seniors reported receiving at least one free sample over the last 12 months and 29.2% reported receiving free samples more than once. In contrast, only 1.3% of seniors reported participating in an industry-sponsored PAP. Higher income respondents were more likely to report free sample receipt than low-income respondents (50.8% vs. 43.8%, p < 0.001) and less likely to report participating in a PAP (0.42% vs. 2.2%, p < 0.001). In multivariate analyses, those who reported talking to their doctor about the cost of their medications had more than twice the odds of receiving samples as those who did not (OR 2.17, 95% CI 1.95–2.42). CONCLUSIONS: In 2006, over half of seniors in Medicare received free samples, but only 1.3% reported receiving any medications from a patient assistance program. Doctor–patient communication is strongly associated with use of these programs, which has important implications for clinical care regardless of whether these programs are viewed as drivers of prescription costs or a remedy for them.

http://www.rand.org/pubs/external_publications/EP201100148.html

EP-201100-149

The Impact of Menopause on Health-Related Quality of Life: Results from the STRIDE Longitudinal Study. Ron D. Hays, Chung-Chou H. Chang, Cindy Bryce, Karen A. Matthews. 2011

PURPOSE: We examine the impact of menopausal status, beyond menopausal symptoms, on health-related quality of life (HRQoL). METHODS: Seven hundred thirty-two women aged 40-65, regardless of health condition or menopausal status, were enrolled from single general internal medicine practice. Women completed annual questionnaires including HRQoL, and menopausal status and symptoms. RESULTS: The physical health composite of the RAND-36 is lower in late peri (45.6, P < .05), early post (45.4, P < .05), and late postmenopausal women (44.6, P < .01), and those who report a hysterectomy (44.2, P < .01) compared to premenopausal women (47.1), with effect sizes of Cohen's d = .12-.23. The mental health composite of the RAND-36 is lower in late peri (44.7, P < .01), early post (44.9, P < .01), and late postmenopausal women (45.0, P < .05) and those who report a hysterectomy (44.2, P < .01) compared to premenopausal women (46.8), with effect sizes of Cohen's d = .15-.20. Findings are comparable adjusted for menopausal symptom frequency and bother. CONCLUSIONS: Over a 5-year follow-up period, we found a negative impact of menopause on some domains of HRQoL, regardless of menopausal symptoms. Clinicians should be aware of this relationship and work to improve HRQoL, rather than expect it to improve spontaneously when menopausal symptoms resolve.

http://www.rand.org/pubs/external_publications/EP201100149.html

EP-201100-15

Factors Associated with Prolonged Emergency Department Length of Stay for Admitted Children. Paul J. Chung, Michael D. Cabana. 2011

OBJECTIVE: To estimate the prevalence of and to identify factors associated with prolonged emergency department length-of-stay (ED-LOS) for admitted children. METHODS: Data were from the 2001-2006 National Hospital Ambulatory Medical Care Survey. The primary outcome was prolonged ED-LOS (defined as total ED time >8

hours) among admitted children. Predictor variables included patient-level (eg, demographics including race/ethnicity, triage score, diagnosis, and admission to inpatient bed vs intensive care unit), physician-level (intern/resident vs attending physician), and system-level (eg, region, metropolitan area, ED and hospital type, time and season, and diagnostic and therapeutic procedures) factors. Multivariable logistic regression was performed to identify independent predictors of prolonged ED-LOS. RESULTS: Median ED-LOS for admitted children was 3.7 hours. Thirteen percent of pediatric patients admitted from the ED experienced prolonged ED-LOS. Factors associated with prolonged ED-LOS for admitted children were Hispanic ethnicity (odds ratio [OR], 1.76; 95% confidence interval [95% CI], 1.10-2.81), ED arrival between midnight and 8 a.m. (OR, 2.80; 95% CI, 1.87-4.20), winter season (January-March: OR, 1.81; 95% CI, 1.20-2.74), computed tomography scan or magnetic resonance imaging (OR, 1.65; 95% CI, 1.05-2.58), and intravenous fluids or medications (OR, 1.81; 95% CI, 1.10-2.97). Children requiring ICU admissions (OR, 0.29; 95% CI, 0.11-0.77) or receiving pulse oximetry in the ED (OR, 0.52; 95% CI, 0.34-0.81) had a lower risk of experiencing prolonged ED-LOS. CONCLUSIONS: We found that prolonged ED-LOS occurs frequently for admitted pediatric patients and is associated with Hispanic ethnicity, presentation during winter season, and early morning arrival. Potential strategies to reduce ED-LOS include improved availability of interpreter services and enhanced staffing and additional inpatient bed availability during winter season and overnight hours.

http://www.rand.org/pubs/external_publications/EP20110015.html

EP-201100-150

Patient Education Integrated with Acupuncture for Relief of Cancer-Related Fatigue Randomized Controlled Feasibility Study. Ron D. Hays, Roberto B. Vargas, Ka-Kit Hui. 2011

BACKGROUND: Cancer-related fatigue (CRF) is a prominent clinical problem. There are calls for multi-modal interventions. METHODS: We assessed the feasibility of delivering patient education integrated with acupuncture for relief of CRF in a pilot randomized controlled trial (RCT) with breast cancer survivors using usual care as control. Social cognitive and integrative medicine theories guided integration of patient education with acupuncture into a coherent treatment protocol. The intervention consisted of two parts. First, patients were taught to improve self-care by optimizing exercise routines, improving nutrition, implementing some additional evidence-based cognitive behavioral techniques such as stress management in four weekly 50-minute sessions. Second, patients received eight weekly 50-minute acupuncture sessions. The pre-specified primary outcome, CRF, was assessed with the Brief Fatigue Inventory (BFI). Secondary outcomes included three dimensions of cognitive impairment assessed with the FACT-COGv2. RESULTS: Due to difficulties in recruitment, we tried several methods that led to the development of a tailored recruitment strategy: we enlisted oncologists into the core research team and recruited patients completing treatment from oncology waiting rooms. Compared to usual care control, the intervention was associated with a 2.38-point decline in fatigue as measured by the BFI (90% Confidence Interval from 0.586 to 5.014; $p < 0.10$). Outcomes associated with cognitive dysfunction were not statistically significant. CONCLUSIONS: Patient education integrated with acupuncture had a very promising effect that warrants conducting a larger RCT to confirm findings. An effective recruitment strategy will be essential for the successful execution of a larger-scale trial.

http://www.rand.org/pubs/external_publications/EP201100150.html

EP-201100-151

Neighborhood Socioeconomic Status and Cognitive Function in Women. Regina A. Shih, Bonnie Ghosh-Dastidar, Adria D. Jewell, Chloe E. Bird, Christine Eibner. 2011

OBJECTIVES: We examined whether neighborhood socioeconomic status (NSES) is associated with cognitive functioning in older US women and whether this relationship is explained by associations between NSES and vascular, health be-

havior, and psychosocial factors. METHODS: We assessed women aged 65 to 81 years (n=7479) who were free of dementia and took part in the Women's Health Initiative Memory Study. Linear mixed models examined the cross-sectional association between an NSES index and cognitive functioning scores. A base model adjusted for age, race/ethnicity, education, income, marital status, and hysterectomy. Three groups of potential confounders were examined in separate models: vascular, health behavior, and psychosocial factors. RESULTS: Living in a neighborhood with a 1-unit higher NSES value was associated with a level of cognitive functioning that was 0.022 standard deviations higher (P=.02). The association was attenuated but still marginally significant (P<.1) after adjustment for confounders and, according to interaction tests, stronger among younger and non-White women. CONCLUSIONS: The socioeconomic status of a woman's neighborhood may influence her cognitive functioning. This relationship is only partially explained by vascular, health behavior, or psychosocial factors. Future research is needed on the longitudinal relationships between NSES, cognitive impairment, and cognitive decline.

http://www.rand.org/pubs/external_publications/EP201100151.html

EP-201100-152

Depression and the Health Care Experiences of Medicare Beneficiaries. Steven Martino, Marc N. Elliott, David E. Kanouse, Donna O. Farley, Q Burkhart, Ron D. Hays. 2011

OBJECTIVES: To compare health care experiences of Medicare beneficiaries with and without symptoms of depression and investigate the role of patient confidence in shaping these experiences. DATA SOURCES: Data came from the 2009 CAHPS Medicare 4.0 Fee-for-Service (FFS) Survey, which was fielded to a national probability sample of 298,492 FFS Medicare beneficiaries. STUDY DESIGN: Linear regression was used to model associations of depression with four global ratings and three composite measures of health care and to test whether beneficiaries' confidence in their ability to recognize the need for care mediates these associations. PRINCIPAL FINDINGS: Beneficiaries with depressive symptoms reported worse experiences with care across the full range of patient experience covered by the CAHPS survey. Depressive symptoms were associated with decreased patient confidence and decreased confidence was in turn associated with poorer reports of care. CONCLUSIONS: Our study highlights depressive symptoms as a risk factor for poorer experiences of health care and highlights depressed patients' confidence in recognizing their need for care and for designing programs to improve the health care of this population.

http://www.rand.org/pubs/external_publications/EP201100152.html

EP-201100-153

Use of Human Papillomavirus Vaccines Among Young Adult Women in the United States: An Analysis of the 2008 National Health Interview Survey. Nancy Breen. 2011

BACKGROUND: The Centers for Disease Control and Prevention recommends catch-up administration of human papillomavirus (HPV) vaccines to girls and women ages 13 to 26 who have not been vaccinated previously. In response to debate regarding catch-up vaccination of young adult women, this study examined whether 18- to 26-year-old women most likely to benefit from catch-up vaccination were aware of the HPV vaccine, and initiated the vaccine series by the end of 2008. METHODS: We used data from the 2008 National Health Interview Survey to assess HPV vaccine awareness and use, and reasons for not vaccinating, among women aged 18-26 years (n = 1583). Sociodemographic, health care access, and health history factors associated with vaccine initiation were assessed using multivariate logistic regression. RESULTS: Overall, 11.7% of women aged 18-26 years reported receiving at least 1 dose of the HPV vaccine by the end of 2008. In multivariate analyses, younger age, history of previous HPV infection, unmarried status, health insurance, flu shot in the past year, and receipt of 1 or more recommended lifetime vaccines were significantly associated with HPV vaccine initia-

tion. Two-fifths (39.6%) of unvaccinated women were interested in receiving the HPV vaccine (n = 1327). Primary reasons for lack of interest in the vaccine were belief that it was not needed, not knowing enough about it, concerns about safety, and not being sexually active. CONCLUSION: HPV vaccine coverage among young adult women was low, and lower among the uninsured than the insured. Public financing and care provision programs have the potential to expand vaccine coverage among uninsured women, who are at increased risk of cervical cancer.

http://www.rand.org/pubs/external_publications/EP201100153.html

EP-201100-154

Updating Comparative Effectiveness Reviews: Current Efforts in AHRQ's Effective Health Care Program. Margaret Maglione, Roger Chou, David Moher. 2011

OBJECTIVES: To review the current knowledge and efforts on updating systematic reviews (SRs) as applied to comparative effectiveness reviews (CERs). STUDY DESIGN AND SETTING: This article outlines considerations for updating CERs by including a definition of the updating process, describing issues around assessing whether to update, and providing general guidelines for the update process. Key points to consider include (1) identifying when to update CERs, (2) how to update CERs, and (3) how to present, report, and interpret updated results in CERs. RESULTS: Currently, there is little information about what proportion of SRs needs updating. Similarly, there is no consensus on when to initiate updating and how best to carry it out. CONCLUSION: CERs need to be regularly updated as new evidence is produced. Lack of attention to updating may lead to outdated and sometimes misleading conclusions that compromise health care and policy decisions. The article outlines several specific goals for future research, one of them being the development of efficient guideline for updating CERs applicable across evidence-based practice centers.

http://www.rand.org/pubs/external_publications/EP201100154.html

EP-201100-155

The Social Context of Homeless Men's Substance Use. Suzanne L. Wenzel, Daniela Golinelli, Joan S. Tucker, David P. Kennedy, Harold P. Green. 2011

BACKGROUND: Homeless men may be at particular risk for the negative health effects of substance use. This cross-sectional study investigates the individual and personal network risk factors associated with substance use in this vulnerable population. METHODS: Participants were a representative probability sample of 305 heterosexually active homeless men interviewed from meal programs in the Skid Row region of Los Angeles, CA. Interviews assessed individual, personal network, and substance use characteristics. Logistic regression examined individual and personal network predictors of the three most prevalent substances. RESULTS: In the past 6 months, the three most prevalent substances were marijuana (56%), crack (40%), and alcohol to intoxication (38%). The mental health status of homeless men was associated with substance use, with PTSD more common among those who used crack. Riskier networks (comprised of a larger proportion of drug users) were associated with marijuana use, and normative social ties (family, employed and school/work contacts) were associated with a decreased likelihood of crack use. CONCLUSIONS: Mental health problems and riskier personal networks are associated with homeless men's substance use. These findings underscore the importance of interventions that focus on improving mental health, mitigating the drug-using norms of personal networks, and helping men to maintain contact with normative, low-risk alters. Mental health care and peer-based, network interventions to reduce substance use should be a priority for heterosexually active homeless men.

http://www.rand.org/pubs/external_publications/EP201100155.html

EP-201100-156

Using Ordered Attitudinal Indicators in a Latent Variable Choice Model: A Study of the Impact of

Security on Rail Travel Behaviour. Andrew Daly, Stephane Hess, Bhanu Patruni, Dimitris Potoglou, Charlene Rohr. 2011

There is growing interest in the use of models that recognise the role of individuals' attitudes and perceptions in choice behaviour. Rather than relying on simple linear approaches or a potentially bias-inducing deterministic approach based on incorporating stated attitudinal indicators directly in the choice model, researchers have recently recognised the latent nature of attitudes. The uptake of such latent attitude models in applied work has however been slow, while a number of overly simplistic assumptions are also commonly made. In this article, we present an application of jointly estimated attitudinal and choice models to a real-world transport study, looking at the role of latent attitudes in a rail travel context. Our results show the impact that concern with privacy, liberty and security, and distrust of business, technology and authority have on the desire for rail travel in the face of increased security measures, as well as for universal security checks. Alongside demonstrating the applicability of the model in applied work, we also address a number of theoretical issues. We first show the equivalence of two different normalisations discussed in the literature. Unlike many other latent attitude studies, we explicitly recognise the repeated choice nature of the data. Finally, the main methodological contribution comes in replacing the typically used continuous model for attitudinal response by an ordered logit structure which more correctly accounts for the ordinal nature of the indicators.

http://www.rand.org/pubs/external_publications/EP201100156.html

EP-201100-157

Relative Affordability of Health Insurance Premiums Under CHIP Expansion Programs and the ACA. Miriam Laugesen. 2011

Affordability is integral to the success of health care reforms aimed at ensuring universal access to health insurance coverage, and affordability determinations have major policy and practical consequences. This article describes factors that influenced the determination of affordability benchmarks and premium-contribution requirements for Children's Health Insurance Program (CHIP) expansions in three states that sought to universalize access to coverage for youth. It also compares subsidy levels developed in these states to the premium subsidy schedule under the Affordable Care Act (ACA) for health insurance plans purchased through an exchange. We find sizeable variability in premium-contribution requirements as a percentage of family income across the three states and in the progressivity and regressivity of the premium-contribution schedules developed. These findings underscore the ambiguity and subjectivity of affordability standards. Further, our analyses suggest that the future of CHIP beyond 2015 is likely to have significant implications for health insurance coverage costs incurred by families who currently rely at least in part on CHIP for coverage.

http://www.rand.org/pubs/external_publications/EP201100157.html

EP-201100-158

Malpractice Risk According to Physician Specialty. Anupam B. Jena, Seth A. Seabury, Darius N. Lakdawalla, Amitabh Chandra. 2011

Background: Data are lacking on the proportion of physicians who face malpractice claims in a year, the size of those claims, and the cumulative career malpractice risk according to specialty. Methods: We analyzed malpractice data from 1991 through 2005 for all physicians who were covered by a large professional liability insurer with a nationwide client base (40,916 physicians and 233,738 physician-years of coverage). For 25 specialties, we reported the proportion of physicians who had malpractice claims in a year, the proportion of claims leading to an indemnity payment (compensation paid to a plaintiff), and the size of indemnity payments. We estimated the cumulative risk of ever being sued among physicians in high- and low-risk specialties. Results: Each year during the study period, 7.4% of all physicians had a malpractice claim, with 1.6% having a claim leading to a payment (i.e., 78% of all claims did not result in

payments to claimants). The proportion of physicians facing a claim each year ranged from 19.1% in neurosurgery, 18.9% in thoracic-cardiovascular surgery, and 15.3% in general surgery to 5.2% in family medicine, 3.1% in pediatrics, and 2.6% in psychiatry. The mean indemnity payment was $274,887, and the median was $111,749. Mean payments ranged from $117,832 for dermatology to $520,923 for pediatrics. It was estimated that by the age of 65 years, 75% of physicians in low-risk specialties had faced a malpractice claim, as compared with 99% of physicians in high-risk specialties. Conclusions: There is substantial variation in the likelihood of malpractice suits and the size of indemnity payments across specialties. The cumulative risk of facing a malpractice claim is high in all specialties, although most claims do not lead to payments to plaintiffs.

http://www.rand.org/pubs/external_publications/EP201100158.html

EP-201100-159

Telephone-based Cognitive-Behavioral Therapy for Latino Patients Living in Rural Areas: A Randomized Pilot Study. Megan Dwight-Johnson, Daniela Golinelli. 2011

OBJECTIVE: This pilot study tested the effectiveness of culturally tailored, telephone-based cognitive-behavioral therapy (CBT) for improving depression outcomes among Latino primary care patients living in rural settings. METHODS: A total of 101 Latino patients at a rural family medical center who met criteria for probable major depression were randomly assigned to enhanced usual care or eight sessions of CBT delivered by phone by trained bilingual therapists from the community. Blinded study assistants assessed depression symptom severity, using the Hopkins Symptom Checklist (SCL) depression items and the Patient Health Questionnaire-9, and patient satisfaction after six weeks, three months, and six months. Mixed-effects models were used to estimate intervention effects over time. For cross-sectional analyses, attrition weights were used to account for missing data. RESULTS: In intent-to-treat analyses, patients who received CBT by phone were more likely to experience improvement in depression scores over the six-month follow-up period compared with patients who received enhanced usual care (β=–.41, t=–2.36, df=219, p=.018, for the SCL; and β=–3.51, t=–2.49, df=221, p=.013, for the PHQ-9). A greater proportion of patients in the CBT group than in the group that received enhanced usual care achieved treatment response at three months (p=.017), as indicated by a 50% improvement in SCL depression score or a score <.75, and reported high satisfaction with treatment (p=.013). CONCLUSIONS: Although limited by small sample size, pilot results suggest culturally tailored, telephone-based CBT has the potential to enhance access to psychotherapy in an underserved Latino population with little access to mental health services.

http://www.rand.org/pubs/external_publications/EP201100159.html

EP-201100-16

Hospital Spending and Inpatient Mortality: Evidence from California: An Observational Study. John A. Romley, Anupam B. Jena, Dana P. Goldman. 2011

BACKGROUND: Evidence shows that high Medicare spending is not associated with better health outcomes at a regional level and that high spending in hospitals is not associated with better process quality. The relationship between hospital spending and inpatient mortality is less well understood. OBJECTIVE: To determine the association between hospital spending and risk-adjusted inpatient mortality. DESIGN: Retrospective cohort study. SETTING: Database of discharge records from 1999 to 2008 for 208 California hospitals included in The Dartmouth Atlas of Health Care. Patients: 2,545,352 patients hospitalized during 1999 to 2008 with 1 of 6 major medical conditions. MEASUREMENTS: Inpatient mortality rates among patients admitted to hospitals with varying levels of end-of-life hospital spending. RESULTS: For each of 6 diagnoses at admission-acute myocardial infarction, congestive heart failure, acute stroke, gastrointestinal hemorrhage, hip fracture, and pneumonia-patient admission to higher-

spending hospitals was associated with lower risk-adjusted inpatient mortality. During 1999 to 2003, for example, patients admitted with acute myocardial infarction to California hospitals in the highest quintile of hospital spending had lower inpatient mortality than did those admitted to hospitals in the lowest quintile (odds ratio, 0.862 [95% CI, 0.742 to 0.983]). Predicted inpatient deaths would increase by 1831 if all patients admitted with acute myocardial infarction were cared for in hospitals in the lowest quintile of spending rather than the highest. The association between hospital spending and inpatient mortality did not vary by region or hospital size. LIMITATION: Unobserved predictors of mortality create uncertainty about whether greater inpatient hospital spending leads to lower inpatient mortality. CONCLUSION: Hospitals that spend more have lower inpatient mortality for 6 common medical conditions.

http://www.rand.org/pubs/external_publications/EP20110016.html

EP-201100-160

The Role of Physicians in Controlling Medical Care Costs and Reducing Waste. Robert H. Brook. 2011

This commentary argues that physicians must take the lead in identifying and eliminating waste in US health care.

http://www.rand.org/pubs/external_publications/EP201100160.html

EP-201100-161

Insurance Expansion and Health Literacy. Laurie T. Martin, Ruth M. Parker. 2011

If the Affordable Care Act is to successfully expand health care coverage and access for those who most need it, states must implement strategies to ensure that those eligible for coverage are appropriately and efficiently enrolled.

http://www.rand.org/pubs/external_publications/EP201100161.html

EP-201100-162

Patient and Provider Characteristics Associated with the Decision of HIV Coinfected Patients to Start Hepatitis C Treatment. Glenn Wagner, Jeffrey Garnett, Bonnie Ghosh-Dastidar, Mallory D. Witt, Laveeza Bhatti. 2011

Hepatitis C (HCV) and HIV coinfection is common and liver disease is a leading cause of morbidity and mortality among coinfected patients. Despite advances in HCV treatment, few HIV coinfected patients actually initiate treatment. We examined patient and provider characteristics associated with a patient's decision to accept or refuse HCV treatment once offered. We conducted patient chart abstraction and surveys with 127 HIV coinfected patients who were offered HCV treatment by their provider and surveys of their HCV care providers at three HIV clinics. Participants were mostly male (87%), minority (66%), and had a history of injection drug use (60%). Most had been diagnosed with HIV for several years (X=13.7 years) and reported HIV transmission through unprotected sex (47%). Of the 127 patients, 79 accepted treatment. In multivariate analysis, patients who had a CD4 greater than 200 cells/mm3 and a provider with more confidence about HCV treatment were more likely to accept the recommendation to start treatment; younger age was marginally associated with treatment acceptance. In bivariate analysis, added correlates of treatment acceptance included male gender, no recent drug use, and several provider attitudes regarding treatment and philosophy about determination of patient treatment readiness. Patient and provider characteristics are important when understanding a patient's decision to start or defer HCV treatment. Further research is needed to better understand barriers to treatment uptake as new and more effective HCV treatments will soon be available.

http://www.rand.org/pubs/external_publications/EP201100162.html

EP-201100-163

A Closer Look at Depression and Its Relationship to HIV Antiretroviral Adherence. Glenn Wagner, Robert H. Remien, Honghu H. Liu. 2011

BACKGROUND: Depression consistently pre-

dicts nonadherence to human immunodeficiency virus antiretroviral therapy, but which aspects of depression are most influential are unknown. Such knowledge could inform assessments of adherence readiness and the type of depression treatment to utilize. PURPOSE: We examined how depression severity, symptom type, and change over time relate to adherence. METHODS: Microelectronic adherence and self-reported depression data from 1,374 participants across merged studies were examined with cross-sectional and longitudinal analyses. Depression variables included a continuous measure, categorical measure of severity, cognitive and vegetative subscales, and individual symptoms. RESULTS: At baseline, mean adherence was 69%, and 25% had mild/moderate and 18% had severe depression. In cross-sectional multivariate analyses, continuous depression, cognitive depressive symptoms, and severe depression were associated with lower adherence. In longitudinal analysis, reductions in both continuous and categorical depression predicted increased adherence. CONCLUSIONS: The relationship between global continuous depression and nonadherence was statistically significant, but relatively weak compared to that of cognitive depressive symptoms and severe depression, which appear to pose strong challenges to adherence and call for the need for early detection and treatment of depression.

http://www.rand.org/pubs/external_publications/EP201100163.html

EP-201100-164

Early Care and Education for Children in Immigrant Families. Lynn A. Karoly, Gabriella C. Gonzalez. 2011

A substantial and growing share of the population, immigrant children are more likely than children with native-born parents to face a variety of circumstances, such as low family income, low parental education, and language barriers that place them at risk of developmental delay and poor academic performance once they enter school. Lynn Karoly and Gabriella Gonzalez examine the current role of and future potential for early care and education (ECE) programs in promoting healthy development for immigrant children. Participation in center-based care and preschool programs has been shown to have substantial short-term benefits and may also lead to long-term gains as children go through school and enter adulthood. Yet, overall, immigrant children have lower rates of participation in nonparental care of any type, including center-based ECE programs, than their native counterparts. Much of the participation gap can be explained by just a few economic and sociodemographic factors, the authors find. To some extent, the factors that affect disadvantaged immigrant children resemble those of their similarly disadvantaged native counterparts. Affordability, availability, and access to ECE programs are structural barriers for many immigrant families, as they are for disadvantaged families more generally. Language barriers, bureaucratic complexity, and distrust of government programs, especially among undocumented immigrants, are unique challenges that may prevent some immigrant families from taking advantage of ECE programs, even when their children might qualify for subsidies. Cultural preferences for parental care at home can also be a barrier. Thus the authors suggest that policy makers follow a two-pronged approach for improving ECE participation rates among immigrant children. First, they note, federal and state ECE programs that target disadvantaged children in general are likely to benefit disadvantaged immigrant children as well. Making preschool attendance universal is one way to benefit all immigrant children. Second, participation gaps that stem from the unique obstacles facing immigrants, such as language barriers and informational gaps, can be addressed through the way publicly subsidized and private or nonprofit programs are structured.

http://www.rand.org/pubs/external_publications/EP201100164.html

EP-201100-165

Not Making the Transition to College: School, Work, and Opportunities in the Lives of Contemporary American Youth. Robert Bozick, Stefanie DeLuca. 2011

Unlike traditional research on educational stratification that focuses on the pursuit of higher education, our study examines why young adults do not make the transition to college, using a nationally representative sample of college non-enrollees (N = 2640). In applying latent class analysis techniques, we identified multiple types of students who do not pursue college. One group of non-enrollees (27.6%) reports forgoing college because the economic barriers are too high — either because of college affordability or family financial responsibility. These youth had both low math test scores and low family income, and thus closely align with regression-based analyses on college enrollment that emphasize academic and economic constraints as the central barriers to educational progress. However, we also identified a second, often overlooked group of youth who had the academic preparation and family income support to enroll in higher education, but decided to forgo college because they preferred to work and to make money (18.3%). The heterogeneous motives of these youth suggest that postsecondary decisions are not always guided by academic and economic barriers, but sometimes driven by previous work experience and perceptions of local opportunities for school and work.

http://www.rand.org/pubs/external_publications/EP201100165.html

EP-201100-166

Increases in Mortality, Length of Stay, and Cost Associated with Hospital-Acquired Infections in Trauma Patients. Laurent G. Glance, Patricia Stone, Dana B. Mukamel, Andrew W. Dick. 2011

OBJECTIVE: To explore the clinical impact and economic burden of hospital-acquired infections (HAIs) in trauma patients using a nationally representative database. DESIGN: Retrospective study. SETTING: The Healthcare Cost and Utilization Project Nationwide Inpatient Sample. PATIENTS: Trauma patients. MAIN OUTCOME MEASURES: We examined the association between HAIs (sepsis, pneumonia, Staphylococcus infections, and Clostridium difficile- associated disease) and in-hospital mortality, length of stay, and inpatient costs using logistic regression and generalized linear models. RESULTS: After controlling for patient demographics, mechanism of injury, injury type, injury severity, and comorbidities, we found that mortality, cost, and length of stay were significantly higher in patients with HAIs compared with patients without HAIs. Patients with sepsis had a nearly 6-fold higher odds of death compared with patients without an HAI (odds ratio, 5.78; 95% confidence interval, 5.03-6.64; P < .001). Patients with other HAIs had a 1.5- to1.9-fold higher odds of mortality compared with controls (P < .005). Patients with HAIs had costs that were approximately 2- to 2.5-fold higher compared with patients without HAIs (P < .001). The median length of stay was approximately 2-fold higher in patients with HAIs compared with patients without HAIs (P < .001). CONCLUSIONS: Trauma patients with HAIs are at increased risk for mortality, have longer lengths of stay, and incur higher inpatient costs. In light of the preventability of many HAIs and the magnitude of the clinical and economic burden associated with HAIs, policies aiming to decrease the incidence of HAIs may have a potentially large impact on outcomes in injured patients.

http://www.rand.org/pubs/external_publications/EP201100166.html

EP-201100-167

Substance Use and Recessions: What Can Be Learned from Economic Analyses of Alcohol?. Rosalie Liccardo Pacula. 2011

In this paper, I conduct a review of the economics literature examining the relationship between alcohol use and the macro economy comparing methods, measures and findings. Like illicit drug consumption, the relationship between alcohol use and economic conditions is not entirely straightforward since there are various theoretical explanations for why they might be positively or negatively related. Empirical findings suggest that the relationship between drinking and the economy depends on the type of user and whether use is examined in developing or developed countries. In developed countries, heavy drinkers consume less in a downturn, while light drinkers consume more. This pro-cyclical relationship found for heavy

drinking does not hold for developed countries where disposable income is low. The implications for researchers interested in understanding how illicit drug consumption varies with the business cycle are that they must be careful to consider differential responses across user types as well as expensive and inexpensive drugs.

http://www.rand.org/pubs/external_publications/EP201100167.html

EP-201100-168

Spillover Effects of Community Uninsurance on Working-Age Adults and Seniors: An Instrumental Variables Analysis. Carole Roan Gresenz, Jose J. Escarce. 2011

Previous research suggests, but does not definitively establish, that a high level of uninsurance in a community may negatively affect access to and quality of health care for insured persons. OBJECTIVE: To assess the effect of the level of uninsurance in a community on access to and satisfaction with care—an important dimension of quality—among insured persons. RESEARCH DESIGN: The 1996 to 2006 Medical Expenditure Panel Survey Household Component data linked to data from the Current Population Survey, Area Resource File, and the InterStudy Competitive Edge. Analyses include 86,928 insured adult respondents living in approximately 200 large metropolitan areas. MAIN OUTCOME MEASURES: Measures of whether an individual had a usual source of care, had any delay/difficulty obtaining needed care, used office-based services, used prescription drug services, and used any medical services, and measures of satisfaction with care. RESULTS: Among privately insured adults, a higher community uninsurance rate resulted in a lower probability of having a usual source of care, having an office-based visit, having any medical expenditures, and reporting being satisfied with the quality of care provided by the usual source of care. A higher community uninsurance rate also led to a higher probability of reporting difficulty obtaining needed care. Among Medicare enrollees, a higher community uninsurance rate resulted in lower reported satisfaction with care and higher probability of experiencing difficulty or delay in getting needed care. CONCLUSIONS: Our results suggest substantial spillover effects of the community uninsurance rate on access to and satisfaction with health care among insured working-age adults and seniors. Consequently, new efforts to address the problem of the uninsured may bring significant benefits to persons who already have insurance.

http://www.rand.org/pubs/external_publications/EP201100168.html

EP-201100-169

Some Thoughts on the Role of Robust Control Theory in Climate-Related Decision Support: An Editorial Comment. Robert J. Lempert, Shawn McKay. 2011

Climate change is sure to surprise us, both in its impacts and in the technological and behavioral changes that will affect society's ability to respond (NRC 2009). Any successful response to climate change--both the challenges of limiting the magnitude of future climate change and adapting to its impacts--will clearly involve policies that evolve over time in response to new information and that are robust over a wide range of difficult-to-predict future conditions. Recent years have seen expanding interest in decision frameworks and approaches to help identify and evaluate such policies. Funke and Paetz (2011) offer robust control theory as one means to evaluate such robust and adaptive policies for reducing greenhouse gas emissions.

http://www.rand.org/pubs/external_publications/EP201100169.html

EP-201100-17

A Unified Framework for Smoking Assessment: The PROMIS Smoking Initiative. William G. Shadel, Joan S. Tucker. 2011

The PROMIS Smoking Initiative has the goal of developing, evaluating, and making widely available a set of items for assessing smoking behavior and the biopsychosocial constructs that can be used to predict smoking outcomes.

http://www.rand.org/pubs/external_publications/EP20110017.html

EP-201100-170

Does Marginal Price Matter? A Regression Discontinuity Approach to Estimating Water Demand. Shanthi Nataraj. 2011

Although complex pricing schedules are increasingly common among water and electricity providers, it is difficult to determine whether consumers respond to changes in the pricing schedule because price changes are often confounded with simultaneous demand shocks or non-price policies. To overcome this challenge, we exploit a natural experiment – the introduction of a third price block in an increasing block pricing schedule for water – in Santa Cruz, California. Using a regression discontinuity design, we find that consumers do respond to changes in marginal price. Doubling marginal price leads to a 12% decrease in water use (500 cubic feet per bill) among high-use households.

http://www.rand.org/pubs/external_publications/EP201100170.html

EP-201100-171

Technology Interactions Among Low-Carbon Energy Technologies: What Can We Learn from a Large Number of Scenarios?. Andrew Hackbarth, Benjamin P. Bryant, Robert J. Lempert. 2011

Advanced low-carbon energy technologies can substantially reduce the cost of stabilizing atmospheric carbon dioxide concentrations. Understanding the interactions between these technologies and their impact on the costs of stabilization can help inform energy policy decisions. Many previous studies have addressed this challenge by exploring a small number of representative scenarios that represent particular combinations of future technology developments. This paper uses a combinatorial approach in which scenarios are created for all combinations of the technology development assumptions that underlie a smaller, representative set of scenarios. We estimate stabilization costs for 768 runs of the Global Change Assessment Model (GCAM), based on 384 different combinations of assumptions about the future performance of technologies and two stabilization goals. Graphical depiction of the distribution of stabilization costs provides first-order insights about the full data set and individual technologies. We apply a formal scenario discovery method to obtain more nuanced insights about the combinations of technology assumptions most strongly associated with high-cost outcomes. Many of the fundamental insights from traditional representative scenario analysis still hold under this comprehensive combinatorial analysis. For example, the importance of carbon capture and storage (CCS) and the substitution effect among supply technologies are consistently demonstrated. The results also provide more clarity regarding insights not easily demonstrated through representative scenario analysis. For example, they show more clearly how certain supply technologies can provide a hedge against high stabilization costs, and that aggregate end-use efficiency improvements deliver relatively consistent stabilization cost reductions. Furthermore, the results indicate that a lack of CCS options combined with lower technological advances in the buildings sector or the transportation sector is the most powerful predictor of high-cost scenarios.

http://www.rand.org/pubs/external_publications/EP201100171.html

EP-201100-172

A Decade of Health Care Cost Growth Has Wiped Out Real Income Gains for an Average US Family. David Auerbach, Arthur L. Kellermann. 2011

Although a median-income US family of four with employer-based health insurance saw its gross annual income increase from $76,000 in 1999 to $99,000 in 2009 (in current dollars), this gain was largely offset by increased spending to pay for health care. Monthly spending increases occurred in the family's health insurance premiums (from $490 to $1,115), out-of-pocket health spending (from $135 to $235), and taxes devoted to health care (from $345 to $440). After accounting for price increases in other goods and services, the family had $95 more in monthly income to devote to nonhealth spending in 2009 than in

1999. By contrast, had the rate of health care cost growth not exceeded general inflation, the family would have had $545 more per month instead of $95 — a difference of nearly $5,400 per year. Even the $95 gain was artificial, because tax collections in 2009 were insufficient to cover actual increases in federal health spending. As a result, we argue, the burdens imposed on all payers by steadily rising health care spending can no longer be ignored.

http://www.rand.org/pubs/external_publications/EP201100172.html

EP-201100-173

Anaplastic Large Cell Lymphoma and Breast Implants: Results from a Structured Expert Consultation Process. Benjamin Kim, Kevin C. Chung, Christopher Schnyer, Soeren Mattke. 2011

BACKGROUND: There are increasing concerns about a possible association between anaplastic large cell lymphoma (ALCL) and breast implants. We conducted a structured expert consultation process to evaluate the evidence for the association, its clinical significance, and a potential biological model based on their interpretation of the published evidence. METHODS: A multidisciplinary panel of 10 experts was selected based on nominations from national specialty societies, academic department heads, and recognized researchers in the U.S. RESULTS: Panelists agreed that (1) there is a positive association between breast implants and ALCL development but likely under-recognition of the true number of cases; (2) a recurrent, clinically evident seroma occurring >= 6 months after breast implantation should be aspirated and sent for cytologic analysis; (3) anaplastic lymphoma kinase (ALK)-negative ALCL that develops around breast implants is a clinically indolent disease with a favorable prognosis that is distinct from systemic ALK-negative ALCL; (4) management should consist of removal of the involved implant and capsule, which is likely to prevent recurrence, and evaluation for other sites of disease; and (5) adjuvant radiation or chemotherapy should not be offered to women with capsule-confined disease. Little agreement, however, was found regarding etiologic risk factors for implant-associated ALCL. CONCLUSIONS: Our assessment yielded consistent results on a number of key issues regarding ALCL in women with breast implants, but substantial further research is needed to improve our understanding of the epidemiology, clinical aspects, and biology of this disease.

http://www.rand.org/pubs/external_publications/EP201100173.html

EP-201100-174

Do Colleges Cultivate Critical Thinking, Problem Solving, Writing and Interpersonal Skills?. Anna Rosefsky Saavedra, Juan Esteban Saavedra. 2011

We investigate how much value college enrollment adds to students' critical thinking, problem-solving and communication skills, and the role college inputs play in developing these competencies, using data from a 2009 collegiate assessment pilot study in Colombia. Relative to observationally similar first year students, students in their final year of college score about half of a standard deviation higher, with statistically significant higher scores on every individual component of the test. Sensitivity analyses indicate that results are robust to validity threats posed by selection bias. Students in private colleges exhibit significantly higher overall test score differences. Measures of college quality such as selectivity, rankings based on reputation, share of faculty with PhD, share of full-time faculty and expenditures per student, however, are not meaningfully associated with higher test score differences between last and first year students.

http://www.rand.org/pubs/external_publications/EP201100174.html

EP-201100-175

Comparing the Costs of Alternative Models of End-of-Life Care. Tom McBride, Alec Morton, Andy Nichols, Christian van Stolk, , . 2011

OBJECTIVES: This study explores the financial consequences of decreased acute care utilization and expanded community-based care for patients at the end of life in England. METHOD: A Mar-

kov model based on cost and utilization data was used to estimate the costs of care for cancer and organ failure in the last year of life and to simulate reduced acute care utilization. RESULTS: We estimated at pounds 1.8 billion the cost to the taxpayer of care for the 127,000 patients dying from cancer in 2006. The equivalent cost for the 30,000 people dying from organ failure was pounds 553 million. Resources of pounds 16 to pounds 171 million could be released for cancer. CONCLUSION: People generally prefer to die outside hospital. Our results suggest that reducing reliance on acute care could release resources and better meet peoples' preferences. Better data on the cost-effectiveness of interventions are required. Similar models would be useful to decision-makers evaluating changes in service provision.

http://www.rand.org/pubs/external_publications/EP201100175.html

EP-201100-176

Behavioral Health Insurance Parity: Does Oregon's Experience Presage the National Experience with the Mental Health Parity and Addiction Equity Act?. John K. McConnell, Samuel H. N. Gast, M. Susan Ridgely, Neil Wallace, Natalie Jacuzzi, Traci Rieckmann, Benton H. Mcfarland, Dennis McCarty. 2011

OBJECTIVE: The Mental Health Parity and Addiction Equity Act of 2008 prohibits commercial group health plans from imposing spending and visit limitations for mental health and substance abuse services that are not imposed on medical-surgical services. The act also restricts the use of managed care tools that apply to behavioral health benefits in ways that differ from how they apply to medical-surgical benefits. The only precedent for this approach is Oregon's state parity law, which was implemented in 2007. The goal of this study was to estimate the effect of Oregon's parity law on expenditures for mental health and substance abuse treatment services. METHOD: The authors compared expenditures for commercially insured individuals in four Oregon health plans from 2005 through 2008 and a matched group of commercially insured individuals in Oregon who were exempt from parity. Using a difference-in-differences analysis, the authors analyzed the effect of comprehensive parity on spending for mental health and substance abuse services. RESULTS: Increases in spending on mental health and substance abuse services after implementation of Oregon's parity law were almost entirely the result of a general trend observed among individuals with and without parity. Expenditures per enrollee for mental health and substance abuse services attributable to parity were positive, but they did not differ significantly from zero in any of the four plans. CONCLUSIONS: Behavioral health insurance parity rules that place restrictions on how plans manage mental health and substance abuse services can improve insurance protections without substantial increases in total costs.

http://www.rand.org/pubs/external_publications/EP201100176.html

EP-201100-177

The Increased Concentration of Health Plan Markets Can Benefit Consumers Through Lower Hospital Prices. Glenn Melnick, Anil Bamezai. 2011

The long-term trend of consolidation among US health plans has raised providers' concerns that the concentration of health plan markets can depress their prices. Although our study confirmed that, it also revealed a more complex picture. First, we found that 64 percent of hospitals operate in markets where health plans are not very concentrated, and only 7 percent are in markets that are dominated by a few health plans. Second, we found that in most markets, hospital market concentration exceeds health plan concentration. Third, our study confirmed earlier studies showing that greater hospital market concentration leads to higher hospital prices. Fourth, we found that hospital prices in the most concentrated health plan markets are approximately 12 percent lower than in more competitive health plan markets. Overall, our results show that more concentrated health plan markets can counteract the price-increasing effects of concentrated hospital markets, and that—contrary to conventional wisdom—in-

creased health plan concentration benefits consumers through lower hospital prices as long as health plan markets remain competitive. Our findings also suggest that consumers would benefit from policies that maintained competition in hospital markets or that would restore competition to hospital markets that are uncompetitive.

http://www.rand.org/pubs/external_publications/EP201100177.html

EP-201100-178

Meaningful Use of Electronic Prescribing in 5 Exemplar Primary Care Practices. Jesse C. Crosson, Susan G. Straus, David Eisenman, Douglas S. Bell. 2011

PURPOSE: Successful use of electronic prescribing (e-prescribing) is a key requirement for demonstrating meaningful use of electronic health records to qualify for federal incentives. Currently, many physicians who implement e-prescribing fail to make substantial use of these systems, and little is known about factors contributing to successful e-prescribing use. The objective of this study was to identify successful implementation and use techniques. METHODS: We conducted a multimethod qualitative case study of 5 ambulatory primary care practices identified as exemplars of effective e-prescribing. The practices were identified by a group of e-prescribing experts. Field researchers conducted in-depth interviews and observed prescription-related workflow in these practices. RESULTS: In these exemplar practices, successful use of e-prescribing required practice transformation. Practice members reported extensive efforts to redesign work processes to take advantage of e-prescribing capabilities and to create specific e-prescribing protocols to distribute prescription-related work among practice team members. These practices had substantial resources to support e-prescribing use, including local physician champions, ongoing training for practice members, and continuous on-site technical support. Practices faced considerable challenges during use of e-prescribing, however, deriving from problems coordinating new work processes with pharmacies and ineffective health information exchange that required workarounds to ensure the completeness of patient medical records. CONCLUSIONS: More widespread implementation and effective use of e-prescribing in ambulatory care settings will require practice transformation efforts that focus on work process redesign while being attentive to effects on patient and pharmacy involvement in prescribing. Improved health information exchange is required to fully realize expected quality, safety, and efficiency gains of e-prescribing.

http://www.rand.org/pubs/external_publications/EP201100178.html

EP-201100-179

Multisite Cost Analysis of a School-Based Voluntary Alcohol and Drug Prevention Program. Beau Kilmer, James R. Burgdorf, Joan S. Tucker. 2011

OBJECTIVE: This article estimates the societal costs of Project CHOICE, a voluntary after-school alcohol and other drug prevention program for adolescents. To our knowledge, this is the first cost analysis of an after-school program specifically focused on reducing alcohol and other drug use. METHOD: The article uses microcosting methods based on the societal perspective and includes a number of sensitivity analyses to assess how the results change with alternative assumptions. Cost data were obtained from surveys of participants, facilitators, and school administrators; insights from program staff members; program expenditures; school budgets; the Bureau of Labor Statistics; and the National Center for Education Statistics. RESULTS: From the societal perspective, the cost of implementing Project CHOICE in eight California schools ranged from $121 to $305 per participant (Mdn = $238). The major cost drivers included labor costs associated with facilitating Project CHOICE, opportunity costs of displaced class time (because of in-class promotions for Project CHOICE and consent obtainment), and other efforts to increase participation. Substituting nationally representative cost information for wages and space reduced the range to $100-$206 (Mdn = $182), which is lower than the Substance

Abuse and Mental Health Services Administration's estimate of $262 per pupil for the "average effective school-based program in 2002." Denominating national Project CHOICE costs by enrolled students instead of participants generates a median per-pupil cost of $21 (range: $14-$28). CONCLUSIONS: Estimating the societal costs of school-based prevention programs is crucial for efficiently allocating resources to reduce alcohol and other drug use. The large variation in Project CHOICE costs across schools highlights the importance of collecting program cost information from multiple sites.

http://www.rand.org/pubs/external_publications/EP201100179.html

EP-201100-18

The Association Between Care Experiences and Parent Ratings of Care for Different Racial, Ethnic, and Language Groups in a Medicaid Population. Marc N. Elliott, Andrea Richardson, Rita Mangione-Smith. 2011

OBJECTIVE: To examine the association between care experiences and parent ratings of care within racial/ethnic/language subgroups. DATA SOURCE: National Consumer Assessment of Healthcare Providers and Systems Benchmarking Database 3.0 (2003-2006). SAMPLE CHARACTERISTICS. 111,139 parents of minor Medicaid managed care enrollees. STUDY DESIGN: Cross-sectional observational study predicting "poor" (0-5 on 0-10 scale) parent ratings of personal doctor, specialist, health care, and health plan from care experiences for different parent race/ethnicity/language subgroups (Latino/Spanish, Latino/English, white, and black). PRINCIPAL FINDINGS: Care experiences had similar associations with the probability of poor parent ratings of care across the four racial/ethnic/language subgroups ($p>.20$). A one standard deviation improvement in the doctor communication care experience was associated with about half the frequency of poor ratings of care for personal doctor and health care in all subgroups ($p<.05$). Sensitivity analysis of individual communication items found that failure to provide explanations to children predicted poor ratings of care only among whites, who also weighed the length of physician interaction more heavily than other subgroups. CONCLUSIONS: Communication-based interventions may improve experiences and ratings of care for all subgroups, although implementation of these interventions may need to consider preferences associated with race, ethnicity, and language.

http://www.rand.org/pubs/external_publications/EP20110018.html

EP-201100-180

Patients' Literacy Skills: More Than Just Reading Ability. Matthias Schonlau, Laurie T. Martin, Ann C. Haas, Rima Rudd. 2011

Limited literacy contributes to suboptimal care and outcomes for patients. The Institute of Medicine noted that future work in health literacy should consider multiple literacy skills. However, lacking empirical evidence of the relationship between different literacy skills, reading skills are often used as proxies of literacy in research and practice. Using a community-based sample of 618 individuals residing in Boston, Massachusetts, and Providence, Rhode Island, the authors conducted a principal component analysis on measures of four literacy skills — reading, numeracy, oral (speaking), and aural (listening) — to examine whether and to what extent literacy can, or should, be represented by a single measure. The first principal component represented overall literacy and could only explain 60% of the total variation in literacy skills among individuals. The second principal component differentiated between numeracy/reading and the oral/aural exchange. While reading and numeracy best represent overall literacy, patients' relative strengths may vary. Those with moderate reading ability may have high oral and aural language skills. Conversely, people who have difficulties speaking with or understanding a provider may read well. Effective communication with patients should rely on the oral exchange and written health information, and not rely on a single literacy skill.

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tions/EP201100180.html

EP-201100-181

Travel Using Managed Lanes: An Application of a Stated Choice Model for Houston, Texas. Sunil Patil. 2011

Managed lane (ML) travel adds flexibility, but also complexity, to travel choices. Stated choice models (SCMs) are often used for modeling complex transportation choices such as these in an effort to predict demand for these travel options. The design methods for SCMs have evolved from simple orthogonal designs to more sophisticated designs such as D-efficient design that can increase efficiency in estimation. We used three different survey design strategies to produce the stated preference portion of surveys, which were used to elicit travel choices for a sample of Houston travelers. Apart from the D-efficient design we also used random and adaptive random designs to generate attribute levels. There were observable differences in choice behavior depending on what design strategy was used. These differences appear to influence estimates of the value of travel time savings (VTTS) obtained from the random parameter logit (RPL) models estimated using these data. This, in turn, would greatly impact the percentage of travelers predicted to use the MLs. The adaptive random strategy was superior to the other design methods in several categories, and it had similar efficiency to the D-efficient design. However, the mean of VTTS estimate obtained from a D-efficient design was closer to what is typically found in the literature. The difference was considerable and could greatly influence traffic and revenue estimates for the MLs, illustrating the importance of the survey design strategy.

http://www.rand.org/pubs/external_publications/EP201100181.html

EP-201100-182

Health Information Management and Perceptions of the Quality of Care for Children with Tracheotomy: A Qualitative Study. Donald Goldmann, Robin M. Weinick. 2011

BACKGROUND: Children with tracheotomy receive health care from an array of providers within various hospital and community health system sectors. Previous studies have highlighted substandard health information exchange between families and these sectors. The aim of this study was to investigate the perceptions and experiences of parents and providers with regard to health information management, care plan development and coordination for children with tracheotomy, and strategies to improve health information management for these children. METHODS: Individual and group interviews were performed with eight parents and fifteen healthcare (primary and specialty care, nursing, therapist, equipment) providers of children with tracheotomy. The primary tracheotomy-associated diagnoses for the children were neuromuscular impairment (n = 3), airway anomaly (n = 2) and chronic lung disease (n = 3). Two independent reviewers conducted deep reading and line-by-line coding of all transcribed interviews to discover themes associated with the objectives. RESULTS: Children with tracheotomy in this study had healthcare providers with poorly defined roles and responsibilities who did not actively communicate with one another. Providers were often unsure where to find documentation relating to a child's tracheotomy equipment settings and home nursing orders, and perceived that these situations contributed to medical errors and delayed equipment needs. Parents created a home record that was shared with multiple providers to track the care that their children received but many considered this a burden better suited to providers. Providers benefited from the parent records, but questioned their accuracy regarding critical tracheotomy care plan information such as ventilator settings. Parents and providers endorsed potential improvement in this environment such as a comprehensive internet-based health record that could be shared among parents and providers, and between various clinical sites. CONCLUSIONS: Participants described disorganized tracheotomy care and health information mismanagement that could help guide future investigations into the impact of improved health information systems for children with tracheotomy. Strategies with the potential to improve tracheot-

omy care delivery could include defined roles and responsibilities for tracheotomy providers, and improved organization and parent support for maintenance of home-based tracheotomy records with web-based software applications, personal health record platforms and health record data authentication techniques.

http://www.rand.org/pubs/external_publications/EP201100182.html

EP-201100-183

Academic Health Centers and Comparative Effectiveness Research: Baggage, Buckets, Basics, and Bottles. Harold Alan Pincus. 2011

Comparative effectiveness research (CER) is like a projective test. Individuals (and organizations) have presumptions about the connotations and "baggage" that accompany the term. To some, it implies studies that compare Drug A against Drug B (so-called "Coke versus Pepsi" studies). For others, the term raises the specter of government interfering with medical practice, dictating specific treatment procedures. To others, it conjures up the "R" word (rationing) and images of death panels. The battles surrounding health care reform attached so much baggage that a new term for CER was created in the Patient Protection and Affordable Care Act — patient-centered outcomes research. In fact, CER has a specific definition spelled out in an Institute of Medicine report, built around the simple concept of providing more and better information to patients, providers, and policy makers. This editorial attempts further clarification by identifying seven "bins" into which activities that take place under CER can be sorted: (1) workforce development; (2) research infrastructure; (3) evidence creation; (4) analysis and synthesis; (5) clinical and systems implementation; (6) priority setting; and (7) policymaking.

http://www.rand.org/pubs/external_publications/EP201100183.html

EP-201100-184

Identifying Quality Improvement Intervention Publications - a Comparison of Electronic Search Strategies. Susanne Hempel, Lisa V. Rubenstein, Roberta M. Shanman, Robbie Foy, Su Golder, Paul G. Shekelle. 2011

BACKGROUND: The evidence base for quality improvement (QI) interventions is expanding rapidly. The diversity of the initiatives and the inconsistency in labeling these as QI interventions makes it challenging for researchers, policymakers, and QI practitioners to access the literature systematically and to identify relevant publications. METHODS: We evaluated search strategies developed for MEDLINE (Ovid) and PubMed based on free text words, Medical subject headings (MeSH), QI intervention components, continuous quality improvement (CQI) methods, and combinations of the strategies. Three sets of pertinent QI intervention publications were used for validation. Two independent expert reviewers screened publications for relevance. We compared the yield, recall rate, and precision of the search strategies for the identification of QI publications and for a subset of empirical studies on effects of QI interventions. RESULTS: The search yields ranged from 2,221 to 216,167 publications. Mean recall rates for reference publications ranged from 5% to 53% for strategies with yields of 50,000 publications or fewer. The 'best case' strategy, a simple text word search with high face validity ('quality' AND 'improv*' AND 'intervention*') identified 44%, 24%, and 62% of influential intervention articles selected by Agency for Healthcare Research and Quality (AHRQ) experts, a set of exemplar articles provided by members of the Standards for Quality Improvement Reporting Excellence (SQUIRE) group, and a sample from the Cochrane Effective Practice and Organization of Care Group (EPOC) register of studies, respectively. We applied the search strategy to a PubMed search for articles published in 10 pertinent journals in a three-year period which retrieved 183 publications. Among these, 67% were deemed relevant to QI by at least one of two independent raters. Forty percent were classified as empirical studies reporting on a QI intervention. CONCLUSIONS: The presented search terms and operating characteristics can be used to guide the identification of QI intervention publications. Even with extensive iterative development, we achieved only moderate recall rates of

reference publications. Consensus development on QI reporting and initiatives to develop QI-relevant MeSH terms are urgently needed.

http://www.rand.org/pubs/external_publications/EP201100184.html

EP-201100-185

Health Care Reform and the Health Care Workforce — The Massachusetts Experience. Douglas Staiger, David Auerbach, Peter Buerhaus. 2011

The Massachusetts Health Care Reform Plan, implemented in 2007, offered insurance subsidies for low-income individuals, expanded Medicaid coverage, and created an individual mandate to obtain insurance, pay-or-play requirements for employers, and a state insurance exchange through which many of the newly insured Massachusetts residents obtained coverage. The Massachusetts reform experience has been watched closely for indications of what might occur throughout the country as national health care reform is implemented under the Accountable Care Act (ACA). One aspect of the Massachusetts experience that has remained unexplored is the impact on the health care workforce, particularly the question of whether greater numbers of health care professionals or support personnel were needed to ensure the success of the reform. This analysis gathered data on total and occupation- level employment per capita in the health care industry and compared trends before and after reform in Massachusetts with those in all other states. The analysis found that reform may accelerate the trend toward health care's being the dominant employment sector in the economy. More important, the analysis supports physicians' concerns about the administrative burden of health care reforms, an issue that will have to be addressed as the ACA is implemented. Finally, rather than requiring greater numbers of physicians and nurses, reform may require larger numbers of people supporting the work of such health care professionals.

http://www.rand.org/pubs/external_publications/EP201100185.html

EP-201100-186

Best-worst Scaling Vs. Discrete Choice Experiments: An Empirical Comparison Using Social Care Data. Dimitris Potoglou, Peter Burge. 2011

This paper presents empirical findings from the comparison between two principal preference elicitation techniques: discrete choice experiments and profile-based best-worst scaling. Best-worst scaling involves less cognitive burden for respondents and provides more information than traditional "pick-one" tasks asked in discrete choice experiments. However, there is lack of empirical evidence on how best-worst scaling compares to discrete choice experiments. This empirical comparison between discrete choice experiments and best-worst scaling was undertaken as part of the Outcomes of Social Care for Adults project, England, which aims to develop a weighted measure of social care outcomes. The findings show that preference weights from best-worst scaling and discrete choice experiments do reveal similar patterns in preferences and in the majority of cases preference weights—when normalised/rescaled—are not significantly different.

http://www.rand.org/pubs/external_publications/EP201100186.html

EP-201100-187

Developing Interdisciplinary Centers in Aging: Learning from the RAND/Hartford Building Interdisciplinary Geriatric Health Care Research Centers Initiative. Dana Schultz, Donna J. Keyser. 2011

The rising number of older patients with complex, often chronic conditions presents challenges in service delivery and social organization. Addressing the complexity of multiple interacting chronic conditions and devoting time for extensive interaction with elderly patients requires an interdisciplinary team. The "Building Interdisciplinary Geriatric Health Care Research Centers" initiative was designed to establish geriatric research centers that would bring together interdisciplinary teams of health professionals who would integrate concepts, methods, and practices across disciplines. The directors of the centers planned and conducted activities (e.g., seminars, Wikis, and

mentoring) to develop infrastructure, to conduct collaborative research projects, and to support junior faculty career development. The activities in these areas led to a number of grant submissions and awards, to manuscript acceptances and conference presentations, and to career advances for junior faculty members. Overall, the centers' directors found that building interdisciplinary research capabilities takes time, attention, and support. External grant funding helped to create centers that, through infrastructure and activities, brought together individuals from a wide range of disciplines who had common interests and then helped these individuals collaborate to develop new projects or build on existing efforts. Through their infrastructure, collaborative research, and career development activities, the centers changed the approach to interdisciplinary research.

http://www.rand.org/pubs/external_publications/EP201100187.html

EP-201100-188

Romantic Attraction and Adolescent Smoking Trajectories. Michael Pollard, Joan S. Tucker, Harold P. Green, David P. Kennedy, Myong-Hyun Go. 2011

Research on sexual orientation and substance use has established that lesbian, gay, and bisexual (LGB) individuals are more likely to smoke than heterosexuals. This analysis furthers the examination of smoking behaviors across sexual orientation groups by describing how same- and opposite-sex romantic attraction, and changes in romantic attraction, are associated with distinct six-year developmental trajectories of smoking. The National Longitudinal Study of Adolescent Health dataset is used to test our hypotheses. Multinomial logistic regressions predicting smoking trajectory membership as a function of romantic attraction were separately estimated for men and women. Romantic attraction effects were found only for women. The change from self-reported heterosexual attraction to lesbian or bisexual attraction was more predictive of higher smoking trajectories than was a consistent lesbian or bisexual attraction, with potentially important differences between the smoking patterns of these two groups.

http://www.rand.org/pubs/external_publications/EP201100188.html

EP-201100-189

Are United States and Canadian Cancer Screening Rates Consistent with Guideline Information Regarding the Age of Screening Initiation?. Srikanth Kadiyala. 2011

OBJECTIVE: To understand whether US and Canadian breast, colorectal and prostate cancer screening test utilization is consistent with US and Canadian cancer screening guideline information with respect to the age of screening initiation. DESIGN: Cross-sectional, regression discontinuity. SETTING: Canada and the US. PARTICIPANTS: Canadian and American women of ages 30–60 and men of ages 40–60. INTERVENTIONS: None. MAIN OUTCOMES MEASURES: Mammography, prostate-specific antigen (PSA) and colorectal cancer test use within the past 2 years. METHODS: We identify US and Canadian compliance with age screening information in a novel manner, by comparing test utilization rates of individuals who are immediately on either side of the guideline recommended initiation ages. RESULTS: US mammography utilization within the last 2 years increased from 33% at age 39 to 48% at age 40 and 60% at age 41. US colorectal cancer test utilization, within the last 2 years, increased from 15% at age 49 to 18% at age 50 and 28% at age 51. US PSA utilization within the last 2 years increased from 37% at age 49 to 44% at age 50 and 54% at age 51. In Canada, mammography utilization within the last 2 years increased from 47% at age 49 to 57% at age 50 and 66% at age 51. CONCLUSION: American and Canadian cancer screening utilization is generally consistent with each country's guideline recommendations regarding age. US and Canadian differences in screening due to guidelines can potentially explain cross-country differences in breast cancer mortality and affect interpretation of international comparisons of cancer statistics.

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EP-201100-19

Faith-based Organizations, Science, and the Pursuit of Health. Nicole Lurie. 2011

Over the last three decades, there has been increasing interest in the role that faith-based organizations (FBOs) can play in promoting health and health care access among underserved populations. Although the research literature on church-based health interventions is growing, there are relatively few rigorous evaluations of their effectiveness in addressing health and health care outcomes. Establishing a national faith-based health research network is an excellent opportunity to create an evaluative infrastructure and generate new research on health programs and their effectiveness in FBO settings.

http://www.rand.org/pubs/external_publications/EP20110019.html

EP-201100-190

Today's 'Meaningful Use' Standard for Medication Orders by Hospitals May Save Few Lives; Later Stages May Do More. Spencer S. Jones, Paul Heaton, Eric C. Schneider. 2011

The federal government is currently offering bonus payments through Medicare and Medicaid to hospitals, physicians, and other eligible health professionals who meet new standards for "meaningful use" of health information technology. Whether these incentives will improve care, reduce errors, and improve patient safety as intended remains uncertain. We sought to partially fill this knowledge gap by evaluating the relationship between the use of electronic medication order entry and hospital mortality. Our results suggest that the initial meaningful-use threshold for hospitals—which requires using electronic orders for at least 30 percent of eligible patients—is probably too low to have a significant impact on deaths from heart failure and heart attack among hospitalized Medicare beneficiaries. However, the proposed threshold for the next stage of the program—using the orders for at least 60 percent of patients, a rate some stakeholders have said is too high—is more consistently associated with lower mortality. Our results suggest that the higher standard that will probably follow in the second stage of meaningful-use regulations would be more likely than the first-stage standard to produce the improved patient outcomes at the heart of the federal health information technology initiative.

http://www.rand.org/pubs/external_publications/EP201100190.html

EP-201100-191

Prioritizing "psychological" Consequences for Disaster Preparedness and Response: A Framework for Addressing the Emotional, Behavioral, and Cognitive Effects of Patient Surge in Large-Scale Disasters. Lisa S. Meredith, David Eisenman, Terri Tanielian, Stephanie Taylor, Ricardo Basurto-Davila, James Zazzali, Sandra Shields. 2011

While information for the medical aspects of disaster surge is increasingly available, there is little guidance for health care facilities on how to manage the psychological aspects of large-scale disasters that might involve a surge of psychological casualties. In addition, no models are available to guide the development of training curricula to address these needs. This article describes 2 conceptual frameworks to guide hospitals and clinics in managing such consequences. One framework was developed to understand the antecedents of psychological effects or "psychological triggers" (restricted movement, limited resources, limited information, trauma exposure, and perceived personal or family risk) that cause the emotional, behavioral, and cognitive reactions following large-scale disasters. Another framework, adapted from the Donabedian quality of care model, was developed to guide appropriate disaster response by health care facilities in addressing the consequences of reactions to psychological triggers. This framework specifies structural components (internal organizational structure and chain of command, resources and infrastructure, and knowledge and skills) that should be in place before an event to minimize consequences. The framework also specifies process components

(coordination with external organizations, risk assessment and monitoring, psychological support, and communication and information sharing) to support evidence-informed interventions.

http://www.rand.org/pubs/external_publications/EP201100191.html

EP-201100-192

The Role of Theory in Research to Develop and Evaluate the Implementation of Patient Safety Practices. Robbie Foy, John Ovretveit, Paul G. Shekelle, Peter J. Pronovost, Stephanie Taylor, Sydney Dy, Susanne Hempel, Lisa V. Rubenstein. 2011

Theories provide a way of understanding and predicting the effects of patient safety practices (PSPs), interventions intended to prevent or mitigate harm caused by healthcare or risks of such harm. Yet most published evaluations make little or no explicit reference to theory, thereby hindering efforts to generalise findings from one context to another. Theories from a wide range of disciplines are potentially relevant to research on PSPs. Theory can be used in research to explain clinical and organisational behaviour, to guide the development and selection of PSPs, and in evaluating their implementation and mechanisms of action. One key recommendation from an expert consensus process is that researchers should describe the theoretical basis for chosen intervention components or provide an explicit logic model for 'why this PSP should work.' Future theory-driven evaluations would enhance generalisability and help build a cumulative understanding of the nature of change.

http://www.rand.org/pubs/external_publications/EP201100192.html

EP-201100-193

Does Better Quality of Care for Falls and Urinary Incontinence Result in Better Participant-Reported Outcomes?. Lillian Min, David Reuben, John L. Adams, Paul G. Shekelle, David A. Ganz, Neil S. Wenger. 2011

OBJECTIVES: To determine whether delivery of better quality of care for urinary incontinence (UI) and falls is associated with better participant-reported outcomes. DESIGN: Retrospective cohort study. SETTING: Assessing Care of Vulnerable Elders Study 2 (ACOVE-2). PARTICIPANTS: Older (≥75) ambulatory care participants in ACOVE-2 who screened positive for UI (n=133) or falls or fear of falling (n=328). MEASUREMENTS: Composite quality scores (percentage of quality indicators (QIs) passed per participant) and change in Incontinence Quality of Life (IQOL, range 0–100) or Falls Efficacy Scale (FES, range 10–40) scores were measured before and after care was delivered (mean 10 months). Because the treatment-related falls QIs were measured only on patients who received a physical examination, an alternative Common Pathway QI (CPQI) score was developed that assigned a failing score for falls treatment to unexamined participants. RESULTS: Each 10% increment in receipt of recommended care for UI was associated with a 1.4-point improvement in IQOL score (P=.01). The original falls composite quality-of-care score was unrelated to FES, but the new CPQI scoring method for falls quality of care was related to FES outcomes (+0.4 points per 10% increment in falls quality, P=.01). CONCLUSION: Better quality of care for falls and UI was associated with measurable improvement in participant-reported outcomes in less than 1 year. The connection between process and outcome required consideration of the interdependence between diagnosis and treatment in the falls QIs. The link between process and outcome demonstrated for UI and falls underscores the importance of improving care in these areas.

http://www.rand.org/pubs/external_publications/EP201100193.html

EP-201100-194

Social Networks of Homeless Youth in Emerging Adulthood. Suzanne L. Wenzel, Ian Holloway, Daniela Golinelli, Richard Bowman, Joan S. Tucker. 2011

Little is known about the social networks of homeless youth in emerging adulthood despite the importance of this information for interventions to reduce health risks. This study examined the

composition of social networks, and the risks and supports present within them, in a random sample of 349 homeless youth (33.4% female, 23.9% African American, 17.7% Hispanic) between the ages of 18 and 24. Social network members who were met on the street were among the most likely to be perceived as engaging in risky sex, as well as to engage in substance use with the youth. Youth were more likely to count on relatives and sex partners for support compared to other network members, but they also were more likely to use substances with sex partners and perceived them as engaging in risky sex. Interventions may need to recognize the importance of intimate relationships during the developmental stage of emerging adulthood by enhancing supportive bonds and reducing substance use and risky sex in these relationships.

http://www.rand.org/pubs/external_publications/EP201100194.html

EP-201100-195

PartyIntents: A Portal Survey to Assess Gay and Bisexual Men's Risk Behaviors at Weekend Parties. Rajeev Ramchand, Kirsten Becker, Teague Ruder, Michael P. Fisher. 2011

PartyIntents examines whether portal survey methods could be used to anonymously survey gay and bisexual men about HIV-risk behaviors before and after a weekend party-oriented vacation. The study recruited 97% of eligible men and of these 489 participants 47% completed the follow-up assessment. Approximately one half of the men intended to use illegal drugs over the weekend, and almost 20% thought that they might have anal intercourse and not use a condom. The methodology can be applied and provides useful information about HIV risk at these events, though refinements may be needed to increase the follow-up rates.

http://www.rand.org/pubs/external_publications/EP201100195.html

EP-201100-196

Earthquakes, Hurricanes, and Terrorism: Do Natural Disasters Incite Terror?. Claude Berrebi, Jordan Ostwald. 2011

A novel and important issue in contemporary security policy is the impact of natural disasters on terrorism. Natural disasters can strain a society and its government, creating vulnerabilities which terrorist groups might exploit. Using a structured methodology and detailed data on terrorism, disasters, and other relevant controls for 167 countries between 1970 and 2007, we find a strong positive impact of disaster-related deaths on subsequent terrorism incidence and fatalities. Furthermore, the effects differ by disaster type and GDP per capita. The results consistently are significant and robust across a multitude of disaster and terrorism measures for a diverse set of model specifications.

http://www.rand.org/pubs/external_publications/EP201100196.html

EP-201100-197

Patterns of Osteoporosis Treatment Change and Treatment Discontinuation Among Commercial and Medicare Advantage Prescription Drug Members in a National Health Plan. John L. Adams, Joel Kallich, Kenneth G. Saag. 2011

RATIONALE, AIMS AND OBJECTIVES: Multiple treatments are available for osteoporosis; however, little is known about treatment change patterns and associated factors. Osteoporosis treatment change patterns, discontinuation and factors associated with treatment change in members of a large national health plan were examined. METHODS: A retrospective cohort study was conducted in 7315 commercial and 34 146 Medicare Advantage Prescription Drug (MAPD) members newly initiated on an osteoporosis medication between 2006 and 2008. Osteoporosis treatment change, discontinuation and re-initiation patterns were assessed. Multivariate logistic regression was used to examine factors associated with treatment change. Commercial and MAPD members were assessed separately because of differences in demographics and insurance benefits. RESULTS: Approximately 12% of members had a change in index therapy within 12 months. Almost 60% of members discontinued the index

medication at least once, based on a 90-day refill gap. Over 40% of members discontinued all osteoporosis medications by the end of 12 months post-index. Among MAPD and commercial members, women and those with risedronate, ibandronate or calcitonin at index, index therapy in 2008 and an osteoporosis diagnosis were more likely to have a treatment change while members with health plans other than health maintenance organizations and generic alendronate at index were less likely to have a treatment change. CONCLUSIONS: Osteoporosis treatment change occurred in approximately 12% of members, while a greater proportion of members discontinued treatment completely within 12 months. Member characteristics may be used to predict therapy change for evaluation and quality initiatives within a health plan.

http://www.rand.org/pubs/external_publications/EP201100197.html

EP-201100-198

Methodological Considerations in Generating Provider Performance Scores for Use in Public Reporting: A Guide for Community Quality Collaboratives. Cheryl L. Damberg, Elizabeth A. McGlynn, John L. Adams. 2011

Public reports of health care providers' performance on measures of quality, cost and resource use, patient experience, and health outcomes have become increasingly common. These reports are often intended to help patients choose providers and may encourage providers to improve their performance. At the July 2009 National Meeting of Chartered Value Exchanges (CVEs) hosted by AHRQ, CVE stakeholders identified a dilemma: Two organizations could, by making different methodological decisions, use the exact same data to produce divergent public performance reports that send conflicting messages to patients and providers. In response to this dilemma, AHRQ commissioned RAND Corporation to develop a white paper to identify methodological decision points that precede publication of a performance report and to delineate the options for each. Our overall aim in developing this white paper is to produce a resource that is useful to CVEs and other community collaboratives as they consider the range of available methodological options for performance reporting. This white paper reviews a number of methodological decision points that CVEs and other community collaboratives may encounter when generating provider performance scores. The paper also discusses the advantages and disadvantages associated with various choices for each of these decision points. This report is intended to help CVEs understand different types of measurement error, how sources of error may enter into the construction of provider performance scores, and how to mitigate or minimize the risk of misclassifying a provider. Again, the methods decisions generally involve important tradeoffs. There are rarely clear "right answers," and value judgments underlie most decisions.

http://www.rand.org/pubs/external_publications/EP201100198.html

EP-201100-199

Substance Use and Other Risk Factors for Unprotected Sex: Results from an Event-Based Study of Homeless Youth. Joan S. Tucker, Gery W. Ryan, Daniela Golinelli, Suzanne L. Wenzel, David P. Kennedy, Harold P. Green. 2011

This study used an event-based approach to understand condom use in a probability sample of 309 homeless youth recruited from service and street sites in Los Angeles County. Condom use was significantly less likely when hard drug use preceded sex, the relationship was serious, the partners talked about "pulling out", or sex occurred in a non-private place (and marginally less likely when heavier drinking preceded sex, or the partnership was monogamous or abusive). Condom use was significantly more likely when the youth held positive condom attitudes or were concerned about pregnancy, the partners talked about condom use, and the partners met up by chance. This study extends previous work by simultaneously examining a broad range of individual, relationship, and contexual factors that may play a role in condom use. Results identify a number of actionable targets for programs aimed at reducing

HIV/STI transmission and pregnancy risk among homeless youth.

http://www.rand.org/pubs/external_publications/EP201100199.html

EP-201100-20

Heterogeneity in the Composition of Marijuana Seized in California. James R. Burgdorf, Beau Kilmer. 2011

BACKGROUND: Marijuana contains multiple cannabinoids. Most attention is given to delta-9-tetrahydrocannabinol (THC) which produces euphoria and in some cases anxiety and panic reactions. Research suggests that another cannabinoid, cannabidiol (CBD), may offset some of these effects. Thus, there is growing interest in the health consequences of the THC to CBD ratio for marijuana. METHODS: Using data from over 5000 marijuana samples in California from 1996 to 2008, we examine changes in the median THC-level, median CBD-level, and median THC:CBD-ratio. RESULTS: The median THC-level and median THC:CBD-ratio have dramatically increased for seizures in California, particularly north of the Mexican border. CONCLUSION: Research on the consequences of the THC:CBD ratio should continue, especially as more attention is devoted to thinking about how to regulate marijuana for medical and recreational use. Researchers should also consider the lack of uniformity in the chemical composition of marijuana when evaluating its health effects.

http://www.rand.org/pubs/external_publications/EP20110020.html

EP-201100-200

Response to the 2009-H1n1 Influenza Pandemic in the Mekong Basin: Surveys of Country Health Leaders. Melinda Moore, David J. Dausey. 2011

BACKGROUND: Soon after the 2009-H1N1 virus emerged as the first influenza pandemic in 41 years, countries had an early opportunity to test their preparedness plans, protocols and procedures, including their cooperation with other countries in responding to the global pandemic threat. The Mekong Basin Disease Surveillance cooperation (MBDS) comprises six countries - Cambodia, China (Yunnan and Guangxi Provinces), Lao People's Democratic Republic, Myanmar, Thailand and Vietnam - that formally organized themselves in 2001 to cooperate in disease surveillance and control. The pandemic presented an opportunity to assess their responses in light of their individual and joint planning. We conducted two surveys of the MBDS leadership from each country, early during the pandemic and shortly after it ended. RESULTS: On average, participants rated their country's pandemic response performance as good in both 2009 and 2010. Post-pandemic (2010), perceived performance quality was best for facility-based interventions (overall mean of 4.2 on a scale from 1=poor to 5=excellent), followed by surveillance and information sharing (4.1), risk communications (3.9) and disease prevention and control in communities (3.7). Performance was consistently rated as good or excellent for use of hotlines for case reporting (2010 mean of 4.4) and of selected facility-based interventions (each with a 2010 mean of 4.4): using hospital admission criteria, preparing or using isolation areas, using PPE for healthcare workers and using antiviral drugs for treatment. In at least half the countries, the post-pandemic ratings were lower than initial 2009 assessments for performance related to surveillance, facility-based interventions and risk communications. CONCLUSIONS: MBDS health leaders perceived their pandemic responses effective in areas previously considered problematic. Most felt that MBDS cooperation helped drive and thus added value to their efforts. Surveillance capacity within countries and surveillance information sharing across countries, longstanding MBDS focus areas, were cited as particular strengths. Several areas needing further improvement are already core strategies in the 2011-2016 MBDS Action Plan. Self-organized sub-regional cooperation in disease surveillance is increasingly recognized as an important new element in global disease prevention and control. Our findings suggest that more research is needed to understand the characteristics of networking that will result in the best shared outcomes.

http://www.rand.org/pubs/external_publications/EP201100200.html

EP-201100-201

Patient Activation and Advocacy: Which Literacy Skills Matter Most?. Laurie T. Martin, Matthias Schonlau, Ann C. Haas, Lindsay Rosenfeld, Stephen L. Buka, Rima Rudd. 2011

Attention to the effect of a patient's literacy skills on health care interactions is relatively new. So, too, are studies of either structural or personal factors that inhibit or support a patient's ability to navigate health services and systems and to advocate for their own needs within a service delivery system. Contributions of the structural environment, of interpersonal dynamics, and of a variety of psychological and sociological factors in the relationship between patients and providers have long been under study. Less frequently examined is the advocacy role expected of patients. However, the complex nature of health care in the United States increasingly requires a proactive stance. This study examined whether four literacy skills (reading, numeracy, speaking, and listening) were associated with patient self-advocacy — a component of health literacy itself — when faced with a hypothetical barrier to scheduling a medical appointment. Although all literacy skills were significantly associated with advocacy when examined in isolation, greater speaking and listening skills remained significantly associated with better patient advocacy when all four skills were examined simultaneously. These findings suggest that speaking and listening skills and support for such skills may be important factors to consider when developing patient activation and advocacy skills.

http://www.rand.org/pubs/external_publications/EP201100201.html

EP-201100-202

HIV Risk and Perceptions of Masculinity Among Young Black Men Who Have Sex with Men. Laura M. Bogart, Katherine Smith, Jonathan Ellen, Mark A. Schuster. 2011

PURPOSE: Young black men who have sex with men (YBMSM) are known to have the highest rates of HIV infection in the United States. Although reported rates of unprotected anal intercourse are similar to the rates of men who have sex with men of other racial/ethnic backgrounds, YBMSM aged 15–22 years are five times more likely to be HIV-infected than the comparably aged white men who have sex with men. We explored contextual social-environmental factors that may influence how YBMSM assess risk, choose partners, and make decisions about condom use. METHODS: We analyzed semi-structured interviews with 35 YBMSM (age: 18–24 years) in New York City, Upstate New York, and Atlanta. We used structured analytic coding based on a theoretical scheme that emerged from the data. RESULTS: Perception of masculinity was the primary contextual factor influencing partner selection, risk assessment, and decision-making with regard to condom usage. Four primary themes emerged: (1) greater preference for partners perceived as masculine; (2) discomfort with allowing men perceived as feminine to be the insertive partner in anal intercourse; (3) a power dynamic such that partners perceived as more masculine made condom-use decisions within the dyad; and (4) use of potential partners' perceived masculinity to assess HIV risk. CONCLUSIONS: Perceived masculinity may play a significant role in HIV risk for YBMSM and may be an important concept to consider in prevention strategies directed toward this population.

http://www.rand.org/pubs/external_publications/EP201100202.html

EP-201100-203

Understanding Disparities in Health Care Access – and Reducing Them – Through a Focus on Public Health. Jeanne S. Ringel. 2011

Attempts to explain disparities in access to health care faced by racial and ethnic minorities and other underserved populations often focus on individual-level factors such as demographics, personal health beliefs, and health insurance status. This article proposes an examination of these disparities—and an effort to redress them—through the lens of public health. Public health agencies can link people to needed services such as immu-

nizations, testing, and treatment; ensure the availability of health care; ensure the competency of the public health and personal health care workforce; and evaluate the effectiveness, accessibility, and quality of personal and population-based services. Approaching disparities through a public health framework can provide the foundation for developing more robust evidence to inform additional policies for improving access and reducing disparities.

http://www.rand.org/pubs/external_publications/EP201100203.html

EP-201100-204

Collection Of Race And Ethnicity Data By Health Plans Has Grown Substantially, But Opportunities Remain To Expand Efforts. Jose J. Escarce. 2011

In 2003 the Institute of Medicine called on health plans to collect data on their members' race and ethnicity as a foundation for improving the quality of care and reducing disparities. We describe the progress made toward collecting these data, the most commonly used data collection methods, and the challenges plans have encountered. We found that from 2003 through 2008, the proportion of plans that collected members' data on race and ethnicity doubled in the commercial market to 60 percent. It increased even more sharply to 94 percent and 83 percent, respectively, for plans covering Medicaid and Medicare Advantage enrollees. However, the scope of data collection varied greatly across plans, and data collection was an organization-wide initiative in a minority of plans. To fulfill the goals of recent legislation, including the Affordable Care Act, health plans will need to expand their efforts. Among other steps, plans and other key stakeholders should agree on uniform race and ethnicity categories, modify information systems to capture these data, and increase members' trust so that self-reported data—the most accurate data on race and ethnicity—can be gathered.

http://www.rand.org/pubs/external_publications/EP201100204.html

EP-201100-205

Patient Protection and Affordable Care Act.: How to Ensure That They Help Reduce Disparities--Not Increase Them. Robin M. Weinick. 2011

Despite persistent evidence of continued racial and ethnic disparities in health care, little explicit attention has been paid to how quality improvement activities might affect disparities. As the nation focuses on the practical realities of implementing health care reform and concurrent quality improvement provisions under the Affordable Care Act of 2010, it is important to recognize that overall improvements in the US health care system might not automatically benefit all segments of the population equally. In this article we highlight challenges to ensuring that quality improvement efforts reduce racial and ethnic disparities. These include making certain that quality improvement efforts measure disparities and improvements in them, notwithstanding providers' reputational concerns; that such efforts not create perverse incentives for providers to avoid serving minority patients; that they be applied to institutions where minority patients are most likely to receive care; and that they fully engage minority patients despite language or other barriers. To assist in these efforts, we argue for the development of disparities impact assessments to measure the effect that the Affordable Care Act's quality provisions will have on reducing disparities.

http://www.rand.org/pubs/external_publications/EP201100205.html

EP-201100-206

Classes of Conduct Disorder Symptoms and Their Life Course Correlates in a US National Sample. Joshua Breslau, N. Saito, Daniel J. Tancredi , M. Nock, S. E. Gilman. 2011

BACKGROUND: Population data on conduct disorder (CD) symptoms can help determine whether hypothesized subtypes of CD are sufficiently disparate in their familial, psychiatric and life course correlates to distinguish separate diagnostic entities. METHOD: Latent class analysis (LCA) of CD symptoms occurring before age 15 was conducted in a national sample of adults aged 18–44 years from the National Epidemiological

Study of Alcohol and Related Conditions. Associations of latent class membership with parental behavior problems, onset of psychiatric disorders and anti-social behaviors after age 15, adolescent life events (e.g. high school drop-out), and past-year life events (e.g. divorce/separation, bankruptcy) were estimated. RESULTS: LCA identified a no-CD class with low prevalence of all symptoms, three intermediate classes – deceit/theft, rule violations, aggression – and a severe class. The prevalence of CD, according to DSM-IV criteria, was 0% in the no-CD class, between 13.33% and 33.69% in the intermediate classes and 62.20% in the severe class. Latent class membership is associated with all the familial, psychiatric and life course outcomes examined. Among the intermediate classes, risk for subsequent mood/anxiety disorders and anti-social behavior was higher in the deceit/theft and aggressive classes than in the rule violations class. However, risk for adolescent life events is highest in the rule violations class. CONCLUSIONS: CD symptoms tend to occur in a partially ordered set of classes in the general population. Prognostically meaningful distinctions can be drawn between classes, but only at low levels of symptoms.

http://www.rand.org/pubs/external_publications/EP201100206.html

EP-201100-207

Efficacy and Comparative Effectiveness of Atypical Antipsychotic Medications for Off-Label Uses in Adults: A Systematic Review and Meta-Analysis. Margaret Maglione, Steven Bagley, Marika Suttorp, Jianhui Hu, Zhen Wang, Martha Timmer, David Sultzer, Paul G. Shekelle. 2011

CONTEXT: Atypical antipsychotic medications are commonly used for off-label conditions such as agitation in dementia, anxiety, and obsessive-compulsive disorder. OBJECTIVE: To perform a systematic review on the efficacy and safety of atypical antipsychotic medications for use in conditions lacking approval for labeling and marketing by the US Food and Drug Administration. DATA SOURCES AND STUDY SELECTION: Relevant studies published in the English language were identified by searches of 6 databases (PubMed, EMBASE, CINAHL, PsycInfo, Cochrane DARE, and CENTRAL) from inception through May 2011. Controlled trials comparing an atypical antipsychotic medication (risperidone, olanzapine, quetiapine, aripiprazole, ziprasidone, asenapine, iloperidone, or paliperidone) with placebo, another atypical antipsychotic medication, or other pharmacotherapy for adult off-label conditions were included. Observational studies with sample sizes of greater than 1000 patients were included to assess adverse events. DATA EXTRACTION: Independent article review and study quality assessment by 2 investigators. DATA SYNTHESIS: Of 12 228 citations identified, 162 contributed data to the efficacy review. Among 14 placebo-controlled trials of elderly patients with dementia reporting a total global outcome score that includes symptoms such as psychosis, mood alterations, and aggression, small but statistically significant effects sizes ranging from 0.12 and 0.20 were observed for aripiprazole, olanzapine, and risperidone. For generalized anxiety disorder, a pooled analysis of 3 trials showed that quetiapine was associated with a 26% greater likelihood of a favorable response (defined as at least 50% improvement on the Hamilton Anxiety Scale) compared with placebo. For obsessive-compulsive disorder, risperidone was associated with a 3.9-fold greater likelihood of a favorable response (defined as a 25% improvement on the Yale-Brown Obsessive Compulsive Scale) compared with placebo. In elderly patients, adverse events included an increased risk of death (number needed to harm [NNH] = 87), stroke (NNH = 53 for risperidone), extrapyramidal symptoms (NNH = 10 for olanzapine; NNH = 20 for risperidone), and urinary tract symptoms (NNH range = 16-36). In nonelderly adults, adverse events included weight gain (particularly with olanzapine), fatigue, sedation, akathisia (for aripiprazole), and extrapyramidal symptoms. CONCLUSIONS: Benefits and harms vary among atypical antipsychotic medications for off-label use. For global behavioral symptom scores associated with dementia in elderly patients, small but statistically significant benefits were observed for aripiprazole, olanzapine, and risperidone. Quetiapine was associated

with benefits in the treatment of generalized anxiety disorder, and risperidone was associated with benefits in the treatment of obsessive-compulsive disorder; however, adverse events were common.

http://www.rand.org/pubs/external_publications/EP201100207.html

EP-201100-208

The Effects of Consumer-Directed Health Plans on Episodes of Health Care. Amelia M. Haviland, Neeraj Sood, Roland McDevitt. 2011

Past research has shown that high deductible and consumer-directed health plans (HD/CDHPs) can significantly reduce health care costs. In this paper we investigate how these cost savings are realized. We use panel data from many large employers and difference in difference models to examine how HD/CDHPs affect the number of health care episodes and the cost per episode. Our results show that about two-thirds of the cost savings from HD/CDHP enrollment are from reductions in number of episodes and the remaining one-third of the savings are from reductions in costs per episode. The presence of a Health Reimbursement Arrangement (HRA) or HealthSavings Account (HSA) does not temper the effects of high deductibles on number of episodes. However, enrollees in plans with generous employer contributions to HSAs have more episodes of care than enrollees in plans where employers make smaller account contributions. The reductions in costs per episode and in visits to specialists, inpatient care, and use of non-generic pharmaceuticals suggest that higher deductibles are effective at making patients more cost conscious even after care is initiated.

http://www.rand.org/pubs/external_publications/EP201100208.html

EP-201100-209

Longitudinal Association of HIV Conspiracy Beliefs with Sexual Risk Among Black Males Living with HIV. Laura M. Bogart, Frank H. Galvan, Glenn Wagner, David J. Klein. 2011

Research is needed to identify culturally relevant factors that may contribute to sexual risk among African Americans. We investigated HIV-specific medical mistrust as one such cultural factor, often exhibited as conspiracy beliefs about HIV (e.g., "AIDS was produced in a government laboratory"), which may be indicative of general suspicion of HIV treatment and prevention messages. Over a 6-month time-period, we measured endorsement of HIV conspiracy beliefs three times and frequency of condom use monthly among 181 HIV-positive African American males. A hierarchical multivariate repeated-measures logistic random effects model indicated that greater belief in HIV conspiracies was associated with a higher likelihood of reporting unprotected intercourse across all time-points. An average of 54% of participants who endorsed conspiracies reported unprotected intercourse, versus 39% who did not endorse conspiracies. Secondary prevention interventions may need to address medical mistrust as a contributor to sexual risk among African Americans living with HIV.

http://www.rand.org/pubs/external_publications/EP201100209.html

EP-201100-21

Smoothing Across Time in Repeated Cross-Sectional Data. Daniel F. McCaffrey, Claude Messan Setodji, Marc N. Elliott. 2011

Repeated cross-sectional samples are common in national surveys of health like the National Health Interview Survey (NHIS). Because population health outcomes generally evolve slowly, pooling data across years can improve the precision of current-year annual estimates of disease prevalence and other health outcomes. Pooling over time is particularly valuable in health disparities research, where outcomes for small groups are often of interest and pooling data across groups would bias disparity estimates. State-space modeling and Kalman filtering are appealing choices for smoothing data across time. However, filtering can be problematic when few time points are available, as is common with annual cross-sectional data. Problems arise because filtering relies on estimated variance components, which can be biased and imprecise when estimated with small

samples, especially when estimated in tandem with linear trends. We conduct a simulation study showing that even when trends and variance components are estimated poorly, smoothing with these estimates can improve the mean squared error (MSE) of estimated health states for multiple racial/ethnic groups when the variance components are estimated with the pooled sample. We consider frequentist estimators with no trends, one common trend across groups, and separate trends for every group, as well as shrinkage estimators of trends through a Bayesian model. We show that the Bayesian model offers the greatest improvement in MSE, and that Bayesian Information Criterion (BIC)-based model averaging of the frequentist estimators with different trend assumptions performs nearly as well. We present empirical examples using the NHIS data.

http://www.rand.org/pubs/external_publications/EP20110021.html

EP-201100-210

Training Primary Care Staff to Deliver a Computer-Assisted Cognitive Behavioral Therapy Program for Anxiety Disorders. Raphael D. Rose, Ariel J. Lang, Denise A. Chavira, Cathy D. Sherbourne, Alexander Bystritsky, Murray Stein, Michelle G. Craske. 2011

OBJECTIVES: This paper describes the training approach used with primary care staff to deliver an evidence-based computer-assisted cognitive–behavioral therapy (CBT) program for anxiety disorders within a collaborative care treatment delivery model. METHODS:: We describe the training and proficiency evaluation procedures utilized in the Coordinated Anxiety Learning and Management (CALM) study, a large multisite study of collaborative care for anxiety disorders in primary care. Training incorporated readings, didactic presentations, video demonstrations of CBT skills, role-plays, computer-assisted practice, CBT training cases and ongoing group supervision provided by study psychologists. RESULTS: Proficiency training case data from 15 clinicians are presented. The anxiety clinical specialists (ACSs) were highly proficient at delivering the CBT component of the CALM intervention. The ACSs also provided Likert-scale ratings and open-ended responses about their experiences with the training. Overall, the training was rated very positively and was described as very thorough, indicating a high level of acceptability to clinicians. Recommendations for future training are described. CONCLUSIONS: Primary care staff with none or minimal prior CBT experience can be trained to deliver a computer-assisted, evidence-based treatment for anxiety disorders. The implications for dissemination and transportability of evidenced-based interventions are discussed.

http://www.rand.org/pubs/external_publications/EP201100210.html

EP-201100-211

Basing Drug Scheduling Decisions on Scientific Ranking of Harmfulness: False Promise from False Premises. Jonathan P. Caulkins, Peter H. Reuter. 2011

In recent years a number of studies have attempted to rank drugs by a single measure of harmfulness as the basis for decisions about scheduling and classification. These efforts are fundamentally flawed, both conceptually and methodologically. The effort to provide a single measure masks the variety of non-comparable dimensions that are relevant, the fact that benefits are ignored for most, but not all, drugs and that the harms of a drug are not invariant to the policy regime chosen. Methodologically, the most prominent recent effort ignores drug interactions and mixes aggregate and individual harms inappropriately. Instead we suggest that multiple dimensions of harm need to be displayed to inform human judgments of what drugs should be scheduled. Harm is not usefully reducible to a single dimension, and even perfect rankings would not constitute a 'sufficient statistic' for determining scheduling decisions.

http://www.rand.org/pubs/external_publications/EP201100211.html

EP-201100-212

Racial and ethnic disparities in hospital care resulting from air pollution in excess of federal

standards. Andrew Hackbarth, John A. Romley, Dana P. Goldman. 2011

This study investigates racial and ethnic disparities in hospital admission and emergency room visit rates resulting from exposure to ozone and fine particulate matter levels in excess of federal standards ("excess attributable risk"). We generate zip code-level ambient pollution exposures and hospital event rates using state datasets, and use pollution impact estimates in the epidemiological literature to calculate excess attributable risk for racial/ethnic groups in California over 2005–2007. We find that black residents experienced roughly 2.5 times the excess attributable risk of white residents. Hispanic residents were exposed to the highest levels of pollution, but experienced similar excess attributable risk to whites. Asian/Pacific Islander residents had substantially lower excess attributable risk compared to whites. We estimate the distinct contributions of exposure and other factors to these results, and find that factors other than exposure can be critical determinants of pollution-related disparities.

http://www.rand.org/pubs/external_publications/EP201100212.html

EP-201100-213

Myths of the Mote. Beau Kilmer. 2011

Having a greater knowledge of the amount of marijuana consumed and produced in each country will sustain substantially informed debates both sides of the border. Without this information, it is difficult to answer several questions regarding policies, for example, what would the tax revenue be from the legalization of marijuana or how to influence U.S. policy changes in the drug trafficking organizations in Mexico.

http://www.rand.org/pubs/external_publications/EP201100213.html

EP-201100-214

Integrating Schools Is a Matter of Housing Policy. Heather L. Schwartz. 2011

Inclusionary zoning and economic integration in suburban neighborhoods not only reduces concentration of poverty, it directly improves low-income children's academic achievement.

http://www.rand.org/pubs/external_publications/EP201100214.html

EP-201100-215

Mitos De La Mota. Beau Kilmer. 2011

Tener un mayor conocimiento sobre la cantidad de marihuana consumida y producida en cada país permitirá sostener debates sustancialmente informados a ambos lados de la frontera. Sin esta información, es difícil responder varias preguntas en relación con las políticas, por ejemplo, cuáles serían los ingresos fiscales derivados de la legalización de la marihuana o cómo influirían los cambios de políticas estadunidenses en las organizaciones dedicadas al narcotráfico en México.

http://www.rand.org/pubs/external_publications/EP201100215.html

EP-201100-216

Medicare's Bundled Payment Pilot for Acute and Postacute Care:: Analysis and Recommendations on Where to Begin. Neeraj Sood, Peter J. Huckfeldt, Jose J. Escarce, David Grabowski, Joseph P. Newhouse. 2011

In the National Pilot Program on Payment Bundling, a subset of Medicare providers will receive a single payment for an episode of acute care in a hospital, followed by postacute care in a skilled nursing or rehabilitation facility, the patient's home, or other appropriate setting. This article examines the promises and pitfalls of bundled payments and addresses two important design decisions for the pilot: which conditions to include, and how long an episode should be. Our analysis of Medicare data found that hip fracture and joint replacement are good conditions to include in the pilot because they exhibit strong potential for cost savings. In addition, these conditions pose less financial risk for providers than other common ones do, so including them would make participation in the program more appealing to providers. We also found that longer episode lengths captured a higher percentage of costs and hospital readmissions while adding little financial risk. We recommend that the

Medicare pilot program test alternative design features to help foster payment innovation throughout the health system.

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EP-201100-217

How event reporting by US hospitals has changed from 2005 to 2009. Donna O. Farley, Amelia M. Haviland, Ann C. Haas, Chau Pham, William B. Munier, James B. Battles. 2011

CONTEXT: Information is needed on the performance of hospitals' adverse-event reporting systems and the effects of national patient-safety initiatives, including the Patient Safety and Quality Improvement Act (PSQIA) of 2005. Results are presented of a 2009 survey of a sample of non-federal US hospitals and changes between 2005 and 2009 are examined. METHODS: The Adverse Event Reporting System survey was fielded in 2005 and 2009 using a mixed-mode design with stratified random samples of non-federal US hospitals; risk managers were respondents. Response rates were 81% in 2005 and 79% in 2009. RESULTS: Virtually all hospitals reported they had centralised adverse-event-reporting systems. However, scores on four performance indexes suggested that hospitals have not effectively implemented key components of reporting systems. Average index scores improved somewhat between 2005 and 2009 for supportive environment (0.7 increase; $p<0.05$) and types of staff reporting (0.08 increase; $p<0.001$). Average scores did not change for timely distribution of event reports or discussion with key departments and committees. Some within-hospital inconsistencies in responses between 2005 and 2009 were found. These self-reported responses may be optimistic assessments of hospital performance. CONCLUSIONS: The 2009 survey confirmed improvement needs identified by the 2005 survey for hospitals' event reporting processes, while finding signs of progress. Optimising the use of surveys to assess the effects of national patient-safety initiatives such as PSQIA will require decreasing within-hospital variations in reporting rates.

http://www.rand.org/pubs/external_publications/EP201100217.html

EP-201100-218

Social, Structural and Behavioral Drivers of Concurrent Partnerships Among African American Men in Philadelphia. Daniel Kim, Kenneth R. Mayer. 2011

African Americans face disproportionately higher risks of HIV infection. Concurrent sexual relationships, or sexual partnerships that overlap in time, are more common among African Americans than individuals of other races and may contribute to racial disparities in HIV infection. However, little is known about attitudes, norms and practices among individuals engaged in concurrent partnerships. Little is also known about the processes through which structural, behavioral, and social factors influence concurrent sexual relationships. We recruited 24 heterosexual African American men involved in concurrent sexual relationships from a public health clinic in Philadelphia. We conducted in-depth interviews exploring these men's sexual practices; social norms and individual attitudes about concurrency; perceived sexual health risks with main and non-main partners; and the social, structural, and behavioral factors contributing to concurrent sexual relationships. Twenty-two men reported having one main and one or more non-main partners; two reported having no main partners. Respondents generally perceived sexual relationships with non-main partners as riskier than relationships with main partners and used condoms far less frequently with main than non-main partners. Most participants commented that it is acceptable and often expected for men and women to engage in concurrent sexual relationships. Social factors influencing participants' concurrent partnerships included being unmarried and trusting neither main nor non-main partners. Structural factors influencing concurrent partnerships included economic dependence on one or more women, incarceration, unstable housing, and unemployment. Several men commented that individual behavioral factors such as alcohol and cocaine use contributed to their concurrent sexual

partnerships. Future research and interventions related to sexual concurrency should address social and structural factors in addition to conventional HIV risk-taking behaviors.

http://www.rand.org/pubs/external_publications/EP201100218.html

EP-201100-219

Valuation of Plug-In Vehicle Life-Cycle Air Emissions and Oil Displacement Benefits. Paulina Jaramillo, Constantine Samaras, Lester B. Lave. 2011

We assess the economic value of life-cycle air emissions and oil consumption from conventional vehicles, hybrid-electric vehicles (HEVs), plug-in hybrid-electric vehicles (PHEVs), and battery electric vehicles in the US. We find that plug-in vehicles may reduce or increase externality costs relative to grid-independent HEVs, depending largely on greenhouse gas and SO2 emissions produced during vehicle charging and battery manufacturing. However, even if future marginal damages from emissions of battery and electricity production drop dramatically, the damage reduction potential of plug-in vehicles remains small compared to ownership cost. As such, to offer a socially efficient approach to emissions and oil consumption reduction, lifetime cost of plug-in vehicles must be competitive with HEVs. Current subsidies intended to encourage sales of plug-in vehicles with large capacity battery packs exceed our externality estimates considerably, and taxes that optimally correct for externality damages would not close the gap in ownership cost. In contrast, HEVs and PHEVs with small battery packs reduce externality damages at low (or no) additional cost over their lifetime. Although large battery packs allow vehicles to travel longer distances using electricity instead of gasoline, large packs are more expensive, heavier, and more emissions intensive to produce, with lower utilization factors, greater charging infrastructure requirements, and life-cycle implications that are more sensitive to uncertain, time-sensitive, and location-specific factors. To reduce air emission and oil dependency impacts from passenger vehicles, strategies to promote adoption of HEVs and PHEVs with small battery packs offer more social benefits per dollar spent.

http://www.rand.org/pubs/external_publications/EP201100219.html

EP-201100-22

The Detrimental Effects of Missing School: Evidence from Urban Siblings. Michael A. Gottfried. 2011

There is evidence suggesting that missing school negatively relates to academic achievement. However, it is a difficult task to derive unbiased empirical estimates of absences in their influence on performance. One particular challenge arises from the unobserved heterogeneity in the family environment, which may relate to both absence behavior and school performance. This article provides the first analysis aimed at reducing the family-specific omitted variable bias pertaining to measures of absences in their influence on standardized testing achievement. It does so by employing a model of family fixed effects on a longitudinal sample of siblings within the same household in a large urban school district over six years of observations. The results indicate a stronger, statistically significant negative relationship between absences and achievement than what would have been suggested otherwise. Implications are discussed.

http://www.rand.org/pubs/external_publications/EP20110022.html

EP-201100-220

What Context Features Might Be Important Determinants of the Effectiveness of Patient Safety Practice Interventions?. Stephanie Taylor, Sydney Dy, Robbie Foy, Susanne Hempel, John Ovretveit, Peter J. Pronovost, Lisa V. Rubenstein, Paul G. Shekelle. 2011

BACKGROUND: Differences in contexts (eg, policies, healthcare organisation characteristics) may explain variations in the effects of patient safety practice (PSP) implementations. However, knowledge of which contextual features are important determinants of PSP effectiveness is

limited and consensus is lacking on a taxonomy of which contexts matter. METHODS: Iterative, formal discussions were held with a 22-member technical expert panel composed of experts or leaders in patient safety, healthcare systems, and methods. First, potentially important contextual features were identified, focusing on five PSPs. Then, two surveys were conducted to determine the context likely to influence PSP implementations. RESULTS: The panel reached a consensus on a taxonomy of four broad domains of contextual features important for PSP implementations: safety culture, teamwork and leadership involvement; structural organisational characteristics (eg, size, organisational complexity or financial status); external factors (eg, financial or performance incentives or PSP regulations); and availability of implementation and management tools (eg, training organisational incentives). Panelists also tended to rate specific patient safety culture, teamwork and leadership contexts as high priority for assessing their effects on PSP implementations, but tended to rate specific organisational characteristic contexts as high priority only for use in PSP evaluations. Panelists appeared split on whether specific external factors and implementation/management tools were important for assessment or only description. CONCLUSION: This work can guide research commissioners and evaluators on the contextual features of PSP implementations that are important to report or evaluate. It represents a first step towards developing guidelines on contexts in PSP implementation evaluations. However, the science of context measurement needs maturing.

http://www.rand.org/pubs/external_publications/EP201100220.html

EP-201100-221

Quality of Care Provided in a Special Needs Plan Using a Nurse Care Manager Model. Neil S. Wenger, David H. Martin, Robin L. Beckman, Caren Kamberg, David A. Ganz. 2011

OBJECTIVES: To comprehensively evaluate the quality of care provided in special needs plans (SNPs; Medicare Advantage plans that aim to provide specialized care for complex older adults) and specifically the nurse care management model in the community setting. DESIGN: We adapted 107 process-of-care quality measures across 12 conditions from the Assessing Care of Vulnerable Elders set to obtain a clinically detailed evaluation of the quality of care received by complex older enrollees in a dual eligible Evercare SNP. We abstracted 13 months of primary care medical records to delineate quality of care provided by physicians and whether there was value added from the nurse care manager model. SETTING: Dual eligible Evercare SNP located in central Florida. PARTICIPANTS: Two-hundred thirty-one vulnerable older enrollees in the SNP who had complex disease. RESULTS: Based on physician medical records alone, the 231 high-risk participants (mean age 77, 67% women) received recommended care for 53% of 5,569 evaluated clinical circumstances, ranging from 12% for end-of-life care to 78% for diabetes mellitus. In fewer than 40% of these clinical circumstances was recommended care provided for dementia, falls, and urinary incontinence. In a second analysis accounting for care provided by both the Evercare nurse and the physician, recommended care was provided to patients in 69% of the 5,684 evaluated clinical circumstances. CONCLUSION: Comprehensive quality measurement applied to vulnerable older adults enrolled in one mature SNP showed that the Evercare nurse model addresses important deficits in physician care for geriatric conditions. Such measurement should be applied to other SNP models and to compare SNP care with that for complex, older, fee-for-service Medicare cohorts.

http://www.rand.org/pubs/external_publications/EP201100221.html

EP-201100-222

Resisting Smoking When a Best Friend Smokes: Do Intrapersonal and Contextual Factors Matter?. Joan S. Tucker, Michael Pollard, Harold P. Green, David P. Kennedy. 2011

This longitudinal study examines individual differences in the tendency to initiate (N = 4,612)

and escalate (N = 2,837) smoking when adolescents gain a best friend who smokes. Potential moderating factors include self-esteem, depression, problem behavior, school and family bonds, and household access to cigarettes. In addition to acquiring a smoking best friend, initiation was predicted by trouble at school, household access, poorer grades and delinquency, whereas escalation was predicted by depressive symptoms. There was little evidence that the examined individual difference factors moderate the association between gaining a smoking best friend and increased adolescent smoking. Results point to the challenges of identifying factors that may lead adolescents to be more or less susceptible to the influence of pro-smoking friends.

http://www.rand.org/pubs/external_publications/EP201100222.html

EP-201100-223

Depression in the Pathway of HIV Antiretroviral Effects on Sexual Risk Behavior Among Patients in Uganda. Glenn Wagner, Bonnie Ghosh-Dastidar, Ian Holloway, Cissy Kityo, Peter Mugyenyi. 2011

HIV antiretroviral therapy (ART) can increase safe sex or lead to disinhibition and less condom use. We conducted one of the first controlled studies of ART effects on sexual risk behavior in sub-Saharan Africa, and the potential explanatory roles of physical and mental health. Participants (302 non-ART, 300 ART) were followed for the first 12 months of HIV care in Uganda. Multivariate intention-to-treat regression analysis showed that frequency of sex increased significantly in both groups, but more among ART patients; when added to the model in separate analyses, changes in physical health functioning and depression were both significant predictors, as was time in HIV care, but there was no longer an ART effect. Both ART and non-ART groups had similar dramatic increases in consistent condom use over time; however, change in depression, unlike physical health functioning, was a significant predictor of consistent condom use when added to this model, and there remained a similar level of increased condom use among ART and non-ART patients. HIV care and ART increase sexual activity and condom use, but depression undercuts the prevention benefits of ART, highlighting the need to integrate mental health services into HIV care.

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EP-201100-224

Patient Characteristics Associated with HCV Treatment Adherence, Treatment Completion and Sustained Virologic Response in HIV Co-Infected Patients. Glenn Wagner, Jeffrey Garnett, Bonnie Ghosh-Dastidar, Laveeza Bhatti, Mallory D. Witt. 2011

BACKGROUND: Hepatitis C (HCV) treatment efficacy among HIV patients is limited by poor treatment adherence and tolerance, but few studies have examined the psychosocial determinants of treatment adherence and outcomes. METHODS: Chart abstracted and survey data were collected on 72 HIV patients who had received pegylated interferon and ribavirin to assess correlates of treatment adherence, completion, and sustained virologic response (SVR). RESULTS: Nearly half (46%) the sample had active psychiatric problems and 13% had illicit drug use at treatment onset; 28% reported <100% treatment adherence, 38% did not complete treatment (mostly due to virologic nonresponse), and intent to treat SVR rate was 49%. Having a psychiatric diagnosis was associated with nonadherence, while better HCV adherence was associated with both treatment completion and SVR. CONCLUSIONS: Good mental health may be an indicator of HCV treatment adherence readiness, which is in turn associated with treatment completion and response, but further research is needed with new HCV treatments emerging.

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EP-201100-225

Care for Veterans with Mental and Substance Use Disorders: Good Performance, but Room to Improve on Many Measures. Katherine E. Watkins, Susan M. Paddock, Brad Smith, Abigail

Woodroffe, Carrie M. Farmer, Melony E. Sorbero, Marcela Horvitz-Lennon, Thomas E. Mannle, Jr., Kimberly A. Hepner. 2011

In 2006 the Department of Veterans Affairs commissioned the Altarum Institute and the RAND Corporation to do an evaluation of its mental health treatment system. We found that veterans with mental illness and substance use disorders represented 15.4 percent of all veterans using Veterans' Health Administration (VHA) services in 2007 and that they accounted for 32.9 percent ($12 billion) of VHA costs, of which the majority was for non–mental health conditions. The average cost for a veteran with mental illness and substance use in our study was $12,337, or 2.7 times the cost for an average veteran without these conditions. The quality of care for the veterans in our study, although similar to or better than the care given to comparable privately insured patients or those enrolled in Medicare or Medicaid, varied by as much as twenty-three percentage points among regional service networks. Performance on some indicators, such as whether those with alcohol dependence received pharmacotherapy, was low. There is a need for substantial improvement in the care of these veterans, particularly with respect to ensuring the delivery of evidence-based treatments.

http://www.rand.org/pubs/external_publications/EP201100225.html

EP-201100-226

Measuring NHS performance 1990–2009 using amenable mortality: Interpret with Care. Ellen Nolte. 2011

OBJECTIVES: The new performance framework for the NHS in England will assess how well health services are preventing people from dying prematurely, based on the concept of mortality amenable to healthcare. We ask how the different parts of the UK would be assessed had this measure been in use over the past two decades, a period that began with somewhat lower levels of health expenditure in England and Wales than in Scotland and Northern Ireland but which, after 1999, saw the gap closing. DESIGN: We assessed the change in age-standardized death rates in England and Wales, Northern Ireland and Scotland in two time periods: 1990–1999 and 1999–2009. Mortality data by five-year age group, sex and cause of death for the years 1990 to 2009 were analysed using age-standardized death rates from causes considered amenable to healthcare. The absolute change was assessed by fitting linear regression and the relative change was estimated as the average annual percent decline for the two periods. SETTING: United Kingdom. PARTICIPANTS: Not applicable. MAIN OUTCOMES MEASURES: Mortality from causes amenable to healthcare. RESULTS: Between 1990 and 1999 deaths amenable to medical care had been falling more slowly in England and Wales than in Scotland and Northern Ireland. However the rate of decline in England and Wales increased after 1999 when funding of the NHS there increased. Examination of individual causes of death reveals a complex picture, with some improvements, such as in breast cancer deaths, occurring simultaneously across the UK, reflecting changes in diagnosis and treatment that took place in each nation at the same time, while others varied. CONCLUSIONS: Amenable mortality is a useful indicator of health system performance but there are many methodological issues that must be taken into account when interpreting it once it is adopted for routine use in England.

http://www.rand.org/pubs/external_publications/EP201100226.html

EP-201100-227

Variations in Amenable Mortality-Trends in 16 High-Income Nations. Ellen Nolte. 2011

BACKGROUND: There has been growing interest in the comparison of health system performance within and between countries, using a range of different indicators. This study examines trends in amenable mortality, as one measure of health system performance, in sixteen high-income countries. METHODS: Amenable mortality was defined as premature death from causes that should not occur in the presence of timely and effective health care. We analysed age-stan-

dardised rates of amenable mortality under age 75 in 16 countries for 1997/1998 and 2006/2007. RESULTS: Amenable mortality remains an important contributor to premature mortality in 16 high-income countries, accounting for 24% of deaths under age 75. Between 1997/1998 and 2006/2007, amenable mortality fell by between 20.5% in the US and 42.1% in Ireland (average decline: 31%). In 2007, amenable mortality in the US was almost twice that in France, which had the lowest levels. CONCLUSIONS: Amenable mortality continues to fall across high-income nations although the USA is lagging increasingly behind other high income countries. Despite its many limitations, amenable mortality remains a useful indicator to monitor progress of nations.

http://www.rand.org/pubs/external_publications/EP201100227.html

EP-201100-228

Design considerations for legalizing cannabis: Lessons inspired by analysis of California's Proposition 19. Jonathan P. Caulkins, Beau Kilmer, Robert J. MacCoun, Peter H. Reuter. 2011

AIMS: No modern jurisdiction has ever legalized commercial production, distribution and possession of cannabis for recreational purposes. This paper presents insights about the effect of legalization on production costs and consumption and highlights important design choices. METHODS: Insights were uncovered through our analysis of recent legalization proposals in California. The effect on the cost of producing cannabis is largely based on existing estimates of current wholesale prices, current costs of producing cannabis and other legal agricultural goods, and the type(s) of production that will be permitted. The effect on consumption is based on production costs, regulatory regime, tax rate, price elasticity of demand, shape of the demand curve and non-price effects (e.g. change in stigma). RESULTS: Removing prohibitions on producing and distributing cannabis will dramatically reduce wholesale prices. The effect on consumption and tax revenues will depend on many design choices, including: the tax level, whether there is an incentive for a continued black market, whether to tax and/or regulate cannabinoid levels, whether there are allowances for home cultivation, whether advertising is restricted, and how the regulatory system is designed and adjusted. CONCLUSIONS: The legal production costs of cannabis will be dramatically below current wholesale prices, enough so that taxes and regulation will be insufficient to raise retail price to prohibition levels. We expect legalization will increase consumption substantially, but the size of the increase is uncertain since it depends on design choices and the unknown shape of the cannabis demand curve.

http://www.rand.org/pubs/external_publications/EP201100228.html

EP-201100-229

A Markov Decision Process to Dynamically Match Hospital Inpatient Staffing to Demand. James R. Broyles, Douglas C. Montgomery. 2011

Appropriate inpatient staffing levels minimize hospital cost and increase patient safety. Hospital inpatient units dynamically adjust premium staffing (above base staffing) levels by attempting to match their daily demand. Historically, inpatient managers subjectively adjust daily staffing from observing the morning inpatient inventory. Inpatient units strive to match staff with demand in a complex patient throughput environment where service rates and non-stationary profiles are not explicitly known. Related queue control and throughput modeling literature do not directly match staffing with demand, require explicit service process knowledge, and are not formulated for an inpatient unit. This paper presents a Markov decision process (MDP) for dynamic inpatient staffing. The MDP explicitly attempts to match staffing with demand, has a statistical discrete time Markov chain foundation that estimates the service process, predicts transient inventory, and is formulated for an inpatient unit. Lastly, the MDP application to a telemetry unit reveals a computational myopic, an approximate stationary, and a finite horizon optimal policy that is validated through hospital expert experience. The application reveals difficult-to-staff inventory levels and shows that the removal

of discharge seasonality can drastically decrease required size of the premium staffing pool and the probability of full occupancy thus improving the inpatient unit's patient flow.

http://www.rand.org/pubs/external_publications/EP201100229.html

EP-201100-230

Defining and Identifying Hard-To-Staff Schools: The Role of School Demographics and Conditions. Darleen V. Opfer. 2011

PURPOSE: This study makes a distinction between a school having high attrition and one having difficulties in hiring. It does so by exploring the relationship between definitions of hard-to-staff schools, school demographics, and school conditions that are often associated with a school being hard-to-staff. RESEARCH DESIGN: The study relies on a survey of Ohio schools to ascertain information on vacancies for 2004-2005. The survey also collected information on principal perceptions of the impact of various school conditions and difficulty in hiring. Information was received about 3,371 teaching vacancies in 1,040 schools. The overall response rate from schools was 67%. In the first stage of analysis, a descriptive analysis explored the relationship between school demographic factors, definitions of hard-to-staff, and school conditions. In the second stage, three regression models were tested for seven definitions of hard-to-staff to determine whether school demographics and conditions were predictive of being hard-to-staff under any of the definitions. FINDINGS: The analyses showed that school demographics such as poverty, student ethnicity, and school location are not predictive of difficulty in hiring in general. School conditions such as central office help in hiring are more important than the demographic characteristics typically associated with a school being hard-to-staff. CONCLUSIONS: How we define hard-to-staff matters. The characteristics of a hard-to-staff school vary depending on the definition used. Thus, we need to be more specific in defining hard-to-staff schools so that both research on these schools and resource targeting by policy makers yield better results.

http://www.rand.org/pubs/external_publications/EP201100230.html

EP-201100-231

The role of teachers' orientation to learning in professional development and change: A national study of teachers in England. Darleen V. Opfer. 2011

This paper uses results from a national survey of teachers in England to test a hypothesised model of teacher orientation to learning (consisting of beliefs, practice and experiences about learning) and its relationship to teacher learning change. Results from a structural equation modeling process of 1126 teacher survey responses show that teachers bring an internal, external and collaborative orientation to their professional learning. The beliefs and practices associated with these orientations are also shown to have a moderate influence, via path analysis, on teacher learning change defined as a composite outcome of change in beliefs, practices and students.

http://www.rand.org/pubs/external_publications/EP201100231.html

EP-201100-232

The influence of school orientation to learning on teachers' professional learning change. Darleen V. Opfer, David J. Pedder, Zsolt Lavicza. 2011

This article presents a theoretical argument for assuming that schools have an orientation to learning that influences both whether teachers learn and also whether they change professionally as a result of the learning. This school-level orientation to learning is hypothesized to consist of beliefs and practices about learning. Results from a structural equation modeling process of 1,126 teacher survey responses in England show that schools have an orientation to learning that includes beliefs about learning, systems and supports for learning, and collective capacity for learning. The practices constituting the school-level orientation to learning have a strong to moderate influence, via path analysis, on teacher learning change defined as a composite outcome

of change in beliefs, practices, and students. The beliefs that constitute a school-level orientation have a weak, but still significant, influence on teacher learning change.

http://www.rand.org/pubs/external_publications/EP201100232.html

EP-201100-233

Conceptualizing Teacher Professional Learning. Darleen V. Opfer, David J. Pedder. 2011

This article adopts a complexity theory framework to review the literature on teachers' professional development practices, the generative systems of these practices, and the impact that learning experiences have on their knowledge and changes in classroom practices. The review brings together multiple strands of literature on teacher professional development, teaching and learning, teacher change, and organizational learning. In doing so, it illustrates that process–product logic has dominated the literature on teacher professional learning and that this has limited explanatory ability. The review demonstrates the ways the elements of three subsystems (the teacher, the school, and the learning activity) interact and combine in different ways and with varying intensities to influence teacher learning. The limitations of studies focusing on specific elements or subsystems are highlighted. The article concludes that to understand teacher learning scholars must adopt methodological practices that focus on explanatory causality and the reciprocal influences of all three subsystems.

http://www.rand.org/pubs/external_publications/EP201100233.html

EP-201100-234

The lost promise of teacher professional development in England. Darleen V. Opfer, David J. Pedder. 2011

This paper explores three influences on the effectiveness of teacher professional development for improving schools - the individual teacher, the learning activities in which teachers participate and the structures and supports provided by schools for teacher learning. It does so by relying on survey data collected for a national study of teacher professional development in England. The analysis indicates that while the professional development of teachers in England is generally ineffectual and lacks school level systems and supports, the professional development and supports for professional learning by teachers in high performing schools display many of the characteristics associated with effective professional learning. Given the results showing a link between school factors and professional learning and the lack of influence of individual teacher factors, the paper concludes that the previously reported importance of school capacity in influencing learning and improvement is supported by the findings.

http://www.rand.org/pubs/external_publications/EP201100234.html

EP-201100-235

Healthcare Services: Strategy, Direction and Delivery. Mirella Cacace, Ellen Nolte. 2011

Examines the health policy and practice context for healthcare management and the specific challenges of managing healthcare organizations. The authors use four countries, Canada, England, Germany, and the United States, as a means to illustrate typical healthcare systems features and the most fundamental directions of change in the governance of healthcare provision.

http://www.rand.org/pubs/external_publications/EP201100235.html

EP-201100-236

Quality of and Patient Satisfaction with Primary Health Care for Anxiety Disorders. Murray Stein, Michelle G. Craske, Ariel J. Lang, Daniela Golinelli, Raphael D. Rose, Alexander Bystritsky, Cathy D. Sherbourne. 2011

BACKGROUND: Most patients with anxiety disorders receive their care from primary care practitioners (PCPs). The purpose of this study was to evaluate quality of and patient satisfaction with primary health care for anxiety disorders. METHOD: A survey was performed among 1,004 outpatients with anxiety disorders (diagnosed ac-

cording to DSM-IV) referred by their PCPs from 17 primary care clinical settings (3 of which were university-affiliated) in 4 regions of the United States for participation in the Coordinated Anxiety Learning and Management (CALM) study, a therapeutic trial. Participating research institutions were the University of Washington at Seattle, the University of California at San Diego and Los Angeles, and the University of Arkansas for Medical Sciences at Little Rock. Enrollment took place between June 2006 and April 2008. Patients were contacted by telephone after enrollment to provide information about previous care received (during the 6 months prior to referral) and satisfaction with that care. Quality-of-care indicators were self-reported type, dose, and duration of antianxiety medication treatment and self-reported psychotherapy with cognitive-behavioral therapy (CBT) elements. RESULTS: A total of 576 patients (57.4%) had received an appropriate antianxiety medication in the previous 6 months, but only 289 patients (29.4% of 983 who answered this question) had received the medication at adequate dose for at least 2 months. A total of 465 patients (46.3%) had received some counseling with at least 1 element of CBT, but only 213 patients (21.2%) had received counseling with a strong (3+ elements) CBT focus. Overall, 416 patients (41.4%) had received quality pharmacotherapy or psychotherapy, and 81 patients (8.1%) had received both. Only 432 patients (44.8% of 964 who answered this question) were at least somewhat satisfied with their mental health care. Receipt of quality psychotherapy was the sole positive predictor (adjusted odds ratio = 2.71; 95% CI, 1.94–3.80; P < .0005) of satisfaction with mental health care for anxiety. Moreover, there was a dose-response relationship between the number of CBT elements consistently delivered and satisfaction with care (test for trend, z = 4.06, P < .0005). CONCLUSIONS: Despite recognition of these patients' anxiety disorders and referral by their PCPs to an anxiety treatment study, fewer than half of the patients had in the prior 6 months received quality pharmacologic and/or psychosocial mental health care. Receipt of CBT-oriented, quality psychosocial (but not pharmacologic) care showed a strong dose-response relationship with satisfaction with mental health care.

http://www.rand.org/pubs/external_publications/EP201100236.html

EP-201100-237

Measuring Exposure to Protobacco Marketing and Media: A Field Study Using Ecological Momentary Assessment. Steven Martino, Deborah M. Scharf, Claude Messan Setodji, William G. Shadel, Marc N. Elliott. 2011

INTRODUCTION: The aims of this study were to validate ecological momentary assessment (EMA) as a method for measuring exposure to tobacco-related marketing and media and to use this method to provide detailed descriptive data on college students' exposure to protobacco marketing and media. METHODS: College students (n = 134; ages 18–24 years) recorded their exposures to protobacco marketing and media on handheld devices for 21 consecutive days. Participants also recalled exposures to various types of protobacco marketing and media at the end of the study period. RESULTS: Retrospectively recalled and EMA-based estimates of protobacco marketing exposure captured different information. The correlation between retrospectively recalled and EMA-logged exposures to tobacco marketing and media was moderate (r = .37, p < .001), and EMA-logged exposures were marginally associated with the intention to smoke at the end of the study, whereas retrospective recall of exposure was not. EMA data showed that college students were exposed to protobacco marketing through multiple channels in a relatively short period: Exposures (M = 8.24, SD = 7.85) occurred primarily in the afternoon (42%), on weekends (35%), and at point-of-purchase locations (68%) or in movies/TV (20%), and exposures to Marlboro, Newport, and Camel represented 56% of all exposures combined and 70% of branded exposures. CONCLUSIONS: Findings support the validity of EMA as a method for capturing detailed information about youth exposure to protobacco marketing and media that are not captured through other existing methods. Such data have the potential to highlight areas for

policy change and prevention in order to reduce the impact of tobacco marketing on youth.

http://www.rand.org/pubs/external_publications/EP201100237.html

EP-201100-238

Suicidality, Ethnicity and Immigration in the USA. Joshua Breslau. 2011

BACKGROUND: Suicide is the 11th leading cause of death in the USA. Suicide rates vary across ethnic groups. Whether suicide behavior differs by ethnic groups in the USA in the same way as observed for suicide death is a matter of current discussion. The aim of this report was to compare the lifetime prevalence of suicide ideation and attempt among four main ethnic groups (Asians, Blacks, Hispanics, and Whites) in the USA. METHOD: Suicide ideation and attempts were assessed using the World Mental Health version of the Composite International Diagnostic Interview (WMH-CIDI). Discrete time survival analysis was used to examine risk for lifetime suicidality by ethnicity and immigration among 15 180 participants in the Collaborative Psychiatric Epidemiological Surveys (CPES), a group of cross-sectional surveys. RESULTS: Suicide ideation was most common among Non-Hispanic Whites (16.10%), least common among Asians (9.02%) and intermediate among Hispanics (11.35%) and Non-Hispanic Blacks (11.82%). Suicide attempts were equally common among Non-Hispanic Whites (4.69%), Hispanics (5.11%) and Non-Hispanic Blacks (4.15%) and less common among Asians (2.55%). These differences in the crude prevalence rates of suicide ideation decreased but persisted after control for psychiatric disorders, but disappeared for suicide attempt. Within ethnic groups, risk for suicidality was low among immigrants prior to migration compared to the US born, but equalized over time after migration. CONCLUSIONS: Ethnic differences in suicidal behaviors are explained partly by differences in psychiatric disorders and low risk prior to arrival in the USA. These differences are likely to decrease as the US-born proportion of Hispanics and Asians increases.

http://www.rand.org/pubs/external_publications/EP201100238.html

EP-201100-239

How Much Observation Is Enough? Refining the Administration of SOPARC. Deborah Cohen, Claude Messan Setodji, Kelly R. Evenson, Thomas L. McKenzie. 2011

BACKGROUND: The Systematic Observation of Play and Recreation in Communities (SOPARC) was designed to estimate the number and characteristics of people using neighborhood parks by assessing them 4 times/day, 7 days/week. We tested whether this schedule was adequate and determined the minimum number of observations necessary to provide a robust estimate of park user characteristics and their physical activity levels. METHODS: We conducted observations every hour for 14 hours per day during 1 summer and 1 autumn week in 10 urban neighborhood parks: 2 each in Los Angeles, CA; Albuquerque, NM; Columbus, OH; Durham, NC; and Philadelphia, PA. We counted park users by gender, age group, apparent race/ethnicity, and activity level. We used a standardized Cronbach's alpha and intraclass correlation coefficients to test the reliability of using fewer observations. RESULTS: We observed 76,632 individuals, an average of 547/park/day (range 155–786). Interobserver reliability ranged from 0.80 to 0.99. Obtaining a robust estimate of park user characteristics and their physical activity required a schedule of 4 days/week, 4 times/day. CONCLUSION: An abbreviated schedule of SOPARC was sufficient for estimating park use, park user characteristics, and physical activity. Applying these observation methods can augment physical activity surveillance.

http://www.rand.org/pubs/external_publications/EP201100239.html

EP-201100-240

Geographic Variation in Physicians' Responses to a Reimbursement Change. Mireille Jacobson, Craig C. Earle, Joseph P. Newhouse. 2011

Many studies have documented US. geographical variation in the intensity of health care utilization and the level of Medicare spending. Howev-

er, such variation in response to Medicare policy changes has received much less attention. This limitation has become more important in the face of the myriad Medicare-reimbursement changes included in the Patient Protection and Affordable Care Act (ACA). This study examined variation in geographic response to a major reform of Medicare's reimbursement system for physician-administered drugs (Part B), the vast majority of which are chemotherapy agents.

http://www.rand.org/pubs/external_publications/EP201100240.html

EP-201100-241

Trends in Late-Life Disability in Taiwan, 1989-2007: The Roles of Education, Environment, and Technology. Linda Martin. 2011

This analysis offers the first strong evidence of trends in late-life disability in an emerging economy. For the population of Taiwan aged 65 and older, consistent measures of limitations in seeing, hearing, physical functions, instrumental activities of daily living (IADLs), and activities of daily living (ADLs) were available for three to six survey waves, depending on the outcome, from 1989 to 2007. Limitations in seeing, hearing, and IADLs declined substantially, but trends were mixed for physical functions and flat for ADLs. The remarkable reduction in difficulty telephoning, an IADL, may reflect changes in telecommunications infrastructure and highlights the roles of environment and technology in disability outcomes. Trends for urban residents were more advantageous than those for rural residents for seeing and hearing, but less so for physical functions and IADLs. Were it not for the substantial increase in educational attainment, trends in all outcomes would have been less.

http://www.rand.org/pubs/external_publications/EP201100241.html

EP-201100-242

The PROMETHEUS Bundled Payment Experiment: Slow Start Shows Problems in Implementing New Payment Models. Peter S. Hussey, Meredith B. Rosenthal. 2011

Fee-for-service payment is blamed for many of the problems observed in the US health care system. One of the leading alternative payment models proposed in the Affordable Care Act of 2010 is bundled payment, which provides payment for all of the care a patient needs over the course of a defined clinical episode, instead of paying for each discrete service. We evaluated the initial "road test" of PROMETHEUS Payment, one of several bundled payment pilot projects. The project has faced substantial implementation challenges, and none of the three pilot sites had executed contracts or made bundled payments as of May 2011. The pilots have taken longer to set up than expected, primarily because of the complexity of the payment model and the fact that it builds on the existing fee-for-service payment system and other complexities of health care. Participants continue to see promise and value in the bundled payment model, but the pilot results suggest that the desired benefits of this and other payment reforms may take time and considerable effort to materialize.

http://www.rand.org/pubs/external_publications/EP201100242.html

EP-201100-243

Changes in Body Mass During Elementary and Middle School in a National Cohort of Kindergarteners. Ashlesha Datar, Victoria Shier. 2011

OBJECTIVE: To analyze changes in BMI, according to gender and race/ethnicity, in a nationally representative cohort of children in the United States during their elementary and middle school years to identify critical periods of excess BMI gains. METHODS: The Early Childhood Longitudinal Study-Kindergarten Class monitored a nationally representative cohort of kindergarten students over 9 years (1998–2007). Height and weight measurements were available for 4240 white, 640 black, and 1070 Hispanic children in kindergarten and 1st, 3rd, 5th, and 8th grades. In each wave, we estimated the proportions of children with BMI values in each quartile of the Centers for Disease Control and Prevention reference-population distribution according to gender and race/ethnic-

ity. We conducted nonparametric tests of differences in BMI distributions over time within racial/ethnic groups and across racial/ethnic groups in each wave. Piecewise linear growth models were estimated to test for specific time periods during which the largest gains in BMI percentiles occurred. RESULTS: Overall, nearly 40% of children started kindergarten with a BMI in the top quartile of the growth charts (BMI > 75th percentile). This proportion increased significantly during the elementary school years, and the largest gains were between 1st and 3rd grades (5.8 percentage points), but there was no further increase during middle school. Increases in BMI percentiles over time were most notable among Hispanic children and black girls. CONCLUSIONS: The early school years might be a critical time for excess BMI gains, even among children with normal BMI values at kindergarten entry.

http://www.rand.org/pubs/external_publications/EP201100243.html

EP-201100-244

The contextual effects of social capital on health: A cross-national instrumental variable analysis. Daniel Kim. 2011

Past research on the associations between area-level/contextual social capital and health has produced conflicting evidence. However, interpreting this rapidly growing literature is difficult because estimates using conventional regression are prone to major sources of bias including residual confounding and reverse causation. Instrumental variable (IV) analysis can reduce such bias. Using data on up to 167,344 adults in 64 nations in the European and World Values Surveys and applying IV and ordinary least squares (OLS) regression, we estimated the contextual effects of country-level social trust on individual self-rated health. We further explored whether these associations varied by gender and individual levels of trust. Using OLS regression, we found higher average country-level trust to be associated with better self-rated health in both women and men. Instrumental variable analysis yielded qualitatively similar results, although the estimates were more than double in size in both sexes when country population density and corruption were used as instruments. The estimated health effects of raising the percentage of a country's population that trusts others by 10 percentage points were at least as large as the estimated health effects of an individual developing trust in others. These findings were robust to alternative model specifications and instruments. Conventional regression and to a lesser extent IV analysis suggested that these associations are more salient in women and in women reporting social trust. In a large cross-national study, our findings, including those using instrumental variables, support the presence of beneficial effects of higher country-level trust on self-rated health. Previous findings for contextual social capital using traditional regression may have underestimated the true associations. Given the close linkages between self-rated health and all-cause mortality, the public health gains from raising social capital within and across countries may be large.

http://www.rand.org/pubs/external_publications/EP201100244.html

EP-201100-245

Trends in Retail Clinic Use Among the Commercially Insured. Rachel O. Reid, Claude Messan Setodji, Martin Gaynor, Ateev Mehrotra. 2011

OBJECTIVES: To describe trends in retail clinic use among commercially insured patients and to identify which patient characteristics predict retail clinic use. STUDY DESIGN: Retrospective cohort analysis of commercial insurance claims sampled from a population of 13.3 million patients in 22 markets in 2007 to 2009.METHODS: We identified 11 simple acute conditions that can be managed at a retail clinic and described trends in retail clinic utilization for these conditions. We used multiple logistic regressions to identify predictors of retail clinic versus another care site for these conditions and assessed whether those predictors changed over time. RESULTS: Retail clinic use increased 10-fold from 2007 to 2009. By 2009, 6.9% of all visits for the 11 conditions were to a retail clinic. Proximity to a retail clinic was the strongest pre-

dictor of use. Patients living within 1 mile of a retail clinic were 7.5% more likely to use one than those living 10 to 20 miles away (P <.001). Women (0.9%, P<.001), young adults (1.6%, P <.001), patients without a chronic condition (0.9%, P <.001), and patients with high incomes (2.6%, P <.001) were more likely to use retail clinics. All these associations became stronger over time. There was no association between primary care physician availability and retail clinic use. CONCLUSIONS: If these trends continue, health plans will see a dramatic increase in retail clinic utilization. While use is increasing on average, it is particularly increasing among young, healthy, and higher income patients living close to retail clinics.

http://www.rand.org/pubs/external_publications/EP201100245.html

EP-201100-246

Implementing collaborative care for depression treatment in primary care: A cluster randomized evaluation of a quality improvement practice redesign. Edmund Chaney, Lisa V. Rubenstein, Chuan-Fen Liu, Elizabeth Yano, Cory Bolkan, Martin L. Lee, Bradford Felker. 2011

BACKGROUND: Meta-analyses show collaborative care models (CCMs) with nurse care management are effective for improving primary care for depression. This study aimed to develop CCM approaches that could be sustained and spread within Veterans Affairs (VA). Evidence-based quality improvement (EBQI) uses QI approaches within a research/clinical partnership to redesign care. The study used EBQI methods for CCM redesign, tested the effectiveness of the locally adapted model as implemented, and assessed the contextual factors shaping intervention effectiveness. METHODS: The study intervention is EBQI as applied to CCM implementation. The study uses a cluster randomized design as a formative evaluation tool to test and improve the effectiveness of the redesign process, with seven intervention and three non-intervention VA primary care practices in five different states. The primary study outcome is patient antidepressant use. The context evaluation is descriptive and uses subgroup analysis. The primary context evaluation measure is naturalistic primary care clinician (PCC) predilection to adopt CCM. For the randomized evaluation, trained telephone research interviewers enrolled consecutive primary care patients with major depression in the evaluation, referred enrolled patients in intervention practices to the implemented CCM, and resurveyed at seven months. RESULTS: Interviewers enrolled 288 CCM site and 258 non-CCM site patients. Enrolled intervention site patients were more likely to receive appropriate antidepressant care (66% versus 43%, p = 0.01), but showed no significant difference in symptom improvement compared to usual care. In terms of context, only 40% of enrolled patients received complete care management per protocol. PCC predilection to adopt CCM had substantial effects on patient participation, with patients belonging to early adopter clinicians completing adequate care manager follow-up significantly more often than patients of clinicians with low predilection to adopt CCM (74% versus 48%%, p = 0.003). CONCLUSIONS: Depression CCM designed and implemented by primary care practices using EBQI improved antidepressant initiation. Combining QI methods with a randomized evaluation proved challenging, but enabled new insights into the process of translating research-based CCM into practice. Future research on the effects of PCC attitudes and skills on CCM results, as well as on enhancing the link between improved antidepressant use and symptom outcomes, is needed.

http://www.rand.org/pubs/external_publications/EP201100246.html

EP-201100-247

What Are Achievement Gains Worth -- to Teachers?. Julie A. Marsh, Daniel F. McCaffrey. 2011

In 2007, New York City schools commenced a school-level pay-for-performance program for teachers and staff in about 200 schools. The authors found that the program didn't improve schools or student outcomes. Why? Because the program failed to create conditions that theory suggests are necessary for performance-based incentive programs to change behaviors, and the

program did not appear to motivate teachers to change their behaviors.

http://www.rand.org/pubs/external_publications/EP201100247.html

EP-201100-248

Missed Opportunities: Use of an End-of-Life Symptom Management Order Protocol Among Inpatients Dying Expected Deaths. Anne Walling, Susan L. Ettner, Tod Barry, Neil S. Wenger. 2011

BACKGROUND: When a patient is expected to die, the ideal plan of care focuses on comfort. Prior investigation of application of one institution's end-of-life symptom management order (ESMO) protocol suggested that comfort measures were often instituted too late and sometimes not at all. We studied patient factors associated with missed opportunities for use of an ESMO protocol and protocol adherence in order to identify areas for quality improvement. METHODS: We abstracted the terminal hospitalization medical record for all adult decedents hospitalized for at least 3 days between April 2005 and April 2006 (n = 496) at a university medical center. Detailed information was collected about ESMO use and opiate titration at the end of life. Among patients expected to die, we used multivariate logistic regression to evaluate factors associated with whether patients were placed on the ESMO protocol prior to death. RESULTS: Half of patients who died received ESMO protocol care (n = 248). All had documentation of a do-not-resuscitate (DNR) order (a requirement of the protocol). An opiate drip was used for 95% of patients placed on the ESMO protocol and it was titrated up at least once for 67% of those patients. Patients had a mean of 4 opiate titrations, but for only a mean of 2.2 was a justification documented (symptom documentation is required for each titration per the protocol). In a multivariable regression accounting for other demographic, clinical and provider variables, uninsured patients (risk ratio [RR] 0.25, 95% confidence interval [CI] 0.06–0.62), patients admitted from a nursing home (RR 0.57, 95% CI 0.30–0.99), and patients considered for transplant (RR 0.60, 95% CI 0.40–0.85) were significantly less likely to be placed on the ESMO protocol prior to death. CONCLUSIONS: Evaluation of implementation of a standardized order set can identify areas for quality improvement and missed opportunities for use.

http://www.rand.org/pubs/external_publications/EP201100248.html

EP-201100-249

Quality of End-of-Life Care for Patients with Advanced Cancer in an Academic Medical Center. Sydney Dy, Steven M. Asch, Karl Lorenz, Jennifer Malin. 2011

PURPOSE: We assessed key aspects of the quality of end-of-life care using validated explicit process quality measures in an academic medical center (hospital and cancer center) before expanding to a broader palliative care initiative. METHODS: We evaluated 21 indicators most relevant to end-of-life care from the Cancer Quality-ASSIST supportive oncology indicator set for 238 patients with advanced/metastatic solid tumors who died between 2–15 months after diagnosis. These included outpatient and hospital indicators for cancer symptoms and information and care planning that met criteria for feasibility, reliability, and validity. We abstracted detailed information from medical records to specify the necessary data elements. RESULTS: Overall adherence was 53% (95% confidence interval [CI], 50%–56%); this varied widely among indicators. Adherence was highest for pain indicators; in particular, 97% of eligible subjects' hospitalizations had documented screening for pain, and, after an outpatient pain medication was changed, 97% of patients had a pain assessment at the subsequent visit. For other symptoms, adherence ranged from 0% for documentation of life expectancy for patients starting parenteral or enteral nutrition to 87% for assessment of nausea or vomiting on hospital admission. For information and care planning, results ranged from 6% for documentation of ventilation preferences prior to intubation to 68% for documented communication of risks and benefits or prognosis prior to starting chemotherapy. CONCLUSION: In conclusion, Cancer Quality-ASSIST indicators are useful for practical quality assessment of cancer

end-of-life care in an academic medical center. These results will serve as useful data for targeting areas for quality improvement and measuring progress.

http://www.rand.org/pubs/external_publications/EP201100249.html

EP-201100-25

How Do the Experiences of Medicare Beneficiary Subgroups Differ Between Managed Care and Original Medicare?. Marc N. Elliott, Amelia M. Haviland, Katrin Hambarsoomian, Paul Cleary. 2011

OBJECTIVE: To examine whether disparities in health care experiences of Medicare beneficiaries differ between managed care (Medicare Advantage [MA]) and traditional fee-for-service (FFS) Medicare. DATA SOURCES: 132,937 MA and 201,444 FFS respondents to the 2007 Medicare Consumer Assessment of Health Care Providers and Systems (CAHPS) survey. STUDY DESIGN: We defined seven subgroup characteristics: low-income subsidy eligible, no high school degree, poor or fair self-rated health, age 85 and older, female, Hispanic, and black. We estimated disparities in CAHPS experience of care scores between each of these groups and beneficiaries without those characteristics within MA and FFS for 11 CAHPS measures and assessed differences between MA and FFS disparities in linear models. PRINCIPAL FINDINGS: The seven subgroup characteristics had significant ($p<.05$) negative interactions with MA (larger disparities in MA) in 27 of 77 instances, with only four significant positive interactions. CONCLUSION: Managed care may provide less uniform care than FFS for patients; specifically there may be larger disparities in MA than FFS between beneficiaries who have low incomes, are less healthy, older, female, and who did not complete high school, compared with their counterparts. There may be potential for MA quality improvement targeted at the care provided to particular subgroups.

http://www.rand.org/pubs/external_publications/EP20110025.html

EP-201100-250

Communication with Families Facing Life-Threatening Illness: A Research-Based Model for Family Conferences. Steven M. Asch. 2011

BACKGROUND: Communication is an ongoing challenge for clinicians working with people facing life-threatening illnesses and end of life. Family conferences offer patient-focused, family-oriented care that brings together patients, family members, and health care providers. OBJECTIVE: The aim of this study was to develop a research-based model for family conferences to help physicians and other health care providers conduct such conferences effectively and improve communication with patients and families. DESIGN: We prospectively studied family conferences for patients facing life-threatening illness in two inpatient medical centers. We videotape and audiotape recorded real-life conferences and postconference interviews with participants. PARTICIPANTS: Twenty-four family conferences were included in the study. Participants consisted of 24 patients, 10 of whom took part in the family conferences, 49 family members, and 85 health care providers. APPROACH: A multidisciplinary team conducted a qualitative analysis of the videotaped and audiotaped materials using thematic analysis. The team used a multistage approach to independently and collectively analyze and integrate three data sources. MAIN RESULTS: The resulting theoretical model for family conferences has 4 main components. These include the underlying structural context of conference organization and the key process components of negotiation and personal stance. Emotional engagement by health care providers, emotion work, appears central to the impact of these components on the successful outcome of the conference. In addition to the theoretical model, the authors found that family conference participants place specific value on the "simultaneous presence" of conference attendees that leads to being on the "same page." CONCLUSIONS: Physicians and other health care professionals can use the model as a guide for conducting family conferences and strengthening communication with patients, families and colleagues.

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tions/EP201100250.html

EP-201100-251

Increasing the Availability and Consumption of Drinking Water in Middle Schools: A Pilot Study. Anisha I. Patel, Laura M. Bogart, Marc N. Elliott, Kimberly E. Uyeda, Jennifer Hawes-Dawson, David J. Klein, Mark A. Schuster. 2011

INTRODUCTION: Although several studies suggest that drinking water may help prevent obesity, no US studies have examined the effect of school drinking water provision and promotion on student beverage intake. We assessed the acceptability, feasibility, and outcomes of a school-based intervention to improve drinking water consumption among adolescents. METHODS: The 5-week program, conducted in a Los Angeles middle school in 2008, consisted of providing cold, filtered drinking water in cafeterias; distributing reusable water bottles to students and staff; conducting school promotional activities; and providing education. Self-reported consumption of water, nondiet soda, sports drinks, and 100% fruit juice was assessed by conducting surveys among students (n = 876), preintervention and at 1 week and 2 months postintervention, from the intervention school and the comparison school. Daily water (in gallons) distributed in the cafeteria during the intervention was recorded. RESULTS: After adjusting for sociodemographic characteristics and baseline intake of water at school, the odds of drinking water at school were higher for students at the intervention school than students at the comparison school. Students from the intervention school had higher adjusted odds of drinking water from fountains and from reusable water bottles at school than students from the comparison school. Intervention effects for other beverages were not significant. CONCLUSION: Provision of filtered, chilled drinking water in school cafeterias coupled with promotion and education is associated with increased consumption of drinking water at school. A randomized controlled trial is necessary to assess the intervention's influence on students' consumption of water and sugar-sweetened beverages, as well as obesity-related outcomes.

http://www.rand.org/pubs/external_publications/EP201100251.html

EP-201100-252

Influenza Vaccination Coverage Among Health-Care Personnel --- United States, 2010-11 Influenza Season. Katherine M. Harris, Lori Uscher-Pines, Carla Black, Gary Euler. 2011

This article reports on the results of a survey of health care workers to determine whether they had received an influenza vaccine in April 2011.

http://www.rand.org/pubs/external_publications/EP201100252.html

EP-201100-253

Can the Patient-Centered Outcomes Research Institute Become Relevant to Controlling Medical Costs and Improving Value?. Robert H. Brook. 2011

Research sponsored by the Patient Centered Outcomes Research Institute can help patients make better decisions by comparing the effectiveness of alternative therapies, but it is constrained from considering the costs of therapies it compares.

http://www.rand.org/pubs/external_publications/EP201100253.html

EP-201100-254

Managing Climate Risks in Developing Countries with Robust Decision Making. Robert J. Lempert, Nidhi Kalra. 2011

The authors present the concept of robust decision making (RDM), which draws on already-existing knowledge of practitioners to choose actions that are viable in both the short- and long-term.

http://www.rand.org/pubs/external_publications/EP201100254.html

EP-201100-255

Text Analysis of After Action Reports to Support Improved Emergency Response Planning. Brian A. Jackson, Henry H. Willis. 2011

Common failures in emergency responses could be reduced if response organizations had a more systematic way to incorporate lessons learned from exercises and past events into their plans. Reliability and risk concepts from systems engineering provide one framework for improving emergency response planning, but it is unclear if sufficient data exists to apply these techniques. This study combines a text analysis of 70 after action reports (AARs) with a failure mode effects and consequences analysis (FMECA). This approach provides a mechanism to connect the AAR process with efforts to improve emergency response planning. The text analysis is able to identify the frequency of both common (e.g. lack of equipment or training, communication failures) and uncommon (e.g. medical or transportation infrastructure destroyed, units misunderstand or refuse orders) failures modes across a range of emergency response events, but is unable to obtain sufficiently detailed information on the consequences of those failures or their root causes to fully implement a FMECA. These findings suggest that future analyses of response failures could draw on AARs as a data source. However, AARs would be more useful as a source of information on emergency response performance if they were standardized to more explicitly include the causes and consequences of failures during emergency response operations.

http://www.rand.org/pubs/external_publications/EP201100255.html

EP-201100-256

Motives for Smoking in Movies Affect Future Smoking Risk in Middle School Students: An Experimental Investigation. William G. Shadel, Steven Martino, Claude Messan Setodji, Amelia M. Haviland, Brian A. Primack, Deborah M. Scharf. 2011

BACKGROUND: Exposure to smoking in movies has been linked to adolescent smoking uptake. However, beyond linking amount of exposure to smoking in movies with adolescent smoking, whether the way that smoking is portrayed in movies matters for influencing adolescent smoking has not been investigated. This study experimentally examined how motivation for smoking depicted in movies affects self-reported future smoking risk (a composite measure with items that assess smoking refusal self-efficacy and smoking intentions) among early adolescents. METHODS: A randomized laboratory experiment was used. Adolescents were exposed to movie scenes depicting one of three movie smoking motives: social smoking motive (characters smoked to facilitate social interaction); relaxation smoking motive (characters smoked to relax); or no smoking motive (characters smoked with no apparent motive, i.e., in neutral contexts and/or with neutral affect). Responses to these movie scenes were contrasted (within subjects) to participants' responses to control movie scenes in which no smoking was present; these control scenes matched to the smoking scenes with the same characters in similar situations but where no smoking was present. A total of 358 adolescents, aged 11–14 years, participated. RESULTS: Compared with participants exposed to movie scenes depicting characters smoking with no clear motive, adolescents exposed to movie scenes depicting characters smoking for social motives and adolescents exposed to movie scenes depicting characters smoking for relaxation motives had significantly greater chances of having increases in their future smoking risk. CONCLUSIONS: Exposure to movies that portray smoking motives places adolescents at particular risk for future smoking.

http://www.rand.org/pubs/external_publications/EP201100256.html

EP-201100-257

Childhood and Adult Socioeconomic Position, Cumulative Lead Levels, and Pessimism in Later Life: The VA Normative Aging Study. Laura D. Kubzansky, Daniel Kim, Joel Schwartz. 2011

Pessimism, a general tendency toward negative expectancies, is a risk factor for depression and also heart disease, stroke, and reduced cancer survival. There is evidence that individuals with higher lead exposure have poorer health. However, low socioeconomic status (SES) is linked with

higher lead levels and greater pessimism, and it is unclear whether lead influences psychological functioning independently of other social factors. The authors considered interrelations among childhood and adult SES, lead levels, and psychological functioning in data collected on 412 Boston area men between 1991 and 2002 in a subgroup of the VA Normative Aging Study. Pessimism was measured by using the Life Orientation Test. Cumulative (tibia) lead was measured by x-ray fluorescence. Structural equation modeling was used to quantify the relations as mediated by childhood and adult SES, controlling for age, health behaviors, and health status. An interquartile range increase in lead quartile was associated with a 0.37 increase in pessimism score ($P < 0.05$). Low childhood and adult SES were related to higher tibia lead levels, and both were also independently associated with higher pessimism. Lead maintained an independent association with pessimism even after childhood and adult SES were considered. Results demonstrate an interrelated role of lead burden and SES over the life course in relation to psychological functioning in older age.

http://www.rand.org/pubs/external_publications/EP201100257.html

EP-201100-258

Art Sales as Cultural Intelligence: Analysis of the Auction Market for African Tribal Art. Erik Nemeth. 2011

The market value of tribal art has implications for the risk of looting in Africa. Consequent trafficking in tribal art compromises security on the continent by eroding cultural identity, fostering public-sector corruption, and providing a source of revenue for insurgents. This paper examines auction sales of African tribal art for the continent as a whole and by individual nations of origin. Graphical analysis of sales data from the past nine years identifies distinct market trends for temporal comparison with security in nations from which the artworks originate. The analysis suggests that collecting trends in "market nations" may reflect perceptions of security in "source nations."

http://www.rand.org/pubs/external_publications/EP201100258.html

EP-201100-259

Collecting Cultural Intelligence: The Tactical Value of Cultural Property. Erik Nemeth. 2011

The tightening interrelation of cultural property and international security--cultural security--creates a need for the collection and analysis of specialized intelligence. "Cultural intelligence" enables assessments of the tactical and strategic significance of antiquities, fine art, and cultural heritage sites to national and regional security. This paper defines a framework for the collection of cultural intelligence as a fundamental asset in countering threats to cultural security. Looting of antiquities as a tactic in campaigns of cultural cleansing, trafficking in antiquities as a source of funding for insurgents, and targeting of historic structures and religious monuments in political violence represent distinct threats to regional security. A critical initial step in countering the threats includes marshalling appropriate sources of information. Publications that report on the art market and cultural property globally and players in the antiquities trade offer opportunities as sources of cultural intelligence. Ultimately, the development of tactical and strategic cultural intelligence can reveal trafficking networks and assess risks to cultural heritage sites. As a starting point, this paper indentifies viable sources of cultural intelligence. Conflicts in Afghanistan (2001) and Iraq (2003) provide examples in retrospect, while volatility in Mali presents an opportunity in the context of an emerging security risk. In conclusion, the paper speculates on the applications of cultural intelligence in regional security.

http://www.rand.org/pubs/external_publications/EP201100259.html

EP-201100-26

Within-day Temporal Patterns of Smoking, Withdrawal Symptoms, and Craving. Deborah M. Scharf, Saul Shiffman. 2011

Smoking is associated with particular moods and activities, but it is not known whether there

are individual differences in these associations and whether these differences are associated with success in smoking cessation. We assessed such associations using ecological momentary assessment: real-world, real-time data, collected by palm-top computer. Two hundred and fourteen smokers participating in a smoking cessation study provided data during ad lib smoking at baseline. Participants recorded moods and activities each time they smoked and, for comparison, at randomly selected non-smoking occasions. Situational associations with smoking were captured by examining the associations between smoking and antecedents considered relevant to lapse risk: negative affect (NA), arousal, socializing with others, the presence of others smoking, and consumption of coffee and alcohol. The associations varied across participants, confirming individual differences in situational smoking associations. Survival analyses revealed that only the NA pattern predicted first lapse. The effect was only seen in EMA assessments of NA smoking, and was not captured by questionnaire measures of negative affect smoking, which did not predict lapse risk. Moreover, the effect was not mediated by nicotine dependence.

http://www.rand.org/pubs/external_publications/EP20110026.html

EP-201100-260

A History of the Academic Pediatric Association's Public Policy and Advocacy Initiatives. Tina L. Cheng, Mark A. Schuster. 2011

This article reviews the public policy and advocacy priorities of the Academic Pediatric Association over the last 50 years.

http://www.rand.org/pubs/external_publications/EP201100260.html

EP-201100-261

Guide to Reducing Unintended Consequences of Electronic Health Records. Spencer S. Jones, Michael I. Harrison. 2011

The Guide to Reducing Unintended Consequences of Electronic Health Records is an online resource designed to help you and your organization anticipate, avoid, and address problems that can occur when implementing and using an electronic health record (EHR). Our purpose in developing the Guide was to provide practical, trouble-shooting knowledge and resources. The Guide was developed with all types of health care organizations in mind -- from large hospital systems to solo physician practices. We anticipate that the primary users will be EHR implementers such as Regional Extension Centers, chief information officers, directors of clinical informatics, EHR champions or "super users," administrators, information technology specialists, and clinicians involved in the implementation of an EHR. Frontline EHR users (such as physicians and nurses) may also find the Guide useful. The Guide is based on the research literature, other practice-oriented guides for EHR implementation and use, research by its authors, and interviews with organizations that have recently implemented EHR. The Guide represents a compilation of the known best practices for anticipating, avoiding, and addressing EHR-related unintended consequences. However, this area of research is still in its infancy. Therefore, the Guide is a work in progress.

http://www.rand.org/pubs/external_publications/EP201100261.html

EP-201100-262

Reading Coach Quality: Findings from Florida Middle Schools. Julie A. Marsh. 2011

Drawing on a statewide study of Florida middle-school reading coaches, this article examines what constitutes, contributes to, and is associated with high-quality coaches and coaching. Authors find that coaches generally held many of the qualifications recommended by state and national experts and principals and teachers rated their coaches highly on many indicators of quality. However, several common concerns about recruiting, retaining, and supporting high-quality coaches emerged. Estimates from models indicate that a few indicators of coach experience, knowledge, and skills had significant associations with perceived improvements in teaching and higher student achievement, although the magnitude of

the latter relationship was quite small. Findings suggest that although possessing strong reading knowledge and instructional expertise may be important for coaching, it may not be sufficient.

http://www.rand.org/pubs/external_publications/EP201100262.html

EP-201100-263

Validation of a Quality-of-Life Scale for Women with Bladder Pain Syndrome/interstitial Cystitis. Laura M. Bogart, Marika Suttorp, Marc N. Elliott, Sandra H. Berry. 2011

PURPOSE: To validate a disease-specific scale to measure the impact of symptoms of bladder pain syndrome/interstitial cystitis (BPS/IC), a condition that affects up to 6.5% of US women. METHODS: Participants were drawn from the RAND Interstitial Cystitis Epidemiology (RICE) Study, a telephone probability survey of 146,231 US households. Women who met RICE BPS/IC symptom criteria (n = 3,397) completed the 6-item RAND Bladder Symptom Impact scale (RICE BSI-6). The RICE BSI-6 was adapted from a scale used to assess the impact of diabetes on life and sexuality and modified based on expert input on face validity and focus group work; items specific to diabetic symptoms were eliminated. Validated scales of symptom severity, mental- and physical-health-related quality of life (QoL), depression, coping, and perceived control were used to assess convergent validity. RESULTS: The RICE BSI-6 (⍁ = 0.92) was significantly related to greater symptom severity, worse general mental- and physical-health-related QoL, more severe depression symptoms, and lower perceived control over life in general and over BPS/IC symptoms (P values < .05). It was also associated with less use of distancing coping (P < .05). CONCLUSION: The RICE BSI-6 shows excellent internal consistency and strong convergent validity. It can be used to examine the effects of psychosocial and treatment interventions on QoL among women with BPS/IC.

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EP-201100-264

The impact of buprenorphine on treatment of opioid dependence in a medicaid population: Recent service utilization trends in the use of buprenorphine and methadone. Bradley D. Stein, Mark J. Sorbero, Andrew W. Dick, James Schuster, Carrie M. Farmer. 2011

BACKGROUND: Buprenorphine provides an important option for individuals with opioid dependence who are unwilling or unable to attend a licensed methadone opioid agonist treatment program to receive opioid agonist therapy (OAT). Little empirical information is available, however, about the extent to which buprenorphine has increased the percentage of opioid dependent individuals receiving OAT, nor to what extent buprenorphine is being used in office based settings. METHODS: Using administrative data from the largest Medicaid managed behavioral health organization in a large mid-Atlantic state, we used multivariate regression to examine rates and predictors of opioid agonist use and treatment setting for 14,386 new opioid dependence treatment episodes during 2007–2009. RESULTS: Despite an increase in the use of buprenorphine, the percentage of new treatment episodes involving OAT is unchanged due to a decrease in the percentage of episodes involving methadone. Use of buprenorphine was significantly more common in rural communities, and 64% of buprenorphine use was in office-based settings. CONCLUSION: Buprenorphine use has increased in recent years, with the greatest use in rural communities and in office based settings. However, the percentage of new opioid dependence treatment episodes involving an opioid agonist is unchanged, suggesting the need for further efforts to increase buprenorphine use among urban populations.

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EP-201100-265

Coexistence of Obesity and Anemia in Children Between 2 and 18 Years of Age in Mexico. Homero Martinez. 2011

BACKGROUND: According to the most recent national nutrition survey (ENSANUT 2006)

in Mexico, 18.4% of the population aged 5 years or older was obese, and 19.6% of those children aged 1 year or older were anemic. Although these are two of the most highly prevalent conditions, coexistence of both conditions has not been previously described at the national level. METHODS: We carried out a secondary data analysis to determine the frequency of anemia in different categories of body mass index (BMI) and the frequency in which obesity and anemia co-occurred in children between 2 and 18 years of age. We included data from 29,893 children <18 years of age. RESULTS: The highest prevalence of anemia was found among children with low BMI (13.1%), whereas in obese children the corresponding prevalence was 9.6%. Only 1.3% of children presented obesity and anemia, and its coexistence was observed mainly in children <5 years of age ($p = 0.001$). Being female and being <9 years of age were the two factors significantly associated with the phenomenon under study. CONCLUSIONS: The risk for coexistence of obesity and anemia varied according to the gender and age of the children. Integral nutrition education programs are required to simultaneously address both of these issues.

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EP-201100-266

Who Knew? Awareness of Being Recommended for Influenza Vaccination Among US Adults. Katherine M. Harris, Andrew M. Parker. 2011

BACKGROUND: Starting with the 2010–2011 influenza season, the Advisory Committee on Immunization Practices at the US Centers for Disease Control and Prevention recommends annual influenza vaccination to all people aged 6 months and older unless contraindicated. OBJECTIVES: To measure perceived influenza vaccination recommendation status among US adults (n = 2122) and its association with socio-demographic characteristics and recommendation status during the 2009–2010 pandemic influenza season. METHODS: We analyze nationally representative data from longitudinal Internet surveys of US adults conducted in November–December 2009 and September–October 2010. RESULTS: During the 2010–2011 vaccination season, 46.2 percent (95%-CI: 43.3–49.1%) of US adults correctly reported to be covered by a government recommendation for influenza vaccination. Awareness of being covered by a government influenza vaccination recommendation was statistically significantly higher among non-working adults and adults who had been recommended for seasonal vaccination or both seasonal and H1N1 vaccination during the 2009–2010 pandemic influenza vaccination season. CONCLUSIONS: Our results highlight that a majority of US adults do not know that they are recommended for annual influenza vaccination by the government. The fraction of adults who are unaware of their recommendation status is especially large among newly recommended healthy young adults. The universal vaccination recommendations will only be successful if they reach both patients and physicians and lead to changing vaccination practices. The universal nature of the new recommendation simplifies vaccination-related outreach and compliance with government vaccination guidelines considerably, as it does not require any identification of specific recommendation groups based on complex personal or health risk factors.

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EP-201100-267

Racial Variation in the Cancer Caregiving Experience: A Multisite Study of Colorectal and Lung Cancer Caregivers. Katherine L. Kahn. 2011

BACKGROUND: As cancer care shifts from hospital to outpatient settings, the number of cancer caregivers continues to grow. Yet, little is known about the cancer caregiving experience. This gap in knowledge is especially evident for racially diverse caregivers. OBJECTIVE: This study, part of a multisite study of care recipients with either lung or colorectal cancer and their caregivers, examined the caregiving experiences of African American (AA) and white caregivers. METHODS: Caregivers were identified by cancer patients in

the Cancer Care Outcomes Research and Surveillance consortium. Caregivers completed a self-administered, mailed questionnaire that assessed their characteristics and experiences. Analysis of covariance was used to compare racial groups by objective burden and caregiving resources while controlling for covariates. RESULTS: Despite greater preparedness for the caregiving role (P = .006), AA caregivers reported more weekly hours caregiving than whites did (26.5 +/- 3.1 vs 18.0 +/- 1.7; P = .01). In later phases of caregiving, AAs reported having more social support (P = .02), spending more hours caregiving (31.9 +/- 3.5 vs 16.9 +/- 1.9; P < .001), and performing more instrumental activities of daily living on behalf of their care ecipient (P = .021). CONCLUSION: Racial differences in the caregiving experience exist. IMPLICATIONS FOR PRACTICE: Nurses play a key role in educating cancer patients and their caregivers on how to effectively cope with and manage cancer. Because AA caregivers seem to spend more time in the caregiving role and perform more caregiving tasks, AA caregivers may benefit from interventions tailored to their specific caregiving experience.

http://www.rand.org/pubs/external_publications/EP201100267.html

EP-201100-268

Community-based Care Coordination: Practical Applications for Childhood Asthma. Michael P. Rosenthal, Marielena Lara, Kimberly E. Uyeda. 2011

Care coordination programs have been used to address chronic illnesses, including childhood asthma, but primarily via practice-based models. An alternative approach employs community-based care coordinators who bridge gaps between families, health care providers, and support services. Merck Childhood Asthma Network, Inc. (MCAN) sites developed community-based care coordination approaches for childhood asthma. Using a community-based care coordination logic model, programs at each site are described along with program operational statistics. Four sites used three to four community health workers (CHWs) to provide care coordination, whereas one site used five school-based asthma nurses. This school-based site had the highest caseload (82.5 per year), but program duration was 3 months with 4 calls or visits. Other sites averaged fewer cases (35 to 61 per CHW per year), but families received more (7 to 17) calls or visits over a year. Retention was 43% to 93% at 6 months and 24% to 75% at 12 months. Pre-post cross-site data document changes in asthma management behaviors and outcomes. After program participation, 93% to 100% of caregivers had confidence in controlling their child's asthma, 85% to 92% had taken steps to reduce triggers, 69% to 100% had obtained an asthma action plan, and 46% to 100% of those with moderate to severe asthma reported appropriate use of controller medication. Emergency department visits for asthma decreased by 36% to 63%, and asthma-related hospitalizations declined by 26% to 78%. More than three fourths had fewer school absences. In conclusion, MCAN community-based care coordination programs improved management behaviors and decreased morbidity across all sites.

http://www.rand.org/pubs/external_publications/EP201100268.html

EP-201100-269

Balancing "fidelity" and Community Context in the Adaptation of Asthma Evidence-Based Interventions in the "real World". Marielena Lara, Michael P. Rosenthal, Kimberly E. Uyeda. 2011

The Merck Childhood Asthma Network (MCAN) initiative selected five sites (New York City, Puerto Rico, Chicago, Los Angeles, and Philadelphia) to engage in translational research to adapt evidence-based interventions (EBIs) to improve childhood asthma outcomes. The authors summarize the sites' experience by describing criteria defining the fidelity of translation, community contextual factors serving as barriers or enablers to fidelity, types of adaptation conducted, and strategies used to balance contextual factors and fidelity in developing a "best fit" for EBIs in the community. A conceptual model captures important structural and process-related factors and

helps frame lessons learned. Site implementers and intervention developers reached consensus on qualitative rankings of the levels of fidelity of implementation for each of the EBI core components: low fidelity, adaptation (major vs. minor), or high fidelity. MCAN sites were successful in adapting core EBI components based on their understanding of structural and other contextual barriers and enhancers in their communities. Although the sites varied regarding both the EBI components they implemented and their respective levels of fidelity, all sites observed improvement in asthma outcomes. Our collective experiences of adapting and implementing asthma EBIs highlight many of the factors affecting translation of evidenced-based approaches to chronic disease management in real community settings.

http://www.rand.org/pubs/external_publications/EP201100269.html

EP-201100-27

Quality Measures for the Diagnosis and Non-Operative Management of Carpal Tunnel Syndrome in Occupational Settings. Teryl K. Nuckols, Philip Harber, Karl J. Sandin, Douglas A. Benner, Haoling H. Weng, Rebecca Shaw, Anne Griffin, Steven M. Asch. 2011

INTRODUCTION: Providing higher quality medical care to workers with occupationally associated carpal tunnel syndrome (CTS) may reduce disability, facilitate return to work, and lower the associated costs. Although many workers' compensation systems have adopted treatment guidelines to reduce the overuse of unnecessary care, limited attention has been paid to ensuring that the care workers do receive is high quality. Further, guidelines are not designed to enable objective assessments of quality of care. This study sought to develop quality measures for the diagnostic evaluation and non-operative management of CTS, including managing occupational activities and functional limitations. METHODS: Using a variation of the well-established RAND/UCLA Appropriateness Method, we developed draft quality measures using guidelines and literature reviews. Next, in a two-round modified-Delphi process, a multidisciplinary panel of 11 U.S. experts in CTS rated the measures on validity and feasibility. RESULTS: Of 40 draft measures, experts rated 31 (78%) valid and feasible. Nine measures pertained to diagnostic evaluation, such as assessing symptoms, signs, and risk factors. Eleven pertain to non-operative treatments, such as the use of splints, steroid injections, and medications. Eleven others address assessing the association between symptoms and work, managing occupational activities, and accommodating functional limitations. CONCLUSIONS: These measures will complement existing treatment guidelines by enabling providers, payers, policymakers, and researchers to assess quality of care for CTS in an objective, structured manner. Given the characteristics of previous measures developed with these methods, greater adherence to these measures will probably lead to improved patient outcomes at a population level.

http://www.rand.org/pubs/external_publications/EP20110027.html

EP-201100-270

Household Portfolio Choices, Health Status and Health Care Systems: A Cross-Country Analysis Based on SHARE. Vincenzo Atella, Marianna Brunetti, Nicole Maestas. 2011

Health risk is increasingly viewed as an important form of background risk that affects household portfolio decisions. However, its role might be mediated by the presence of a protective full-coverage national health service that could reduce households' probability of incurring current and future out-of-pocket medical expenditures. We use SHARE data to study the influence of current health status and future health risk on the decision to hold risky assets, across ten European countries with different health systems, each offering a different degree of protection against out-of-pocket medical expenditures. We find robust empirical evidence that perceived health status matters more than objective health status and, consistent with the theory of background risk, health risk affects portfolio choices only in countries with less protective health care systems. Furthermore, port-

folio decisions consistent with background risk models are observed only with respect to middle-aged and highly-educated investors.

http://www.rand.org/pubs/external_publications/EP201100270.html

EP-201100-271

Burdens on Research Imposed by Institutional Review Boards: The State of the Evidence and Its Implications for Regulatory Reform. George Silberman, Katherine L. Kahn. 2011

CONTEXT: Federal regulations mandate independent review and approval by an "institutional review board" (IRB) before studies that involve human research subjects may begin. Although many researchers strongly support the need for IRB review, they also contend that it is burdensome when it imposes costs that do not add to the protections afforded to research participants and that this burden threatens the viability of research. The U.S. Department of Health and Human Services recently announced its intention to reform the regulations governing IRB review. METHODS: We used a search of the PubMed database, supplemented by a bibliographic review, to identify all existing primary data on the costs of IRB review. "Costs" were broadly defined to include both expenditures of time or money and constraints imposed on the scope of the research. Burdensome costs were limited to those that did not contribute to greater protections for the participants. FINDINGS: Evidence from a total of fifty-two studies shows that IRBs operate at different levels of efficiency; that waiting to obtain IRB approval has, in some instances, delayed project initiation; that IRBs presented with identical protocols sometimes asked for different and even competing revisions; and that some decisions made (and positions held) by IRBs are not in accord with federal policy guidance. CONCLUSIONS: While the evidence is sufficient to conclude that there is burden associated with IRB review, it is too limited to allow for valid estimates of its magnitude or to serve as the basis for formulating policies on IRB reform. The single exception is multicenter research, for which we found that review by several local IRBs is likely to be burdensome. No mechanism currently exists at the national level to gather systematic evidence on the intersection between research and IRB review. This gap is of concern in light of the changing nature of research and the increasingly important role that research is envisioned to play in improving the overall quality of health care.

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Registered Nurse Supply Grows Faster Than Projected Amid Surge in New Entrants Ages 23-26. David Auerbach, Peter Buerhaus, Douglas Staiger. 2011

The vast preponderance of the nation's registered nurses are women. In the 1980s and 1990s, a decline in the number of women ages 23–26 who were choosing nursing as a career led to concerns that there would be future nurse shortages unless the trend was reversed. Between 2002 and 2009, however, the number of full-time-equivalent registered nurses ages 23–26 increased by 62 percent. If these young nurses follow the same life-cycle employment patterns as those who preceded them — as they appear to be thus far — then they will be the largest cohort of registered nurses ever observed. Because of this surge in the number of young people entering nursing during the past decade, the nurse workforce is projected to grow faster during the next two decades than previously anticipated. However, it is uncertain whether interest in nursing will continue to grow in the future.

http://www.rand.org/pubs/external_publications/EP201100272.html

EP-201100-273

Assessment of Food Offerings and Marketing Strategies in the Food-Service Venues at California Children's Hospitals. Gery W. Ryan, Robert H. Brook, Deborah Cohen. 2011

OBJECTIVE: Marketing strategies and food offerings in hospital cafeterias can impact dietary choices. Using a survey adapted to assess food environments, the purpose of this study was to as-

sess the food environment available to patients, staff, and visitors at the food-service venues in all 14 California children's hospitals. METHODS: We modified a widely-used tool to create the Nutritional Environment Measures Survey for Cafeterias (NEMS-C) by partnering with a hospital wellness committee. The NEMS-C summarizes the number of healthy items offered, whether calorie labeling is present, if there is signage promoting healthy or unhealthy foods, pricing structure, and the presence of unhealthy combination meals. The range of possible scores is zero (unhealthy) to 37 (healthy). We directly observed the food-service venues at all 14 tertiary care children's hospitals in California and scored them. RESULTS: Inter-rater reliability showed 89% agreement on the assessed items. For the 14 hospitals, the mean score was 19.1 (SD = 4.2; range, 13–30). Analysis revealed that nearly all hospitals offered diet drinks, low-fat milk, and fruit. Fewer than one-third had nutrition information at the point of purchase and 30% had signs promoting healthy eating. Most venues displayed high calorie impulse items such as cookies and ice cream at the registers. Seven percent (7%) of the 384 entrees served were classified as healthy according to NEMS criteria. CONCLUSIONS: Most children's hospitals' food venues received a mid-range score, demonstrating there is considerable room for improvement. Many inexpensive options are underused, such as providing nutritional information, incorporating signage that promotes healthy choices, and not presenting unhealthy impulse items at the register.

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EP-201100-274

Identifying the Aggregate Productivity Effects of Entry and Size Restrictions: An Empirical Analysis of License Reform in India. A.V. Chari. 2011

Distortions in the allocation of resources between heterogeneous producers have the potential to generate large reductions in aggregate productivity, a point that has been stressed by recent studies. There is, however, little direct empirical evidence from actual policy experiments on the magnitude of these effects. This paper proposes a simple methodology that empirically identifies the separate effects of entry and size restrictions on aggregate productivity, and uses it to analyse the impact of a policy reform in India.

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EP-201100-275

Off-label Use of Atypical Antipsychotics: An Update. Margaret Maglione, Jianhui Hu, Zhen Wang, Roberta M. Shanman, Paul G. Shekelle, Elizabeth Roth, Lara Hilton, Marika Suttorp, Aneesa Motala, Tanja Perry. 2011

OBJECTIVES: Antipsychotic medications are approved by the U.S. Food and Drug Administration (FDA) for treatment of schizophrenia, bipolar disorder, and for some drugs, depression. We performed a systematic review on the efficacy and safety of atypical antipsychotic drugs for use in conditions lacking FDA approval. DATA SOURCES: We searched PubMed, Embase, PsycINFO, CINAHL (Cumulative Index to Nursing and Allied Health Literature), Cochrane DARE (Database of Abstracts of Reviews of Effects), and Cochrane CENTRAL (Cochrane Central Register of Controlled Trials) from inception to May 2011. We included only English-language studies. REVIEW METHODS: Controlled trials comparing an atypical antipsychotic (risperidone, olanzapine, quetiapine, aripiprazole, ziprasidone, asenapine, iloperidone, paliperidone) to either placebo, another atypical antipsychotic drug, or other pharmacotherapy, for the off-label conditions of anxiety disorder, attention deficit hyperactivity disorder, dementia and severe geriatric agitation, major depressive disorder, eating disorders, insomnia, obsessive compulsive disorder (OCD), post traumatic stress disorder (PTSD), personality disorders, substance abuse, and Tourette's syndrome were included. Observational studies with sample sizes greater than 1,000 were included to assess rare adverse events. Two investigators conducted independent article review, data abstraction, and study quality assessment. RESULTS: One hundred seventy trials contributed data to the efficacy

review. Among the placebocontrolled trials of elderly patients with dementia reporting a total/global outcome score that includes symptoms such as psychosis, mood alterations, and aggression, small but statistically significant effect sizes ranging from 0.12 and 0.20 were observed for aripiprazole, olanzapine, and risperidone. For generalized anxiety disorder, pooled analysis of three large trials showed that quetiapine was associated with a 26 percent greater likelihood of "responding," defined as at least 50 percent improvement on the Hamilton Anxiety Scale, compared with placebo. For obsessive-compulsive disorder, risperidone was associated with a 3.9-fold greater likelihood of "responding," defined as a 25 to 35 percent improvement on the Yale Brown Obsessive Compulsive Scale (YBOCS) compared with placebo. We identified 6 trials on eating disorders, 12 on personality disorder, an existing metaanalysis and 10 trials of risperidone or olanzapine for PTSD, 36 trials for depression of which 7 assessed drugs without an FDA-approved indication, and 33 trials of aripiprazole, olanzapine, quetiapine, or risperidone for treating substance abuse disorders. We identified one small trial (N=13) of atypical antipsychotics for insomnia which was inconclusive. For eating disorder patients specifically, evidence shows that atypicals are do not cause significant weight gain. The level of evidence is mixed regarding personality disorders and moderate for an association of risperidone with improving post-traumatic stress disorder. Evidence does not support efficacy of atypical antipsychotics for substance abuse. In elderly patients, adverse events included an increased risk of death (number needed to harm [NNH]=87), stroke (for risperidone, NNH=53), extrapyramidal symptoms (for olanzapine (NNH=10) and risperidone (NNH=20), and urinary symptoms (NNH= from 16 to 36). In nonelderly adults, adverse events included weight gain (particularly with olanzapine), fatigue, vi sedation, akithisia (for aripiprazole) and extrapyramidal symptoms. Direct comparisons of different atypical antipsychotics for off-label conditions are rare. CONCLUSIONS: Benefits and harms vary among atypical antipsychotics for off-label usage. For symptoms associated with dementia in elderly patients, small but statistically significant benefits were observed for aripiprazole, olanzapine, and risperidone. Quetiapine was associated with benefits in the treatment of generalized anxiety disorder, and risperidone was associated with benefits in the treatment of OCD; however, adverse events were common.

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The Influence of Mental Disorders on School Dropout in Mexico. Joshua Breslau. 2011

OBJECTIVE: To study the impact of mental disorders on failure in educational attainment in Mexico. METHODS: Diagnoses and age of onset for each of 16 DSM-IV disorders were assessed through retrospective self-reports with the Composite International Diagnostic Instrument (CIDI) during fieldwork in 2001–2002. Survival analysis was used to examine associations between early onset DSM-IV/CIDI disorders and subsequent school dropout or failure to reach educational milestones. RESULTS: More than one of two Mexicans did not complete secondary education. More than one-third of those who finished secondary education did not enter college, and one of four students who entered college did not graduate. Impulse control disorders and substance use disorders were associated with higher risk for school dropout, secondary school dropout and to a lesser degree failure to enter college. Anxiety disorders were associated with lower risk for school dropout, especially secondary school dropout and, to a lesser degree, primary school dropout. CONCLUSIONS: The heterogeneity of results found in Mexico may be due to the effect of mental disorders being diminished or masked by the much greater effect of economic hardship and low cultural expectations for educational achievement. Future research should inquire deeper into possible reasons for the better performance of students with anxiety disorders in developing countries.

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EP-201100-277

The Effects of Arkansas Master Settlement Spending on Disparities in Smoking. Hao Yu, Deborah M. Scharf, John Engberg, Dana Schultz. 2011

OBJECTIVES: We assessed the effect of Master Settlement Agreement (MSA) spending on smoking disparities in Arkansas, which distinguished itself from other states by investing all of its MSA funds in health-related programs. METHODS: In 1996–2009 data from the Behavioral Risk Factor Surveillance System, we specified multivariate logistic models to examine gender and racial/ethnic disparities in smoking rates within Arkansas (a pre–post analysis) and between Arkansas and its 6 neighboring states. RESULTS: Before the MSA programs started in 2001, male Arkansans smoked more than did female Arkansans ($P < .05$). After the programs, smoking declined significantly among men (but not women), eliminating the gender disparity by 2009. Smoking among men in Arkansas also declined more than it did in neighboring states ($P < .05$). Hispanics showed a greater decline in smoking than did non-Hispanic Whites in Arkansas (but not in neighboring states). In 2001, Hispanic Arkansans smoked more than did non-Hispanic Whites ($P < .05$); by 2009, Hispanic Arkansans smoked significantly less than did non-Hispanic Whites ($P < .05$). CONCLUSIONS: MSA-funded programs were more effective in some segments of the Arkansas population than in others. Policymakers should consider targeting future MSA tobacco control programs to populations most resistant to change.

http://www.rand.org/pubs/external_publications/EP201100277.html

EP-201100-278

Faith-based Organizations and the Framing of HIV/AIDS. David E. Kanouse. 2011

This article examines the different ways in which faith-based organizations (FBO) frame discussions about HIV. The authors identify three broad types of frames: HIV as punishment for sin, HIV as a call to compassions, and HIV as an opportunity for transformation. The frame affects the kinds of health services that FBOs provide as well as the messages they convey about HIV to their congregations.

http://www.rand.org/pubs/external_publications/EP201100278.html

EP-201100-279

Empirical Evidence of Associations Between Trial Quality and Effect Size. Susanne Hempel, Marika Suttorp, Zhen Wang, Margaret Maglione, Sally C. Morton, Breanne Johnsen, Paul G. Shekelle. 2011

OBJECTIVES: To examine the empirical evidence for associations between a set of proposed quality criteria and estimates of effect sizes in randomized controlled trials across a variety of clinical fields and to explore variables potentially influencing the association. METHODS: We applied quality criteria to three large datasets of studies included in a variety of meta-analyses covering a wide range of topics and clinical interventions consisting of 216, 165, and 100 trials. We assessed the relationship between quality and effect sizes for 11 individual criteria (randomization sequence, allocation concealment, similar baseline, assessor blinding, care provider blinding, patient blinding, acceptable dropout rate, intention-to-treat analysis, similar cointerventions, acceptable compliance, similar outcome assessment timing) as well as summary scores. Inter-item relationships were explored using psychometric techniques. We investigated moderators and confounders affecting the association between quality and effect sizes across datasets. RESULTS: Quality levels varied across datasets. Many studies did not report sufficient information to judge methodological quality. Some individual quality features were substantially intercorrelated, but a total score did not show high overall internal consistency (0.55 to 0.61). A factor analysis-based model suggested three distinct quality domains. Allocation concealment was consistently associated with slightly smaller treatment effect estimates across all three datasets; other individual criteria results varied. In dataset 1, the 11 individual criteria were consistently associated with lower estimated effect sizes.

Dataset 2 showed some unexpected results; for several dimensions, studies meeting quality criteria reported larger effect sizes. Dataset 3 showed some variation across criteria. There was no statistically significant linear association of a summary scale or factor scores with effect sizes. Applying a cutoff of 5 or 6 criteria met (out of 11) differentiated high and low quality studies best. The effect size differences for a cutoff at 5 was -0.20 (95% confidence interval [CI]: -0.34, -0.06) in dataset 1 and the respective ratio of odds ratios in dataset #3 was 0.79 (95% CI: 0.63, 0.95). Associations indicated that low-quality trials tended to overestimate treatment effects. This observation could not be replicated with dataset 2, suggesting the influence of confounders and moderators. The size of the treatment effect, the condition being treated, the type of outcome, and the variance in effect sizes did not sufficiently explain the differential associations between quality and effect sizes but warrant further exploration in explaining variation between datasets. CONCLUSIONS: Effect sizes of individual studies depend on many factors. The conditions where quality features lead to biased effect sizes warrant further exploration.

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EP-201100-28

Discrimination as a Key Mediator of the Relationship Between Posttraumatic Stress and HIV Treatment Adherence Among African American Men. Glenn Wagner, Laura M. Bogart, Frank H. Galvan, David J. Klein. 2011

Posttraumatic stress disorder (PTSD) is relatively common among people living with HIV/AIDS (PLHA) and may be associated with antiretroviral therapy (ART) adherence. We examined the relationship between PTSD symptom severity and adherence among 214 African American males. Because PLHA may experience discrimination, potentially in the form of traumatic stress (e.g., hate crimes), we also examined whether perceived discrimination (related to race, HIV status, sexual orientation) is an explanatory variable in the relationship between PTSD and adherence. Adherence, monitored electronically over 6 months, was negatively correlated with PTSD total and re-experiencing symptom severity; all 3 discrimination types were positively correlated with PTSD symptoms and negatively correlated with adherence. Each discrimination type separately mediated the relationship between PTSD and adherence; when both PTSD and discrimination were included in the model, discrimination was the sole predictor of adherence. Findings highlight the critical role that discrimination plays in adherence among African American men experiencing posttraumatic stress.

http://www.rand.org/pubs/external_publications/EP20110028.html

EP-201100-280

The In Vivo Adherence Intervention for at Risk Adolescents with Asthma: Report of a Randomized Pilot Trial. Michael Seid, James W. Varni. 2011

OBJECTIVE: Low-income and minority adolescents are at high risk for poor asthma outcomes, due in part to adherence. We tested acceptability, feasibility, and effect sizes of an adherence intervention for low socioeconomic status (SES) minority youth with moderate- and severe-persistent asthma. DESIGN AND METHODS: Single-site randomized pilot trial: intervention (n = 12; asthma education, motivational interviewing, problem-solving skills training, 1 month cell-phone with tailored text messaging) versus control (n = 14; asthma education; cell-phone without tailored messaging). Calculated effect-sizes of relative change from baseline (1 and 3 months). RESULTS: Intervention was judged acceptable and feasible by participants. Participants (12–18 years, mean = 15.1, SD = 1.67) were 76.9% African-American, 80.7% public/no insurance. At 1 and 3 months, asthma symptoms (Cohen's d's = 0.40, 0.96) and HRQOL (PedsQL TM ; Cohen's d's = 0.23, 1.25) had clinically meaningful medium to large effect sizes. CONCLUSIONS: This intervention appears promising for at-risk youth with moderate- and severe-persistent asthma.

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EP-201100-281

The Effectiveness of Community-Based Delivery of an Evidence-Based Treatment for Adolescent Substance Use. Sarah B. Hunter, Rajeev Ramchand, Marika Suttorp, Daniel F. McCaffrey, Andrew R. Morral. 2011

This study evaluates the effectiveness of motivational enhancement therapy/cognitive behavioral therapy–5 (MET/CBT-5) when delivered in community practice settings relative to standard community-based adolescent treatment. A quasi-experimental strategy was used to adjust for pretreatment differences between the MET/CBT-5 sample (n = 2,293) and those who received standard care (n = 458). Results suggest that youth who received MET/CBT-5 fared better than comparable youth in the control group on five of six 12-month outcomes. A low follow-up rate (54%) in the MET/CBT-5 sample raised concerns about nonresponse bias in the treatment effect estimates. Sensitivity analyses suggest that although modest differences in outcomes between the MET/CBT-5 nonrespondents and respondents would yield no significant differences between the two groups on two of the six outcomes, very large differences in outcomes between responders and nonresponders would be required for youth receiving MET/CBT-5 to have fared better had they received standard outpatient care.

http://www.rand.org/pubs/external_publications/EP201100281.html

EP-201100-282

Prescription Medication Abuse and Illegitimate Internet-Based Pharmacies. Anupam B. Jena, Dana P. Goldman. 2011

Abuse of controlled prescription medications in the United States exceeds that of all illicit drugs combined except marijuana and has grown considerably in the past decade. Although available through traditional channels, controlled prescription medications can also be purchased on the Internet without a prescription. This issue has gained the attention of federal regulators, law enforcement, and the media, but physician awareness of the problem is scarce. This article describes the nature of the problem and its magnitude, discusses the challenges to federal and private efforts to combat illegitimate online pharmacies, and outlines strategies for physicians to recognize and minimize the unwarranted effects of the availability of these medications on the Internet.

http://www.rand.org/pubs/external_publications/EP201100282.html

EP-201100-283

Commercial Products That Convey Personal Health Information in Emergencies. Arthur L. Kellermann. 2011

OBJECTIVE: Describe commercially available products and services designed to convey personal health information in emergencies. METHODS: The search engine Google®, supplemented by print ads, was used to identify companies and organizations that offer relevant products and services to the general market. Disease-specific, health system, and health plan-specific offerings were excluded. Vendor web sites were the primary sources of information, supplemented by telephone and e-mail queries to sales representatives. Perfect inter-rater agreement was achieved. RESULTS: Thirty-nine unique vendors were identified. Eight sell engraved jewelry. Three offer an embossed card or pamphlet. Twelve supply USB drives with various features. Eleven support password-protected web sites. Five maintain national call centers. Available media differed markedly with respect to capacity and accessibility. Quoted prices ranged from a one-time expenditure of $3.50 to an annual fee of $200. Associated features and annual fees varied widely. CONCLUSION: A wide range of products and services exist to help patients convey personal health information. Health care providers should be familiar with their features, so they can access the information in a disaster or emergency.

http://www.rand.org/pubs/external_publications/EP201100283.html

EP-201100-284

The Protective Effect of Marriage for Survival: A Review and Update. Michael S. Rendall, Margaret M. Weden. 2011

The theory that marriage has protective effects for survival has itself lived for more than 100 years since Durkheim's groundbreaking study of suicide (Durkheim 1951 [1897]). Investigations of differences in this protective effect by gender, by age, and in contrast to different unmarried statuses, however, have yielded inconsistent conclusions. These investigations typically either use data in which marital status and other covariates are observed in cross-sectional surveys up to 10 years before mortality exposure, or use data from panel surveys with much smaller sample sizes. Their conclusions are usually not based on formal statistical tests of contrasts between men and women or between never-married, divorced/separated, and widowed statuses. Using large-scale pooled panel survey data linked to death registrations and earnings histories for U.S. men and women aged 25 and older, and with appropriate contrast tests, we find a consistent survival advantage for married over unmarried men and women, and an additional survival "premium" for married men. We find little evidence of mortality differences between never-married, divorced/separated, and widowed statuses.

http://www.rand.org/pubs/external_publications/EP201100284.html

EP-201100-285

Intergenerational Relationships Between the Smoking Patterns of a Population-Representative Sample of US Mothers and the Smoking Trajectories of Their Children. Margaret M. Weden. 2011

OBJECTIVES: We assessed intergenerational transmission of smoking in mother-child dyads. METHODS: We identified classes of youth smoking trajectories using mixture latent trajectory analyses with data from the Children and Young Adults of the National Longitudinal Survey of Youth (n=6349). We regressed class membership on prenatal and postnatal exposure to maternal smoking, including social and behavioral variables, to control for selection. RESULTS: Youth smoking trajectories entailed early-onset persistent smoking, early-onset experimental discontinued smoking, late-onset persistent smoking, and nonsmoking. The likelihood of early onset versus late onset and early onset versus nonsmoking were significantly higher among youths exposed prenatally and postnatally versus either postnatally alone or unexposed. Controlling for selection, the increased likelihood of early onset versus nonsmoking remained significant for each exposure group versus unexposed, as did early onset versus late onset and late onset versus nonsmoking for youths exposed prenatally and postnatally versus unexposed. Experimental smoking was notable among youths whose mothers smoked but quit before the child's birth. CONCLUSIONS: Both physiological and social role-modeling mechanisms of intergenerational transmission are evident. Prioritization of tobacco control for pregnant women, mothers, and youths remains a critical, interrelated objective.

http://www.rand.org/pubs/external_publications/EP201100285.html

EP-201100-286

The Multidimensional Relationship Between Early Adult Body Weight and Women's Childbearing Experiences. Margaret M. Weden. 2011

This study has three primary goals that make an important contribution to the literature on body weight and childbearing experiences among United States' women. It sheds light on the physiological and social nature of this relationship by examining whether the consequences of early adult weight for lifetime childbearing are shaped by historical social context, women's social characteristics, and their ability to marry. We analyze data from two female cohorts who participated in the National Longitudinal Study of Youth (NLSY79). Cohort 1 entered early adulthood before the U.S. obesity prevalence increased. Cohort 2 entered early adulthood after the obesity prevalence increased. We find that early adult weight is negatively related to the childbearing trajectories and marital status of Cohort 1 but not Cohort 2. Failing to account for race/ethnicity and women's educa-

tional background as confounders masks some of these associations, which are evident for both White and Black women. Our results suggest that the health consequences of body weight do not fully drive its impact on childbearing. Rather, the lifetime fertility consequences of early adult weight are malleable, involve social processes, and are dependent on social context.

http://www.rand.org/pubs/external_publications/EP201100286.html

EP-201100-287

An Exploration of the Effect of Community Engagement in Research on Perceived Outcomes of Partnered Mental Health Services Projects. Dmitry Khodyakov, Susan Stockdale, Andrea Jones. 2011

Mental health research projects address sensitive issues for vulnerable populations and are implemented in complex environments. Community-based participatory research approaches are recommended for health research on vulnerable populations, but little is known about how variation in participation affects outcomes of partnered research projects. We developed a conceptual model demonstrating the impact of community engagement in research on outcomes of partnered projects. We collected data on key constructs from community and academic leaders of 21 sampled partnered research projects in two cycles of a research center funded by the National Institute of Mental Health. We conducted empirical analyses to test the model. Our findings suggest that community engagement in research is positively associated with perceived professional development as well as political and community impact.

http://www.rand.org/pubs/external_publications/EP201100287.html

EP-201100-288

Incremental Benefits and Cost of Coordinated Anxiety Learning and Management for Anxiety Treatment in Primary Care. Cathy D. Sherbourne, Michelle G. Craske. 2011

The Problem

http://www.rand.org/pubs/external_publications/EP201100288.html

EP-201100-289

Bringing Perspective to Illicit Markets: Estimating the Size of the U.S. Marijuana Market. Beau Kilmer, Jonathan P. Caulkins, Peter H. Reuter. 2011

Having a sense of the scale of an illicit drug market is important for projecting consequences of alternative policy regimes. In this article, we review two general approaches to drug market estimation--supply-side and demand-side--before turning to a more specific analysis of studies that measure the size of the U.S. marijuana market. The paper then generates a demand-side estimate of U.S. marijuana consumption for 2009 and shows how variation in assumptions such as grams per joint and extent of underreporting can cause substantial variation in estimates of market size. While both demand-side and supply-side estimates have weaknesses, the paper argues that the former are more promising for marijuana and offers suggestions on how to reduce the uncertainties surrounding them.

http://www.rand.org/pubs/external_publications/EP201100289.html

EP-201100-29

HIV Risks and Seroprevalence Among Mexican American Injection Drug Users in California. Alexis N. Martinez, Ricky N. Bluthenthal, Neil M. Flynn, Rachel Anderson, Alex H. Kral. 2011

Latinos in the United States are an ethnically diverse group disproportionately affected by HIV/AIDS. We describe HIV seroprevalence, HIV risk behaviors and utilization of health services among Mexican American injection drug users (IDUs) in California (n = 286) and compare them to White (n = 830) and African American (n = 314) IDUs. Study participants were recruited from syringe exchange programs (n = 24) in California. HIV seroprevalence among Mexican Americans (0.5%) was dramatically lower than Whites (5%) and African Americans (8%). Mexican Americans reported fewer sex-related risks than Whites and African Americans though injection-related risks

remained high. Compared to Whites, Mexican Americans were more likely to participate in drug treatment during a 6 month period (AOR 1.5, 95% CI 1.1, 2.0) but less likely to receive any health care (AOR 0.6, 95% CI 0.5, 0.8). Exploring cultural and structural factors among Mexican American IDUs may offer new insights into how to maintain low rates of HIV seroprevalence and reduce barriers to health care utilization.

http://www.rand.org/pubs/external_publications/EP20110029.html

EP-201100-290

Developing a Natural Language Processing Application for Measuring the Quality of Colonoscopy Procedures. Ateev Mehrotra. 2011

OBJECTIVE: The quality of colonoscopy procedures for colorectal cancer screening is often inadequate and varies widely among physicians. Routine measurement of quality is limited by the costs of manual review of free-text patient charts. Our goal was to develop a natural language processing (NLP) application to measure colonoscopy quality. MATERIALS AND METHODS: Using a set of quality measures published by physician specialty societies, we implemented an NLP engine that extracts 21 variables for 19 quality measures from free-text colonoscopy and pathology reports. We evaluated the performance of the NLP engine on a test set of 453 colonoscopy reports and 226 pathology reports, considering accuracy in extracting the values of the target variables from text, and the reliability of the outcomes of the quality measures as computed from the NLP-extracted information. RESULTS: The average accuracy of the NLP engine over all variables was 0.89 (range: 0.62e1.0) and the average F measure over all variables was 0.74 (range: 0.49e0.89). The average agreement score, measured as Cohen's k, between the manually established and NLP-derived outcomes of the quality measures was 0.62 (range: 0.09e0.86). DISCUSSION: For nine of the 19 colonoscopy quality measures, the agreement score was 0.70 or above, which we consider a sufficient score for the NLP-derived outcomes of these measures to be practically useful for quality measurement. CONCLUSION: The use of NLP for information extraction from free-text colonoscopy and pathology reports creates opportunities for large scale, routine quality measurement, which can support quality improvement in colonoscopy care.

http://www.rand.org/pubs/external_publications/EP201100290.html

EP-201100-291

Physician Prescribing Behavior and Its Impact on Patient-Level Outcomes. Geoffrey F. Joyce, Dana P. Goldman, Neeraj Sood. 2011

OBJECTIVES: Concerns over rising drug costs, pharmaceutical advertising, and potential conflicts of interest have focused attention on physician prescribing behavior. We examine how broadly physicians prescribe within the 10 most prevalent therapeutic classes, the factors affecting their choices, and the impact of their prescribing behavior on patient-level outcomes. STUDY DESIGN: Retrospective study from 2005 to 2007 examining prescribers with at least 5 initial prescriptions within a class from 2005 to 2007. Medical and pharmacy claims are linked to prescriber information from 146 different health plans, reflecting 1975 to 8923 unique providers per drug class. METHODS: Primary outcomes are the number of distinct drugs in a class initially prescribed by a physician over 1- and 3-year periods, medication possession ratio, and out-of-pocket costs. RESULTS: In 8 of 10 therapeutic classes, the median physician prescribes at least 3 different drugs and fewer than 1 in 6 physicians prescribe only brand drugs. Physicians prescribing only 1 or 2 drugs in a class are more likely to prescribe the most advertised drug. Physicians who prescribe fewer drugs are less likely to see patients with other comorbid conditions and varied formulary designs. Prescribing fewer drugs is associated with lower rates of medication adherence and higher out-of pocket costs for drugs, but the effects are small and inconsistent across classes. CONCLUSIONS: Physicians prescribe more broadly than commonly perceived. Though narrow prescribers are more likely to prescribe highly advertised

drugs, few physicians prescribe these drugs exclusively. Narrow prescribing has modest effects on medication adherence and out-of-pocket costs in some classes.

http://www.rand.org/pubs/external_publications/EP201100291.html

EP-201100-292

The Positive Mental Health Instrument: Development and Validation of a Culturally Relevant Scale in a Multi-Ethnic Asian Population. Yee-Wei Lim, Cathy D. Sherbourne. 2011

BACKGROUND: Instruments to measure mental health and well-being are largely developed and often used within Western populations and this compromises their validity in other cultures. A previous qualitative study in Singapore demonstrated the relevance of spiritual and religious practices to mental health, a dimension currently not included in exiting multi-dimensional measures. The objective of this study was to develop a self-administered measure that covers all key and culturally appropriate domains of mental health, which can be applied to compare levels of mental health across different age, gender and ethnic groups. We present the item reduction and validation of the Positive Mental Health (PMH) instrument in a community-based adult sample in Singapore. METHODS: Surveys were conducted among adult (21-65 years) residents belonging to Chinese, Malay and Indian ethnicities. Exploratory and confirmatory factor analysis (EFA, CFA) were conducted and items were reduced using item response theory tests (IRT). The final version of the PMH instrument was tested for internal consistency and criterion validity. Items were tested for differential item functioning (DIF) to check if items functioned in the same way across all subgroups. RESULTS: EFA and CFA identified six first-order factor structure General coping, Personal growth and autonomy, Spirituality, Interpersonal skills, Emotional support, and Global affect) under one higherorder dimension of Positive Mental Health (RMSEA = 0.05, CFI = 0.96, TLI = 0.96). A 47-item self-administered multidimensional instrument with a six-point Likert response scale was constructed. The slope estimates and strength of the relation to the theta for all items in each six PMH subscales were high (range:1.39 to 5.69), suggesting good discrimination properties. The threshold estimates for the instrument ranged from -3.45 to 1.61 indicating that the instrument covers entire spectrums for the six dimensions. The instrument demonstrated high internal consistency and had significant and expected correlations with other well-being measures. Results confirmed absence of DIF. CONCLUSIONS: The PMH instrument is a reliable and valid instrument that can be used to measure and compare levels of mental health across different age, gender and ethnic groups in Singapore.

http://www.rand.org/pubs/external_publications/EP201100292.html

EP-201100-294

Going to Scale: Experiences Implementing a School-Based Trauma Intervention. Erum Nadeem, Lisa H. Jaycox, Sheryl H. Kataoka, Audra Langley, Bradley D. Stein. 2011

This article describes implementation experiences "scaling up" the Cognitive Behavioral Intervention for Trauma in Schools (CBITS)—an intervention developed using a community partnered research framework. Case studies from two sites that have successfully implemented CBITS are used to examine macro- and school-level implementation processes and strategies used to address implementation issues and create a successful implementation support system. Key elements of the implementation support system include pre-implementation work, ongoing clinical and logistical implementation supports, promotion of fidelity to the intervention's core components, tailored implementation to fit the service context, and a value on monitoring child outcomes.

http://www.rand.org/pubs/external_publications/EP201100294.html

EP-201100-295

Personal Retirement Accounts and Saving. Emma Aguila. 2011

Aging populations are leading countries world-

wide to social security reforms. Many countries are moving from pay-as-you-go to personal retirement account (PRA) systems because of their financial sustainability and positive impact on private savings. PRA systems boost private savings at a macro level by converting a government liability into financial wealth managed by private fund managers. However, at a micro level, changes in retirement wealth affect individuals' saving and consumption patterns through their working lives. Retirement wealth increased for lower-income workers after Mexico introduced PRAs, crowding out saving, increasing consumption, and offsetting some of the PRA effect on private savings.

http://www.rand.org/pubs/external_publications/EP201100295.html

EP-201100-296

Changes in Consumption at Retirement: Evidence from Panel Data. Emma Aguila, Orazio P. Attanasio, Costas Meghir. 2011

Previous empirical literature has found a sharp decline in consumption during the first years of retirement, implying that individuals do not save enough for their retirement. This phenomenon is called the retirement consumption puzzle. We find no evidence of the retirement consumption puzzle using panel data from 1980 to 2000. Consumption is defined as nondurable expenditure, a more comprehensive measure than only food used in many of the previous studies. We find that food expenditure declines at retirement, which is consistent with previous studies.

http://www.rand.org/pubs/external_publications/EP201100296.html

EP-201100-297

Assessing Policy and Practice Impacts of Social Science Research: The Application of the Payback Framework to Assess the Future of Work Programme. Lisa Klautzer, Stephen Hanney, Edward Nason, Jennifer Rubin, Jonathan Grant, Steven Wooding. 2011

The UK Economic and Social Research Council funded exploratory evaluation studies to assess the wider impacts on society of various examples of its research. The Payback Framework is a conceptual approach previously used to evaluate impacts from health research. We tested its applicability to social sciences by using an adapted version to assess the impacts of the Future of Work (FoW) programme. We undertook key informant interviews, a programme-wide survey, user interviews and four case studies of selected projects. The FoW programme had significant impacts on knowledge, research and career development. While some principal investigators (PIs) could identify specific impacts of their research, PIs generally thought they had influenced policy in an incremental way and informed the policy debate. The study suggests progress can be made in applying an adapted version of the framework to the social sciences. However, some impacts may be inaccessible to evaluation, and some evaluations may occur too early or too late to capture the impact of research on a constantly changing policy environment.

http://www.rand.org/pubs/external_publications/EP201100297.html

EP-201100-298

What Can We Learn from the Dutch Cannabis Coffeeshop System?. Robert J. MacCoun. 2011

AIMS: To examine the empirical consequences of officially tolerated retail sales of cannabis in the Netherlands, and possible implications for the legalization debate. METHODS: Available Dutch data on the prevalence and patterns of use, treatment, sanctioning, prices and purity for cannabis dating back to the 1970s are compared to similar indicators in Europe and the United States. RESULTS: The available evidence suggests that the prevalence of cannabis use among Dutch citizens rose and fell as the number of coffeeshops increased and later declined, but only modestly. The coffeeshops do not appear to encourage escalation into heavier use or lengthier using careers, although treatment rates for cannabis are higher than elsewhere in Europe. Scatterplot analyses suggest that Dutch patterns of use are very typical for Europe, and that the 'separation of markets' may indeed have somewhat weakened the link

between cannabis use and the use of cocaine or amphetamines. CONCLUSIONS: Cannabis consumption in the Netherlands is lower than would be expected in an unrestricted market, perhaps because cannabis prices have remained high due to production-level prohibitions. The Dutch system serves as a nuanced alternative to both full prohibition and full legalization.

http://www.rand.org/pubs/external_publications/EP201100298.html

EP-201100-299

Behavioral Health and Social Normative Influence: Correlates of Concurrent Sexual Partnering Among Heterosexually-Active Homeless Men. Suzanne L. Wenzel, Daniela Golinelli, Joan S. Tucker, David P. Kennedy, Harold P. Green. 2011

Sexual concurrency poses significant HIV/STI transmission risk. The correlates of concurrency have not been examined among homeless men. A representative sample of 305 heterosexually active homeless men utilizing meal programs in the Skid Row area of Los Angeles reported on their mental health, substance use, and social network characteristics. Nearly 40% of men reported concurrency with one of their four most recent sex partners. Results indicated that HIV seropositivity (OR = 4.39, CI: 1.10, 17.46; P = 0.04), PTSD (OR = 2.29, CI: 1.05, 5.01; P = 0.04), hard drug use (OR = 2.45, CI: 1.07, 5.58; P = 0.03), and the perception that network alters engage in risky sex (OR = 3.72, CI: 1.49, 9.30; P = 0.01) were associated with increased odds of concurrency. Programs aimed at reducing HIV/STI transmission in this vulnerable population must take into account the roles that behavioral health and social networks may play in sexual concurrency.

http://www.rand.org/pubs/external_publications/EP201100299.html

EP-201100-30

Cost Implications of Improving Blood Pressure Management Among U.S. Adults. Teryl K. Nuckols, Julia E. Aledort, John L. Adams, Julie Lai, Myong-Hyun Go, Joan Keesey, Elizabeth A. McGlynn. 2011

OBJECTIVE: To examine the cost-effectiveness of improving blood pressure management from the payer perspective. DATA SOURCE/STUDY SETTING: Medical record data for 4,500 U.S. adults with hypertension from the Community Quality Index (CQI) study (1996–2002), pharmaceutical claims from four Massachusetts health plans (2004–2006), Medicare fee schedule (2009), and published literature. Study Design. A probability tree depicted blood pressure management over 2 years. DATA COLLECTION/EXTRACTION METHODS: We determined how frequently CQI study subjects received recommended care processes and attained accepted treatment goals, estimated utilization of visits and medications associated with recommended care, assigned costs based on utilization, and then modeled how hospitalization rates, costs, and goal attainment would change if all recommended care was provided. PRINCIPAL FINDINGS: Relative to current care, improved care would cost payers U.S.$170 more per hypertensive person annually (2009 dollars). The incremental cost per person newly attaining treatment goals over 2 years would be U.S.$1,696 overall, U.S.$801 for moderate hypertension, and U.S.$850 for severe hypertension. Among people with severe hypertension, blood pressure would decline substantially but seldom reach goal; the incremental cost per person attaining a relaxed goal (≤stage 1) would be U.S.$185. CONCLUSIONS: Under the Health Care Effectiveness Data and Information Set program, which monitors the attainment of blood pressure treatment goals, payers will find it slightly more cost-effective to improve care for moderate than severe hypertension. Having a secondary, relaxed goal would substantially increase payers' incentive to improve care for severe hypertension.

http://www.rand.org/pubs/external_publications/EP20110030.html

EP-201100-300

Impact of Prolonged Exposure on PTSD Symptoms and Associated Psychopathology in People Living with HIV: A Randomized Test of Concept. Jessica M. Boarts, Glenn Wagner, Douglas L. Delahanty. 2011

People living with HIV (PLWH) report elevated levels of posttraumatic stress disorder symptoms (PTSS) and associated comorbidities. The present study tested the efficacy of prolonged exposure (PE) at reducing PTSS, depression, negative posttraumatic cognitions, and substance use in PLWH. Participants were randomly assigned to receive PE (n = 40) or to a weekly monitoring control group (n = 25). Assessments occurred at baseline, post-intervention and 3-months post-treatment. Following the 3-month assessment, controls were offered the intervention. All PE recipients (whether originally from the PE or control group) completed a 6-month assessment. Intent-to-treat mixed model repeated measures ANOVAs were conducted through 3-months post-treatment; within group analyses were conducted through 6-months. PE recipients reported fewer PTSS and negative posttraumatic cognitions and were more likely to achieve good end-state functioning; gains were maintained at 6-months. No between-group differences emerged for substance use. Overall, results support the efficacy of PE in PLWH.

http://www.rand.org/pubs/external_publications/EP201100300.html

EP-201100-31

Effect of Usual Source of Care on Depression Among Medicare Beneficiaries: An Application of a Simultaneous-Equations Model. Andrew W. Dick, Kevin Fiscella, Bruce Friedman. 2011

OBJECTIVE: To investigate whether having a usual source of care (USOC) resulted in lower depression prevalence among the elderly. DATA SOURCES: The 2001-2003 Medicare Current Beneficiaries Survey and 2002 Area Resource File. STUDY DESIGN: Twenty thousand four hundred and fifty-five community-dwelling person-years were identified for respondents aged 65+, covered by both Medicare Parts A and B in Medicare fee-for-service for a full year. USOC was defined by the question "Is there a particular medical person or a clinic you usually go to when you are sick or for advice about your health?" Ambulatory care use (ACU) was defined by having at least one physician office visit and/or hospital outpatient visit using Medicare claims. Depression was identified by a two-item screen (sadness and/or anhedonia). All measures were for the past 12 months. A simultaneous-equations (trivariate probit) model was estimated, adjusted for sampling weights and study design effects. PRINCIPAL FINDINGS: Based on the simultaneous-equations model, USOC is associated with 3.8 percent lower probability of having depression symptoms (p=.03). Also, it had a positive effect on having any ACU (p<.001). Having any ACU had no statistically significant effect on depression (p=.96). CONCLUSIONS: USOC was associated with lower depression prevalence and higher realized access (ACU) among community-dwelling Medicare beneficiaries.

http://www.rand.org/pubs/external_publications/EP20110031.html

EP-201100-32

Objective Burden, Resources, and Other Stressors Among Informal Cancer Caregivers: A Hidden Quality Issue?. Katherine L. Kahn. 2011

A great deal of clinical cancer care is delivered in the home by informal caregivers (e.g. family, friends), who are often untrained. Caregivers' context varies widely, with many providing care despite low levels of resources and high levels of additional demands. BACKGROUND: Changes in health care have shifted much cancer care to the home, with limited data to inform this transition. We studied the characteristics, care tasks, and needs of informal caregivers of cancer patients. METHODS: Caregivers of seven geographically and institutionally defined cohorts of newly diagnosed colorectal and lung cancer patients completed self-administered questionnaires (n = 677). We combined this information with patient survey and chart abstraction data and focused on caregivers who reported providing, unpaid, at least 50% of the patient's informal cancer care. RESULTS: Over half of caregivers (55%) cared for a patient with metastatic disease, severe comorbidity, or undergoing current treatment. Besides assisting with activities of daily living, caregivers provided cancer-specific care such as watching for treatment

side effects (68%), helping manage pain, nausea or fatigue (47%), administering medicine (34%), deciding whether to call a doctor (30%), deciding whether medicine was needed (29%), and changing bandages (19%). However, half of caregivers reported not getting training perceived as necessary. In addition, 49% of caregivers worked for pay, 21% reported poor or fair health, and 21% provided unpaid care for other individuals. One in four reported low confidence in the quality of the care they provided. CONCLUSIONS: Much assistance for cancer patients is delivered in the home by informal caregivers, often without desired training, with a significant minority having limited resources and high additional demands. Future research should explore the potentially high yield of addressing caregiver needs in improving quality of cancer care and both survivors' and caregivers' outcomes.

http://www.rand.org/pubs/external_publications/EP20110032.html

EP-201100-33

Congregation-based Programs to Address HIV/AIDS: Elements of Successful Implementation. Malcolm V. Williams, Kartika Palar. 2011

Religious organizations may be uniquely positioned to address HIV by offering prevention, treatment, or support services to affected populations, but models of effective congregation-based HIV programs in the literature are scarce. This systematic review distills lessons on successfully implementing congregation HIV efforts. Peer-reviewed articles on congregation-based HIV efforts were reviewed against criteria measuring the extent of collaboration, tailoring to the local context, and use of community-based participatory research (CBPR) methods. The effectiveness of congregations' efforts and their capacity to overcome barriers to addressing HIV is also assessed. We found that most congregational efforts focused primarily on HIV prevention, were developed in partnerships with outside organizations and tailored to target audiences, and used CBPR methods. A few more comprehensive programs also provided care and support to people with HIV and/or addressed substance use and mental health needs. We also found that congregational barriers such as HIV stigma and lack of understanding HIV's importance were overcome using various strategies including tailoring programs to be respectful of church doctrine and campaigns to inform clergy and congregations. However, efforts to confront stigma directly were rare, suggesting a need for further research.

http://www.rand.org/pubs/external_publications/EP20110033.html

EP-201100-34

Regional Price Differences and Food Consumption Frequency Among Elementary School Children. Roland Sturm, Ashlesha Datar. 2011

OBJECTIVE: Food prices may affect diet and weight gain among youth and lead to geographic disparities in obesity. This paper examines the association between regional prices and consumption frequency of fruit/vegetables and snack items among elementary school children in the USA. STUDY DESIGN: Observational study using individual-level survey data of fifth-grade children (average age 11 years) and regional food prices based on store visits in 2004. METHODS: Dependent variables are self-reported consumption frequency in fifth grade; primary explanatory variables are metropolitan area food prices relative to cost of living. Multivariate regression analysis. RESULTS: Price variation across metropolitan areas exists, and lower real prices for vegetables and fruits predict significantly higher intake frequency. Higher dairy prices predict lower frequency of milk consumption, while higher meat prices predict increased milk consumption. Similar price effects were not found for fast food or soft drink consumption. DISCUSSION: The geographic variation in food prices across the USA is sufficiently large to affect dietary patterns among youth for fruit, vegetables and milk. The price variation is either too small to affect children's consumption frequency of fast food or soft drinks, or the consumption of these foods is less price sensitive.

http://www.rand.org/pubs/external_publications/EP20110034.html

EP-201100-35

Under Pressure: Job Security, Resource Allocation, and Productivity in Schools Under NCLB. Heather L. Schwartz. 2011

The most sweeping federal education law in decades, the No Child Left Behind (NCLB) Act, requires states to administer standardized exams and to punish schools that do not make Adequate Yearly Progress (AYP) for the fraction of students passing these exams. While the literature on school accountability is well-established, there exists no nationwide study of the strong short-term incentives created by NCLB for schools on the margin of failing AYP. We assemble the first comprehensive, national, school-level dataset concerning detailed performance measures used to calculate AYP, and demonstrate that idiosyncrasies in state policies create numerous cases where schools near the margin for satisfying their own state's AYP requirements would have almost certainly failed or almost certainly made AYP if they were located in other states. Using this variation as a means of identification, we examine the impact of NCLB on the behavior of school personnel and students' academic achievement in nationally representative samples. We find that accountability pressure from NCLB lowers teachers' perceptions of job security and causes untenured teachers in high-stakes grades to work longer hours than their peers. We also find that NCLB pressure has either neutral or positive effects on students' enjoyment of learning and their achievement gains on low-stakes exams in reading, math, and science.

http://www.rand.org/pubs/external_publications/EP20110035.html

EP-201100-36

Workplace Efforts to Promote Influenza Vaccination Among Healthcare Personnel and Their Association with Uptake During the 2009 Pandemic Influenza A (H1N1). Katherine M. Harris, Carla Black, Gary Euler, Srikanth Kadiyala. 2011

BACKGROUND: Survey data suggest that, in a typical year, less than half U.S. healthcare personnel (HCP) are vaccinated for influenza. We measured workplace efforts to promote influenza vaccination among HCP in the U.S. and their association with seasonal and pandemic vaccination during the 2009-10 influenza season. METHODS: Self-reported survey data collected in June 2010 from eligible HCP (n = 1714) participating in a nationally representative, online research panel. HCP eligible for participation in the survey were those reporting as patient care providers and/or working in a healthcare setting. The survey measured workplace exposure to vaccination recommendations, vaccination requirements, on-site vaccination, reminders, and/or rewards, and being vaccinated for seasonal or H1N1 influenza. RESULTS: At least two-thirds of HCP were offered worksite influenza vaccination; about one half received reminders; and 10% were required to be vaccinated. Compared to HCP in other work settings, hospital employees were most ($p < 0.001$) likely to be the subject to efforts to promote vaccination. Vaccination requirements were associated with increases in seasonal and pandemic vaccination rates of between 31 and 49% points ($p < 0.005$). On-site vaccination was associated with increases in seasonal and pandemic vaccination of between 13 and 29% points ($p < 0.05$). Reminders and incentives were not associated with vaccination. CONCLUSIONS: Our findings provide empirical support for vaccination requirements as a strategy for increasing influenza vaccination among HCP. Our findings also suggest that making influenza vaccination available to HCP at work could increase uptake and highlight the need to reach beyond hospitals in promoting vaccination among HCP.

http://www.rand.org/pubs/external_publications/EP20110036.html

EP-201100-37

Intervening in Gun Markets: An Experiment to Assess the Impact of Targeted Gun-Law Messaging. Anthony A. Braga, Greg Ridgeway, George Tita, Glenn L. Pierce. 2011

The objective of this study was to assess whether targeting new gun buyers with a public safety

message aimed at improving gun law awareness can modify gun purchasers' behaviors. Between May 2007 and September 2008, 2,120 guns were purchased in two target neighborhoods of the City of Los Angeles. Starting in August 2007, gun buyers initiating transactions on odd-numbered days received a letter signed by prominent law enforcement officials, indicating that law enforcement had a record of their gun purchase and that the gun buyer should properly record future transfers of the gun. The letters arrived during buyers' 10-day waiting periods, before they could legally return to the store to collect their new gun. Subsequent gun records were extracted to assess the letter's effect on legal secondary sales, reports of stolen guns, and recovery of the gun in a crime. An intent-to-treat analysis was also conducted as a sensitivity check to remedy a lapse in the letter program between May and August 2007. The letter appears to have no effect on the legal transfer rate or on the short-term rate of guns subsequently turning up in a crime. However, we found that the rate at which guns are reported stolen for those who received the letter is more than twice the rate for those who did not receive the letter (p value?=?0.01). Those receiving the letter reported their gun stolen at a rate of 18 guns per 1,000 gun-years and those not receiving the letter reported their gun stolen at a rate of 7 guns per 1,000 gun-years. Of those receiving the letter, 1.9% reported their gun stolen during the study period compared to 1.0% for those who did not receive the letter. The percentage of guns reported stolen in these neighborhoods is high, indicating a high rate of true gun theft, a regular practice of using stolen-gun reports to separate the gun buyer from future misuse of the gun, or some blend of both. Simple, targeted gun law awareness campaigns can modify new gun buyers' behaviors. Additional follow-up or modifications to this initiative might be needed to impact the rate at which guns enter the illegal gun market and ultimately are recovered in crimes.

http://www.rand.org/pubs/external_publications/EP20110037.html

EP-201100-38

Addiction Research Centres and the Nurturing of Creativity: RAND's Drug Policy Research Center. Peter H. Reuter, Jonathan P. Caulkins. 2011

In September 1989, amid an emotional and ideological debate regarding problematic drug use in the United States and the 'war on drugs', RAND's Drug Policy Research Center (DPRC) was created through private foundation funds. The purpose of this new research center was to provide objective empirical analysis on which to base sound drug policy. Twenty years later, RAND's DPRC continues its work, drawing on a broad range of analytical expertise to evaluate, compare and assess the effectiveness of a similarly broad range of drug policies. More than 60 affiliated researchers in the United States and Europe make up the Center, which attempts to provide objective empirical analyses to better inform drug policies within the United States and abroad. This paper provides a look back at the creation, evolution and growth of the Center. It then describes how the Center operates today and how it has maintained its clear identity and focus by drawing on the analytical capabilities of a talented group of researchers from a broad range of academic disciplines.

http://www.rand.org/pubs/external_publications/EP20110038.html

EP-201100-39

More Than Four in Five Office-Based Physicians Could Qualify for Federal Electronic Health Record Incentives. Brian Bruen. 2011

Our analyses of federal survey data show that more than four in five office-based physicians could qualify for new federal incentive payments to encourage the adoption and "meaningful use" of electronic health records, based on the numbers of Medicare or Medicaid patients they see. The incentives are thus likely to accelerate the spread of electronic health records. However, our analyses also indicate that eligibility for the incentives is likely to vary by specialty: 90.6 percent of physicians working in general or family practice or internal medicine could qualify for incentives, but fewer than two-thirds of pediatricians, obstetrician-gynecologists, and psychiatrists may qualify. Eligibility and use will also vary by factors such as

size and type of practice; physicians in solo practice are much less likely to use electronic health records than physicians in other practice settings. We suggest actions that policy makers can take to lessen disparities and increase the adoption and meaningful use of electronic health records.

http://www.rand.org/pubs/external_publications/EP20110039.html

EP-201100-40

Making Sense of Posttraumatic Stress Disorder: Illness Perceptions Among Traumatic Injury Survivors. Eunice C. Wong, David P. Kennedy, Grant N. Marshall, Sarah J. Gaillot. 2011

More than 1.5 million persons in the United States sustain traumatic physical injuries each year. A significant proportion of traumatic injury survivors develop serious mental health problems, such as posttraumatic stress disorder (PTSD), yet few obtain professional mental health care. According to the commonsense model of self-regulation (Leventhal, Diefenbach, & Leventhal, 1992), illness-related perceptions can influence coping responses, including the use of professional treatment. Using the commonsense model as a guiding framework, we conducted semistructured interviews with nontreatment-seeking trauma injury survivors with PTSD (N = 23). Illness perceptions regarding the following key conceptual dimensions were examined: PTSD symptoms (identity) experienced or perceived consequences of PTSD symptoms, and beliefs about the causes, controllability, and course of PTSD symptoms. Results revealed that no respondents identified their symptoms as indicative of PTSD. Common illness perceptions included believing that symptoms would be short-lived, that symptoms were reflective of poor physical health or were a natural reaction to life in a violent community, and that symptoms were functionally adaptive. Respondents also reported exerting some limited control over symptoms by relying on religious forms of coping. None of the respondents perceived professional treatment as being able to completely control symptoms. Findings indicated that respondents' conceptualizations of PTSD symptoms might have inhibited the recognition of symptoms as a serious mental health condition that warrants professional treatment.

http://www.rand.org/pubs/external_publications/EP20110040.html

EP-201100-41

Internationally Comparable Health Indices. Erik Meijer, Arie Kapteyn, Tatiana Andreyeva. 2011

One of the most intractable problems in international health research is the lack of comparability of health measures across countries or cultures. We develop a cross-country measurement model for health, in which functional limitations, self-reports of health, and a physical measure are interrelated to construct health indices. To establish comparability across countries, we define the measurement scales by the physical measure while other parameters vary by country to reflect cultural and linguistic differences in response patterns. We find significant cross-country variation in response styles of health reports along with variability in genuine health that is related to differences in national income. Our health indices achieve satisfactory reliability of about 80% and their gradients by age, income, and wealth for the most part show the expected patterns. Moreover, the health indices correlate much more strongly with income and net worth than self-reported health measures

http://www.rand.org/pubs/external_publications/EP20110041.html

EP-201100-42

Percentile-based Empirical Distribution Function Estimates for Performance Evaluation of Healthcare Providers. Susan M. Paddock, Thomas A. Louis. 2011

Hierarchical models are widely used to characterize the performance of individual healthcare providers. However, little attention has been devoted to systemwide performance evaluations, the goals of which include identifying extreme (e.g. the top 10%) provider performance and developing statistical benchmarks to define high quality care. Obtaining optimal estimates of these quanti-

ties requires estimating the empirical distribution function (EDF) of provider-specific parameters that generate the data set under consideration. However, the difficulty of obtaining uncertainty bounds for a squared error loss minimizing EDF estimate has hindered its use in systemwide performance evaluations. We therefore develop and study a percentile-based EDF estimate for univariate provider-specific parameters. We compute order statistics of samples drawn from the posterior distribution of provider-specific parameters to obtain relevant assessments of uncertainty of an EDF estimate and its features, such as thresholds and percentiles. We apply our method to data from the Medicare end stage renal disease programme, which is a health insurance programme for people with irreversible kidney failure. We highlight the risk of misclassifying providers as exceptionally good or poor performers when uncertainty in statistical benchmark estimates is ignored. Given the high stakes of performance evaluations, statistical benchmarks should be accompanied by precision estimates.

http://www.rand.org/pubs/external_publications/EP20110042.html

EP-201100-43

Differential Item Functioning By Survey Language Among Older Hispanics Enrolled in Medicare Managed Care. Claude Messan Setodji, Steven Reise, Leo S. Morales, Marie N. Fongwa, Ron D. Hays. 2011

OBJECTIVE: To propose a permutation-based approach of anchor item detection and evaluate differential item functioning (DIF) related to language of administration (English vs. Spanish) for 9 questions assessing patients' perceptions of their providers from the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Medicare 2.0 survey. METHOD AND STUDY DESIGN: CAHPS 2.0 health plan survey data collected from 703 Hispanics who completed the survey in Spanish were matched on personal characteristics to 703 Hispanics that completed the survey in English. Steps to be followed for the detection of anchor items using the permutation tests are proposed and these tests in conjunction with item response theory were used for the identification of anchor items and DIF detection. RESULTS: Of the questions studied, 4 were selected as anchor items and 3 of the remaining questions were found to have DIF ($P < 0.05$). The 3 questions with DIF asked about seeing the doctor within 15 minutes of the appointment time, respect for what patients had to say, and provider spending enough time with patients. CONCLUSIONS: Failure to account for language differences in CAHPS survey items may result in misleading conclusions about disparities in health care experiences between Spanish and English speakers. Statistical adjustments are needed when using the items with DIF.

http://www.rand.org/pubs/external_publications/EP20110043.html

EP-201100-44

The Benefits of Health Information Technology: A Review of the Recent Literature Shows Predominantly Positive Results. David Blumenthal. 2011

An unprecedented federal effort is under way to boost the adoption of electronic health records and spur innovation in health care delivery. We reviewed the recent literature on health information technology to determine its effect on outcomes, including quality, efficiency, and provider satisfaction. We found that 92 percent of the recent articles on health information technology reached conclusions that were positive overall. We also found that the benefits of the technology are beginning to emerge in smaller practices and organizations, as well as in large organizations that were early adopters. However, dissatisfaction with electronic health records among some providers remains a problem and a barrier to achieving the potential of health information technology. These realities highlight the need for studies that document the challenging aspects of implementing health information technology more specifically and how these challenges might be addressed.

http://www.rand.org/pubs/external_publications/EP20110044.html

EP-201100-45

Increased Substance Use and Risky Sexual Behavior Among Migratory Homeless Youth: Exploring the Role of Social Network Composition. Steven Martino, Joan S. Tucker, Gery W. Ryan, Suzanne L. Wenzel, Daniela Golinelli, Brett A. Munjas. 2011

Travelers are a migratory subgroup of homeless youth who may be especially prone to engaging in risky behavior. This study compared the substance use and sexual behavior of young homeless travelers and non-travelers to evaluate the extent and possible sources of travelers' increased risk. Data came from face-to-face interviews with 419 homeless youth (36.6% female, 34.0% white, 23.9% African American, and 20.0% Hispanic) between the ages of 13 and 24 years (M = 20.1 years, SD = 2.5) who were randomly sampled from 41 shelters, drop-in centers, and street sites in Los Angeles. Travelers were almost twice as likely as non-travelers to exhibit recent heavy drinking, 37% more likely to exhibit recent marijuana use, and five times as likely to have injected drugs. Travelers also had more recent sex partners and were more likely to report having casual or need-based sexual partners and combining sex with substance use. Mediation analyses suggest that travelers' deviant peer associations and disconnection to conventional individuals and institutions may drive their elevated substance use. Differences in sexual risk behaviors are likely attributable to demographic differences between the two groups. Overall, these differences between travelers and non-travelers suggest different service needs and the need for different service approaches.

http://www.rand.org/pubs/external_publications/EP20110045.html

EP-201100-46

Clinical Quality Measures for Intraoperative and Perioperative Management in Carpal Tunnel Surgery. Teryl K. Nuckols, Neil G. Harness, Walter T. Chang, Kevin C. Chung, Steven M. Asch. 2011

BACKGROUND: Previous research documents suboptimal preoperative or postoperative care for patients undergoing surgery. However, few existing quality measures directly address the fundamental element of surgical care: intra-operative care processes. This study sought to develop quality measures for intraoperative, preoperative, and postoperative care for carpal tunnel surgery, a common operation in the USA. METHODS: We applied a variation of the well-established RAND/UCLA Appropriateness Method. Adherence to measures developed using this method has been associated with improved patient outcomes in several studies. Hand surgeons and quality measurement experts developed draft measures using guidelines and literature. Subsequently, in a two-round modified-Delphi process, a multidisciplinary panel of 11 national experts in carpal tunnel syndrome (including six surgeons) reviewed structured summaries of the evidence and rated the measures for validity (association with improved patient outcomes) and feasibility (ability to be assessed using medical records). RESULTS: Of 25 draft measures, panelists judged 22 (88%) to be valid and feasible. Nine intraoperative measures addressed the location and extent of surgical dissection, release after wrist trauma, endoscopic release, and four procedures sometimes performed during carpal tunnel surgery. Eleven measures covered preoperative and postoperative evaluation and management. CONCLUSIONS: We have developed several measures that experts, including surgeons, believe to reflect the quality of care processes occurring during carpal tunnel surgery and be assessable using medical records. Although quality measures like these cannot assess a surgeon's skill in handling the instruments, they can assess many important aspects of intraoperative care. Intraoperative measures should be developed for other procedures.

http://www.rand.org/pubs/external_publications/EP20110046.html

EP-201100-47

Evaluating a Palliative Care Intervention for Veterans: Challenges and Lessons Learned in a Longitudinal Study of Patients with Serious Illness. Glenn Wagner, Jillisa Steckart, Karl Lorenz, Kenneth Rosenfeld. 2011

CONTEXT: Longitudinal studies examining care

for seriously ill patients are needed to understand patients' experience of illness, evaluate interventions, and improve quality of care. Unfortunately, such studies face substantial methodological challenges. OBJECTIVES: This article describes such challenges and the strategies used to overcome them in a successfully implemented palliative care intervention trial for veterans. METHODS: Veterans admitted with a physician-estimated moderate-to-high one-year mortality risk were enrolled and followed up to three years, until death or study completion. Study protocols, procedures, and process data were intermittently analyzed to identify and develop strategies to address issues affecting study enrollment and interview completion rates. RESULTS: Of 561 patients who were eligible, 400 (71%) enrolled in the study; 357 (87%) alive at the end of Month 1 completed interviews; and 254 (88%) alive at Month 6 completed interviews. Of the 208 patients who died during the study and had identified a caregiver, we were able to conduct an after-death interview with 154 (74%) caregivers. A variety of strategies, such as systematic tracking and check-in calls, minimizing respondent burden, and maintaining interviewer-respondent dyads over time, were used to maximize enrollment rates, data collection, and retention. CONCLUSION: These data demonstrate that the use of diverse strategies and flexibility with regard to study protocols can result in successful recruitment, data collection, and retention of participants with serious illness. They thus show that longitudinal research can be successfully implemented with this population to evaluate interventions and examine patient experiences

http://www.rand.org/pubs/external_publications/EP20110047.html

EP-201100-48

Healthcare Spending and Preventive Care in High-Deductible and Consumer-Directed Health Plans. Amelia M. Haviland, Roland McDevitt, Neeraj Sood. 2011

OBJECTIVE: To investigate the effects of high-deductible health plans (HDHPs) and consumer-directed health plans (CDHPs) on healthcare spending and on the use of recommended preventive care. STUDY DESIGN: Retrospective study. METHODS: We analyzed claims and enrollment data for 808,707 households from 53 large US employers, 28 of which offered HDHPs or CDHPs. We estimated the effects of HDHP or CDHP enrollment on healthcare cost growth between 2004 and 2005 using a difference-in-difference method that compared cost growth for families who were enrolled in HDHPs or CDHPs for the first time in 2005 with cost growth for families who were not offered HDHPs or CDHPs. Control families were weighted using propensity score weights to match the treatment families. Using similar methods, we examined the effects of HDHP or CDHP enrollment on the use of preventive care and the effects of HDHP or CDHP offering by employers on the mean cost growth. RESULTS: Families enrolling in HDHPs or CDHPs for the first time spent 14% less than similar families enrolled in conventional plans. Families in firms offering an HDHP or a CDHP spent less than those in other firms. Significant savings for enrollees were realized only for plans with deductibles of at least $1000, and savings decreased with generous employer contributions to healthcare accounts. Enrollment in HDHPs or CDHPs was also associated with moderate reductions in the use of preventive care. CONCLUSIONS: The HDHPs or CDHPs with at least a $1000 deductible significantly reduced healthcare spending, but they also reduced the use of preventive care in the first year. This merits additional study because of concerns about enrollee health.

http://www.rand.org/pubs/external_publications/EP20110048.html

EP-201100-49

Nonexperts' Recognition of Structure in Personal Network Data. David P. Kennedy, Harold P. Green, Joan S. Tucker. 2011

Network-based interventions are gaining prominence in the treatment of chronic illnesses; however, little is known about what aspects of network structure are easily identified by nonexperts when shown network visualizations. This study exam-

ines which structural features are recognizable by nonexperts. Nineteen nonexperts were asked to pile sort 68 network diagrams. Results were analyzed using multidimensional scaling, discriminant analysis, cluster analysis, and PROFIT analysis. Participants tended to sort networks along the dimensions of isolates and size of largest component, suggesting that interventions aimed at helping individuals understand and change their social environments could benefit from incorporating visualizations of social networks.

http://www.rand.org/pubs/external_publications/EP20110049.html

EP-201100-50

The Impact of Patient Choice of Provider on Equity: Analysis of a Patient Survey. Peter Burge. 2011

Objectives: To understand the impact on equity of giving patients a choice of provider. Methods: A postal survey of 5997 patients in four areas of England about choice at their recent referral and, using a discrete choice experiment, how they would choose in hypothetical situations. Binary logistic regression and a series of multinomial and nested logit models were used to analyse the data to discover whether patients with particular characteristics were more likely to: think choice is important; be offered a choice; and, choose a non-local provider. Results: The response rate was 36%. Choice was more important to older patients aged 51–80 years, patients from non-white backgrounds, women, those with no qualifications and those with a bad past experience of their local hospital. There were no significant differences in who was offered a choice in terms of education, age group or ethnicity. In both real and hypothetical situations patients with no formal qualifications and those living in urban centres were more likely to choose their local hospital, and patients with a bad or mixed past experience at the local hospital were more likely to choose an alternative. In hypothetical choices those who do not normally travel by car and without Internet access were more likely to choose their local hospital irrespective of that hospital's characteristics. Conclusions: More educated, affluent patients were no more likely to be offered a choice than other population groups, but there does appear to be a social gradient in who chose to travel beyond the local area for treatment. If these results were replicated across England, there is at least the potential risk that when local hospitals are failing, patient choice could result in inequitable access to high quality care, rather than enhancing equity as the policy's architects had hoped.

http://www.rand.org/pubs/external_publications/EP20110050.html

EP-201100-51

Board Oversight Role in the Spotlight: What That Means for CECOs. Michael D. Greenberg. 2011

The RAND Corporation convened a May 12, 2010 Round Table meeting in Washington DC, entitled "Directors as the Guardians of Ethics and Compliance Within the Corporate Citadel: What the Policy Community Needs to Know." The purpose of the meeting was to generate a broad conversation about the role of directors and boards in C&E oversight, and the challenges and opportunities facing directors in this regard. Despite legal and regulatory trends, awareness of the critical role of corporate integrity programs -- and of the personal liability implications for directors -- remains poorly recognized in many corporate boardrooms. The gap between director responsibility and director awareness on Corporate Ethics and Governance (C&E) is a major point of concern, both because it places firms at greater risk, and because of perceptions that lapses in C&E oversight and in related board supervision might have contributed to the antecedent conditions of the financial collapse and the following "Great Recession." Proactive involvement by corporate boards in compliance and ethics oversight is fundamental in generating a meaningful ethical culture within organizations, and in leading firms to regard Corporate Ethics and Governance as more than just a paper tiger.

http://www.rand.org/pubs/external_publications/EP20110051.html

EP-201100-52

Children with Diabetes Compared to Peers: Depressed? Distressed? A Meta-Analytic Review. Kerry A. Reynolds. 2011

BACKGROUND: It is not clear from the literature whether children with diabetes have more psychological difficulties than their peers. PURPOSE: This study aims to use meta-analysis to determine if children with diabetes differ from children without a chronic illness in a variety of domains reflecting psychological well-being. METHOD: A meta-analysis was undertaken of 22 studies that compared children with diabetes to a comparison group. Outcomes included depression, anxiety, behavioral problems, and related constructs. RESULTS: Children with diabetes were more likely than comparison groups to experience a variety of psychological difficulties. However, these effects were small to medium in magnitude and were typically smaller among more recent studies and studies with well-matched comparison groups. CONCLUSIONS: This meta-analysis suggests that children with diabetes are at slightly elevated risk for psychological difficulties. Future work will need to help identify children at the highest risk, and to identify factors associated with resilience.

http://www.rand.org/pubs/external_publications/EP20110052.html

EP-201100-53

Bridging the Gap Between Basic Science and Clinical Practice: The Role of Organizations in Addressing Clinician Barriers. Megan K. Beckett, Elaine Quiter, Gery W. Ryan, Claude Berrebi, Stephanie Taylor, Michelle Cho, Katherine L. Kahn. 2011

BACKGROUND: New National Institutes of Health policies call for expansion of practice-based research to improve the clinical research enterprise and facilitate dissemination of evidence-based medicine. OBJECTIVE: This paper describes organizational strategies that influence clinicians' decisions to participate in clinical research. DESIGN: We reviewed the literature and interviewed over 200 clinicians and stakeholders. RESULTS: The most common barriers to community clinician participation in clinical research relate to beliefs that clinical research is too burdensome and has little benefit for the participating clinician or patient. We identified a number of approaches healthcare organizations can use to encourage clinicians to participate in research, including an outreach campaign to promote the benefits of clinical research; selection of study topics of interest to clinicians; establishment and enforcement of a set of research principles valuing the clinician and patient; development of a transparent schedule of reimbursement for research tasks; provision of technological and technical assistance to practices as needed; and promotion of a sense of community among clinicians involved in practice-based research. CONCLUSIONS: Many types of existing healthcare organizations could provide the technical and intellectual assistance community clinicians need to participate in clinical research. Multiple approaches are possible.

http://www.rand.org/pubs/external_publications/EP20110053.html

EP-201100-54

Reengineering the Clinical Research Enterprise to Involve More Community Clinicians. Gery W. Ryan, Claude Berrebi, Megan K. Beckett, Stephanie Taylor, Elaine Quiter, Michelle Cho, Katherine L. Kahn. 2011

BACKGROUND: The National Institutes of Health has called for expansion of practice-based research to improve the clinical research enterprise. METHODS: This paper presents a model for the reorganization of clinical research to foster long-term participation by community clinicians. Based on the literature and interviews with clinicians and other stakeholders, we posited a model, conducted further interviews to test the viability of the model, and further adapted it. RESULTS: We propose a three-dimensional system of checks and balances to support community clinicians using research support organizations, community outreach, a web-based registry of clinicians and studies, web-based training services, quality audits, and a feedback mechanism for cli-

nicians engaged in research. CONCLUSIONS: The proposed model is designed to offer a systemic mechanism to address current barriers that prevent clinicians from participation in research. Transparent mechanisms to guarantee the safety of patients and the integrity of the research enterprise paired with efficiencies and economies of scale are maintained by centralizing some of the functions. Assigning other responsibilities to more local levels assures flexibility with respect to the size of the clinician networks and the changing needs of researchers.

http://www.rand.org/pubs/external_publications/EP20110054.html

EP-201100-55

Bridging the Gap Between Basic Science and Clinical Practice: A Role for Community Clinicians. Katherine L. Kahn, Gery W. Ryan, Megan K. Beckett, Stephanie Taylor, Claude Berrebi, Michelle Cho, Elaine Quiter, Allen Fremont. 2011

BACKGROUND: Translating the extraordinary scientific and technological advances occurring in medical research laboratories into care for patients in communities throughout the country has been a major challenge. One contributing factor has been the relative absence of community practitioners from the US biomedical research enterprise. Identifying and addressing the barriers that prevent their participation in research should help bridge the gap between basic research and practice to improve quality of care for all Americans. METHODS: We interviewed over 200 clinicians and other healthcare stakeholders from 2004 through 2005 to develop a conceptual framework and set of strategies for engaging a stable cadre of community clinicians in a clinical research program. RESULTS: Lack of engagement of community practitioners, lack of necessary infrastructure, and the current misalignment of financial incentives and research participation emerged as the three primary barriers to community clinician research participation. Although every effort was made to learn key motivators for engagement in clinical research from interviewees, we did not observe their behavior and self-report by clinicians does not always track with their behavior. CONCLUSIONS: A paradigm shift involving acknowledgement of the value of clinicians in the context of community research, establishment of a stable infrastructure to support a cohort of clinicians across time and research studies, and realignment of incentives to encourage participation in clinical research is required.

http://www.rand.org/pubs/external_publications/EP20110055.html

EP-201100-56

Routine Outcomes Monitoring to Support Improving Care for Schizophrenia: Report from the VA Mental Health QUERI. Alexander Young, Noosha Niv, Matthew Chinman, Lisa Dixon, Ellen P. Fischer, Jeffrey Smith, Stephen R. Marder. 2011

In schizophrenia, treatments that improve outcomes have not been reliably disseminated. A major barrier to improving care has been a lack of routinely collected outcomes data that identify patients who are failing to improve or not receiving effective treatments. To support high quality care, the VA Mental Health QUERI used literature review, expert interviews, and a national panel process to increase consensus regarding outcomes monitoring instruments and strategies that support quality improvement. There was very good consensus in the domains of psychotic symptoms, side-effects, drugs and alcohol, depression, caregivers, vocational functioning, and community tenure. There are validated instruments and assessment strategies that are feasible for quality improvement in routine practice.

http://www.rand.org/pubs/external_publications/EP20110056.html

EP-201100-57

An Analysis of Applicants Presenting to a Medical Marijuana Specialty Practice in California. Beau Kilmer, James R. Burgdorf. 2011

While 15 states and the District of Columbia provide allowances for medical marijuana, little is known about the individuals who seek a physician's recommendation to use marijuana. This study provides descriptive information about

1,655 applicants in California who sought a physician's recommendation for medical marijuana, the conditions for which they sought treatment, and the diagnoses made by the physicians. It presents a systematic analysis of physician records and questionnaires obtained from consecutive applicants seen during a three-month period at nine medical marijuana specialty practices operating throughout the state. The analysis yields insights that may be useful for future research on medical marijuana and marijuana policy, including: 1) very few of those who sought a recommendation had cancer, HIV/AIDS, glaucoma, or multiple sclerosis; 2) most applicants presented with chronic pain, mental health conditions, or insomnia; and 3) half of the applicants reported using marijuana as a substitute for prescription drugs.

http://www.rand.org/pubs/external_publications/EP20110057.html

EP-201100-58

The Role of the Home Environment and Routinization in ART Adherence. Glenn Wagner, Lisa Miyashiro, Gery W. Ryan, James Scott. 2011

Previous research suggests that routinization of medication-taking behavior promotes antiretroviral therapy (ART) adherence. The current study explored the nature of medication-taking routines in the home environment, where medication is most often taken, to identify home-based cues for taking ART. Qualitative interviews were conducted in the homes of 31 HIV-positive adult males in the United States with varying levels of adherence problems. Interviews were audiotaped and transcribed. Content analysis was performed to elicit themes from the text and further categorize responses. Patients with more routinized medication-taking behavior reported fewer adherence problems. Home-based medication-taking triggers that were especially common among patients who reported fewer adherence problems included meals, pillboxes, time of day, and visual cues. Findings characterize the nature of home-based medication-taking routines and suggest the potential utility of the home environment as a setting for adherence interventions.

http://www.rand.org/pubs/external_publications/EP20110058.html

EP-201100-59

Disorder-specific Impact of Coordinated Anxiety Learning and Management Treatment for Anxiety Disorders in Primary Care. Michelle G. Craske, Murray Stein, Cathy D. Sherbourne, Alexander Bystritsky, Raphael D. Rose, Ariel J. Lang, Daniela Golinelli. 2011

CONTEXT: Anxiety disorders commonly present in primary care, where evidence-based mental health treatments often are unavailable or suboptimally delivered. OBJECTIVE: To compare evidence-based treatment for anxiety disorders with usual care (UC) in primary care for principal and comorbid generalized anxiety disorder (GAD), panic disorder (PD), social anxiety disorder (SAD), and posttraumatic stress disorder (PTSD). DESIGN: A randomized controlled trial comparing the Coordinated Anxiety Learning and Management (CALM) intervention with UC at baseline and at 6-, 12-, and 18-month follow-up assessments. SETTING: Seventeen US primary care clinics. PATIENTS: Referred primary care sample, 1004 patients, with principal DSM-IV diagnoses of GAD (n = 549), PD (n = 262), SAD (n = 132), or PTSD (n = 61) (mean [SD] age, 43.7 [13.7] years; 70.9% were female). Eighty percent of the participants completed 18-month follow-up. INTERVENTIONS: CALM (cognitive behavior therapy and pharmacotherapy recommendations) and UC. MAIN OUTCOME MEASURES: Generalized Anxiety Disorder Severity Scale, Panic Disorder Severity–Self-report Scale, Social Phobia Inventory, and PTSD Checklist–Civilian Version scores. RESULTS: CALM was superior to UC for principal GAD at 6-month (–1.61; 95% confidence interval [CI], –2.42 to –0.79), 12-month (–2.34; –3.22 to –1.45), and 18-month (–2.37; –3.24 to –1.50), PD at 6-month (–2.00; –3.55 to –0.44) and 12-month (–2.71; –4.29 to –1.14), and SAD at 6-month (–7.05; –12.11 to –2.00) outcomes. CALM was superior to

UC for comorbid SAD at 6-month (–4.26; 95% CI, –7.96 to –0.56), 12-month (–8.12, –11.84 to –4.40), and 18- month (–6.23, –9.90 to –2.55) outcomes. Effect sizes favored CALM but were not statistically significant for other comorbid disorders. CONCLUSIONS: CALM (cognitive behavior therapy and pharmacotherapy medication recommendations) is more effective than is UC for principal anxiety disorders and, to a lesser extent, comorbid anxiety disorders that present in primary care.

http://www.rand.org/pubs/external_publications/EP20110059.html

EP-201100-60

Comparative Effectiveness Research: Does the Emperor Have Clothes. Ian D. Coulter. 2011

With the recent allocation of a $1.1 billion "down payment" to fund comparative effectiveness research (CER) from the American Recovery and Reinvestment Act of 2009 (generally referred to as the stimulus package) and with $300 million being allocated for the Agency for Healthcare Research and Quality (AHRQ), $400 million for the National Institutes of Health, and $400 million for allocation at the discretion of the Secretary of Health and Human Services and with the National Center for Complementary Alternative Medicine putting out a request for research proposals for Comparative Effectiveness Studies of Complementary and Alternative Medicine, it is safe to say CER has entered a new era. CER solves two historical concerns for complementary and alternative medicine (CAM) researchers; first it focuses on effectiveness not efficacy; second it tests holistic approaches to care. Because it allows the providers to give care in any way they choose, it avoids the problem of reductionism inherent in standard random controlled trials. In CER, the provider can continue to practice holistically and to use individualized medicine to treat the patient. However, amid the largely positive responses to this move among researches in CAM, a more critical evaluation might be in order. This article argues that while the move to effectiveness research is a positive move for CAM, CER as currently being talked about and funded may just be a new form of privileging certain forms of evidence at the expense of other equally important and perhaps more relevant evidence.

http://www.rand.org/pubs/external_publications/EP20110060.html

EP-201100-61

Health Services Research and Clinical Practice. Robert H. Brook. 2011

Health services research has made many important contributions, but it has not revolutionized the way that medicine is practiced to increase its value and moderate costs.

http://www.rand.org/pubs/external_publications/EP20110061.html

EP-201100-62

Does the Response to Alcohol Taxes Differ Across Racial/ethnic Groups? Some Evidence from 1984-2009 Behavioral Risk Factor Surveillance System. Ruopeng An, Roland Sturm. 2011

BACKGROUND: Excessive alcohol use remains an important lifestyle-related contributor to morbidity and mortality in the U.S. and worldwide. It is well documented that drinking patterns differ across racial/ethnic groups, but not how those different consumption patterns would respond to tax changes. Therefore, policy makers are not informed on whether the effects of tax increases on alcohol abuse are shared equally by the whole population, or policies in addition to taxation should be pursued to reach certain sociodemographic groups. AIMS OF THE STUDY: To estimate differential demand responses to alcohol excise taxes across racial/ethnic groups in the U.S. METHODS: Individual data from the Behavioral Risk Factor Surveillance System 1984-2009 waves (N = 3,921,943, 39.3% male; 81.3% White, 7.8% African American, 5.8% Hispanic, 1.9% Asian or Pacific Islander, 1.4% Native American, and 1.8% other race/multi-race) are merged with tax data by residential state and interview month. Dependent variables include consumption of any alcohol and number of drinks consumed per month. Demand responses to alcohol taxes

are estimated for each race/ethnicity in separate regressions conditional on individual characteristics, state and time fixed effects, and state-specific secular trends. RESULTS: The null hypothesis on the identical tax effects among all races/ethnicities is strongly rejected ($P < 0.0001$), although pairwise comparisons using t-test are often not statistically significant due to a lack of precision. Our point estimates suggest that the tax effect on any alcohol consumption is largest among White and smallest among Hispanic. Among existing drinkers, Native American and other race/multi-race are most responsive to tax effects while Hispanic least. For all races/ethnicities, the estimated tax effects on consumption are large and significant among light drinkers (1-40 drinks per month), but shrink substantially for moderate (41-99) and heavy drinkers (= 100). DISCUSSION: Extensive research has been conducted on overall demand responses to alcohol excise taxes, but not on heterogeneity across various racial/ethnic groups. Only one similar prior study exists, but used a much smaller dataset. The authors did not identify differential effects. With this much larger dataset, we found some evidence for different responses across races/ethnicities to alcohol taxes, although we lack precision for individual group estimates. Limitations of our study include the absence of intrastate tax variations, no information on what type of alcohol is consumed, lack of controls for subgroup baseline alcohol consumption rates, and measurement error in self-reported alcohol use data. IMPLICATIONS FOR HEALTH POLICIES: Tax policies aimed to reduce alcohol-related health and social problems should consider whether they target the most harmful drinking behaviors, affect subgroups in unintended ways, or influence some groups disproportionately. This requires information on heterogeneity across subpopulations. Our results are a first step in this direction and suggest that there exists a differential impact across races/ethnicities, which may further increase health disparities. Tax increases also appear to be less effective among the heaviest consumers who are associated with highest risk. IMPLICATIONS FOR FURTHER RESEARCH: More research, including replications in different settings, is required to obtain better estimates on differential responses to alcohol tax across races/ethnicities. Population heterogeneity is also more complex than our first cut by race/ethnicity and needs more fine-grained analyses and model structures.

http://www.rand.org/pubs/external_publications/EP20110062.html

EP-201100-63

Cost-Effectiveness Analysis of a Low-Fat Diet in the Prevention of Breast and Ovarian Cancer. Nicole Urban, Hugh R. Waters. 2011

BACKGROUND: Results of the Women's Health Initiative Randomized Controlled Dietary Modification Trial (WHI-DM) suggest that a low-fat diet may be associated with beneficial health outcomes for specific groups of women. OBJECTIVE: The objective is to assess how cost-effective the WHI-DM would be if implemented as a public health intervention and under the sponsorship of private health insurers and Medicare. Breast and ovarian cancers are the health outcomes of interest. PARTICIPANTS: Two groups of WHI-DM participants form the target population for this analysis: participants consuming >36.8% of energy from fat at baseline, and participants at high risk for breast cancer with 32% or more of energy from fat at baseline. METHODS: This study uses Markov cohort modeling, following societal and health care payer perspectives, with Monte Carlo simulations and one-way sensitivity analyses. WHI-DM records, nationally representative prices, and published estimates of medical care costs were the sources of cost information. Simulations were performed for hypothetical cohorts of women aged 50, 55, 60, 65, or 70 years at the beginning of the intervention. Effectiveness was estimated by quality-adjusted life years (QALYs) and the main outcome measure was the incremental cost-effectiveness ratio (ICER). RESULTS: Following the societal perspective, the ICERs for the 50-year old cohort are $13,773/QALY (95% confidence interval $7,482 to $20,916) for women consuming >36.8% of energy from fat at baseline and $10,544/QALY ($2,096 to $23,673) for women at high risk for breast cancer. The comparable ICER

from a private health care payer perspective is $66,059/QALY ($30,155 to $121,087) and from a Medicare perspective, it is $15,051/QALY ($6,565 to $25,105). CONCLUSIONS: The WHI-DM is a cost-effective strategy for the prevention of breast and ovarian cancers in the target population, from both societal and Medicare perspectives. Private health care payers have a relative short timeframe to realize a return on investment, since after age 65 years the financial benefits associated with the prevention program would accrue to Medicare. For this reason, the intervention is not cost-effective from a private health care payer perspective.

http://www.rand.org/pubs/external_publications/EP20110063.html

EP-201100-64

Association of Family Stressful Life-Change Events and Health-Related Quality of Life in Fifth-Grade Children. Tumaini Coker, Marc N. Elliott, Jan Wallander, Paula Cuccaro, Rosalie Corona, Mark A. Schuster. 2011

OBJECTIVE: To examine the association of recent family-related stressful life-change events (SLEs) with health-related quality of life (HRQOL) in fifth graders. DESIGN: Population-based, cross-sectional survey. SETTING: Three US metropolitan areas; 2004-2006. PARTICIPANTS: A total of 5147 fifth graders and their parents. MAIN EXPOSURES: Nine recent family-related SLEs: a parent's death, another family member's death, a family member's injury/illness, a family member's alcohol/drug problems, loss of a pet, recent change of residence, addition of a new baby or child to the household, parental separation, and parental divorce. MAIN OUTCOME MEASURE: The HRQOL measured using the 23-item Pediatric Quality of Life Inventory. RESULTS: Twenty-four percent of children had no reported recent SLEs; 33% had 1, 25% had 2, 12% had 3, and 6% had 4 or more. Mean HRQOL scores (total, physical, and psychosocial scales) were lower for children with more SLEs. The mean total HRQOL score was 80.4 (95% confidence interval, 79.4-81.3) for children with no recent SLEs and 71.8 (70.2-73.5) for children with 4 or more SLEs ($P < .001$). In adjusted logistic regression analyses, children with more SLEs had greater odds of impaired HRQOL compared with children without any SLEs. Psychosocial HRQOL fully mediated the relationship between SLEs and physical HRQOL. CONCLUSIONS: The occurrence of multiple family-related SLEs in children is associated with less positive HRQOL. By incorporating the needs of families as part of comprehensive, high-quality care, health care professionals can identify these types of family-level needs and assist families in accessing community resources for support.

http://www.rand.org/pubs/external_publications/EP20110064.html

EP-201100-65

The Premises Is the Premise: Understanding Off- and On-Premises Alcohol Sales Outlets to Improve Environmental Alcohol Prevention Strategies. Matthew Chinman, Q Burkhart, Patricia A. Ebener, Cha-Chi Fan, Pamela Imm, Susan M. Paddock. 2011

Environmental strategies to prevent the misuse of alcohol among youth — e.g., use of public policies to restrict minors' access to alcohol — have been shown to reduce underage drinking. However, implementation of policy changes often requires public and private partnerships. One way to support these partnerships is to better understand the target of many of the environmental strategies, which is the alcohol sales outlet. Knowing more about how off-premises outlets (e.g., liquor and convenience stores) and on-premises outlets (e.g., bars and restaurants) are alike and different could help community-based organizations better tailor, plan, and implement their environmental strategies and strengthen partnerships between the public and commercial sectors. We conducted a survey of managerial or supervisory staff and/or owners of 336 off- and on-premises alcohol outlets in six counties in South Carolina, comparing these two outlet types on their preferences regarding certain alcohol sales practices, beliefs toward underage drinking, alcohol sales practices, and outcomes. Multilevel logistic regression showed that while off- and on-premises outlets did have many

similarities, off-premises outlets appear to engage in more practices designed to prevent sales of alcohol to minors than on-premises outlets. The relationship between certain Responsible Beverage Service (RBS) practices and outcomes varied by outlet type. This study furthers the understanding of the differences between off- and on-premises alcohol sales outlets and offers options for increasing and tailoring environmental prevention efforts to specific settings.

http://www.rand.org/pubs/external_publications/EP20110065.html

EP-201100-66

Relationships Between Adolescent Sexual Outcomes and Exposure to Sex in Media: Robustness to Propensity-Based Analysis. Rebecca L. Collins, Steven Martino, Marc N. Elliott, Angela Miu. 2011

Adolescent sexual health is a substantial problem in the United States, and two recent studies have linked adolescent sexual behavior and/or outcomes to youths' exposure to sex in the media. Both studies had longitudinal survey designs and used covariate-adjusted regression analysis. Steinberg and Monahan (2011) reanalyzed data from one of these studies (Brown et al., 2006) using a propensity score approach, arguing that this method better addresses the possibility of unobserved confounders. On the basis of their reanalysis, which found no relationship between media exposure and sexual behavior, Steinberg and Monahan concluded that "Adolescents' Exposure to Sexy Media Does Not Hasten the Initiation of Sexual Intercourse" (p. 562). We subjected data from the second study (Chandra et al., 2008; Collins et al., 2004) to reanalysis using a propensity-score approach. We find only modest reductions in two of the three previously documented associations and no reduction in the third. On the basis of these findings, we conclude that there is an association between exposure to sex in the media and adolescent sexual outcomes. Although the evidence does not prove causality, it is sufficient to advise caution among parents, develop interventions for youths, and work with media producers and distributors to reduce youth exposure to sexual content.

http://www.rand.org/pubs/external_publications/EP20110066.html

EP-201100-67

Propensity Scoring and the Relationship Between Sexual Media and Adolescent Sexual Behavior: Comment on Steinberg and Monahan (2011). Rebecca L. Collins, Steven Martino, Marc N. Elliott. 2011

Longitudinal research has demonstrated a link between exposure to sexual content in media and subsequent changes in adolescent sexual behavior, including initiation of intercourse and various noncoital sexual activities. Based on a reanalysis of one of the data sets involved, Steinberg and Monahan (2011) have challenged these findings. However, propensity score approaches-especially the version of this method used by Steinberg and Monahan, which lacks covariates-do not necessarily result in more accurate estimates of treatment effects than does the regression with covariates approach employed by prior research. There are also a number of problems with the specific set of analyses presented by Steinberg and Monahan and the conclusion they draw from them. In contrast to Steinberg and Monahan's claim, there is substantial evidence of an association between sexual media exposure and adolescent sexual initiation.

http://www.rand.org/pubs/external_publications/EP20110067.html

EP-201100-68

The Role of School Physical Activity Programs in Child Body Mass Trajectory. Meenakshi Maria Fernandes, Roland Sturm. 2011

BACKGROUND: Physical activity at school can support obesity prevention among youth. This paper assesses the role of existing school physical activity programs for a national cohort from first grade to fifth grade. METHODS: We analyzed a cohort from the Early Childhood Longitudinal Survey-Kindergarten Cohort which included 8246 children in 970 schools across the country. Growth curve models estimate the effect of physical edu-

cation (PE) and recess on individual child body mass trajectories controlling for child and school characteristics. Hierarchical models allow for unobserved school and child effects. RESULTS: Among first graders, 7.0% met the National Association of Sport and Physical Education (NASPE) recommended time for PE and 70.7% met the recommended time for recess in the previous week. Boys experienced a greater increase in body mass than girls. Meeting the NASPE recommended time for recess was associated with a 0.74 unit decrease in BMI (body mass index) percentile for children overall. Meeting the NASPE recommendation for physical education was associated with 1.56 unit decrease in BMI percentile among boys but not girls. CONCLUSIONS: We find evidence that meeting the national recommendations for PE and recess is effective in mitigating body mass increase among children.

http://www.rand.org/pubs/external_publications/EP20110068.html

EP-201100-69

Prescription Sharing, Alcohol Use, and Street Drug Use to Manage Pain Among Veterans. Joy R. Goebel, Peggy Compton, Lisa Zubkoff, Steven M. Asch, Cathy D. Sherbourne, Lisa R. Shugarman, Karl Lorenz. 2011

CONTEXT: Efforts to promote awareness and management of chronic pain have been accompanied by a troubling increase in prescription medication abuse. At the same time, some patients may misuse substances in an effort to manage chronic pain. OBJECTIVES: This study examines self-reported substance misuse for pain management among veterans and identifies the contributing factors. METHODS: We analyzed cross-sectional data from the Help Veterans Experience Less Pain study. RESULTS: Of 343 veterans, 35.3% reported an aberrant pain management behavior (24% reported using alcohol, 11.7% reported using street drugs, and 16.3% reported sharing prescriptions to manage pain). Poorer mental health, younger age, substance use disorders (SUDs), number of nonpain symptoms, and greater pain severity and interference were associated with aberrant pain management behaviors. In multivariate analysis, SUDs (odds ratio [OR]: 3.9, 95% confidence interval [CI]: 2.3–6.7, P <0.000) and poorer mental health (OR: 2.3, 95% CI: 1.3–4.3, P=0.006) were associated with using alcohol or street drugs to manage pain; SUDs (OR: 2.4, 95% CI: 1.3–4.4, P=0.006) and pain interference (OR: 1.1, 95% CI: 1.0–1.2, P=0.047) were associated with prescription sharing; and SUDs (OR: 3.6, 95% CI: 2.2–6.1, P<0.000) and number of nonpain symptoms (OR: 6.5, 95% CI: 1.2–35.4, P=0.031) were associated with any aberrant pain management behavior. CONCLUSION: Veterans with a history of SUDs, greater pain interference, more nonpain symptoms, and mental health concerns should be carefully managed to deter substance misuse for pain management.

http://www.rand.org/pubs/external_publications/EP20110069.html

EP-201100-70

Economic Impact of Mexico City's Smoke-Free Law. Hugh R. Waters. 2011

OBJECTIVE: To evaluate the economic impact of Mexico City's 2008 smoke-free law—'The Non-Smokers' Health Protection Law on restaurants, bars and nightclubs. MATERIAL AND METHODS: We used the Monthly Services Survey of businesses from January 2005 to April 2009—with revenues, employment and payments to employees as the principal outcomes. The results are estimated using a differences-in-differences regression model with fixed effects. The states of Jalisco, Nuevo Leon and Mexico, where the law was not in effect, serve as a counterfactual comparison group. RESULTS: In restaurants, after accounting for observable factors and the fixed effects, there was a 24.8% increase in restaurants' revenue associated with the smoke-free law. This difference is not statistically significant but shows that, on average, restaurants did not suffer economically as a result of the law. Total wages increased by 28.2% and employment increased by 16.2%. In nightclubs, bars and taverns there was a decrease of 1.5% in revenues and an increase of 0.1% and

3.0%, respectively, in wages and employment. None of these effects are statistically significant in multivariate analysis. CONCLUSIONS: There is no statistically significant evidence that the Mexico City smoke-free law had a negative impact on restaurants' income, employees' wages and levels of employment. On the contrary, the results show a positive, though statistically non-significant, impact of the law on most of these outcomes. Mexico City's experience suggests that smoke-free laws in Mexico and elsewhere will not hurt economic productivity in the restaurant and bar industries.

http://www.rand.org/pubs/external_publications/EP20110070.html

EP-201100-71

Mixed-Method Approach to Understanding the Experiences of Non-Deployed Military Caregivers. Sandraluz Lara-Cinisomo, Anita Chandra, Rachel M. Burns, Lisa H. Jaycox, Terri Tanielian, Teague Ruder, Bing Han. 2011

Given the unprecedented operational tempo of the Afghanistan and Iraq wars and the heavy involvement of the Reserve and National Guard, the stress that military families are exposed to is distinct from stress in earlier conflicts, with little empirical data to inform the impact on non-deployed military caregivers or "home caregivers." The study seeks to examine the experiences of home caregivers during deployments, with a focus on the impact of deployment on the caregiver's well-being. We conducted 50 qualitative interviews and 1,337 survey interviews with home caregivers who experienced at least one deployment. The structured qualitative interview focused on caregiver experiences during deployment. The quantitative data centered on caregiver well-being and household and relationship hassles. The qualitative interview notes were the unit of analysis and traditional methods were used to analyze the data. The quantitative data were analyzed using regression models. The qualitative data revealed key deployment-related household challenges that caregivers experience and the effect of those challenges on caregivers. Multivariate analyses of the quantitative data explored differences in caregivers' emotional well-being, household and relationship hassles. The results showed important component and deployment experience differences. Caregivers affiliated with the National Guard and those with more months of deployment reported significantly poorer emotional well-being, and more household and relationship hassles. Given the important role that maternal well-being has on child and family functioning, it is critical to understand how the stress of deployment is affecting mothers in their daily routines, especially during potentially high stress periods.

http://www.rand.org/pubs/external_publications/EP20110071.html

EP-201100-72

Group Alcohol and Drug Treatment. Sarah B. Hunter. 2011

Group treatment for teen alcohol and drug disorders can be enhanced by motivational interviewing, a technique that may be ideally suited to addressing barriers to treating teens in groups because it is inherently collaborative, focusing on achievable approaches for change.

http://www.rand.org/pubs/external_publications/EP20110072.html

EP-201100-73

Nurse Manager Perceptions of the Impact of Process Improvements By Nurses. Tracy Yee, Jack Needleman, Marjorie L. Pearson. 2011

Approaches in assessment of process improvements by nurses are a timely issue, given a growing focus on changes in care delivery. Nineteen semistructured phone interviews with nurse managers whose units participated in a process improvement intervention were completed. The most prominent among assessment strategies was observation. Other strategies included quantitative data measurement, informal and formal feedback, and auditing processes. Understanding how nurses are evaluating interventions may contribute to improved measurement in the future.

http://www.rand.org/pubs/external_publications/EP20110073.html

EP-201100-74

Performance Characteristics of a Methodology to Quantify Adverse Events Over Time in Hospitalized Patients. Donald Goldmann, Andrew Hackbarth. 2011

OBJECTIVE: To assess the performance characteristics of the Institute for Healthcare Improvement Global Trigger Tool (GTT) to determine its reliability for tracking local and national adverse event rates. DATA SOURCES: Primary data from 2008 chart reviews. STUDY DESIGN: A retrospective study in a stratified random sample of 10 North Carolina hospitals. Hospital-based (internal) and contract research organization-hired (external) reviewers used the GTT to identify adverse events in the same 10 randomly selected medical records per hospital in each quarter from January 2002 through December 2007. DATA COLLECTION/EXTRACTION: Interrater and intrarater reliability was assessed using kappa statistics on 10 percent and 5 percent, respectively, of selected medical records. Additionally, experienced GTT users reviewed 10 percent of records to calculate internal and external teams' sensitivity and specificity. PRINCIPAL FINDINGS: Eighty-eight to 98 percent of the targeted 2,400 medical records were reviewed. The reliability of the GTT to detect the presence, number, and severity of adverse events varied from kappa=0.40 to 0.60. When compared with a team of experienced reviewers, the internal teams' sensitivity (49 percent) and specificity (94 percent) exceeded the external teams' (34 and 93 percent), as did their performance on all other metrics. CONCLUSIONS: The high specificity, moderate sensitivity, and favorable interrater and intrarater reliability of the GTT make it appropriate for tracking local and national adverse event rates. The strong performance of hospital-based reviewers supports their use in future studies.

http://www.rand.org/pubs/external_publications/EP20110074.html

EP-201100-75

Nicotine Replacement Prescribing Trends in a Large Psychiatric Hospital, Before and After Implementation of a Hospital-Wide Smoking Ban. Deborah M. Scharf. 2011

OBJECTIVE: We examined prescribing patterns for nicotine replacement therapies (NRTs) in a large psychiatric hospital, before and after the implementation of a smoking ban. METHOD: We extracted 5 years of NRT utilization data from hospital pharmacy records. The ban went into effect on January 1, 2007. Data reflect NRT prescriptions from 2 years before and 3 years after the ban, and N = 30,908 total inpatient hospital admissions. RESULTS: The monthly rate of total NRT prescriptions increased after the ban from M = 254.25 (SD = 126.60) doses per month to M = 4,467.52 (SD = 1,785.87) doses per month (>1,700% increase, $p < .0001$). After the smoking ban, clinicians prescribed higher doses of transdermal (but not oral) NRT (Tukey, $p < .0001$). Comparisons of NRT prescribing across hospital units tentatively suggested that patients being treated on the substance use disorders unit were prescribed more doses of NRT, as well as higher doses of NRT compared with patients on other units. Analysis of trends over time showed no apparent downward trend for NRT usage during the 3 years following the smoking ban, suggesting that clinicians continued to treat nicotine dependence after smoking was restricted. CONCLUSIONS: Clinicians are more likely to identify and treat symptoms of nicotine withdrawal when smoking is restricted. Hospitals should consider monitoring prescriptions for NRT as part of their ongoing quality assurance practices so that patients receive aggressive treatment of nicotine withdrawal symptoms—an essential component of high-quality patient care.

http://www.rand.org/pubs/external_publications/EP20110075.html

EP-201100-76

Special treatment-- the story of medicare's ESRD entitlement. Richard A. Rettig. 2011

This review tells the story of how full coverage for treatment of chronic renal disease failure became enshrined in U.S. law.

http://www.rand.org/pubs/external_publications/EP20110076.html

EP-201100-77

Cost Implications to Health Care Payers of Improving Glucose Management among Adults with Type 2 Diabetes. Teryl K. Nuckols, Elizabeth A. McGlynn, John L. Adams, Julie Lai, Myong-Hyun Go, Joan Keesey, Julia E. Aledort. 2011

OBJECTIVE: To assess the cost implications to payers of improving glucose management among adults with type 2 diabetes. DATA SOURCE/STUDY SETTING: Medical-record data from the Community Quality Index (CQI) study (1996-2002), pharmaceutical claims from four Massachusetts health plans (2004-2006), Medicare Fee Schedule (2009), published literature. STUDY DESIGN: Probability tree depicting glucose management over 1 year. DATA COLLECTION/EXTRACTION METHODS: We determined how frequently CQI study subjects received recommended care processes and attained Health Care Effectiveness Data and Information Set (HEDIS) treatment goals, estimated utilization of visits and medications associated with recommended care, assigned costs based on utilization, and then modeled how hospitalization rates, costs, and goal attainment would change if all recommended care was provided. PRINCIPAL FINDINGS: Relative to current care, improved glucose management would cost U.S. $327 (U.S. $192-711 in sensitivity analyses) more per person with diabetes annually, largely due to antihyperglycemic medications. Cost-effectiveness to payers, defined as incremental annual cost per patient newly attaining any one of three HEDIS goals, would be U.S.$1,128; including glycemic crises reduces this to U.S.$555-1,021. CONCLUSIONS: The cost of improving glucose management appears modest relative to diabetes-related health care expenditures. The incremental cost per patient newly attaining HEDIS goals enables payers to consider costs as well as outcomes that are linked to future profitability.

http://www.rand.org/pubs/external_publications/EP20110077.html

EP-201100-78

Where Do Poor Women in Developing Countries Give Birth? A Multi-Country Analysis of Demographic and Health Survey Data. Joanne K. Yoong, Joan Keesey. 2011

BACKGROUND: In 2008, over 300,000 women died during pregnancy or childbirth, mostly in poor countries. While there are proven interventions to make childbirth safer, there is uncertainty about the best way to deliver these at large scale. In particular, there is currently a debate about whether maternal deaths are more likely to be prevented by delivering effective interventions through scaled up facilities or via community-based services. To inform this debate, we examined delivery location and attendance and the reasons women report for giving birth at home. METHODOLOGY/PRINCIPAL FINDINGS: We conducted a secondary analysis of maternal delivery data from Demographic and Health Surveys in 48 developing countries from 2003 to the present. We stratified reported delivery locations by wealth quintile for each country and created weighted regional summaries. For sub-Saharan Africa (SSA), where death rates are highest, we conducted a subsample analysis of motivations for giving birth at home. In SSA, South Asia, and Southeast Asia, more than 70% of all births in the lowest two wealth quintiles occurred at home. In SSA, 54.1% of the richest women reported using public facilities compared with only 17.7% of the poorest women. Among home births in SSA, 56% in the poorest quintile were unattended while 41% were attended by a traditional birth attendant (TBA); 40% in the wealthiest quintile were unattended, while 33% were attended by a TBA. Seven per cent of the poorest women reported cost as a reason for not delivering in a facility, while 27% reported lack of access as a reason. The most common reason given by both the poorest and richest women for not delivering in a facility was that it was deemed "not necessary" by a household decision maker. Among the poorest women, "not necessary" was given as a reason by 68% of women whose births were unattended and by 66% of women whose births were attended. CONCLUSIONS: In developing countries, most poor women deliver at home. This suggests that, at least in the near term, efforts to reduce maternal deaths should prioritize community-based in-

terventions aimed at making home births safer.

http://www.rand.org/pubs/external_publications/EP20110078.html

EP-201100-79

Selecting Performance Indicators for Prison Health Care. Steven M. Asch, Cheryl L. Damberg, Liisa Hiatt, Stephanie S. Teleki, Rebecca Shaw, David Eisenman, Corita R. Grudzen. 2011

Improving prison health care requires a robust measurement dashboard that addresses multiple domains of care. We sought to identify tested indicators of clinical quality and access that prison health managers could use to ascertain gaps in performance and guide quality improvement. We used the RAND/UCLA modified Delphi method to select the best indicators for correctional health. An expert panel rated 111 indicators on validity and feasibility. They voted to retain 79 indicators in areas such as access, cardiac conditions, geriatrics, infectious diseases, medication monitoring, metabolic diseases, obstetrics/gynecology, screening/prevention, psychiatric disorders/substance abuse, pulmonary conditions, and urgent conditions. Prison health institutions, like all other large health institutions, need robust measurement systems. The indicators presented here provide a basic library for prison health managers developing such systems.

http://www.rand.org/pubs/external_publications/EP20110079.html

EP-201100-80

A Review of Quality Measures Used By State and Federal Prisons. Cheryl L. Damberg, Rebecca Shaw, Stephanie S. Teleki, Liisa Hiatt, Steven M. Asch. 2011

In response to deficiencies in the delivery of health care in prisons, (BOP) a number of state correctional systems and the Federal Bureau of Prisons (BOP) have established quality of care monitoring systems. In 2009, the California Department of Corrections and Rehabilitation and the federal receiver overseeing the system asked the RAND Corporation to identify existing indicators of quality performance and to recommend a set of indicators applicable to the prison population. An environmental scan of quality measures being used by other state correctional systems and the BOP found substantial variation in the number and type of measures being used and the underlying data systems used to construct measures. Explicit quality measures were being used, as were measures of disease prevalence and standards.

http://www.rand.org/pubs/external_publications/EP20110080.html

EP-201100-81

Substance Use Among Middle School Students: Associations with Self-Rated and Peer-Nominated Popularity. Joan S. Tucker, Harold P. Green, Regina A. Shih. 2011

Associations of popularity with adolescent substance use were examined among 1793 6–8th grade students who completed an in-school survey. Popularity was assessed through both self-ratings and peer nominations. Students who scored higher on either measure of popularity were more likely to be lifetime cigarette smokers, drinkers, and marijuana users, as well as past month drinkers. Self-rated popularity was positively associated with past month marijuana use and heavy drinking, and peer-nominated popularity showed a quadratic association with past month heavy drinking. These results extend previous work and highlight that popularity, whether based on self-perceptions or peer friendship nominations, is a risk factor for substance use during middle school. Given the substantial increase in peer influence during early adolescence, prevention program effectiveness may be enhanced by addressing popularity as a risk factor for substance use or working with popular students to be peer leaders to influence social norms and promote healthier choices.

http://www.rand.org/pubs/external_publications/EP20110081.html

EP-201100-82

A Qualitative Exploration of the Impact of HIV and ART on Social Disruption and Household Continuity in Uganda. Glenn Wagner, Gery W.

Ryan, Alexis K. Huynh, Cissy Kityo, Peter Mugyenyi. 2011

With increased uptake of antiretroviral therapy (ART) throughout sub-Saharan Africa, it is critical to have a better understanding of the impact of ART on all health dimensions since the treatment can have the expected benefits as well as unintended negative consequences. We conducted semi-structured interviews with 24 adult HIV clients (19 women and 5 men) in Uganda who had been on ART for at least six months. A grounded approach and content analysis were used to explore the effects of having HIV and undergoing ART on household continuity, social engagement, experience of support and stigma, and children's school attendance. Most of the participants reported loss of a spouse/partner and household discontinuity (e.g. having to move in with extended family) because of HIV, and this was largely unchanged after being on ART. While experiences of HIV stigma and social disengagement were common after an HIV diagnosis, most participants reported improved social interaction after having commenced ART, which for some was tied to economic productivity. Many of the participants' children who had stopped going to school were able to return after the parent was on ART. HIV care and ART, with related improvements in clients' physical and work-related functioning, together with family support, helped to reverse some of the deleterious effects of having HIV. Nonetheless, support that augments healthcare is needed to help individuals provide for themselves and their families, both socially and economically.

http://www.rand.org/pubs/external_publications/EP20110082.html

EP-201100-83

Depression and Medication Adherence in the Treatment of Chronic Diseases in the United States: A Meta-Analysis. Jerry Grenard, Brett A. Munjas, John L. Adams, Marika Suttorp, Margaret Maglione, Elizabeth A. McGlynn, Walid F. Gellad. 2011

OBJECTIVE: To conduct a meta-analysis of the association between depression and medication adherence among patients with chronic diseases. Poor medication adherence may result in worse outcomes and higher costs than if patients fully adhere to their medication regimens. DATA SOURCES: We searched the PubMed and PsycINFO databases, conducted forward searches for articles that cited major review articles, and examined the reference lists of relevant articles. STUDY ELIGIBILITY CRITERIA, PARTICIPANTS, AND INTERVENTIONS: We included studies on adults in the United States that reported bivariate relationships between depression and medication adherence. We excluded studies on special populations (e.g., substance abusers) that were not representative of the general adult population with chronic diseases, studies on certain diseases (e.g., HIV) that required special adherence protocols, and studies on interventions for medication adherence. STUDY APPRAISAL AND SYNTHESIS METHODS: Data abstracted included the study population, the protocol, measures of depression and adherence, and the quantitative association between depression and medication adherence. Synthesis of the data followed established statistical procedures for meta-analysis. RESULTS. The estimated odds of a depressed patient being non-adherent are 1.76 times the odds of a non-depressed patient, across 31 studies and 18,245 participants. The association was similar across disease types but was not as strong among studies that used pharmacy records compared to self-report and electronic cap measures. LIMITATIONS: The meta-analysis results are correlations limiting causal inferences, and there is some heterogeneity among the studies in participant characteristics, diseases studied, and methods used. CONCLUSIONS: This analysis provides evidence that depression is associated with poor adherence to medication across a range of chronic diseases, and we find a new potential effect of adherence measurement type on this relationship. Although this study cannot assess causality, it supports the importance that must be placed on depression in studies that assess adherence and attempt to improve it.

http://www.rand.org/pubs/external_publications/EP20110083.html

EP-201100-84

Knowledge and Intention to Participate in Cervical Cancer Screening After the Human Papillomavirus Vaccine. Rebecca Anhang Price, Jill Koshiol, Sarah Kobrin, Jasmin A. Tiro. 2011

BACKGROUND: If women who receive the human papillomavirus (HPV) vaccine are unduly reassured about the cancer prevention benefits of vaccination, they may choose not to participate in screening, thereby increasing their risk for cervical cancer. This study assesses adult women's knowledge of the need to continue cervical cancer screening after HPV vaccination, describes Pap test intentions of vaccinated young adult women, and evaluates whether knowledge and intentions differ across groups at greatest risk for cervical cancer. METHODS: Data were from the 2008 Health Information National Trends Survey (HINTS) and the 2008 National Health Interview Survey (NHIS), which initiated data collection approximately 18 months after the first FDA approval of an HPV vaccine. We calculated associations between independent variables and the outcomes using chi-square tests. RESULTS: Of 1586 female HINTS respondents ages 18 through 74, 95.6% knew that HPV-vaccinated women should continue to receive Pap tests. This knowledge did not vary significantly by race/ethnicity, education, income, or healthcare access. Among 1101 female NHIS respondents ages 18–26 who had ever received a Pap test, the proportion (12.7%; n = 139) who reported receipt of the HPV vaccine were more likely than those not vaccinated to plan to receive a Pap test within three years (98.1% vs. 92.5%, p < 0.001). CONCLUSIONS: US adult women possess high knowledge and intention to participate in Pap testing after HPV vaccination. The vast majority of young adult women who received the HPV vaccine within its first two years on the market intend to participate in cervical cancer screening in the near future. Future studies are needed to examine whether those vaccinated in adolescence will become aware of, and adhere to, screening guidelines as they become eligible.

http://www.rand.org/pubs/external_publications/EP20110084.html

EP-201100-85

The Association of Activity Level, Parent Mental Distress, and Parental Involvement and Monitoring with Unintentional Injury Risk in Fifth Graders. David C. Schwebel, Marc N. Elliott, Michael Windle, Sharon P. Cooper, Mark A. Schuster. 2011

OBJECTIVE: Extend findings with young children by examining the strength of association of activity level, parent mental distress, and parental involvement and monitoring with fifth graders' unintentional injuries. METHODS: Ordinal logistic regression models were used to predict unintentional injury frequency among 4745 fifth-graders. Examined predictors included demographics, parent reports of mental distress, temperamental activity level (tendency to be fidgety, restless, and constantly in motion), and parental involvement and monitoring in adolescents' lives. RESULTS: Higher levels of both activity level and parent mental distress predicted more frequent injuries. CONCLUSIONS: As has been found with younger children, unintentional injuries in fifth graders are associated with both parent and child characteristics. The result is discussed in the context of adolescent development. Implications include those for injury prevention (multi-dimensional prevention strategies that incorporate environmental modifications as well as training of youth and parents) and future research (study of potential mechanisms behind injury risk behavior via longitudinal and experimental research; study of injury risk during this phase of child development).

http://www.rand.org/pubs/external_publications/EP20110085.html

EP-201100-86

How Do Consumer-Directed Health Plans Affect Vulnerable Populations?. Amelia M. Haviland, Neeraj Sood, Roland McDevitt. 2011

We use health care claims data from 59 large employers to estimate how consumer-directed health plans (CDHPs)--plans that combine a high deductible with personal accounts--affect health care costs and the use of preventive services by

vulnerable populations. The vulnerable populations studied are those that will have increased access to health insurance under health care reform: families with high health care needs and low income families. A difference-in-difference framework is used with costs and use available for a full year before and after enrolling in a CDHP and for controls. Our key finding is that in almost all cases, CDHP benefit designs affect lower income populations and the chronically ill to the same extent as non-vulnerable populations. These effects include significant reductions in overall spending that increase with the level of the deductible and greater reductions for high deductible plans when paired with health savings accounts (HSAs) in comparison to health reimbursement arrangements (HRAs). However, enrollment in CDHPs also leads to reductions in care that is considered beneficial for all groups, and this may have greater health consequences for lower income and chronically ill people than for others.

http://www.rand.org/pubs/external_publications/EP20110086.html

EP-201100-87

Development Quality Criteria to Evaluate Nontherapeutic Studies of Incidence, Prevalence, or Risk Factors of Chronic Diseases: Pilot Study of New Checklists. Robert L. Kane, Margaret Maglione, David Moher, Karen A. Robinson. 2011

OBJECTIVE: To develop two checklists for the quality of observational studies of incidence or risk factors of diseases. STUDY DESIGN AND SETTING: Initial development of the checklists was based on a systematic literature review. The checklists were refined after pilot trials of validity and reliability were conducted by seven experts, who tested the checklists on 10 articles. RESULTS: The checklist for studies of incidence or prevalence of chronic disease had six criteria for external validity and five for internal validity. The checklist for risk factor studies had six criteria for external validity, 13 criteria for internal validity, and two aspects of causality. A Microsoft Access database produced automated standardized reports about external and internal validities. Pilot testing demonstrated face and content validities and discrimination of reporting vs. methodological qualities. Interrater agreement was poor. The experts suggested future reliability testing of the checklists in systematic reviews with preplanned protocols, a priori consensus about research-specific quality criteria, and training of the reviewers. CONCLUSION: We propose transparent and standardized quality assessment criteria of observational studies using the developed checklists. Future testing of the checklists in systematic reviews is necessary to develop reliable tools that can be used with confidence.

http://www.rand.org/pubs/external_publications/EP20110087.html

EP-201100-88

Using Information Mining of the Medical Literature to Improve Drug Safety. Kanaka Shetty, Siddhartha Dalal. 2011

OBJECTIVE: Prescription drugs can be associated with adverse effects (AEs) that are unrecognized despite evidence in the medical literature, as shown by rofecoxib's late recall in 2004. We assessed whether applying information mining to PubMed could reveal major drug-AE associations if articles testing whether drugs cause AEs are over-represented in the literature. DESIGN: MEDLINE citations published between 1949 and September 2009 were retrieved if they mentioned one of 38 drugs and one of 55 AEs. A statistical document classifier (using MeSH index terms) was constructed to remove irrelevant articles unlikely to test whether a drug caused an AE. The remaining relevant articles were analyzed using a disproportionality analysis that identified drug-AE associations (signals of disproportionate reporting) using step-up procedures developed to control the familywise type I error rate. MEASUREMENTS: Sensitivity and positive predictive value (PPV) for empirical drug-AE associations as judged against drug-AE associations subject to FDA warnings. RESULTS: In testing, the statistical document classifier identified relevant articles with 81% sensitivity and 87% PPV. Using data filtered by the statistical document classifier, base-case models

showed 64.9% sensitivity and 42.4% PPV for detecting FDA warnings. Base-case models discovered 54% of all detected FDA warnings using literature published before warnings. For example, the rofecoxib-heart disease association was evident using literature published before 2002. Analyses incorporating literature mentioning AEs common to the drug class of interest yielded 71.4% sensitivity and 40.7% PPV. CONCLUSIONS: Results from large-scale literature retrieval and analysis (literature mining) compared favorably with and could complement current drug safety methods.

http://www.rand.org/pubs/external_publications/EP20110088.html

EP-201100-89

Preventing Pressure Ulcers in Hospitals: A Systematic Review of Nurse-Focused Quality Improvement Interventions. Lynn Soban, Susanne Hempel, Brett A. Munjas, Lisa V. Rubenstein. 2011

BACKGROUND: A systematic review of the literature on nurse-focused interventions conducted in the hospital setting informs the evidence base for implementation of pressure ulcer (PU) prevention programs. Despite the availability of published guidelines, there is little evidence about which interventions can be successfully integrated into routine care through quality improvement (QI). The two previous literature syntheses on PU prevention have included articles from multiple settings but have not focused specifically on QI. METHODS: A search of six electronic databases for publications from January 1990 to September 2009 was conducted. Trial registries and bibliographies of retrieved studies and reviews, and Internet sites of funding agencies were also searched. Using standardized forms, two independent reviewers screened publications for eligibility into the sample; data were abstracted and study quality was assessed for those that passed screening. FINDINGS: Thirty-nine studies met the inclusion criteria. Most of them used a before-and-after study design in a single site. Intervention strategies included PU-specific changes in combination with educational and/or QI strategies. Most studies reported patient outcome measures, while fewer reported nursing process of care measures. For nearly all the studies, the authors concluded that the intervention had a positive effect. The pooled risk difference for developing PUs was –.07 (95% confidence interval [CI]: –0.0976, –0.0418) comparing the pre- and postintervention status. CONCLUSION: Future research can build the evidence base for implementation through an increased emphasis on understanding the mechanisms by which improved outcomes are achieved and describing the conditions under which specific intervention strategies are likely to succeed or fail.

http://www.rand.org/pubs/external_publications/EP20110089.html

EP-201100-90

Accountable Care Organizations and Community Empowerment. Benjamin Springgate, Robert H. Brook. 2011

This commentary argues that involving communities in the formation of accountable care organizations would be a dramatic step toward more patient-centered care.

http://www.rand.org/pubs/external_publications/EP20110090.html

EP-201100-91

The Current State of Quality of Care Measurement in the California Department of Corrections and Rehabilitation. Stephanie S. Teleki, Cheryl L. Damberg, Rebecca Shaw, Liisa Hiatt, Steven M. Asch. 2011

The quality of health care in prisons is lacking in many states. In particular, the California Department of Corrections and Rehabilitation (CDCR) is in the midst of an extreme legal remedy to address problems related to access to and quality of care; it now operates under the direction of a federally appointed receiver for medical care. To understand the current state of access and quality measurement and to assess strengths and weaknesses of current activities, the RAND Corporation conducted a series of interviews and site visits in the CDCR and related offices as well as document reviews (December 2008 to February

2009). Findings supported RAND's larger project goals to identify measures for use in a sustainable quality measurement system.

http://www.rand.org/pubs/external_publications/EP20110091.html

EP-201100-92

Factors Associated with Closures of Emergency Departments in the United States. Renee Y. Hsia, Arthur L. Kellermann, Yu-Chu Shen. 2011

CONTEXT: Between 1998 and 2008, the number of hospital-based emergency departments (EDs) in the United States declined, while the number of ED visits increased, particularly visits by patients who were publicly insured and uninsured. Little is known about the hospital, community, and market factors associated with ED closures. Federal law requiring EDs to treat all in need regardless of a patient's ability to pay may make EDs more vulnerable to the market forces that govern US health care. OBJECTIVE: To determine hospital, community, and market factors associated with ED closures. DESIGN: Emergency department and hospital organizational information from 1990 through 2009 was acquired from the American Hospital Association (AHA) Annual Surveys (annual response rates ranging from 84%-92%) and merged with hospital financial and payer mix information available through 2007 from Medicare hospital cost reports. We evaluated 3 sets of risk factors: hospital characteristics (safety net [as defined by hospitals caring for more than double their Medicaid share of discharges compared with other hospitals within a 15-mile radius], ownership, teaching status, system membership, ED size, case mix), county population demographics (race, poverty, uninsurance, elderly), and market factors (ownership mix, profit margin, location in a competitive market, presence of other EDs). SETTING: All general, acute, nonrural, short-stay hospitals in the United States with an operating ED anytime from 1990-2009. MAIN OUTCOME MEASURE: Closure of an ED during the study period. RESULTS: From 1990 to 2009, the number of hospitals with EDs in nonrural areas declined from 2446 to 1779, with 1041 EDs closing and 374 hospitals opening EDs. Based on analysis of 2814 urban acute-care hospitals, constituting 36 335 hospital-year observations over an 18-year study interval (1990-2007), for-profit hospitals and those with low profit margins were more likely to close than their counterparts (cumulative hazard rate based on bivariate model, 26% vs 16%; hazard ratio [HR], 1.8; 95% confidence interval [CI], 1.5-2.1, and 36% vs 18%; HR, 1.9; 95% CI, 1.6-2.3, respectively). Hospitals in more competitive markets had a significantly higher risk of closing their EDs (34% vs 17%; HR, 1.3; 95% CI, 1.1-1.6), as did safety-net hospitals (10% vs 6%; HR, 1.4; 95% CI, 1.1-1.7) and those serving a higher share of populations in poverty (37% vs 31%; HR, 1.4; 95% CI, 1.1-1.7). CONCLUSION: From 1990 to 2009, the number of hospital EDs in nonrural areas declined by 27%, with for-profit ownership, location in a competitive market, safety-net status, and low profit margin associated with increased risk of ED closure.

http://www.rand.org/pubs/external_publications/EP20110092.html

EP-201100-93

The Economic Costs of Reducing Greenhouse Gas Emissions Under a U.S. National Renewable Electricity Mandate. Keith Crane, Aimee E. Curtright, David S. Ortiz, Constantine Samaras, Nicholas Burger. 2011

The electricity sector is the largest source of greenhouse gas emissions (GHGs) in the U.S. Many states have passed and Congress has considered Renewable Portfolio Standards (RPS), mandates that specific percentages of electricity be generated from renewable resources. We perform a technical and economic assessment and estimate the economic costs and net GHG reductions from a national 25 percent RPS by 2025 relative to coal-based electricity. This policy would reduce GHG emissions by about 670 million metric tons per year, 11 percent of 2008 U.S. emissions. The first 100 million metric tons could be abated for less than $36/metric ton. However, marginal costs climb to $50 for 300 million metric tons and to as much as $70/metric ton to fulfill the

RPS. The total economic costs of such a policy are about $35 billion annually. We also examine the cost sensitivity to favorable and unfavorable technology development assumptions. We find that a 25 percent RPS would likely be an economically efficient method for utilities to substantially reduce GHG emissions only under the favorable scenario. These estimates can be compared with other approaches, including increased R&D funding for renewables or deployment of efficiency and/or other low-carbon generation technologies.

http://www.rand.org/pubs/external_publications/EP20110093.html

EP-201100-94

Changes in Diarrheal Disease and Treatment Among Brazilian Children from 1986 to 1996. Narayan Sastry, Sarah Burgard. 2011

We examined changes in diarrhea prevalence and treatment in Brazil between 1986 and 1996. Over this 10-year period there was a small decline in diarrhea prevalence but treatment with oral rehydration therapy (ORT) increased greatly. Deaths due to dehydration were thus averted, although the costly burden of morbidity remained high. The decline in diarrhea prevalence was largely due to changes in the effects of several key covariates, such as breastfeeding, with only a modest role played by socioeconomic change, infrastructure improvements, and other behavioral factors. ORT treatment of diarrhea was essentially unrelated to child and family characteristics, suggesting that the large increase was due to the success of public health efforts to promote its use widely. Our results suggest that the most effective policies for reducing diarrhea prevalence are likely to be further increases in education and the promotion of breastfeeding. Persistent disparities in diarrhea prevalence mean that policies to prevent the disease should be targeted at disadvantaged socioeconomic groups.

http://www.rand.org/pubs/external_publications/EP20110094.html

EP-201100-95

Safety of Probiotics to Reduce Risk and Prevent or Treat Disease. Susanne Hempel, Sydne Newberry, Zhen Wang, Marika Suttorp, Breanne Johnsen, Roberta M. Shanman, Ning Fu, Elizabeth Roth, Joanna Polak, Aneesa Motala, Tanja Perry, Paul G. Shekelle. 2011

OBJECTIVES: To catalog what is known about the safety of interventions containing Lactobacillus, Bifidobacterium, Saccharomyces, Streptococcus, Enterococcus, and/or Bacillus strains used as probiotic agents in research to reduce the risk of, prevent, or treat disease. DATA SOURCES: We searched 12 electronic databases, references of included studies, and pertinent reviews for studies addressing the safety of probiotics from database inception to August 2010 without language restriction. REVIEW METHODS: We identified intervention studies on probiotics that reported the presence or absence of adverse health outcomes in human participants, without restriction by study design, participant type, or clinical field. We investigated the quantity, quality, and nature of adverse events. RESULTS: The search identified 11,977 publications, of which 622 studies were included in the review. In 235 studies, only nonspecific safety statements were made ("well tolerated"); the remaining 387 studies reported the presence or absence of specific adverse events. Interventions and adverse events were poorly documented. A number of case studies described fungemia and some bacteremia potentially associated with administered probiotic organisms. Controlled trials did not monitor routinely for such infections and primarily reported on gastrointestinal adverse events. Based on reported adverse events, randomized controlled trials (RCTs) showed no statistically significantly increased relative risk (RR) of the overall number of experienced adverse events (RR 1.00; 95% confidence interval [CI]: 0.93, 1.07, p=0.999); gastrointestinal; infections; or other adverse events, including serious adverse events (RR 1.06; 95% CI: 0.97, 1.16; p=0.201), associated with short-term probiotic use compared to control group participants; long-term effects are largely unknown. Existing studies primarily examined Lactobacillus alone or in combination with other genera, often Bifidobacterium. Few studies directly compared the safety among different in-

tervention or participant characteristics. Indirect comparisons indicated that effects of delivery vehicles (e.g., yogurt, dairy) should be investigated further. Case studies suggested that participants with compromised health are most likely to experience adverse events associated with probiotics. However, RCTs in medium-risk and critically ill participants did not report a statistically significantly increased risk of adverse events compared to control group participants. CONCLUSIONS: There is a lack of assessment and systematic reporting of adverse events in probiotic intervention studies, and interventions are poorly documented. The available evidence in RCTs does not indicate an increased risk; however, rare adverse events are difficult to assess, and despite the substantial number of publications, the current literature is not well equipped to answer questions on the safety of probiotic interventions with confidence.

http://www.rand.org/pubs/external_publications/EP20110095.html

EP-201100-96

ExpertLens: A System for Eliciting Opinions from a Large Pool of Non-Collocated Experts with Diverse Knowledge. Siddhartha Dalal, Dmitry Khodyakov, Susan G. Straus, John L. Adams. 2011

The complexity of policy decision-making raises the need to elicit opinions from large and heterogeneous groups of stakeholders with broad and diverse sets of expertise. Existing options for elicitation include small face-to-face panels of experts by using the Nominal Group Technique (NGT), large Delphi panels whose members do not interact with each other face-to-face, and crowdsourcing, which involves an open call for input issued to a large community of people. In an attempt to close the gap between the practical needs of policy makers and the methodological challenges associated with eliciting opinions of large, diverse, and distributed groups, we have developed a new online elicitation system and methodology called ExpertLens. By optimizing the direct interactions of NGT with the larger number of Delphi participants and the wisdom of "selected crowds," our approach is designed to save on the costs associated with traditional expert panels, while increasing accuracy in elicitation by reducing the potential for group process losses that can occur in large, diverse, and non-collocated panels whose members interact via asynchronous online discussion boards. The ExpertLens approach is iterative, does not require participants to develop consensus, and determines what the group "thinks" by statistically analyzing data collected in all rounds of the elicitation. This paper describes the ExpertLens system and methodology, briefly discusses recent ExpertLens trials, provides conceptual arguments for why it is an appropriate model for eliciting expert opinions, illustrates its main components and analytics by using an infrastructure investment example, and discusses a research agenda for testing the underlying tenets of the ExpertLens approach.

http://www.rand.org/pubs/external_publications/EP20110096.html

EP-201100-97

Racial and Ethnic Disparities in Uptake and Location of Vaccination for 2009-H1n1 and Seasonal Influenza. Lori Uscher-Pines, Katherine M. Harris. 2011

To learn more about racial and ethnic disparities in influenza vaccination during the 2009-H1N1 pandemic, we examined nationally representative survey data of US adults. We found disparities in 2009-H1N1 vaccine uptake between Blacks and Whites (13.8% vs 20.4%); Whites and Hispanics had similar 2009-H1N1 vaccination rates. Physician offices were the dominant location for 2009-H1N1 and seasonal influenza vaccinations, especially among minorities. Our results highlight the need for a better understanding of how communication methods and vaccine distribution strategies affect vaccine uptake within minority communities.

http://www.rand.org/pubs/external_publications/EP20110097.html

EP-201100-98

How Does Context Affect Interventions to Improve Patient Safety? An Assessment of Evidence from Studies of Five Patient Safety Practices and

Proposals for Research. John Ovretveit, Paul G. Shekelle, Sydney Dy, Susanne Hempel, Peter J. Pronovost, Lisa V. Rubenstein, Stephanie Taylor, Robbie Foy. 2011

BACKGROUND: Logic and experience suggest that it is easier in some situations than in others to change behaviour and organisation to improve patient safety. Knowing which 'context factors' help and hinder implementation of different changes would help implementers, as well as managers, policy makers, regulators and purchasers of healthcare. It could help to judge the likely success of possible improvements, given the conditions that they have, and to decide which of these conditions could be modified to make implementation more effective. METHODS: The study presented in this paper examined research to discover any evidence reported about whether or how context factors influence the effectiveness of five patient safety interventions. RESULTS: The review found that, for these five diverse interventions, there was little strong evidence of the influence of different context factors. However, the research was not designed to investigate context influence. CONCLUSIONS: The paper suggests that significant gaps in research exist and makes proposals for future research better to inform decision-making.

http://www.rand.org/pubs/external_publications/EP20110098.html

EP-201100-99

Using a Cross-Study Design to Assess the Efficacy of Motivational Enhancement Therapy-Cognitive Behavioral Therapy 5 (MET/CBT5) in Treating Adolescents with Cannabis-Related Disorders. Rajeev Ramchand, Marika Suttorp, Katherine M. Harris, Andrew R. Morral. 2011

OBJECTIVE: To evaluate how adolescents with marijuana problems who received a research-based treatment (five sessions of motivational enhancement therapy plus cognitive behavioral therapy [MET/CBT5]) in an experimental setting would have fared had they received exemplary community-based outpatient treatment. METHOD: Twelve-month outcomes representing six domains (substance use problems, substance use frequency, emotional problems, illegal activities, recovery, and institutionalization) were assessed for youth who received MET/CBT5 in the Cannabis Youth Treatment study and youth who received outpatient treatment from one of three community-based programs selected for evidence of efficacy. Groups were matched on pretreatment characteristics using a propensity score weighting strategy. RESULTS: Youth who received MET/CBT5 exhibited greater reductions in substance use frequency, substance use problems, and illegal behaviors 12 months after treatment entry than had they entered the community based outpatient programs. Results showed no evidence that youth who received MET/CBT5 would have fared better with respect to emotional problems, the likelihood of being institutionalized, or achieving a "recovery" status at 12 months had they received community-based treatments. CONCLUSIONS: The community-based treatments used in this study have not been assessed relative to "treatment as usual" but were selected as "exemplary" models of adolescent treatment. There is no evidence in this study that these exemplary programs yielded superior 12-month outcomes for the treatment of adolescents with marijuana problems; youth receiving MET/CBT5 experienced greater reductions in substance use and illegal activities. Thus, MET/CBT5 may be a promising treatment for community-based providers to adopt to treat these clients.

http://www.rand.org/pubs/external_publications/EP20110099.html

EP-201111-02

Higher Education Collaborations:: Implications for Leadership, Management and Governance: Final Report. Ruth Levitt, Stephanie Diepeveen. 2011

This report jointly produced by RAND Europe and the Leadership Foundation for Higher Education examines and analyses collaborative activity between UK higher education institutions (HEIs) and organisations external to the higher education sector. HEIs have been developing collaborative relationships for many generations, and the

scale and range of these activities have increased significantly in recent years. The findings from this report are based on a literature review, seven selected UK case studies and one European case study. Report findings present some clear pointers to the effective leadership of collaborations. Findings provide insight on the purpose of leadership, and how leadership can be exerted and distributed throughout a collaboration; the skills, roles and communication required for effective relationships; governance structures; and the importance of conflict management and conflict resolution. It concludes with recommendations for HEIs when embarking upon collaborative activity.

http://www.rand.org/pubs/external_publications/EP20111102.html

EP-201111-03

Conducting Online Expert Panels: A Feasibility and Experimental Replicability Study. Dmitry Khodyakov, Susanne Hempel, Lisa V. Rubenstein, Paul G. Shekelle, Robbie Foy, Siddhartha Dalal. 2011

BACKGROUND: This paper has two goals. First, we explore the feasibility of conducting online expert panels to facilitate consensus finding among a large number of geographically distributed stakeholders. Second, we test the replicability of panel findings across four panels of different size. METHOD: We engaged 119 panelists in an iterative process to identify definitional features of Continuous Quality Improvement (CQI). We conducted four parallel online panels of different size through three one-week phases by using the RAND's ExpertLens process. In Phase I, participants rated potentially definitional CQI features. In Phase II, they discussed rating results online, using asynchronous, anonymous discussion boards. In Phase III, panelists re-rated Phase I features and reported on their experiences as participants. RESULTS: 66% of invited experts participated in all three phases. 62% of Phase I participants contributed to Phase II discussions and 87% of them completed Phase III. Panel disagreement, measured by the mean absolute deviation from the median (MAD-M), decreased after group feedback and discussion in 36 out of 43 judgments about CQI features. Agreement between the four panels after Phase III was fair (four-way kappa = 0.36); they agreed on the status of five out of eleven CQI features. Results of the post-completion survey suggest that participants were generally satisfied with the online process. Compared to participants in smaller panels, those in larger panels were more likely to agree that they had debated each others' view points. CONCLUSION: It is feasible to conduct online expert panels intended to facilitate consensus finding among geographically distributed participants. The online approach may be practical for engaging large and diverse groups of stakeholders around a range of health services research topics and can help conduct multiple parallel panels to test for the reproducibility of panel conclusions.

http://www.rand.org/pubs/external_publications/EP20111103.html

MONOGRAPHS

MG-1009-OSD

China and India, 2025: A Comparative Assessment. Charles Wolf, Jr., Siddhartha Dalal, Julie DaVanzo, Eric V. Larson, Alisher Akhmedjonov, Harun Dogo, Meilinda Huang, Silvia Montoya. 2011

China and India, the world's two most populous countries, will exercise increasing influence in international affairs in the coming decades, and each country's role on the world stage will be affected by the progress that it makes and by the competition and cooperation that develop between them. This monograph focuses on the progress China and India seem likely to achieve from 2010 through 2025 in four domains: demography, macroeconomics, science and technology, and defense spending and procurement. In each domain, the authors seek answers to these questions: Who is ahead? By how much? and Why? The authors find that India has distinct advantages over China in terms of demographics; that

the two countries are surprisingly close in terms of forecasted economic growth, although China's overall economic output is likely to remain significantly higher than India's; and that, for both science and technology and defense spending and procurement, China's current substantial margins over India are likely to rise but by amounts that will vary widely depending on several alternative scenarios. The monograph concludes with implications for policy and for further research.

http://www.rand.org/pubs/monographs/MG1009.html

MG-1033-AUS

Australia's Submarine Design Capabilities and Capacities: Challenges and Options for the Future Submarine. John Birkler, John F. Schank, Jessie Riposo, Mark V. Arena, Robert W. Button, Paul DeLuca, James Dullea, James G. Kallimani, John Leadmon, Gordon T. Lee, Brian McInnis, Robert Murphy, Joel B. Predd, Raymond H. Williams. 2011

In the mid-2020s, the Royal Australian Navy plans to retire the oldest of its Collins-class submarines. Australia intends to acquire 12 new submarines to replace the Collins-class vessels. The Australian Department of Defence asked RAND to assess the domestic engineering and design skills that industry and the government will need to design the vessels, the skills that they currently possess, and ways to fill any gaps between the two. Although Australian industry has numerous technical draftsmen and engineers, few have experience in submarine design, and their availability may be limited due to demands on their time from other programs. The researchers concluded that (1) using this inexperienced domestic workforce instead of a fully experienced one to design the new submarine would lengthen the time it would take to complete the design by three to four years and would increase the costs by about 20 percent, (2) adding submarine-experienced personnel from abroad would shorten the schedule and lessen the cost increase, and (3) taking 20 years rather than 15 years to design the submarine would reduce the peak demand for designers and draftsmen.

http://www.rand.org/pubs/monographs/MG1033.html

MG-1045-OSD

Analysis and Recommendations on the Company-Grade Officer Shortfall in the Reserve Components of the U.S. Army. Catherine H. Augustine, James Hosek, Ian P. Cook, James Coley. 2011

The U.S. Army National Guard (ARNG) and the U.S. Army Reserve (USAR) both have lower-than-authorized inventories of company-grade officers. Army Reserve Components (RCs) have higher-than-authorized inventories of lieutenants but lower-than-authorized inventories of captains. This monograph addresses the shortfall of captains, explores and confirms the magnitude of the captain shortfall in the Army RCs, identifies recommendations to address the captain shortfall, assesses whether the concept of a National Guard academy is a feasible partial solution to the shortfall, and assesses the impact of requiring Officer Candidate School entrants to hold a four-year degree. Aggressive measures will be needed to dramatically improve the fill rates in both RCs. The Army RCs could achieve a 100-percent captain fill rate in five to ten years if they can sustain recent low loss rates, increase officer accession rates, and promote lieutenants to captain more quickly. The ARNG could achieve a 100-percent captain fill rate before a new National Guard academy will have produced captains. Finally, the captain shortfall is migrating up to the rank of major. Understanding the specific requirements of the vacant captain and major positions could provide additional guidance on reclassifying positions, direct commissioning at higher ranks, or even eliminating the authorization.

http://www.rand.org/pubs/monographs/MG1045.html

MG-1049-RC

Highway Infrastructure and the Economy: Implications for Federal Policy. Howard J. Shatz, Karin E. Kitchens, Sandra Rosenbloom, Martin Wachs. 2011

To inform debate on a new transportation bill

being considered, the authors review the literature on the economic outcomes of highway infrastructure spending, which constitutes the largest share of federal spending on transportation infrastructure. They first highlight the connections between highway spending and the economy and then analyze the literature to trace the effects of highway infrastructure on productivity, output, and employment. Then, they conduct a formal quantitative meta-analysis to discern more clearly why the literature has produced its current findings about infrastructure and the economy. After discussing these findings, they consider the implications for federal highway policy and for future research.

http://www.rand.org/pubs/monographs/MG1049.html

MG-1051-FF

Continuing Challenges and Potential for Collaborative Approaches to Education Reform. Susan J. Bodilly, Rita Karam, Nate Orr. 2011

The Ford Foundation began the Collaborating for Education Reform Initiative (CERI) in 1997–1998 by issuing grants and providing grantees with funds, guidance, and technical assistance to develop collaboratives and carry out activities to improve teaching and learning. CERI's collaborative activities were directed at three possible community groups: the district, a feeder pattern or cluster of schools in a district, and the larger community, such as parents and voters. After restructuring, the foundation ceased giving technical assistance and laid down a new set of goals for grantees: Develop interorganizational linkages to become a well-functioning collaborative and achieve financial independence; develop and implement plans for improving the quality of teaching and learning; develop and implement plans for systemic changes in policy to support improved teaching and learning; and develop a unique voice for underserved communities to air concerns about educational services. RAND Corporation researchers assessed (1) whether grantees showed progress toward the desired outcomes, (2) what lessons came out of the grantees' experiences, and (3) whether the foundation created financially sustainable collaboratives to promote education improvement. The researchers found that the restructured effort yielded functioning collaboratives with varying abilities to meet their goals and that those abilities were influenced by such factors as strong leadership and a positive funding environment. They also found that collaboratives can grow out of deliberate foundation efforts, though the process is not straightforward and their financial sustainability in a bad economy is uncertain.

http://www.rand.org/pubs/monographs/MG1051/

MG-1052-OSD

The Next Supreme Leader: Succession in the Islamic Republic of Iran. Alireza Nader, David E. Thaler, S. R. Bohandy. 2011

As the commander in chief and highest political authority in Iran, the current Supreme Leader, Ayatollah Ali Khamenei, has played a critical role in the direction of the Islamic Republic of Iran. This has never been more true than during the tumultuous 2009 presidential elections, the outcome of which was determined by Khamenei's decisive support of President Mahmoud Ahmadinejad. Only two men have held the position of Supreme Leader since the Islamic Republic of Iran was established in 1979: Khamenei and his predecessor, Ayatollah Ruhollah Khomeini. As Khamenei ages and rumors of his ill health intensify, U.S. policymakers and analysts need to consider the various scenarios for succession. The eventual outcome—what the office of the Supreme Leader looks like in Khamenei's wake—will determine the Islamic Republic's direction. The research documented in this monograph identifies three key factors that will shape succession of the next Supreme Leader and outlines five alternative scenarios for the post-Khamenei era. For each of the factors, it provides a set of indicators that observers can use to assess the most important trends. It situates all of this within the context of the June 2009 election. Because the context in which succession would occur becomes more uncertain the further into the future one looks, the authors focus on the near term—i.e., a succession that would take

place within the next two to three years. However, the authors also speculate about the changes that are likely to ensue in the longer term if Khamenei remains Supreme Leader for the next ten years or more. In light of the 2009 election, a status quo scenario seems most likely in the near term, and an absolutist scenario is a close second. The likelihood of longer-term succession scenarios is uncertain.

http://www.rand.org/pubs/monographs/MG1052/

MG-1057-OSD

Effects of Bonuses on Active Component Reenlistment Versus Prior Service Enlistment in the Selected Reserve. James Hosek, Trey Miller. 2011

The reserves are increasingly being called on to take part in the nation's military operations. This has brought new importance to reserve readiness, but at times during 2004 to 2009 the Army National Guard, the Army Reserve, and the Marine Corps Reserve experienced manning shortfalls that were due in part to an inadequate inflow of recruits. A major source of reserve manpower is the flow of enlisted members from an active component (AC) to a reserve component (RC). This volume examines how effective RC bonuses are in attracting prior service members and, in doing so, explores how AC and RC bonuses interact to affect both AC reenlistment and prior service enlistment in the Selected Reserve. It presents a theoretical model of a service member's decision to stay in the AC, join the RC, or become a civilian; offers empirical estimates of the effect of bonuses, deployment, and other factors on this decision; and develops models of bonus setting based on these estimates. A key finding is that higher RC bonuses increase RC enlistment, but they also decrease AC reenlistment; likewise, higher AC bonuses increase AC reenlistment and decrease RC enlistment. These cross-effects are a result of rational supply behavior and cannot be eliminated, but awareness of them and coordination between AC and RC bonus setters can help ensure that bonus budgets are set appropriately and used efficiently.

http://www.rand.org/pubs/monographs/MG1057.html

MG-1066-A

Security Force Assistance in Afghanistan: Identifying Lessons for Future Efforts. Terrence K. Kelly, Nora Bensahel, Olga Oliker. 2011

Security force assistance (SFA) is a central pillar of the counterinsurgency campaign being waged by U.S. and coalition forces in Afghanistan. The outcome of the campaign hinges, in large measure, on the effectiveness of the assistance given to the Afghan National Army, Afghan National Police, and other security forces, assistance that the International Security Force must provide while fighting the insurgents. Yet senior U.S. military and civilian officials have posed many questions about the effectiveness of SFA in Afghanistan, and no empirically rigorous assessments exist to help answer these questions. This monograph analyzes SFA efforts in Afghanistan over time and documents U.S. and international approaches to building the Afghan National Security Forces from 2001 to 2009. Finally, it provides observations and recommendations that emerged from extensive fieldwork in Afghanistan in 2009 and their implications for the U.S Army.

http://www.rand.org/pubs/monographs/MG1066.html

MG-1068-RE

Life after Lisbon: Europe's Challenges to Promote Labour Force Participation and Reduce Income Inequality. Christian van Stolk, , , Stijn Hoorens, Philipp-Bastian Brutscher, Priscillia Hunt, Flavia Tsang, Barbara Janta. 2011

The aftermath of the economic crisis of 2008 has undone much of the progress on improving employment and growth in Europe over the last 20 years. Vulnerable groups in particular remain at risk of poverty and not being in employment and education, especially in light of trends that have shaped the labour market including changes in educational requirements and the changes in work. The insights from our analysis and review form a

useful input into developing European policy discussions. The review concludes that policy makers should focus more on enabling social policy that allows individuals to achieve their full productive potential and participate in the labour market as a complement to welfare approaches such as social insurance. Evidence from Nordic countries shows that the increased use of enabling social interventions can make an effective contribution to mitigating against social risks such as sustained poverty and long-term unemployment. Moreover, as the review highlights these targeted policies do not need to impact other macroeconomic outcomes or other groups.European action is important. Improving labour force market participation and addressing income inequality across Europe requires a concerted strategy to define the principles in employment and social policy and values and mechanisms that can facilitate effective policy coordination and exchange. It is obvious that Member States could learn from each other given the differences in income inequality and labour force participation rates in Europe. Further improvements also require better information on which particular policy responses are effective.

http://www.rand.org/pubs/monographs/MG1068/

MG-1071-NAVY

Finding Services for an Open Architecture: A Review of Existing Applications and Programs in PEO C4I. Isaac R. Porche III, James Dryden, Kathryn Connor, Bradley Wilson, Shawn McKay, Kate Giglio, Juan Montelibano. 2011

The U.S. Navy is moving toward an open architecture concept for its information technology systems. The Program Executive Office for Command, Control, Communications, Computers, and Intelligence (PEO C4I) is spearheading this effort. A review of Navy documentation on costs and requirements and a series of interviews with subject-matter experts from various Navy program offices supported a study intended to support PEO C4I in its initiative by proposing a set of ideal system characteristics and evaluating the utility and development and support costs of the available options. The study also examined challenges associated with uptake and use of service-oriented architecture, as well as the implications for enterprises endeavoring to pursue such systems. A desirable long-term goal would be for the Navy to support a collection of services or an overall shared architecture that can span a ship, the entire Navy, or joint forces. If PEO C4I can successfully integrate service-oriented architecture in its own functional area, it will be contributing to this vision.

http://www.rand.org/pubs/monographs/MG1071.html

MG-1072-A

New Tools and Metrics for Evaluating Army Distributed Learning. Susan G. Straus, Michael G. Shanley, Douglas Yeung, Jeff Rothenberg, Elizabeth D. Steiner, Kristin J. Leuschner. 2011

Distributed learning (DL) is a key element of the Army's training strategy, and the Army has ambitious goals for expanding the future use of DL and for changing how it is developed and delivered. Program-level evaluation of DL can play an essential role in accomplishing those goals and in identifying strategic directions for the overall program. This report describes a series of studies designed to develop and test new tools and metrics to assess training and to document the impact of Army DL courses at the program level. More specifically, the studies examined soldiers' experiences in DL and knowledge retention of DL material in training that had both DL and resident phases. The project also assessed the capabilities of Army information systems to support efficient data collection for DL evaluation. Results provide information about the current state of Army DL and point to the need for changes in policies and procedures to improve its effectiveness. These studies also demonstrate the feasibility of evaluating DL within the Army and suggest that a more comprehensive program of assessment, better supported by the Army's information systems, could provide major benefits to The Army DL Program.

http://www.rand.org/pubs/monographs/MG1072/

MG-1073-NAVY

Changing Aircraft Carrier Procurement Schedules: Effects That a Five-Year Procurement Cycle Would Have on Cost, Availability, and Shipyard Manpower and Workload. John F. Schank, James G. Kallimani, Jess Chandler, Mark V. Arena, Carter C. Price, Clifford A. Grammich. 2011

Nuclear-powered aircraft carriers are the largest, most capable, and most survivable ships in the U.S. Navy. In the mid-1990s, there were 15 aircraft carriers in the Navy fleet; today, there are 11. The Secretary of Defense recently announced plans to shift the Navy aircraft carrier acquisition program to extend the cycle for acquiring a new aircraft carrier from approximately every four years to five years. In the long run, this could have the effect of reducing the number of aircraft carriers to ten. Shifting from the 30-year shipbuilding plan (SBP) to a five-year authorization cycle for acquiring aircraft carriers should have almost no impact on force structure and the industrial base in the next decade. Beyond the early 2020s, however, the five-year plan results in an increasingly smaller aircraft carrier force structure and a lower probability of meeting goals for the number of deployed aircraft carriers. The five-year plan will have an impact on the total acquisition costs of CVN 79 and CVN 80 due to the effects of inflation. The five-year plan could have a larger effect on any subsequent desire to increase the number of aircraft carriers in the fleet. Although the number of aircraft carriers can be rather quickly reduced through early retirements, a construction cycle of at least four years, coupled with seven or more years between authorization and delivery, means that it can take decades to add an aircraft carrier to the fleet. Policymakers might wish to consider this inability to rapidly expand the aircraft carrier force more than any of the factors considered here.

http://www.rand.org/pubs/monographs/MG1073/

MG-1075-AF

Nuclear Deterrence in Europe: Russian Approaches to a New Environment and Implications for the United States. James T. Quinlivan, Olga Oliker. 2011

The United States and Russia no longer face each other as perpetual adversaries in a conflict of political ideology. However, as in the Cold War, Europe continues to be a key focus of possible contention between these powers, and, as in the Cold War, nuclear weapons have a role in how claimed interests might be defended within an overall deterrent framework. Through a variety of policies and actions—and most recently in a new military doctrine adopted in February 2010—Russia has indicated the types of situations that might cause it to resort to using nuclear weapons. This monograph examines the elements of Russia's emerging deterrent framework: Russia's statements of claimed interests, its force development and posture, its military doctrine and practice, major military exercises it has conducted, and, importantly, whether Russia's highest political authorities have endorsed these military doctrines and exercises. The authors discuss the implications of Russia's evolving deterrence doctrine for U.S. military operations in Europe, particularly for the U.S. Air Force.

http://www.rand.org/pubs/monographs/MG1075.html

MG-1076-AF

The Latin American Drug Trade: Scope, Dimensions, Impact, and Response. Peter Chalk. 2011

Transnational crime remains a particularly serious problem in Latin America, with most issues connected in some way to the drug trade. This book examines the scope and dimensions of Andean cocaine and heroin production; the main methods and land, air, and sea routes that are used to ship these narcotics between source, transit, and consumption countries; and the principal consequences that are associated with this particular manifestation of transnational crime. Addressing the problem of the Latin American drug trade has direct implications for the U.S. Air Force (USAF). In Colombia and, increasingly, Mexico, Washington is including counternarcotics support as an integral feature of its foreign internal

defense aid, and the USAF is already engaged in a number of initiatives in both countries. Although this assistance has borne some notable results, there are some specific measures that the USAF should consider in looking to further hone and adjust its counternarcotics effort in Latin America. These include augmenting aerial surveillance over the Pacific–Central American corridor; refining existing standard operating procedures and further institutionalizing joint mission statements and protocols regarding drug interdiction; reconsidering the policy of aerial fumigation of illegal crops; and ensuring adequate protection of existing counter–drug-access arrangements in Central America.

http://www.rand.org/pubs/monographs/MG1076/

MG-1078-A

Building Afghanistan's Security Forces in Wartime: The Soviet Experience. Olga Oliker. 2011

Security force assistance, specifically the development of Afghanistan's security forces, is a central pillar of the counterinsurgency campaign being waged by U.S. and coalition forces in Afghanistan. The outcome of the campaign hinges, in large measure, on the effectiveness of the assistance provided to the Afghan National Army, Afghan National Police, and other security forces. This report provides an overview of Soviet efforts to improve and facilitate the training and development of Afghan security forces, specifically, the Afghan military, police, and intelligence services. It covers the time period from 1920–1989, with specific focus on the period of the Soviet military presence in Afghanistan, from 1979–1989. To do so, it draws on Western, Soviet, and Russian historical sources and interviews in Kabul and Moscow with individuals involved on the Soviet side and on the Afghan side. It concludes with comparisons with and lessons for ongoing security force assistance in Afghanistan.

http://www.rand.org/pubs/monographs/MG1078.html

MG-1079-RS

Project Retrosight: Understanding the returns from cardiovascular and stroke research: The Policy Report. Steven Wooding, Stephen Hanney, Alexandra Pollitt, Martin Buxton, Jonathan Grant. 2011

This project explores the impacts arising from cardiovascular and stroke research funded 15–20 years ago and attempts to draw out aspects of the research, researcher or environment that are associated with high or low impact.The project is a case study-based review of 29 cardiovascular and stroke research grants, funded in Australia, Canada and UK between 1989 and 1993. The case studies focused on the individual grants but considered the development of the investigators and ideas involved in the research projects from initiation to the present day. Grants were selected through a stratified random selection approach that aimed to include both high- and low-impact grants. The key messages are as follows: 1) The cases reveal that a large and diverse range of impacts arose from the 29 grants studied. 2) There are variations between the impacts derived from basic biomedical and clinical research. 3) There is no correlation between knowledge production and wider impacts 4) The majority of economic impacts identified come from a minority of projects. 5) We identified factors that appear to be associated with high and low impact.This report presents the key observations of the study and an overview of the methods involved. It has been written for funders of biomedical and health research and health services, health researchers, and policy makers in those fields. It will also be of interest to those involved in research and impact evaluation.

http://www.rand.org/pubs/monographs/MG1079/

MG-1080-RE

Low fertility in Europe: Is there still reason to worry?. Stijn Hoorens, Jack Clift, Laura Staetsky, Barbara Janta, Stephanie Diepeveen, Molly Morgan Jones, Jonathan Grant. 2011

Many European governments have been concerned about falling fertility rates, because of the welfare implications of an ageing population and

a shrinking workforce. However, ⊠Doomsday' scenarios of fertility spiralling downwards and European populations imploding have not yet materialised. Recent statistics for childbearing even suggest some recovery in Europe's fertility. RAND Europe therefore decided to update its 2004 study into the causes and consequences of low fertility in Europe. The report analyses the latest data, reviewed recent literature, and examined the situation in Germany, Poland, Spain, Sweden and the UK in depth. The recent recovery appears to be due to complex set of interacting factors, including economic growth, increased female labour participation, and improved gender equality in the work force. Policy and the fertility of migrants also had an effect, albeit limited. Policy makers should note that European couples are not necessarily having more children, but are having them later in life, and that rising fertility rates will not have an immediate impact on population ageing or its consequences. The outlook for fertility in the EU as a whole is not as bleak as it was a decade ago, but fertility rates in several countries are still alarmingly low. These countries will need to continue exploring ways to remove the barriers to parenthood. Implementing measures that help both women and men to combine their career with their family life has direct effects for gender equality and labour force participation, but potential positive externalities for childbearing behaviour.

http://www.rand.org/pubs/monographs/MG1080.html

MG-1081-RC

Succession Management for Senior Military Positions: The Rumsfeld Model for Secretary of Defense Involvement. Andrew R. Hoehn, Albert A. Robbert, Margaret C. Harrell. 2011

Before Donald H. Rumsfeld entered his second tenure as Secretary of Defense in 2001, the selection of senior U.S. military officers for top-ranking positions within the Department of Defense (DoD) was largely decided within the uniformed services, and the Secretary of Defense did not typically challenge the recommendations. However, to support his goal of transforming the defense establishment, Rumsfeld decided to become personally involved in the selection process.Rumsfeld's changes resulted in a process that featured long-term succession planning, identified qualifications for senior positions, built a slate of highly qualified officers, and sought to arrive at a series of “best fit” decisions for the top military positions. The process also focused on planning for the future by identifying highly capable leaders and associating them with a series of assignments that would prepare them for the top military positions.When Rumsfeld left DoD in 2006, parts of the process he developed were retained, and others were changed significantly or discarded. The process has continued to evolve, at times rekindling some of the efforts Rumsfeld initiated but reshaping them to suit the leadership style of current DoD officials. The authors review senior leader selection and succession planning in general, describe the process developed by Rumsfeld, and investigate how the process evolved after Rumsfeld left office. In conclusion, they identify key system attributes that future DoD officials should consider as they contemplate how senior officer selection and assignments will be managed.

http://www.rand.org/pubs/monographs/MG1081.html

MG-1083-ACE

Service Members in School: Military Veterans' Experiences Using the Post-9/11 GI Bill and Pursuing Postsecondary Education. Jennifer L. Steele, Nicholas Salcedo, James Coley. 2011

The Post-9/11 GI Bill, which took effect in August of 2009, significantly increased the higher education benefits available to eligible individuals who served on active duty in the U.S. armed forces after September 10, 2001. The result is the most generous education benefit for veterans since the original GI Bill of 1944. However, the new array of benefits is also more complicated to administer than benefits offered under the existing Montgomery GI Bill, resulting in numerous first-year implementation challenges. To better understand these challenges from the perspective of students and higher education institutions, the American Coun-

cil on Education (ACE) asked RAND to survey and conduct focus groups with veterans and eligible dependents and to interview higher education administrators. This report, which was made possible by ACE and the Lumina Foundation for Education, presents results of the study, describing not only students' and institutions' reported experiences with the new benefits, but also students' experiences transferring military training to academic credit and adapting to life on campus.

http://www.rand.org/pubs/monographs/MG1083

MG-1085-A/AF

Hard Fighting: Israel in Lebanon and Gaza. David E. Johnson. 2011

When Israel fought Hezbollah during the Second Lebanon War in 2006, it discovered that it was ill prepared for the challenges posed by its "hybrid" adversary. Hybrid adversaries employ effective standoff weapons (e.g., antitank guided missiles, man-portable air-defense systems, mortars, rockets, unmanned aerial systems). Thus, defeating such opponents requires different tactical and operational concepts than those used to fight the irregular adversaries—who do not have standoff weapons—that the Israelis had become accustomed to confronting. In the war's aftermath, the Israeli military undertook significant reforms whose effectiveness was demonstrated in 2008–2009 during Operation Cast Lead, when Israel fought Hamas in Gaza.Like Israel in 2006, the United States today is likely ill prepared for hybrid warfare after years of focusing on irregular adversaries. To identify lessons that the U.S. military might learn from the Israeli experience in Lebanon, the author examines the following: the state of the Israeli military before the Second Lebanon War, the challenges that Hezbollah's hybrid warfare posed, the lessons the Israelis learned from the 2006 war, the reforms the Israeli military undertook to address its deficiencies, and how Israel fared during Operation Cast Lead three years later.The author finds that, in facing hybrid opponents, joint combined-arms fire and maneuver are necessary; precision, stand-off fires are critical (but not sufficient); and responsive and adequate air, artillery, and intelligence, surveillance, and reconnaissance support are vital. Finally, heavy forces—based on tanks and infantry fighting vehicles—are key to fighting sophisticated hybrid opponents because they reduce operational risk and minimize friendly casualties.

http://www.rand.org/pubs/monographs/MG1085.html

MG-1087-AF

Iran's Nuclear Future: Critical U.S. Policy Choices. Lynn E. Davis, Jeffrey Martini, Alireza Nader, Dalia Dassa Kaye, James T. Quinlivan, Paul Steinberg. 2011

As Iran's nuclear program continues to evolve, U.S. decisionmakers will confront a series of critical policy choices involving complex considerations and policy trade-offs. These policy choices could include dissuading Iran from developing nuclear weapons and deterring Iran from using its nuclear weapons, if it were to acquire them. To be successful, the United States will need to find ways to influence Iran's calculations of costs and benefits as Iran pursues its national security interests (survival of the regime, protection of the homeland, and expansion of its regional influence). The United States will also need to reassure its partners in the region of the credibility of the U.S. deterrent posture so as to reduce the Gulf Cooperation Council states' potential interest in developing their own nuclear weapons and dissuade Israel from pursuing unilateral military actions or openly declaring its nuclear posture. The U.S. Air Force, supporting combatant commanders, will play a prominent role in implementing the policy choices, and so it needs to prepare by understanding the goals and timelines of potential military tasks and by designing exercises and war games to support different policy choices.

http://www.rand.org/pubs/monographs/MG1087/

MG-1091-AF

Global Demographic Change and Its Implications for Military Power. Martin C. Libicki, Howard

J. Shatz, Julie E. Taylor. 2011

What is the impact of demographics on the prospective production of military power and the causes of war? This monograph analyzes this issue by projecting working-age populations through 2050; assessing the influence of demographics on manpower, national income and expenditures, and human capital; and examining how changes in these factors may affect the ability of states to carry out military missions. It also looks at some implications of these changes for other aspects of international security. The authors find that the United States, alone of all the large affluent nations, will continue to see (modest) increases in its working-age population thanks to replacement-level fertility rates and a likely return to vigorous levels of immigration. Meanwhile, the working-age populations of Europe and Japan are slated to fall by as much as 10 to 15 percent by 2030 and as much as 30 to 40 percent by 2050. The United States will thus account for a larger percentage of the population of its Atlantic and Pacific alliances; in other words, the capacity of traditional alliances to multiply U.S. demographic power is likely to decline, perhaps sharply, through 2050. India's working-age population is likely to overtake China's by 2030. The United States, which has 4.7 percent of the world's working-age population, will still have 4.3 percent by 2050, and the current share of global gross domestic product accounted for by the U.S. economy is likely to stay quite high.

http://www.rand.org/pubs/monographs/MG1091.html

MG-1092-A

Efficiencies from Applying a Rotational Equipping Strategy. Christopher G. Pernin, Edward Wu, Aaron L. Martin, Gregory Midgette, Brendan See. 2011

To meet the demands of the past decade of conflict in Iraq and Afghanistan, the Army has adopted a rotational strategy based on the Army Force Generation (ARFORGEN) model. While the Army has adapted many of its policies to the ARFORGEN model, the equipping policies still largely reflect Cold War tradition to provide active, reserve, and National Guard units with 100 percent of their equipment at all times during the ARFORGEN cycle. This report uses a simulation model to analyze how the Army might reduce equipment in early phases of the ARFORGEN cycle, how those changes might be applied across Army units and equipment, and how those changes might affect near- and far-term budgets. The report finds that reducing overall Army authorization levels can reduce near-term procurements totaling billions of dollars across the Future Years Defense Program.

http://www.rand.org/pubs/monographs/MG1092/

MG-1093-OSD

The U.S. Combat and Tactical Wheeled Vehicle Fleets: Issues and Suggestions for Congress. Terrence K. Kelly, John E. Peters, Eric Landree, Louis R. Moore, Randall Steeb, Aaron L. Martin. 2011

In the National Defense Authorization Act for Fiscal Year 2010, Congress requested a study of the U.S. ground combat and tactical wheeled vehicle fleets. In the study, RAND researchers assess the U.S. military's requirements and capability needs, identify capability gaps based on recent conflicts and emerging threats, identify critical technology elements or integration risks associated with particular vehicles and missions, and make recommendations regarding the development and deployment of critical capabilities to address identified gaps. The study also examines risks in the technologies required to close the capability gaps, in the business processes used by the U.S. Department of Defense in managing the initiatives producing and modernizing these vehicles, and in the modeling and simulation process supporting the vehicles' research, development, and acquisition. The technical challenges that will continue to affect the ability to field cutting-edge vehicles that meet operational requirements include the need for improved protection, power generation, and fuel consumption and the increased complexity spurred by sensors and networking. It will also be necessary to address how cost estimation, testing, evaluation, and staffing are handled. Finally, an improved modeling and simulation process will

be essential as Congress and the Department of Defense move forward in aligning funding decisions with current and future requirements.

http://www.rand.org/pubs/monographs/MG1093/

MG-1095-A

Effects of Soldiers' Deployment on Children's Academic Performance and Behavioral Health. Amy Richardson, Anita Chandra, Laurie T. Martin, Claude Messan Setodji, Bryan W. Hallmark, Nancy F. Campbell, Stacy Ann Hawkins, Patrick Grady. 2011

Long and frequent deployments, with short dwell times in between, have placed stresses on Army children and families already challenged by frequent moves and parental absences. RAND Arroyo Center was asked by the Army to examine the effects of parental deployments on children's academic performance as well as their emotional and behavioral well-being in the school setting. The researchers found that children whose parents have deployed 19 months or more since 2001 have modestly lower, statistically different achievement scores compared to those who have experienced less or no parental deployment. This finding held across states and academic subjects; is consistent across rank or component of the soldier, seniority of the soldier, gender of the deploying parent, and gender of the child; and has been stable since 2001. Based on interviews with school staff having experience with children of deployed soldiers and with experts and key stakeholders in behavioral health, the report describes the academic and behavioral health challenges these children face related to deployment, identifies the barriers to addressing these challenges, and offers recommendations to better meet the needs of these children.

http://www.rand.org/pubs/monographs/MG1095/

MG-1100-UCESRC

Ready for Takeoff: China's Advancing Aerospace Industry. Roger Cliff, Chad J. R. Ohlandt, David Yang. 2011

This monograph assesses China's aerospace capabilities and the extent to which China's participation in commercial aerospace markets and supply chains is contributing to the improvement of those capabilities. It examines China's commercial aviation manufacturing capabilities, its commercial and military capabilities in space, Chinese government efforts to encourage foreign participation in the development of China's aerospace industry, transfers of foreign aerospace technology to China, the extent to which U.S. and other foreign aerospace firms depend on supplies from China, and the implications of these issues for U.S. security interests. China's aerospace industry has advanced at an impressive rate over the past decade, partly due to the increasing participation of its aerospace industry in the global commercial aerospace market and the supply chains of the world's leading aerospace firms. China's current ability to meet demand with indigenous aircraft is limited, however, and much of the demand will be filled by imported aircraft. China's space capabilities have improved rapidly, on the other hand, and it has developed and deployed an increasingly wide range of satellites. China's growing civilian aerospace capabilities are unquestionably contributing to the development of its military aerospace capabilities, but whether the United States could significantly improve its security through alterations of its policy toward civil aerospace cooperation with China without having a significant negative effect on its own economic interests is unclear.

http://www.rand.org/pubs/monographs/MG1100.html

MG-1102

Moving Toward the Future of Policing. Gregory F. Treverton, Matt Wollman, Elizabeth Wilke, Deborah Lai. 2011

Some police forces believe that 20 years from now they will operate much as they do today, but advances in technology and operating concepts are driving significant changes in day-to-day police operations. This book explores potential visions of the future of policing, based on the drivers of

jurisdiction, technology, and threat, and includes concrete steps for implementation. This analysis is based on a review of policing methods and theories from the 19th century to the present day. Recommendations include educating personnel and leaders to build internal support for change, transitioning to shared technical platforms, and leveraging winning technologies. Because criminals will also use new technology that becomes available, the key to the future of policing will not be the technology itself; it will be the ways in which police forces adapt the technology to their needs.

http://www.rand.org/pubs/monographs/MG1102.html

MG-1104-ICJ

Asbestos Bankruptcy Trusts and Tort Compensation. Lloyd Dixon, Geoffrey McGovern. 2011

Payments by asbestos bankruptcy trusts have played an increasingly important role in compensating asbestos injuries and have become a matter of contention between plaintiff and defense attorneys. At issue is how tort cases take into consideration compensation paid by trusts and the evidence submitted in trust claim forms. This monograph examines how such evidence and compensation are addressed by state laws and considered during court proceedings. It also examines how the establishment of the trusts potentially affects plaintiff compensation from trusts and the tort system combined, payments by defendants that remain solvent, and the compensation available to future, as compared to current, plaintiffs. The authors find that the potential effects of trusts' replacement of once-solvent defendants are very different in states with joint-and-several liability than in states with several liability. In states with joint-and-several liability, total plaintiff compensation should not change. In several-liability states, the replacement of once-solvent defendants by trusts can cause total plaintiff compensation to increase, decrease, or remain unchanged. The findings underscore the importance of information on plaintiff exposure to the products and practices of the bankrupt firms in determining the trusts' effects on plaintiff compensation and on payments by defendants that remain solvent.

http://www.rand.org/pubs/monographs/MG1104.html

MG-1106-QF

Recommended Research Priorities for the Qatar Foundation's Environment and Energy Research Institute. Nidhi Kalra, Obaid Younossi, Kristy N. Kamarck, Sarah Al-Dorani, Gary Cecchine, Aimee E. Curtright, Chaoling Feng, Aviva Litovitz, David R. Johnson, Mohammed Makki, Shanthi Nataraj, David S. Ortiz, Parisa Roshan, Constantine Samaras. 2011

Qatar's leadership has created a vision of sustainable development for the country. The Qatar Foundation (QF) is moving this vision of sustainable development forward in part by establishing a national research institute that conducts and collaborates on applied research in energy, environment, and water issues, the Qatar Environment and Energy Research Institute. This book recommends applied research priorities for the new institution and reports on a survey of related research institutions in the region. The authors identified 14 priority research topics that QF should consider for the institute: natural gas and petroleum production and processing, carbon capture and storage, solar-energy development, fuel cells, green building, smart grids, strategic energy planning, desalination, groundwater sustainability, water demand management, integrated water resource management, environmental characterization, and cross-cutting environmental research. These topics address key challenges that Qatar's energy, water, and environment resources and industries face, and they are areas in which Qatar could be well positioned to pursue research. Through the survey, the authors also found that Gulf Cooperation Council (GCC) countries have common resources and concerns about energy, water, and environment issues, and that GCC institutions are engaged in a range of research activities to address such concerns. The authors recommend that Qatar's institute take a multidisciplinary approach to research, and collaborate with other GCC institutions. It should also seek input from and involve the Qatar government to ensure that research pri-

orities are aligned, resources allocated to energy and environment research reflect the institute's capabilities and needs, research findings reach their intended audience, and the institute and government agencies collaborate.

http://www.rand.org/pubs/monographs/MG1106.html

MG-1107-RC

The Long Shadow of 9/11: America's Response to Terrorism. Brian Michael Jenkins, John Godges. 2011

This book provides a multifaceted array of answers to the question, In the ten years since the 9/11 terrorist attacks, how has America responded? In a series of essays, RAND authors lend a farsighted perspective to the national dialogue on 9/11's legacy. The essays assess the military, political, fiscal, social, cultural, psychological, and even moral implications of U.S. policymaking since 9/11. Part One of the book addresses the lessons learned from America's accomplishments and mistakes in its responses to the 9/11 attacks and the ongoing terrorist threat. Part Two explores reactions to the extreme ideologies of the terrorists and to the fears they have generated. Part Three presents the dilemmas of asymmetrical warfare and suggests ways to resolve them. Part Four cautions against sacrificing a long-term strategy by imposing short-term solutions, particularly with respect to air passenger security and counterterrorism intelligence. Finally, Part Five looks at the effects of the terrorist attacks on the U.S. public health system, at the potential role of compensation policy for losses incurred by terrorism, and at the possible long-term effects of terrorism and counterterrorism on American values, laws, and society.

http://www.rand.org/pubs/monographs/MG1107.html

MG-1108-USMC

Alert and Ready: An Organizational Design Assessment of Marine Corps Intelligence. Christopher Paul, Harry J. Thie, Katharine Watkins Webb, Stephanie Young, Colin P. Clarke, Susan G. Straus, Joya Laha, Christine Osowski, Chad C. Serena. 2011

As the U.S. Marine Corps (USMC) has grown in strength, it has needed to add intelligence capabilities. Since the end of the Cold War and, especially, since September 11, 2001, USMC intelligence has had to tailor its organization to meet the evolving demands of the operational environment. This has resulted in a number of ad hoc arrangements, practices, and organizations. A broad review of the organizational design of the USMC intelligence enterprise examined how to align it efficiently and effectively with current and future missions and functions. Specifically, the review, which included interviews with a range of USMC personnel and civilians, considered the organization of (and possible improvements to) the Intelligence Department, the Marine Corps Intelligence Activity, the intelligence organizations within the Marine Expeditionary Forces (specifically, the intelligence and radio battalions), and intelligence structures in the combat elements. A comparison of 48 organizational and functional issues with a series of USMC intelligence and functional issues resulted in a series of recommendations to help improve the “fit” of USMC intelligence organizations with their environmental context. In some cases, the service would benefit not from changing its intelligence structure but by realigning it; in other areas, restructuring would lend greater efficiency and effectiveness to the USMC intelligence enterprise.

http://www.rand.org/pubs/monographs/MG1108.html

MG-1111/1-OSD

From Insurgency to Stability: Volume I: Key Capabilities and Practices. Angel Rabasa, John Gordon IV, Peter Chalk, Christopher S. Chivvis, Audra K. Grant, K. Scott McMahon, Laurel E. Miller, Marco Overhaus, Stephanie Pezard. 2011

This monograph is the first of two volumes that examine how countries confronting insurgencies transition from a high level of violence to a more stable situation. It identifies the procedures and capabilities that the U.S. Department of Defense,

other agencies of the U.S. government, U.S. allies and partners, and international organizations require in order to support the transition from counterinsurgency to stability and reconstruction operations. During counterinsurgency, the military takes primary responsibility for security and economic operations, but when the insurgency has been reduced to a level where the state is able to perform its basic functions, police and civilian government agencies take the lead in providing security and services to the population. Successful post-counterinsurgency operations can ensure that lasting peace and stability will follow, rather than a relapse into violence.

http://www.rand.org/pubs/monographs/MG1111z1.html

MG-1111/2-OSD

From Insurgency to Stability: Volume II: Insights from Selected Case Studies. Angel Rabasa, John Gordon IV, Peter Chalk, Audra K. Grant, K. Scott McMahon, Stephanie Pezard, Caroline Reilly, David Ucko, S. Rebecca Zimmerman. 2011

This monograph is the second of two volumes that examine how countries confronting insurgencies transition from a high level of violence to a more stable situation. It examines six case studies of insurgencies from around the world to identify the key factors necessary for a successful transition. In some of the cases, such as Iraq's Anbar province and Afghanistan, the United States was (or still is) directly involved in combat operations; in the Philippines and Colombia, it played a supporting role; in others, there was little U.S. involvement of any consequence. The authors review the causes of each insurgency and the key players involved and examine what the government did right—or wrong—to bring the insurgency to an end and to transition to stability. They note that in each case, there was a need to understand the participants in the insurgency and the grievances and needs of the local population; to balance security needs with reforms in other areas; and to plan for the disarmament, demobilization, and reintegration of militias and government and insurgent forces.

http://www.rand.org/pubs/monographs/MG1111z2.html

MG-1114-FPS

A Big Apple for Educators: New York City's Experiment with Schoolwide Performance Bonuses: Final Evaluation Report. Julie A. Marsh, Matthew G. Springer, Daniel F. McCaffrey, Kun Yuan, Scott Epstein, Julia Koppich, Nidhi Kalra, Catherine DiMartino, Art (Xiao) Peng. 2011

In the 2007–2008 school year, the New York City Department of Education and the United Federation of Teachers jointly implemented the Schoolwide Performance Bonus Program in a random sample of the city's high-needs public schools. The program lasted for three school years, and its broad objective was to improve student performance through school-based financial incentives. The question, of course, was whether it was doing so. To examine its implementation and effects, the department tasked a RAND Corporation-led partnership with the National Center on Performance Incentives at Vanderbilt University to conduct a two-year study of the program that would offer an independent assessment. This report describes the results of our analyses for all three years of the program, from 2007–2008 through 2009–2010. This work built on past research and was guided by a theory of action articulated by program leaders. Researchers examined student test scores; teacher, school staff, and administrator surveys; and interviews with administrators, staff members, program sponsors, and union and district officials. The researchers found that the program did not, by itself, improve student achievement, perhaps in part because conditions needed to motivate staff were not achieved (e.g., understanding, buy-in for the bonus criteria) and because of the high level of accountability pressure all the schools already faced.

http://www.rand.org/pubs/monographs/MG1114.html

MG-1119-OSD

Dilemmas of Intervention: Social Science for Stabilization and Reconstruction. Paul K. Davis.

2011

Governments intervening in post-conflict states find themselves beset with numerous challenges and profound dilemmas: It is often unclear how best to proceed because measures that may improve conditions in one respect may undermine them in another. This volume reviews and integrates the scholarly social-science literature relevant to stabilization and reconstruction (S&R), with the goal of informing strategic planning at the whole-of-government level. The authors assert that S&R success depends on success in each of four component domains—political, social, security, and economic; the authors discuss each domain separately but emphasize their interactions and the idea that the failure of any component can doom S&R as a whole. The authors also focus on a number of dilemmas that intervenors in post-conflict states face—such as between short- and long-term goals and whether to work through or around the state's central government—and suggest how these dilemmas can be confronted depending on context.

http://www.rand.org/pubs/monographs/MG1119.html

MG-1120-WF

Making Summer Count: How Summer Programs Can Boost Children's Learning. Jennifer Sloan McCombs, Catherine H. Augustine, Heather L. Schwartz, Susan J. Bodilly, Brian McInnis, Dahlia S. Lichter, Amanda Brown Cross. 2011

Despite long-term and ongoing efforts to close the achievement gap between disadvantaged and advantaged students, low-income students continue to perform at considerably lower levels than their higher-income peers in reading and mathematics. Research has shown that students' skills and knowledge often deteriorate during the summer months, with low-income students facing the largest losses. Instruction during the summer has the potential to stop these losses and propel students toward higher achievement. A review of the literature on summer learning loss and summer learning programs, coupled with data from ongoing programs offered by districts and private providers across the United States, demonstrates the potential of summer programs to improve achievement as well as the challenges in creating and maintaining such programs. School districts and summer programming providers can benefit from the existing research and lessons learned by other programs in terms of developing strategies to maximize program effectiveness and quality, student participation, and strategic partnerships and funding. Recommendations for providers and policymakers address ways to mitigate barriers by capitalizing on a range of funding sources, engaging in long-term planning to ensure adequate attendance and hiring, and demonstrating positive student outcomes.

http://www.rand.org/pubs/monographs/MG1120.html

MG-1123-A

Expectations About Civilian Labor Markets and Army Officer Retention. Michael L. Hansen, Shanthi Nataraj. 2011

Despite relatively high levels of officer retention overall, U.S. Army personnel management officials have noted that junior officer retention is lowest for the individuals in whom the Army has made the largest investment. These officials are concerned that these officers might not have a full and accurate picture of the socioeconomic environment that they will face if they leave active-duty service. If these personnel currently underestimate the additional costs of civilian employment, a more complete picture of the socioeconomic environment could raise retention and assist the Army in its competition with civilian employers. This monograph develops a comprehensive picture of the socioeconomic environment officers will encounter if they leave active-duty service and analyzes the potential impact of these factors on Army retention. Ultimately, officers' expectations about civilian employment affect their retention decisions. Therefore, the monograph also considers how major differences between military and civilian employment can be effectively communicated to officers making stay/leave decisions. It reports results from projects that aimed to help the

U.S. Army optimize the return on investment from retention policies by evaluating economic trends in the private sector and the perceived merit of civilian versus military employment. The projects also evaluated different measures of potential and performance and identified areas in which the U.S. Army has been least successful in retaining its highest-performing officers. The authors present and discuss the results of a review of the existing literature concerning these topics; analyses of military personnel data, as well as civilian employment and earnings data; and incorporation of these results into existing theoretical models of retention.

http://www.rand.org/pubs/monographs/MG1123.html

MG-1124-OSD

A New Approach for Assessing the Needs of Service Members and Their Families. Laura L. Miller, Bernard D. Rostker, Rachel M. Burns, Dionne Barnes-Proby, Sandraluz Lara-Cinisomo, Terry R. West. 2011

The authors developed a new methodological framework for assessing military personnel and military family needs that fills a gap not currently being met. The framework places personnel and spouse perceptions of problems and needs and the prioritization of those problems and needs at the center of the analysis. This monograph describes the development and testing of a survey tool based on that framework that the Department of Defense and local military commanders can use to gauge the problems and problem-related needs of service members and their families, how well those needs are being met, and the barriers and bridges to accessing services. It discusses how this approach differs from others, the challenges to implementing such a survey, and the value of the survey results to different types of military leaders and support service professionals. The framework could be applied to other types of research questions, such as the problems, needs, and resources for military personnel serving in war zones, and the content of the survey could be modified to address other populations, such as wounded service members. A sample survey is included as an appendix.

http://www.rand.org/pubs/monographs/MG1124.html

MG-1125-OSD

The Challenge of Violent Drug-Trafficking Organizations: An Assessment of Mexican Security Based on Existing RAND Research on Urban Unrest, Insurgency, and Defense-Sector Reform. Christopher Paul, Agnes Gereben Schaefer, Colin P. Clarke. 2011

Violent drug-trafficking organizations (VDTOs) in Mexico produce, transship, and deliver into the United States tens of billions of dollars worth of narcotics annually, but their activities are not limited to drug trafficking. VDTOs have also engaged in human trafficking, weapon trafficking, kidnapping, money laundering, extortion, bribery, racketeering, and assassinations. In an effort to clarify the scope and details of the challenges posed by VDTOs, a RAND team conducted a Delphi expert elicitation exercise, the results of which offer an assessment of the contemporary security situation in Mexico through the lens of existing RAND research on related issues. The exercise centered around three strands of prior RAND research on urban instability and unrest, historical insurgencies, and defense-sector reform. Although this prior research was not designed specifically for the study of Mexico, all three areas offer applicable insights. Assessment scorecards from these projects were used to obtain input from the expert panel and to guide the resulting discussion. The goal was not to break significant new ground in understanding the dynamics of drug violence in Mexico or to offer a qualitative assessment of these dynamics, but rather to provide an empirically based platform for identifying key areas that merit further investigation.

http://www.rand.org/pubs/monographs/MG1125.html

MG-1126-A

Making the Connection: Beneficial Collaboration Between Army Installations and Energy Utility

Companies. Beth E. Lachman, Kimberly Curry Hall, Aimee E. Curtright, Kimberly Colloton. 2011

U.S. Army installations consume substantial amounts of energy, and the Army is seeking ways to meet federal energy requirements, conserve resources, and save costs. RAND Arroyo Center conducted a study for the Army's Office of the Assistant Chief of Staff for Installation Management to assess how the Army could improve installation collaboration with utility companies to reduce energy consumption and help meet other Army energy goals. This report provides the final study results, including findings about how installations collaborate with utilities, the barriers to such collaboration, and the study team's recommendations about how best to overcome the barriers to improve installation collaboration with utility companies for mutual benefit.

http://www.rand.org/pubs/monographs/MG1126.html

MG-1128-NAVY

Learning from Experience: (four volume set). John F. Schank. 2011

Large, complex submarine design and construction programs demand personnel with unique skills and capabilities supplemented with practical experiences in their areas of expertise. Recognizing the importance of past experiences for successful program management, the governments of the United States, the United Kingdom, and the Commonwealth of Australia asked the RAND Corporation to develop a set of lessons learned from previous submarine programs that could help inform future program managers. The four volumes in this set present lessons learned from the Ohio, Seawolf, and Virginia programs of the United States; the Astute program of the United Kingdom; and the Collins program of Australia.

http://www.rand.org/pubs/monographs/MG1128.html

MG-1128/1-NAVY

Learning from Experience: Volume I: Lessons from the Submarine Programs of the United States, United Kingdom, and Australia. John F. Schank, Frank W. Lacroix, Robert E. Murphy, Mark V. Arena, Gordon T. Lee. 2011

Large, complex submarine design and construction programs demand personnel with unique skills and capabilities supplemented with practical experiences in their areas of expertise. Recognizing the importance of past experiences for successful program management, the governments of the United States, the United Kingdom, and the Commonwealth of Australia asked the RAND Corporation to develop a set of lessons learned from previous submarine programs that could help inform future program managers. In this volume, the authors present an overview of five submarine programs from the three countries—the U.S. Navy's Ohio, Seawolf, and Virginia programs; the UK's Astute program; and Australia's Collins program—and identify lessons that apply to all of them. The lessons were developed through an extensive literature review and numerous interviews with government and private-sector personnel involved in the programs. Among the most important lessons: Ensure the stability of the program; establish the roles and responsibilities of the government and private-sector organizations; develop knowledgeable and experienced managers; and take a long-term, strategic view of the submarineforce and the industrial base.

http://www.rand.org/pubs/monographs/MG1128z1.html

MG-1128/2-NAVY

Learning from Experience: Volume II: Lessons from the U.S. Navy's Ohio, Seawolf, and Virginia Submarine Programs. John F. Schank, Cesse Ip, Frank W. Lacroix, Robert E. Murphy, Mark V. Arena, Kristy N. Kamarck, Gordon T. Lee. 2011

Large, complex submarine design and construction programs demand personnel with unique skills and capabilities supplemented with practical experiences in their areas of expertise. Recognizing the importance of past experiences for successful program management, the U.S. Navy asked the RAND Corporation to develop a set of lessons learned from previous submarine programs that could help inform future program man-

agers. This volume presents lessons from three submarine programs. The RAND team looked at how the programs were managed, the issues that affected management decisions, and the outcomes of those decisions. All three submarine programs had tenuous beginnings. Each experienced cost overruns and schedule delays in the construction of its first-of-class submarine. The Ohio and Virginia programs made corrections, and both are viewed as generally successful. Seawolf, probably due to the changing threat and budgetary environment, was terminated before changes could be made to correct early missteps. An overarching lesson from the three programs is the importance of program stability. Stability applies in many areas—funding consistency, a long-term build strategy, fixed operational requirements, program management, and an integrated partnership between the Navy and the shipbuilders.

http://www.rand.org/pubs/monographs/MG1128z2.html

MG-1128/3-NAVY

Learning from Experience: Volume III: Lessons from the United Kingdom's Astute Submarine Program. John F. Schank, Frank W. Lacroix, Robert E. Murphy, Cesse Ip, Mark V. Arena, Gordon T. Lee. 2011

Large, complex submarine design and construction programs demand personnel with unique skills and capabilities supplemented with practical experiences in their areas of expertise. Recognizing the importance of past experiences for successful program management, the United Kingdom's Ministry of Defence (MOD) asked the RAND Corporation to develop a set of lessons learned from its Astute submarine program that could help inform future program managers. RAND reviewed the history of UK nuclear submarines, investigated how operational requirements were set for the Astute class; explored the acquisition, contracting, design, and build processes that the Astute program employed; and assessed the plans and activities surrounding integrated logistics support for the Astute. The impact of the substantial time gap between the design and build of the Astute and its predecessor nuclear submarines was greatly underestimated by the private sector and the MOD, and both parties underestimated the impact of the MOD's decision to shift responsibilities to the private sector. Designing and building a submarine requires careful management and oversight and a delegation of roles and responsibilities that recognizes which party—the shipbuilder or the government—is best positioned to manage risks.

http://www.rand.org/pubs/monographs/MG1128z3.html

MG-1128/4-NAVY

Learning from Experience: Volume IV: Lessons from Australia's Collins Submarine Program. John F. Schank, Cesse Ip, Kristy N. Kamarck, Robert E. Murphy, Mark V. Arena, Frank W. Lacroix, Gordon T. Lee. 2011

Large, complex submarine design and construction programs demand personnel with unique skills and capabilities supplemented with practical experiences in their areas of expertise. Recognizing the importance of past experiences for successful program management, the Australian government asked the RAND Corporation to develop a set of lessons learned from its Collins submarine program that could help inform future program managers. Collins was the first submarine built in Australia. RAND investigated how operational requirements were set for the Collins class; explored the acquisition, contracting, design, and build processes that the program employed; and assessed the plans and activities surrounding integrated logistics support for the class. Although Australia had intended to take an evolutionary approach in procuring the Collins class by using an existing design, no design was suitable, so the program pursued a developmental platform and a developmental combat system. This introduced a high degree of risk into the program, particularly in the combat system technology. Among the important lessons: All appropriate organizations should be involved in a new submarine program from its inception, the majority of the design drawings should be completed before construction begins, and a thorough and adequate testing pro-

gram should be developed. Because designing and building a submarine is one of the most complex undertakings for a new program, they require careful management and oversight.

http://www.rand.org/pubs/monographs/MG1128z4.html

MG-1131-RC

Afghan Peace Talks: A Primer. James Shinn, James Dobbins. 2011

The objective of a negotiated peace has been firmly embraced by both the Afghan and American governments and endorsed by the North Atlantic Treaty Organization and most of Afghanistan's neighbors. The potential parties to a treaty accept that the Taliban must be both involved in negotiations and granted some role in the resulting government. Although the priorities of all the potential parties overlap to a considerable degree, their interests and objectives vary greatly. Arriving at an agreement about the sequencing, timing, and prioritization of peace terms is likely to be difficult. The American objective in these negotiations should be a stable and peaceful Afghanistan that neither hosts nor collaborates with international terrorists. Only to the extent that other issues impinge on this objective should American negotiators be drawn into a discussion of Afghanistan's social or constitutional issues. Because the United States is poorly placed to broker a peace settlement, and because third-party assistance in overseeing the implementation of an accord will be required, the authors recommend that the United States seek the appointment of a United Nations–endorsed facilitator to promote agreement on such issues as a venue for the talks, participation, and the agenda.

http://www.rand.org/pubs/monographs/MG1131.html

MG-1133-OSD

Keeping a Competitive U.S. Military Aircraft Industry Aloft: Findings from an Analysis of the Industrial Base. John Birkler, Paul Bracken, Gordon T. Lee, Mark A. Lorell, Soumen Saha, Shane Tierney. 2011

For at least two decades, policymakers have expressed concerns that further consolidation could erode the competitive environment for military aircraft and degrade the industry's abilities to develop, manufacture, and support innovative designs. This monograph responds to a request by Congress to evaluate programs to ensure that more than one aerospace company could support design, development, and production of fixed-wing military aircraft in the future. It reviews a 2003 RAND evaluation of the risks and costs of the United States having little or no competition among fixed-wing military aircraft companies; examines changes in industrial-base structure and capabilities that have taken hold since that analysis was performed; and assesses how these and future changes will affect the industrial base. The authors find that only by involving two prime contractors equally in performing RDT&E (research, development, test, and evaluation) on a new large program, such as a bomber, could DoD sustain two firms through 2020 with RDT&E funding and through 2025 with procurement funding.

http://www.rand.org/pubs/monographs/MG1133.html

MG-1139-TPP

Fulfilling The Pittsburgh Promise®: Early Progress of Pittsburgh's Postsecondary Scholarship Program. Gabriella C. Gonzalez, Robert Bozick, Shannah Tharp-Taylor, Andrea Phillips. 2011

This report presents a detailed assessment of the extent to which The Pittsburgh Promise—a postsecondary education scholarship intended to remedy the area's population decline, foster high school completion and college readiness among Pittsburgh district students, and prepare a capable and energetic workforce for the city—has met its goals to date and offers recommendations for improving the program's short- and long-term effectiveness. Both qualitative and quantitative research methods were used to address questions concerning (1) changes in enrollment in PPS district (traditional and charter) schools, (2) the effect of The Promise on parents' decisions to send their children to district schools, (3) its effect on students' attitudes toward completing high school

and going on to postsecondary education, (4) changes in rates of enrollment and persistence in postsecondary institutions since the inception of The Promise, and (5) what can be learned from progress to date to inform future improvements. The results of the analyses are synthesized to develop a conceptual model that Promise administrators can use to ensure continual improvements and to evaluate the extent to which the program is meeting its goals in the coming years.

http://www.rand.org/pubs/monographs/MG1139.html

MG-1143-OSD

Israel and Iran: A Dangerous Rivalry. Dalia Dassa Kaye, Alireza Nader, Parisa Roshan. 2011

Israel and Iran have come to view each other as directregional rivals over the past decade, with Iran viewing Israel as being bent on undermining Iran's revolutionary system and Israel viewing Iran as posing grave strategic and ideological challenges to the Jewish state. But the two countries have not always been rivals. Both before and after the 1979 Islamic revolution, shared geopolitical interests led to years of pragmatic policies and, at times, extensive cooperation. But the growing rivalry between them has intensified in recent years, particularly with the rise of principlist (fundamentalist) leaders in Iran and the prospect of a nuclear-armed Iran. Israeli leaders now view every regional threat through the prism of Iran, even if their strategic community is divided about how to address this challenge and particularly the utility of a military strike option. Iran, which currently views Israel in more ideological and less pragmatic terms, may be emboldened to further challenge Israel if it has a nuclear weapons capability. The United States can help manage this rivalry by focusing on policies aimed at prevention and preparation. This means discouraging an Israeli military strike while bolstering Israeli capabilities in preparation for a future where Iran has managed to acquire nuclear weapons. For Iran, this means dissuading that regime from weaponizing its nuclear program and, if that fails, making preparations to deter it from brandishing or using its weapons.

http://www.rand.org/pubs/monographs/MG1143.html

MG-1144-CHSWC

Medical Care Provided Under California's Workers' Compensation Program: Effects of the Reforms and Additional Opportunities to Improve the Quality and Efficiency of Care. Barbara O. Wynn, Justin W. Timbie, Melony E. Sorbero. 2011

Since 2004, significant changes have been made to the California workers' compensation (WC) system. The Commission on Health and Safety and Workers' Compensation (CHSWC) asked the RAND Corporation to examine the impact that these changes have on the medical care provided to injured workers. This monograph synthesizes findings from interviews and available information regarding the implementation of the changes affecting WC medical care and identifies areas in which additional changes might increase the quality and efficiency of care delivered under the WC system. To improve incentives for efficiently providing medically appropriate care, California should revise its fee schedule allowances for services provided by hospitals to inpatients, freestanding ambulatory surgery centers, and physicians, create nonmonetary incentives for providing medically appropriate care in the medical provider network (MPN) context through more-selective contracting with providers and reducing medical review requirements for high-performing physicians; reduce incentives for inappropriate prescribing practices by curtailing in-office physician dispensing; and implement pharmacy benefit network regulations. To increase accountability for performance, California should revise the MPN certification process to place accountability for meeting MPN standards on the entity contracting with the physician network; strengthen Division of Workers' Compensation (DWC) authorities to provide intermediate sanctions for failure to comply with MPN requirements; and modify the Labor Code to remove payers and MPNs from the definition of individually identifiable data so that performance on key measures can be publicly available. To facilitate monitoring and oversight, California

should provide DWC with more flexibility to add needed data elements to medical data reporting and provide penalties for a claim administrator failing to comply with the data-reporting requirements; require that medical cost-containment expenses be reported by category of cost; compile information on the types of medical services that are subject to UR denials and expedited hearings; and expand ongoing monitoring of system performance. Finally, to increase administrative efficiency, California should use an external medical review organization to review medical-necessity determinations, and it should explore best practices of other WC programs and health programs in carrying out medical cost-containment activities.

http://www.rand.org/pubs/monographs/MG1144.html

MG-1147-NETL

Characterizing the U.S. Industrial Base for Coal-Powered Electricity. Constantine Samaras, Jeffrey A. Drezner, Henry H. Willis, Evan Bloom. 2011

Coal-fired electricity generating units (EGUs) provide approximately 46 percent of the electricity generated in the United States, yet most of the existing coal-fired electricity generating fleet is 25–45 years old. Deploying new coal-fired EGUs and maintenance of the existing fleet requires an industrial capacity to provide equipment, skilled labor, and project management expertise. This monograph addresses the concern about whether the industrial base for the U.S. domestic coal-based electricity generation industry can maintain the capability to design, construct, operate, and maintain coal-fired EGUs within reasonable cost, schedule, performance,environmental, and quality expectations. The authors reviewed existing reports and databases, conducted interviews with a variety of stakeholders, and collected and analyzed data describing key elements of industry capability and validation or verification of concerns. They find that some capabilities are maintained through active operation and maintenance and pollution-control markets but that new construction is required to maintain complete capabilities; that coal boilers are critical to the coal power industrial base but the equipment market is global; that workforce challenges are not unique to coal but could raise costs during high-demand periods; that construction costs and schedules have increased for recently built coal-fired power plants; and that potential future challenges could increase costs and schedules. By first describing the capability that is inherent in the existing coal-fired fleet, this monograph takes a first step toward addressing the larger policy questions of how to develop, deploy, and maintain an advanced, low-carbon electricity-generation industry capability into the future.

http://www.rand.org/pubs/monographs/MG1147.html

MG-1154-SRF

Coping with a Nuclearizing Iran. James Dobbins, Alireza Nader, Dalia Dassa Kaye, Frederic Wehrey. 2011

It is not inevitable that Iran will acquire nuclear weapons or even that it will gain the capacity to quickly produce them. U.S. and even Israeli analysts continually push their estimates for such an event further into the future. Nevertheless, absent a change in Iranian policy, it is reasonable to assume that, some time in the coming decade, Iran will acquire such a capability. Most recent scholarly studies have also focused on how to prevent Iran from acquiring nuclear weapons. Other, less voluminous writing looks at what to do after Iran becomes a nuclear power. What has so far been lacking is a policy framework for dealing with Iran before, after, and, indeed, during its crossing of the nuclear threshold. This monograph attempts to fill that gap by providing a midterm strategy for dealing with Iran that neither begins nor ends at the point at which Tehran acquires a nuclear weapon capability. It proposes an approach that neither acquiesces to a nuclear-armed Iran nor refuses to admit the possibility—indeed, the likelihood—of this occurring.

http://www.rand.org/pubs/monographs/MG1154.html

MG-1162-CAPP

China's Expanding Role in Global Mergers and Acquisitions Markets. Charles Wolf, Jr., Brian G. Chow, Gregory S. Jones, Scott Harold. 2011

This report evaluates recent and proposed Chinese foreign investment. It aims to improve understanding of China's foreign investment patterns and strategy and considers how U.S. national security might be compromised as well as how the United States and China can benefit from such investment. It provides a method for assessing national security risks and benefits, compares Chinese investment patterns in the United States with those of other U.S. investors, compares Chinese investment patterns in the United States with Chinese investment patterns elsewhere, and draws conclusions from its findings. The authors show that these patterns are distinctive, selective, and flexible. They conclude that both risks and benefits are important to assess in evaluating the effects of increased Chinese investment. They urge analysts to track Chinese investments through a "wider lens," comparing patterns of investment in the United States with patterns elsewhere to gain a greater understanding of Chinese investment.

http://www.rand.org/pubs/monographs/MG1162.html

MG-1165-TCE

Understanding the Public Health Implications of Prisoner Reentry in California: State-of-the-State Report. Lois M. Davis, Malcolm V. Williams, Kathryn Pitkin Derose, Paul Steinberg, Nancy Nicosia, Adrian Overton, Lisa Miyashiro, Susan Turner, Terry Fain, Eugene Williams III. 2011

When prisoners are released and return to communities, an often overlooked concern is the health care needs that former prisoners have and the role that health care plays in how successfully they reintegrate. To a large extent, the reentry population will eventually become part of the uninsured and medically indigent populations in communities.This volume examines the health care needs of newly released prisoners in California, including the need for mental health and substance abuse treatment; which communities are most affected by prisoner reentry; the health care system capacity of those communities; and the experiences of released prisoners, service providers, and families of incarcerated individuals. The authors conducted a geographic analysis to identify where parolees are concentrated in California and the capacity of the safety net in four of these communities—Alameda, Los Angeles, San Diego, and Kern counties—to meet the health care needs of the reentry population. They then conducted focus groups in Alameda, Los Angeles, and San Diego counties with former prisoners and their family members and interviews with relevant service providers and community groups to better understand how health affects reentry; the critical roles that health care providers, other social services, and family members play in successful reentry; and how the children and families of ex-prisoners are affected by reentry. The authors discuss all this in the context of budget cuts that have substantially shrunk California's safety net and the May 2011 U.S. Supreme Court decision ordering California to reduce its prison population by 33,000. The volume concludes with recommendations for improving access to care for this population in the current fiscal environment.

http://www.rand.org/pubs/monographs/MG1165.html

MG-1171/1-OSD

Root Cause Analyses of Nunn-McCurdy Breaches, Volume 1: Zumwalt-Class Destroyer, Joint Strike Fighter, Longbow Apache, and Wideband Global Satellite. Irv Blickstein, Michael Boito, Jeffrey A. Drezner, James Dryden, Kenneth Horn, James G. Kallimani, Martin C. Libicki, Megan McKernan, Roger C. Molander, Charles Nemfakos, Chad J. R. Ohlandt, Caroline Reilly, Rena Rudavsky, Jerry M. Sollinger, Katharine Watkins Webb, Carolyn Wong. 2011

Congressional concern with cost overruns, or breaches, in several major defense acquisition programs led the authors, in a partnership with the Performance Assessments and Root Cause Analysis Office in the Office of the Secretary of Defense, Acquisition, Technology, and Logistics,

to investigate root causes by examining program reviews, analyzing data, participating in contractor briefings, and holding meetings with diverse stakeholders. The analysis of cost overruns in four programs revealed several contributory factors, including changes in the economy, misestimation of costs, and inadequate program planning. Underestimation of baseline costs; increases in component costs; insufficient Research, Development, Test, and Evaluation; inflation; and increased, inadequate, or unstable program funding were identified as root causes in all four programs.

http://www.rand.org/pubs/monographs/MG1171z1.html

MG-1179-CF/AARP

Living Longer in Mexico: Income Security and Health. Emma Aguila, Claudia Diaz, Mary Manqing Fu, Arie Kapteyn, Ashley Pierson. 2011

This analysis of aging and income security in Mexico establishes that the older population in Mexico is increasing quickly and that this population is especially vulnerable to poverty. Mexican citizens are living longer and overall have experienced an improvement in the quality of life compared to that of prior generations. However, this study demonstrates that social improvements are not affecting the daily lives of all persons equally. The authors attempt to uncover and highlight those differences. One of the primary challenges facing Mexico is a growing older population. The demographic transition in Mexico combined with the lack of formal sources of income in retirement place many older persons in a state of financial insecurity. The information contained in this monograph and the proposed policy research areas are intended to enlarge the portfolio of options for older Mexicans. The authors analyze wealth and sources of income during retirement, the relationship between health and wealth, urban and rural disparities, and the impact of migration spells to the United States on wealth accumulation and health insurance in Mexico.

http://www.rand.org/pubs/monographs/MG1179.html

MG-1179/1-CF/AARP

Living Longer in Mexico: Income Security and Health: Executive Summary. Emma Aguila, Claudia Diaz, Mary Manqing Fu, Arie Kapteyn, Ashley Pierson. 2011

This analysis of aging and income security in Mexico establishes that the older population in Mexico is increasing quickly and that this population is especially vulnerable to poverty. Mexican citizens are living longer and overall have experienced an improvement in the quality of life compared to that of prior generations. However, this study demonstrates that social improvements are not affecting the daily lives of all persons equally. The authors attempt to uncover and highlight those differences. One of the primary challenges facing Mexico is a growing older population. The demographic transition in Mexico combined with the lack of formal sources of income in retirement place many older persons in a state of financial insecurity. The information contained in this executive summary and the proposed policy research areas are intended to enlarge the portfolio of options for older Mexicans. The authors analyze wealth and sources of income during retirement, the relationship between health and wealth, urban and rural disparities, and the impact of migration spells to the United States on wealth accumulation and health insurance in Mexico.

http://www.rand.org/pubs/monographs/MG1179z1.html

MG-1179/2-CF/AARP

Living Longer in Mexico: Income Security and Health (Spanish-language version). Emma Aguila, Claudia Diaz, Mary Manqing Fu, Arie Kapteyn, Ashley Pierson. 2011

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http://www.rand.org/pubs/monographs/MG1179z2.html

MG-1179/3-CF/AARP

Living Longer in Mexico: Income Security and Health: Executive Summary (Spanish-language version). Emma Aguila, Claudia Diaz, Mary Manqing Fu, Arie Kapteyn, Ashley Pierson. 2011

This analysis of aging and income security in Mexico establishes that the older population in Mexico is increasing quickly and that this population is especially vulnerable to poverty. Mexican citizens are living longer and overall have experienced an improvement in the quality of life compared to that of prior generations. However, this study demonstrates that social improvements are not affecting the daily lives of all persons equally. The authors attempt to uncover and highlight those differences. One of the primary challenges facing Mexico is a growing older population. The demographic transition in Mexico combined with the lack of formal sources of income in retirement place many older persons in a state of financial insecurity. The information contained in this monograph and the proposed policy research areas are intended to enlarge the portfolio of options for older Mexicans. The authors analyze wealth and sources of income during retirement, the relationship between health and wealth, urban and rural disparities, and the impact of migration spells to the United States on wealth accumulation and health insurance in Mexico (Spanish-language version).

http://www.rand.org/pubs/monographs/MG1179z3.html

MG-443-OSD

Small Business and Defense Acquisitions: A Review of Policies and Current Practices. Clifford A. Grammich, Thomas R. Edison, Jr., Nancy Y. Moore, Edward G. Keating. 2011

Support for small businesses has been a bipartisan effort promoted by policymakers for more than a century. The Department of Defense (DoD) has had mixed results in meeting some of its mandated small business goals, exceeding them in some industries while falling short in others. Part of the challenge may be due to the nature of the different industries with which DoD works and these industries' conduciveness to small business. Another part of the challenge may be attributable, in some measure, to the bewildering array of criteria for what constitutes a "small" business. In any event, overall, there is little evidence of the effectiveness of small business policies, but supporting such policies is likely to remain a concern of DoD for many years to come. The authors of this report research the general evolution of federal small business policy and how this has affected DoD, the challenges that evolving procurement needs pose to efforts by DoD to fulfill small business policy goals, and what the current practices of large private-sector firms toward small businesses suggest about the feasibility of DoD small business policies.

http://www.rand.org/publications/MG/MG443/

MG-685-AF

Intratheater Airlift Functional Area Analysis (FAA). David T. Orletsky, Anthony D. Rosello, John Stillion. 2011

This functional area analysis is the first in a trio of documents that the Joint Capabilities Integration and Development System requires for a capabilities-based assessment of intratheater airlift capabilities. This volume sets the stage for the as-

sessment by laying out the tasks, conditions, and standards required for the intratheater airlift fleet. The authors gleaned these by examining high-level guidance from the National Security Strategy and the National Defense Strategy; service concepts of operations and the family of Joint Future Concepts, both themselves developed from the national strategies; and recent experience in Afghanistan and Iraq for insight into the current operational environment. Because the analytical results will be sensitive to the operational variables, the authors also outlined these, some of the most important being the number of delivery points; the terrain; air base accessibility; the total amount, size, and weight of each supply class to be delivered by air; the number of personnel to be delivered by air; the required response time; the mission characteristics; and the threat level.

http://www.rand.org/pubs/monographs/MG685.html

MG-803-OSD

Assessing the Performance of Military Treatment Facilities. Nancy Nicosia, Barbara O. Wynn, John A. Romley. 2011

The U.S. Department of Defense (DoD) has increasingly confronted financial, managerial, and operational challenges in sustaining health benefits for service members and their families: For example, medical costs are projected to increase to 12 percent of DoD's total budget in 2015, from a level of 8 percent in 2007. To address these challenges, DoD is working to transform business practices within the Military Health System. As part of this effort, DoD has considered setting targets for health care utilization in its military treatment facilities (MTFs) and rewarding or penalizing MTFs according to their performance. In this volume, the authors discuss the potential and limitations of using MTF utilization and costs as measures of MTF leaders' performance. Nicosia, Wynn, and Romley report the findings of (1) their qualitative review of performance assessment in the nonmilitary health care sector and (2) their quantitative analysis of how MTF utilization and cost metrics are limited by random variation in the data, and how MTF size and resource-intensive catastrophic cases affect this variation.

http://www.rand.org/pubs/monographs/MG803/

MG-818-AF

Intratheater Airlift Functional Solution Analysis (FSA). David T. Orletsky, Daniel M. Norton, Anthony D. Rosello, William Stanley, Michael Kennedy, Michael Boito, Brian G. Chow, Yool Kim. 2011

This functional solution analysis (FSA) is the third in a trio of documents that the Joint Capabilities Integration and Development System requires for a capabilities-based assessment of intratheater airlift capabilities. Specifically, the analysis is an operationally based assessment of current capabilities to determine whether a materiel solution is required to close the capability gap identified in the second document, the functional needs analysis. That analysis raised concerns about airlift capacity even under existing demand levels, given an aging fleet. The FSA reviewed a series of nonmateriel options intended to fill that gap, generally by delaying the need to recapitalize. However, the FSA revealed no viable nonmateriel solution or combination of such solutions that could delay the need to recapitalize the fleet by more than a few years. This indicated a need to evaluate potential materiel solutions including service-life extension programs and new aircraft buys.

http://www.rand.org/pubs/monographs/MG818.html

MG-822-AF

Intratheater Airlift Functional Needs Analysis (FNA). John Stillion, David T. Orletsky, Anthony D. Rosello. 2011

This functional needs analysis (FNA) is the second in a trio of documents that the Joint Capabilities Integration and Development System requires for a capabilities-based assessment of intratheater airlift capabilities. Specifically, this analysis assesses the ability of current U.S. Air Force assets to deliver the airlift capabilities identified in the first document, the functional area analysis. That analysis identified three broad operational

mission areas for intratheater airlift: routine sustainment; time-sensitive, mission-critical resupply; and maneuver. The FNA looks at these missions in terms of current and projected capabilities and demands. The authors use two vignettes and assorted variables to test how the systems would respond to the demands identified. This analysis highlighted concerns about airlift capacity even under existing demand levels, given an aging fleet. Possible plans to increase the reliance of ground troops on airlift are among the factors that suggest finding ways to maintain the minimum number of C-130 aircraft available is a necessary starting place.

http://www.rand.org/pubs/monographs/MG822.html

MG-835-AF

Air Operations in Israel's War Against Hezbollah: Learning from Lebanon and Getting It Right in Gaza. Benjamin S. Lambeth. 2011

In response to a surprise incursion by Hezbollah combatants into northern Israel and their abduction of two Israeli soldiers, Israel launched a campaign that included the most complex air offensive to have taken place in the history of the Israeli Air Force (IAF). Many believe that the inconclusive results of this war represent a “failure of air power." The author demonstrates that this conclusion is an oversimplification of a more complex reality. He assesses the main details associated with the Israeli Defense Forces' (IDF's) campaign against Hezbollah to correct the record regarding what Israeli air power did and did not accomplish (and promise to accomplish) in the course of contributing to that campaign. He considers IAF operations in the larger context of the numerous premises, constraints, and ultimate errors in both military and civilian leadership strategy choice that drove the Israeli government's decisionmaking throughout the counteroffensive. He also examines the IDF's more successful operation against the terrorist organization Hamas in the Gaza Strip in December 2008 and January 2009, to provide points of comparison and contrast in the IDF's conduct of the latter campaign based on lessons learned and assimilated from its earlier combat experience in Lebanon.

http://www.rand.org/pubs/monographs/MG835.html

MG-903-JFCOM

Band of Brothers or Dysfunctional Family? A Military Perspective on Coalition Challenges During Stability Operations. Russell W. Glenn. 2011

Counterinsurgency and other stability operations seldom present a nation with trials that threaten its very survival. Bonds between coalition members are therefore weaker then than they are when threat of annihilation reinforces mutual dependence. These situations are further complicated by the use of force likely not being the primary implement for attaining ultimate success. Devoid of a preeminent threat and denied primary dependence on armed forces, primary coalition objectives tend to be political rather than military in character and include the concepts like counterinsurgency, nation building, developing government capacity, and providing humanitarian assistance--in other words, they are stability operations. Armed forces are not staffed or trained to meet the long-term demands of many of these tasks. An alliance or coalition must therefore incorporate participation by other government agencies and--ultimately--that of the indigenous government and its population more than is expected during conventional combat operations. Recent contingencies have also seen commercial enterprises, militias, intergovernmental organizations, and nongovernmental organizations become key participants in these undertakings.The result is coalitions of a size seldom seen and with a number of affiliations rarely, if ever, approached before the late 20th century. This monograph investigates the dramatic expansion of challenges confronting alliances and coalitions today and thereafter considers potential solutions that include questioning the conception of what constitutes a coalition in today's world.

http://www.rand.org/pubs/monographs/MG903.html

MG-915-AF

Shaking the Heavens and Splitting the Earth: Chinese Air Force Employment Concepts in the 21st Century. Roger Cliff, John F. Fei, Jeff Hagen, Elizabeth Hague, Eric Heginbotham, John Stillion. 2011

Less than a decade ago, China's air force was an antiquated service equipped almost exclusively with weapons based on 1950s-era Soviet designs and operated by personnel with questionable training according to outdated employment concepts. Today, the People's Liberation Army Air Force (PLAAF) appears to be on its way to becoming a modern, highly capable air force for the 21st century. This monograph analyzes publications of the Chinese military, previously published Western analyses of China's air force, and information available in published sources about current and future capabilities of the PLAAF. It describes the concepts for employing forces that the PLAAF is likely to implement in the future, analyzes how those concepts might be realized in a conflict over Taiwan, assesses the implications of China implementing these concepts, and provides recommendations about actions that should be taken in response.

http://www.rand.org/pubs/monographs/MG915.html

MG-934-OSD

The Battle Behind the Wire: U.S. Prisoner and Detainee Operations from World War II to Iraq. Cheryl Benard, Edward O'Connell, Cathryn Quantic Thurston, Andres Villamizar, Elvira N. Loredo, Thomas Sullivan, Jeremiah Goulka. 2011

Although prisoner of war and detainee operations ultimately tend to become quite extensive, military planners and policymakers have repeatedly treated such operations as an afterthought. In reality, such operations can be a central part of the successful prosecution of a conflict. Determining how to gain knowledge from, hold, question, influence, and release captured adversaries can be an important component of military strategy and doctrine, both during the conflict and in reconstruction afterward. This monograph finds parallels in U.S. prisoner and detainee operations in World War II, Korea, Vietnam, and Iraq: underestimation of the number to be held, hasty scrambling for resources to meet operational needs, and inadequate doctrine and policy. During the later phases of military operations, an attempt is often made to better understand prisoners and detainees and influence their social and political values, which is particularly important in an insurgency where the value of understanding the motivation and morale of opposing forces is heightened. A key recommendation, based on lessons learned from these conflicts, is the development of standard doctrine for detention operations. This doctrine must be responsive to the dynamic nature of military campaigns and should include standard methods for assessing the composition of the detention population, managing special populations, and developing strategic plans for detention operations, including how detention operations should inform the wider operational strategy, especially in a counterinsurgency.

http://www.rand.org/pubs/monographs/MG934.html

MG-953-OSD

The War Within: Preventing Suicide in the U.S. Military. Rajeev Ramchand, Joie D. Acosta, Rachel M. Burns, Lisa H. Jaycox, Christopher G. Pernin. 2011

Since late 2001, U.S. military forces have been engaged in conflicts around the globe, most notably in Iraq and Afghanistan. These conflicts have exacted a substantial toll on soldiers, marines, sailors, and airmen, and this toll goes beyond the well-publicized casualty figures. It extends to the stress that repetitive deployments can have on the individual servicemember and his or her family. This stress can manifest itself in different ways—increased divorce rates, spouse and child abuse, mental distress, substance abuse—but one of the most troubling manifestations is suicide, which is increasing across the U.S. Department of Defense (DoD). The increase in suicides among members of the military has raised concern among policymakers, military leaders, and the population at

large. While DoD and the military services have had a number of efforts under way to deal with the increase in suicides among their members, the Assistant Secretary of Defense for Health Affairs asked RAND to review the current evidence detailing suicide epidemiology in the military, identify "state-of-the-art" suicide-prevention programs, describe and catalog suicide-prevention activities in DoD and across each service, and recommend ways to ensure that the activities in DoD and across each service reflect state-of-the-art prevention science.

http://www.rand.org/pubs/monographs/MG953/

MG-961-OSD

Reshaping the Army's Active and Reserve Components. Michael L. Hansen, Celeste Ward Gventer, John D. Winkler, Kristy N. Kamarck. 2011

To assess the utilization of Army active and reserve forces and to analyze policy options that would improve the utilization of reserve forces, the authors reviewed Department of Defense policy for managing the active and reserve components, identified different measures of utilization, examined the variation in utilization of capabilities across Army components, and considered ways in which the Army could adjust the balance of capabilities to rebalance the burden of deployment and mobilization on Army personnel. Converting billets from low-use to high-use career fields within a component could partially, but not completely, rebalance the reserve components. Converting billets from a low-use career field in one component to a high-use career field in another component is unlikely in the near term, but an option in the long run. In addition, there are unlikely to be significant cost savings from placing operational capabilities in the reserve components instead of the active component. Thus, any rebalancing of operational units should be done for reasons other than cost.

http://www.rand.org/pubs/monographs/MG961.html

MG-967-OSD

Developing Military Health Care Leaders: Insights from the Military, Civilian, and Government Sectors. Sheila Nataraj Kirby, Julie A. Marsh, Jennifer Sloan McCombs, Harry J. Thie, Nailing Xia, Jerry M. Sollinger. 2011

The U.S. Department of Defense has highlighted the importance of preparing health care leaders to succeed in joint, performance-based environments. The current wartime environment, rising health care costs, and an increased focus on joint operations have led to recommendations for Military Health System (MHS) transformation. Part of that transformation will involve improving the identification and development of potential MHS leaders. An examination of how candidates are identified for leadership positions, the training and education opportunities offered to them, and the competencies they are expected to achieve revealed both a range of approaches and several commonalities in the military, civilian, and government sectors. A conceptual framework guided a series of interviews with senior health care executives from a wide range of organizations and military health care leaders from the Army, Navy, and Air Force, as well as a case study of the leader development approaches used by the Veterans Health Administration. Several themes emerged in terms of how leaders are developed in each sector, including the importance of mentoring, career counseling, 360-degree feedback, self-development, and formal education and training programs. Lessons learned in the civilian and government sectors hold importance for transforming the way in which MHS identifies and develops health care officers with high leadership potential for senior executive positions.

http://www.rand.org/pubs/monographs/MG967/

MG-969-OSD

Alternative Fuels for Military Applications. James T. Bartis, Lawrence Van Bibber. 2011

The U.S. Army, Navy, Marine Corps, and Air Force have all established programs geared toward reducing dependence on the use of fossil fuels in tactical weapon systems such as aircraft, combat ships and vehicles, and supporting equip-

ment. From a technical standpoint, a number of alternative fuels can meet military requirements, but it is uncertain how much these fuels will cost and what effect they may have on the environment, particularly in terms of greenhouse gas emissions. This monograph examines alternative fuels that might be candidates for military applications within ten years, with emphasis on those that either have been or are currently the focus of research, testing, and certification within the Department of Defense (DoD). The authors discuss these fuels' economic viability, technical readiness for commercial production, lifecycle greenhouse gas emissions, and approaches that could be used to reduce those emissions. They also examine the military utility of mobile, in-theater synthetic fuel processes. The authors conclude that DoD goals for alternative fuel use in tactical weapon systems should be based on potential national benefits because the use of alternative fuels offers no direct military benefit over the use of conventional petroleum-derived fuels. Consequently, DoD and Congress should decide whether defense appropriations should continue to support advanced technology for producing alternative liquid fuels. The authors also find that the prospects for commercial production of appreciable amounts of alternative fuels suitable for military applications within the next decade are highly uncertain, that current efforts by the services to test and certify alternative fuels are far outpacing commercial development, and that certain efforts are directed at fuels with a very limited potential for sustainable production.

http://www.rand.org/pubs/monographs/MG969/

MG-978-A

Unmanned Aircraft Systems for Logistics Applications. John E. Peters, Somi Seong, Aimee Bower, Harun Dogo, Aaron L. Martin, Christopher G. Pernin. 2011

RAND Arroyo Center evaluated potential logistics applications for unmanned aircraft systems (UAS) to determine whether they are technically feasible, operationally feasible, and more cost-effective than other options. The study concentrated on reconnaissance and surveillance tasks to secure logistics convoys through overwatch with UAS; route reconnaissance looking for hazards that might endanger logistics convoys; surveillance of pipelines, electrical lines, rivers, supply depots, disaster scenes, and pre-deployment reconnaissance. It also examined the potential for using UAS to locate airdropped cargo that misses the drop zone and to retrograde critical unserviceable items expeditiously. The study identified six factors that could be used to compare UAS and non-UAS based solutions to logistics tasks. The study uncovered significant potential for logistics applications of these systems in the near- and long-term future.

http://www.rand.org/pubs/monographs/MG978.html

MG-979-A

Toward Affordable Systems II: Portfolio Management for Army Science and Technology Programs Under Uncertainties. Brian G. Chow, Richard Silberglitt, Scott Hiromoto, Caroline Reilly, Christina Panis. 2011

Consistent with U.S. Department of Defense acquisition policy since 2003, U.S. Army leadership has called for consideration of lifecycle cost at system design and technology development stages so that adjustments can be made early enough to ensure affordability. This companion to Toward Affordable Systems: Portfolio Analysis and Management for Army Science and Technology Programs (Brian G. Chow, Richard Silberglitt, and Scott Hiromoto, Santa Monica, Calif.: RAND Corporation, MG-761-A, 2009) describes the continued development and demonstration of a method and model to incorporate lifecycle cost into the portfolio analysis and management process for Army Science and Technology (S&T) programs. Germane to the portfolio management process mandated by the Department of Defense and currently being implemented by the Army, this monograph demonstrates the application of the method and model in meeting Army capability gap requirements. In addition to the gap space cover-

age and the linear programming model described in the first monograph, the companion monograph introduces a simulation that takes into account the uncertainty regarding the success of S&T projects in meeting their goals and leading to fielded systems. The combination of this simulation with the linear programming model allows the identification of capability gap requirements that will lead to the development of new S&T projects, and this combination provides a means to develop an optimum portfolio that balances the remaining S&T and lifecycle costs for existing and new projects. Moreover, the process will create a new opportunity for dialogue among stakeholders and allow different viewpoints and perspectives to be analyzed objectively in the process of building an S&T portfolio.

http://www.rand.org/pubs/monographs/MG979/

MG-981-OSD

Establishing a Research and Evaluation Capability for the Joint Medical Education and Training Campus. Sheila Nataraj Kirby, Julie A. Marsh, Harry J. Thie. 2011

In calling for the transformation of military medical education and training, the 2005 Base Realignment and Closure Commission recommended relocating basic and specialty enlisted medical training to a single site to take advantage of economies of scale and the opportunity for joint training. As a result, a joint medical education and training campus (METC) has been established at Fort Sam Houston, Texas. Two of METC's primary long-term goals are to become a high-performing learning organization and to seek accreditation as a community college. Such goals require a clear model of organizational improvement with well-defined metrics for measuring its performance and using research and evaluation to assess and improve that performance. Lessons learned from a review of practices at institutions with similar missions—such as community colleges, corporate universities, the UK's Defence Medical Education and Training Agency, and other federal agencies, such as the Veterans Health Administration—establish a clear need for an office of institutional research to help METC attain its organizational goals. They also provide useful recommendations regarding the METC office's structure, scope, and governance.

http://www.rand.org/pubs/monographs/MG981.html

MG-990-A

Developing U.S. Army Officers' Capabilities for Joint, Interagency, Intergovernmental, and Multinational Environments. M. Wade Markel, Henry A. Leonard, Charlotte Lynch, Christina Panis, Peter Schirmer, Carra S. Sims. 2011

Law, policy, and, most importantly, ongoing operations require the Department of Defense and the Army to develop a cadre of officers skilled in the integration of joint, interagency, intergovernmental, and multinational (JIIM) capabilities into military operations. Based on interviews and focus groups with Army officers and their counterparts and co-workers from other services, agencies, and nations, this monograph identifies and describes the knowledge, skills, and abilities that enable Army officers to succeed in JIIM contexts. Using surveys of experts in officer assignments, the researchers identified the kinds of assignments that develop capabilities in these domains. They also used inventory modeling to assess the Army's ability to develop and maintain a cadre of officers with these capabilities. Broadly speaking, the study found that good interpersonal skills are extremely important to success in the JIIM domains. Still, the JIIM domains are qualitatively different. For example, competence in integrating Army capabilities with those of other services does not necessarily translate into competence in integrating other government agencies' capabilities. Second, different echelons require qualitatively different knowledge, skills and abilities in the JIIM domains. Third, proficiency in these domains improves significantly with repeated developmental experiences. The most important such experience, however, is one that broadens an officer by confronting him with an unfamiliar context in which his success depends on others' voluntary cooperation. Fourth, the current operating environment

seems to provide JIIM experience reliably at echelons as low as battalion commanders, executive officers, and operations officers. Fifth, the Army can probably produce and maintain enough "experts" in the JIIM domains to meet likely requirements.

http://www.rand.org/pubs/monographs/MG990/

MG-991-OSD/NAVY

Are Ships Different? Policies and Procedures for the Acquisition of Ship Programs. Jeffrey A. Drezner, Mark V. Arena, Megan McKernan, Robert Murphy, Jessie Riposo. 2011

The management and oversight of a major defense acquisition program are exceedingly complex processes. The U.S. Department of Defense has a well-established set of policies, procedures, and organizations for program management and oversight, described in the "5000 series" of directives and instructions. Not all weapon systems fit comfortably within this framework, however. In particular, ship acquisition programs have characteristics that deviate from the normal framework, including concurrency of production and subsystem development, low production quantity and rate, varied test and evaluation procedures, and a unique relationship between milestone decision points and actual construction status. The authors explore these differences in detail, suggesting policies that can better account for the differences in ship acquisition programs without compromising oversight or establishing an entirely separate process.

http://www.rand.org/pubs/monographs/MG991.html

MG-996-OSD

Promoting Psychological Resilience in the U.S. Military. Lisa S. Meredith, Cathy D. Sherbourne, Sarah J. Gaillot, Lydia Hansell, Hans V. Ritschard, Andrew M. Parker, Glenda Wrenn. 2011

As U.S. service members deploy for extended periods on a repeated basis, their ability to cope with the stress of deployment may be challenged. A growing number of programs and strategies provided by the military and civilian sectors are available to encourage and support psychological resilience to stress for service members and families. Though previous research from the field of psychology delineating the factors that foster psychological resilience is available, there has been no assessment of whether and how well the current military resilience programs are addressing these factors in their activities. Further, little is known about the effectiveness of these programs on developing resilience. To assist the Department of Defense in understanding methodologies that could be useful in promoting resilience among service members and their families, the authors conducted a focused literature review to identify evidence-informed factors for promoting psychological resilience. The study also reviewed a subset of military resilience programs to determine the extent to which they included those evidence-informed factors. This report describes the context, approach, and findings from these research activities.

http://www.rand.org/pubs/monographs/MG996.html

MG-997-NASA

Advancing Aeronautics: A Decision Framework for Selecting Research Agendas. Philip S. Anton, Liisa Ecola, James G. Kallimani, Thomas Light, Chad J. R. Ohlandt, Jan Osburg, Raj Raman, Clifford A. Grammich. 2011

What aeronautics research should be supported by the U.S. government? What compelling and desirable benefits drive that research? How should the government—especially NASA—make these decisions? This monograph develops practical mechanisms for answering these difficult questions. The authors describe ways to evaluate and compare the potential benefits from different research options, show the range of fundamental approaches for research to achieve those benefits, compare rough estimates of the costs of research and subsequent development and implementation against those benefits, and outline a transparent decision process for objectively evaluating competing research options. The monograph illustrates these mechanisms with examples that

show the magnitude of aeronautics problems and challenges in economic terms that allow direct comparison across research areas. It also highlights how areas such as general aviation safety might warrant additional attention.

http://www.rand.org/pubs/monographs/MG997/

OCCASIONAL PAPERS

OP-290-DTRA

Early Observations on Possible Defenses by the Emerging Threat Agent Project. Bruce W. Bennett, Jonathan Kaufman, James Byrnes, Pamela L. Gordon, McRae Smith. 2011

The Defense Department's 2010 Quadrennial Defense Review expressed concerns about emerging chemical and biological (CB) weapon agents and the ability of U.S. defenses to counter them. Scientific advances that facilitate the development of new and novel CB agents and the difficulties uncovering such work suggest that adversary programs could acquire new CB agents years before U.S. defense planners recognize those agents. Once these CB agents are recognized as threats, the United States will probably need many more years to establish a comprehensive defense against them, and even these defenses are unlikely to protect the civilians, contractors, and allied military personnel essential to modern U.S. military operations. Such gaps in CB agent defense capabilities pose a potentially serious risk to U.S. military operations. To best mitigate this risk, the U.S. Chemical and Biological Defense Program (CBDP) needs to augment current work with enhanced efforts to dissuade adversary CB agent development and to deter adversary use of new CB weapons. Successful initiatives in dissuasion and deterrence will depend on CB defensive programs that appear dynamic, progressive, and integrated with other Defense Department and national-level efforts in counterproliferation. The CBDP could add a second track to the current agent-specific science and technology effort to focus on the mechanisms of CB agent effects and interactions with the environment. The goal of the resulting robust combination of CBDP defense, dissuasion, and deterrence is to induce great doubts in adversaries about the value of employing any CB agents or developing new CB agents.

http://www.rand.org/pubs/occasional_papers/OP290/

OP-312-IFG

Paying for carbon emissions reduction. Flavia Tsang, Peter Burge. 2011

This paper explores how much British citizens might be willing to pay for carbon emissions reduction, and the implication of this for climate change policies. Much of the current valuation of carbon focuses on cost measures, notably the marginal social cost of carbon, which measures the damage imposed by each unit of carbon emitted; and the marginal abatement cost, which reflects the cost of reducing emissions. These measures reflect how much people should pay or have to pay, but there is relatively little policy research on how much people are willing to pay, a measure of the value they place on carbon emissions reduction. This paper begins to address this research gap. The willingness to pay method reflects people's subjective welfare, so the method is useful for putting a value on public goods. This paper draws on the willingness to pay values from a suite of four stated choice studies in the water sector, and seeks to extend the use of these values for wider climate change policies. Across the studies, the values that the public placed are on the order of hundreds of pounds per tonne of carbon dioxide reduced. This value is an order of magnitude higher than the “official” damage estimates of carbon (i.e. what the public should pay), suggesting that there is an opportunity for a large consumer surplus (a social benefit) even if a carbon tax is introduced to pay for the damages.

http://www.rand.org/pubs/occasional_papers/OP312/

OP-316-OSD

How Is Deployment to Iraq and Afghanistan Affecting U.S. Service Members and Their Fami-

lies? An Overview of Early RAND Research on the Topic. James Hosek. 2011

The conflicts in Iraq and Afghanistan, which have extended over the past decade, have put America's all-volunteer force to its most severe test since its inception in 1973. In this environment of ongoing demand for battle-ready soldiers, sailors, airmen, and marines, there is concern about the effects and consequences of prolonged stress on the force as a whole and on individual service members and their families. The well-being of troops and the people close to them is an issue of much importance, both because it affects military readiness and the ability of the U.S. armed forces to carry out their mission and because the nation is committed to acting on its appreciation of the sacrifices made by military families. To devise policies effective for facilitating the well-being of this community, there must first be a comprehensive understanding of the myriad issues and consequences that service members and their families may face because of deployment. Yet for much of the 2000s, this understanding was largely lacking. Recognizing the need for analysis, RAND launched a program of research around 2005, its goal being to investigate this topic and, where possible, offer policymakers informed recommendations. This paper introduces this body of work—still being added to today—through summaries of six of RAND's earliest studies on various aspects of the topic. It calls attention to the pressing policy questions; summarizes the key findings, insights into the issues, and policy implications; and, where applicable, lays out recommendations.

http://www.rand.org/pubs/occasional_papers/OP316/

OP-317

Linkages in World Financial Markets. C. Richard Neu, Jack Clift. 2011

Although assessing the full consequences of the global financial crisis that began in the summer of 2007 will require years, it is possible now to examine how short-term linkages in different financial markets have changed since the onset of the crisis. In particular, this paper asks whether there has been any diminution in the traditional role of U.S. financial markets in leading movements in other financial markets. This paper examines daily movements in three major equity indexes: the U.S. S&P 500, the Japanese Nikkei 225, and the British FTSE 100. It examines how daily changes in one market are correlated with the immediately subsequent changes in the other two and the size of movements in each market after a given change in the other markets before and after the onset of the crisis. The authors find that the three national equity indices examined became more highly correlated after the onset of the crisis. This result is robust with respect to the choice of starting date for the crisis and is consistent with the findings of other studies of other financial crises. More novel is the finding that the size of one market's movements subsequent to movements in other markets also increased. The influence of U.S. markets on market movements elsewhere does not appear to have diminished in the period immediately following the onset of the crisis.

http://www.rand.org/pubs/occasional_papers/OP317/

OP-318-MCIA

Subnational Government in Afghanistan. Michael Shurkin. 2011

This primer on subnational government in Afghanistan is meant to inform efforts to strengthen local government in recently cleared areas. Among the problems afflicting the Afghan state are the lack of effective service provision and representation, which together should constitute the base of the state's legitimacy. This paper identifies the various entities of local government and identifies opportunities for improvement. It is based on a review of the available academic and nongovernmental studies of subnational government in Afghanistan and interviews with civilian experts, including consultants attached to U.S. and allied government agencies. Opportunities to make the system more participatory and representative should be sought at lower levels to compensate for weak central institutions, and the court system must be strengthened where possible. Good intel-

ligence about local politics must precede engagement. Governance metrics should gauge subjective perceptions of the legitimacy of the Afghan state, rather than objective outputs.

http://www.rand.org/pubs/occasional_papers/OP318.html

OP-320-RC

The Option of an Oil Tax to Fund Transportation and Infrastructure. Keith Crane, Nicholas Burger, Martin Wachs. 2011

This paper raises key issues associated with using an oil tax to fund U.S. transportation infrastructure, identifies the decisions Congress would need to make in designing such a tax, and outlines some of the likely implications of adopting an oil tax. In 2009, federal spending on surface-transportation infrastructure outpaced federal tax revenues on gasoline and diesel fuel. Increasing fuel efficiency results in less money spent buying fuel, so real revenue generated from these taxes has declined. This paper investigates using a percentage tax on crude oil and imported refined petroleum products consumed in the United States to fund U.S. transportation infrastructure. Such a tax could simplify the tax system by replacing several existing taxes used to finance transportation with a single, upstream tax that could be adjusted automatically to fully fund appropriated expenditures on transportation and transfer external costs associated with producing and consuming oil from the general public to oil producers and consumers. It would spread the burden of these external costs across all users of petroleum products, help fund national security expenditures employed to safeguard sources and sea-lanes used to import oil, and might be more politically palatable than raising existing motor-fuel taxes. The paper provides revenue estimates based on different potential oil tax rates at various oil prices, then matches potential revenues to estimates of transportation expenditure needs. It also estimates the aggregate external costs associated with producing and consuming oil.

http://www.rand.org/pubs/occasional_papers/OP320/

OP-322-MCIA

Iran's Balancing Act in Afghanistan. Alireza Nader, Joya Laha. 2011

The Islamic Republic of Iran continues to provide measured support to Taliban insurgents battling U.S. and coalition forces in Afghanistan. However, Iran also maintains close and constructive relations with the same Afghan central government that is battling Taliban forces. Iran's complex and, at times, contradictory set of cultural, religious, political, and security interests shapes its behavior in Afghanistan, to the benefit and detriment of U.S. objectives. This paper examines Iran's objectives and interests in Afghanistan and the consequent Iranian policies affecting U.S. forces in Afghanistan. The authors find that Iran appears to be pursuing at times contradictory objectives in Afghanistan; that the Baluchi insurgency in Iran is an important factor in determining Iran's behavior in Afghanistan; and that increasing tensions with the United States could lead to more-significant Iranian aid to the Taliban.

http://www.rand.org/pubs/occasional_papers/OP322.html

OP-326-OSD

Looming Discontinuities in U.S. Military Strategy and Defense Planning: Colliding RMAs Necessitate a New Strategy. Paul K. Davis, Peter A. Wilson. 2011

In this think piece, the authors argue that the United States is entering a period of discontinuity in its defense planning, something that future historians may see as a planning crisis. The causes are technology diffusion that is leveling aspects of the playing field militarily, geostrategic changes, and the range of potential adversaries. The authors see these as leading to (1) increasingly difficult force projection in some important circumstances; (2) a related block obsolescence of U.S. forces and concepts of operations; (3) the need for a new grand strategy in the Asia-Pacific region, where China is now a major regional power; and (4) the United States having to deal with a demanding mix of “complex operations”

(e.g., counterinsurgency and stabilization) and traditional challenges. Obstacles exist to taking on these challenges. These include severe economic issues and the absence of consensus on the nature of next-generation forces and posturing. The paper presents three illustrative models for future concepts of operations, but all are very challenging. They and others will need to be explored with considerable innovation and experimentation. Finally, the papers argue for a comprehensive rebalancing of national security strategy, not just a rebalancing of military capabilities.

http://www.rand.org/pubs/occasional_papers/OP326/

OP-327-MCIA

Reintegrating Afghan Insurgents. Seth G. Jones. 2011

Successful counterinsurgency requires getting insurgents to switch sides. Former insurgents provide an invaluable source of information on their previous colleagues, and can ultimately cause momentum to shift toward counterinsurgent forces. This document examines reintegrating mid- and low-level insurgents into their local communities in Afghanistan and outlines steps to facilitate that reintegration process. The author discusses the factors that increase the likelihood of reintegrating fighters and the key options for fighters as they consider reintegration. Finally, he outlines operational and tactical steps that should be taken when insurgents consider reintegration.

http://www.rand.org/pubs/occasional_papers/OP327.html

OP-328-OSD

Measuring Illegal Border Crossing Between Ports of Entry: An Assessment of Four Promising Methods. Andrew R. Morral, Henry H. Willis, Peter Brownell. 2011

The U.S. Department of Homeland Security is responsible for controlling the flow of goods and people across the U.S. border, a difficult task that raises challenging resource management questions about how best to minimize illicit flows across the border while facilitating legitimate ones. Commonly reported border control measures, such as numbers of illegal migrants apprehended or miles of border under effective control, bear only an indirect and uncertain relationship to the border control mission, making them unreliable management tools. Fundamental to the question of border control effectiveness is the proportion of illicit border crossings that are prevented through either deterrence or apprehension. Estimating these proportions requires knowing the total flow of illicit goods or border crossings, but compelling methods for producing such estimates do not yet exist. This short paper describes four innovative approaches to estimating the total flow of illicit border crossings between ports of entry. Each is sufficiently promising to warrant further attention for purposes of supporting reliable, valid, and timely measures of illicit cross-border flow. Successfully implementing each of these approaches will require methodological development and analysis to identify barriers or constraints to using the approach, the cost of data collection, and the amount of error that can be expected in the resulting estimates.

http://www.rand.org/pubs/occasional_papers/OP328.html

OP-329/1-A

Perspectives on the Battle of Wanat: Challenges Facing Small Unit Operations in Afghanistan. Randall Steeb, John Matsumura, Thomas J. Herbert, John Gordon IV, William W. Horn. 2011

The research reported in this document is focused on exploring alternatives for improving ongoing small unit operations in Afghanistan. The effort attempts to provide a more hands-on look at the situation that platoon-sized units face in establishing and protecting combat outposts (COPs). Using the Battle of Wanat as a case study, the authors explore and evaluate a range of alternative technological and corresponding tactical improvements. They begin the process by developing a tactical-level understanding of the circumstances and risks that a small unit faced as it transitioned from a vehicle patrol base to a COP. Future research will examine near-term technologies and tactics, along with alternative concepts of opera-

tion that could improve future outcomes for such small units.

http://www.rand.org/pubs/occasional_papers/OP329z1.html

OP-331-A

Where Might the U.S. Army Budget Go, and How Might It Get There?. Carter C. Price, Aaron L. Martin, Edward Wu, Christopher G. Pernin. 2011

Since 1950, the U.S. Army's budget has waxed and waned on a roughly 20-year cycle. As the Army's role in Iraq and Afghanistan diminishes over the next decade, it will be entering the waning phase of this budget cycle. In this report, the authors examine historic trends in the Army's largest budget accounts (military personnel, operations and maintenance, and procurement) to provide a context for decisions relating to future spending and explore the recent public discourse on cuts in military spending. They also discuss the potential implications of these cuts.

http://www.rand.org/pubs/occasional_papers/OP331.html

OP-332-ICJ

Recovery Under the Medicare Secondary Payer Act: Impact of Reporting Thresholds. Eric Helland, Fred Kipperman. 2011

Effective January 1, 2012, Medicare will require insurers and self-insured companies to report settlements, awards, and judgments that involve a Medicare beneficiary to the Centers for Medicare and Medicaid Services (CMS). In the first year of the law's implementation, claims resolved for less than $5,000 will be exempt from the reporting requirement. In the second year, the threshold for reporting will fall to $2,000 and then $600. In the third year, all claims will have to be reported regardless of payment size. As a first step toward informing the policy debate about the costs of compliance, the amounts likely to be available for recovery under the Medicare Secondary Payer (MSP) Act, and the effects of different thresholds on these quantities, the researchers analyzed the effects of the eventual phaseout of the $5,000 threshold. The results of the analysis suggest that collecting on low-value claims provides Medicare with relatively little revenue and that such claims represent a substantial fraction of the reporting burden.

http://www.rand.org/pubs/occasional_papers/OP332.html

OP-333-OSD

Radicalization, Linkage, and Diversity: Current Trends in Terrorism in Europe. Lorenzo Vidino. 2011

Although it has not suffered a successful attack since the July 7, 2005, bombings in London, Europe perceives itself to be under a constant threat from jihadist-inspired terrorism. Indeed, European authorities arrest some 200 individuals and thwart a handful of plots of jihadist inspiration every year. Based on a survey of legal documents, intelligence reports, academic literature, and media sources, and on conversations with experts and government officials, this paper provides an overview of current trends in jihadism in Europe from an operational perspective. Its main finding is that, although most European plots appear to have been independent, the most serious ones tended to involve extensive operational connections to groups operating outside of Europe. Moreover, contrary to common characterizations, there is little evidence indicating that al Qaeda and affiliated organizations operating outside of Europe conduct direct efforts to recruit European Muslims. Rather, connections between individuals or clusters in Europe on one hand and al Qaeda and affiliated movements on the other are forged through a process of linkage, often facilitated through personal connections and “jihad entrepreneurs,” that typically occurs after radicalization and is initiated by European militants. The presence of this linkage characterizes the fourth and current phase of jihadism in Europe.

http://www.rand.org/pubs/occasional_papers/OP333.html

OP-334-A

Heavy Armor in the Future Security Environ-

ment. David E. Johnson. 2011

The U.S. Army is under pressure to demonstrate a valid need for heavy brigade combat teams in the future security environment—an environment in which many believe that such units will be largely irrelevant. Do heavy armored forces have a place in the U.S. military of the future?The paper examines the capabilities of irregular, state-sponsored hybrid, and state adversaries in the context of recent experiences in Iraq, Afghanistan, Gaza, and Lebanon. It concludes that heavy armored vehicles have been key enablers for light and medium armored forces engaged in irregular warfare and that they are the only vehicles able to maneuver on the battleground when adversaries have standoff weapons. To minimize future risk and cost, the author therefore recommends that the United States base much of its future capabilities on heavy armored forces that can scale down to confront irregular adversaries and serve as a hedge against challenges presented by a very complex and lethal future security environment.

http://www.rand.org/pubs/occasional_papers/OP334.html

OP-335-A

The 2008 Battle of Sadr City. David E. Johnson, M. Wade Markel, Brian Shannon. 2011

The 2008 Battle of Sadr City, which took place in Baghdad nearly 15 months after the beginning of the U.S. "surge" in Iraq, has received relatively little scholarly attention. However, the coalition's defeat of Jaish al-Mahdi after six weeks of high-intensity fighting offers important lessons for the U.S. Army as it prepares for future operations.Using after-action reports, briefings, other primary sources, and interviews with combatants and officials involved in the fighting and its aftermath, the authors describe the battle, analyze its outcome, and derive implications for the conduct of land operations. Their analysis identifies the following factors as critical to the coalition victory: supporting ground maneuver elements with integrated intelligence, surveillance, and reconnaissance capabilities and strike assets; the key roles played by heavy forces, snipers, and special operations forces; decentralized decisionmaking; capable indigenous security forces; and rapid transitions from phase to phase. The authors conclude that the Battle of Sadr City presents a new model for dealing with insurgent control of urban areas: treating an urban area as a wide-area security mission. Unlike previous urban operations against insurgents, in which cities were essentially besieged and then stormed, the objective in this battle was not to take and clear Sadr City but to create conditions that would make it both impossible for the insurgents to operate effectively and possible to restore security to the broader population.

http://www.rand.org/pubs/occasional_papers/OP335.html

OP-337-OSD

Counterinsurgency Scorecard: Afghanistan in Early 2011 Relative to the Insurgencies of the Past 30 Years. Christopher Paul. 2011

The previously published RAND monograph, Victory Has a Thousand Fathers: Sources of Success in Counterinsurgency, used detailed case studies of the 30 insurgencies worldwide begun and completed between 1978 and 2008 to analyze correlates of success in counterinsurgency (COIN). A core finding was that a case's score on a scorecard of 15 equally weighted good and 12 equally weighted bad COIN factors and practices perfectly predicted the outcome of those 30 insurgencies. That is, the balance of good and bad factors and practices correlated with either a COIN win (insurgency loss) or a COIN loss (insurgency win) in the overall case. Using the scorecard approach as its foundation, a RAND project sought to extend the findings to the case of Afghanistan in early 2011. The effort involved an expert elicitation, or Delphi, exercise in which experts were asked to make "worst-case" assessments of the factors to complete the scorecard for ongoing operations in Afghanistan. The consensus results revealed that early 2011 Afghanistan scores in the middle of the historical record in terms of COIN wins and losses: Its score was lower than that in the lowest-scoring historical COIN win but higher than that in the highest-scoring COIN loss. This suggests an uncertain outcome in Afghanistan, but the findings

may help provide additional guidance as operations continue.

http://www.rand.org/pubs/occasional_papers/OP337.html

OP-338-DH

A Prize Worth Paying? Non-standard ways to support and reward excellence in health research and development in the UK NHS. Tom Ling. 2011

This is a short paper scoping the issues involved in considering the merits of using prizes to support the objectives of the Department of Health Research and Development Directorate (DH R&D). The paper concludes that there is indeed merit in developing incentives to support excellence in health research in addition to standard' performance management and routine inspection. These could act either to reinforce the signals created by standard metrics (for example, awards recognising the best performers as measured by standard metrics) or they could fill the gaps' to encourage behaviour not influenced by conventional incentives. This would create an ecosystem to more effectively link reward with motivation, which could deliver benefits for patients and the health care system more widely. Prizes, it is argued, should play a more significant role in the UK health R&D system than in the past but it is not suggested that they replace existing systems to support high-quality research and development.

http://www.rand.org/pubs/occasional_papers/OP338.html

OP-339-USFI

Managing Arab-Kurd Tensions in Northern Iraq After the Withdrawal of U.S. Troops. Larry Hanauer, Jeffrey Martini, Omar Al-Shahery. 2011

To help U.S. policymakers prepare for the withdrawal of U.S. troops from Iraq in late 2011, this paper presents options for mitigating the risks of Arab-Kurd conflict and suggests mechanisms through which U.S. government entities—both civilian and military—could work to alleviate tensions in northern Iraq. The authors discuss the feasibility of a range of confidence-building measures that could help Arabs and Kurds build trust and avoid conflicts that might derail peaceful efforts to resolve Iraq's fundamental political challenges. They conclude that such efforts are unlikely to contain Arab-Kurd violence over the long-term absent a national-level agreement regarding federalism, the legal and political status of disputed territories, and the management of oil and gas resources. However, by managing local disputes, confidence-building measures may be able to prevent violence long enough for Iraq's politicians to resolve these broader issues.

http://www.rand.org/pubs/occasional_papers/OP339.html

OP-340-MO/FR

Alliances in the 21st Century: Implications for the US-European partnership. Jeremy J. Ghez. 2011

This paper's argument is two-fold. First, the concepts of “partnership” and “alliance” deserve to be unpacked because they can reflect very different motivations and realities. Second, strategic partnerships do not exclusively take the form of a threat- or an adversary-based alliance. Partnerships that are driven commonalities in political culture – “natural alliances” – can also be the expression of a very pragmatic approach to international relations, especially for leaders in search of predictability in an uncertain global landscape. This paper provides a categorization of alliances by identifying three drivers for state alignments: tactics, history and commonalities in political culture. It presents a discussion of the last driver – commonalities in political culture – and a methodology to identify natural alliances that I apply to the US-European partnership. I find that the trans-Atlantic partnership forms a natural alliance since 1991 at least, which could potentially include Australia, New Zealand, Japan and South Korea but not Turkey. Understanding the differences between the driving forces of alliances has policy implications for the United States and European powers, especially as they seek to redefine the purpose of their partnership in the 21st century international landscape. Rather than being a necessary source of confusion, the diversity of alliances can potentially offer greater leverage to trans-Atlantic partners,

through an appropriate mix of alliances fulfilling different purposes in a broad strategy.

http://www.rand.org/pubs/occasional_papers/OP340.html

OP-341-EMKF

Challenges to Value-Enhancing Innovation in Health Care Delivery: Commonalities and Contrasts with Innovation in Drugs and Devices. Steven Garber, Susan M. Gates, Margaret E. Blume-Kohout, James R. Burgdorf, Helen Wu. 2011

Limiting the growth of health care costs while improving population health is perhaps the most important and difficult challenge facing U.S. health policymakers. The role of innovation in advancing these social goals is controversial, with many seeing innovation as a major cause of cost growth and many others viewing innovation as crucial for improving the quality of care and health outcomes. The authors argue that mitigating the tension between improving health and controlling costs requires more-nuanced perspectives on innovation. More specifically, they argue that policymakers should carefully distinguish between innovative activities that are worth their social costs and activities that are not worth their social costs and try to encourage the former and discourage the latter. The paper considers innovation in drugs, devices, and methods of delivering health care, with particular attention to delivery.

http://www.rand.org/pubs/occasional_papers/OP341.html

OP-342-OSD

A Cyberworm that Knows No Boundaries. Isaac R. Porche III, Jerry M. Sollinger, Shawn McKay. 2011

Iran's announcement that a computer worm called Stuxnet had infected computers that controlled one of its nuclear processing facilities marked a signal event in cyber attacks. Although such attacks were known to be theoretically possible, the incident proved that a cyberworm could successfully infiltrate a system and produce physical damage. Furthermore, the sophisticated nature of the worm and the resources that would have been required to design, produce, and implant it strongly suggest a state-sponsored effort. It has become clear that Stuxnet-like worms pose a serious threat even to infrastructure and computer systems that are not connected to the Internet. However, defending against such attacks is an increasingly complex prospect. The nature of cyberspace ensures that the attacker has the upper hand and can move about with impunity and relative anonymity. The sophistication of virulent malware has also made it difficult to detect whether an intrusion has occurred, and attackers have a wide range of means at their disposal to gain access to networks, even those that are closed. Finally, bureaucratic and legal barriers can hinder the ability to mount a successful defense. Under the current framework, different organizations have different responsibilities and different levels of authority when it comes to investigating or defending against intrusions, depending on the nature of the attack, its geographic origin, and the systems it targets. In addition, there is a need to protect critical government and private-sector infrastructure in a way that does not infringe on civil liberties or proprietary data. The authors argue that new legislation is needed to establish a more efficient assignment of responsibilities, and a revised legal code may be required to successfully defend against the ever-evolving cyber threat.

http://www.rand.org/pubs/occasional_papers/OP342.html

OP-343-RC

Stray Dogs and Virtual Armies: Radicalization and Recruitment to Jihadist Terrorism in the United States Since 9/11. Brian Michael Jenkins. 2011

Since September 11, 2001, so-called “homegrown terrorists,” working alone or with others, have planned and in some cases implemented terrorist activities, contributed financial or other material support to others' terrorist activities, or become radicalized in the United States and then traveled to other countries to conduct terrorist activities directed against those countries or against the United States. This paper examines the cases of homegrown terrorism from 9/11 through 2010,

highlights lessons learned from those cases that suggest actions for the future, and includes a chronology of numbers and case descriptions of terrorist events in the United States during that period. Most of the individuals involved are Muslim, but the numbers are small. A total of 176 Americans have been indicted, arrested, or otherwise identified as jihadist terrorists or supporters since 9/11. They were involved in 82 cases, a majority of which involve the actions of a single individual. Al Qaeda has increasingly used the Internet to build an army of followers. Many of the terrorists identified in this study began their journey online. However, al Qaeda has not yet managed to inspire its online followers to action. Few of the 32 locally hatched jihadist plots to carry out terrorist attacks in the United States since 9/11 got much beyond the discussion stage. Nevertheless, al Qaeda remains a threat. More terrorist attempts will occur. Traditional law enforcement, in which authorities attempt to identify and apprehend a perpetrator after a crime has been committed, is inadequate to deal with terrorists who are determined to cause many deaths and great destruction and who may not care whether they themselves survive. Public safety demands a preventive approach—intervention before an attack occurs. In addition to law enforcement, intelligence collection, and community policing, public reaction is an essential component of such preventive defense.

http://www.rand.org/pubs/occasional_papers/OP343.html

OP-344-A

Conflict with China: Prospects, Consequences, and Strategies for Deterrence. James Dobbins, David C. Gompert, David A. Shlapak, Andrew Scobell. 2011

This paper presents some scenarios that, if they were to come to pass, could result in military conflict with China over the next thirty years. The authors begin by exploring different plausible sources of conflict--whether it be the collapse of North Korea, possible dwindling relations between Taiwan and China, or other contingencies involving Japan or India. They discuss the operational implications each might present the United States and then turn to the requirements for defense and deterrence. Although China's military capabilities lag far behind those of the United States, it has--or will gain--local superiority, first in and around Taiwan and then at greater distances. As a result, direct defense of contested assets in the region will become increasingly difficult and would likely escalate geographically or into the cyber and economic realms. Enabling capabilities and buttressing the resolve of China's neighbors is one means for improving U.S. prospects for direct defense while reducing the necessity for escalation. In parallel to that strategy, efforts to draw China into cooperative security endeavors should be proffered. The far-reaching specter of economic mayhem that would be a consequence of any Sino-American conflict, in effect a form of mutual assured economic destruction, also acts as a powerful mutual deterrent.

http://www.rand.org/pubs/occasional_papers/OP344.html

OP-349-IFPMA

Improving Access to Medicines for Non-Communicable Diseases in the Developing World. Soeren Mattke, Marla C. Haims, Nono Ayivi-Guedehoussou, Emily M. Gillen, Lauren Hunter, Lisa Klautzer, Tewodaj Mengistu. 2011

Non-communicable diseases (NCDs) now account for the majority of global morbidity and mortality and are increasingly affecting developing countries whose under-resourced health care systems also have to handle a high burden of infectious disease. To counter the global devastation caused by NCDs, the United Nations General Assembly decided to “set a new global agenda” and is convening a high-level meeting on NCDs in September 2011. In connection with this meeting, the authors of this paper took a first step toward developing a policy research agenda for improving access to NCD medicines in developing countries, a step that the research-based pharmaceutical industry, in particular, can carry forward as part of broader global efforts to combat NCD. The authors provide a framework for understanding

the obstacles to access for NCD medicines, review specific issues to be confronted within each obstacle in the developing world, identify promising ideas for improving access to NCD medicines, and point to several highly promising areas for the research-based pharmaceutical industry to focus on as it develops its NCD policy research program in close collaboration with other key stakeholders.

http://www.rand.org/pubs/occasional_papers/OP349.html

OP-352-DOSS

Power to the People: The Role of Consumer-Controlled Personal Health Management Systems in the Evolution of Employer-Based Health Care Benefits. Spencer S. Jones, John P. Caloyeras, Soeren Mattke. 2011

The passage of the Patient Protection and Affordable Care Act has piqued employers' interest in new benefit designs because it includes numerous provisions that favor cost-reducing strategies, such as workplace wellness programs, value-based insurance design (VBID), and consumer-directed health plans (CDHPs). Consumer-controlled personal health management systems (HMSs) are a class of tools that provide encouragement, data, and decision support to individuals. Their functionalities fall into the following three categories: health information management, promotion of wellness and healthy lifestyles, and decision support. In this paper, we review the evidence for many of the possible components of an HMS, including personal health records, web-based health risk assessments, integrated remote monitoring data, personalized health education and messaging, nutrition solutions and physical activity monitoring, diabetes-management solutions, medication reminders, vaccination and preventive-care applications, integrated incentive programs, social-networking tools, comparative data on price and value of providers, telehealth consultations, virtual coaching, and an integrated nurse hotline. The value of the HMS will be borne out as employers begin to adopt and implement these emerging technologies, enabling further assessment as their benefits and costs become better understood.

http://www.rand.org/pubs/occasional_papers/OP352.html

OP-354-EMKF

Innovations in the Provision of Legal Services in the United States: An Overview for Policymakers. Neil Rickman, James M. Anderson. 2011

Over the past 20 twenty years, globalization, consolidation, information technology, and litigation financing have begun to change the way that many legal services are provided in the United States. The innovations that have occurred have often been influenced by experiences elsewhere, as in the case of traditional prohibitions on litigation financing, for which the United Kingdom and Australia have led the way in relaxing rules. The same globalization and offshoring of information services that have occurred in accounting, product support, and medical transcription have begun to occur in legal services. Yet numerous restrictions on the provision of legal services—from traditional restrictions on litigation and firm financing to the requirement that a legal provider be a licensed attorney in a particular state—limit the kinds of innovation that are permissible. The authors present a framework for examining recent and ongoing innovations in legal services in the United States. The purpose of this framework is to aid policymakers in understanding the likely effects of innovations and the role of policy in promoting or deterring innovation, and to provide criteria that policymakers might use to decide whether the advantages of an innovation justify loosening existing restrictions. The authors also discuss the further research and data infrastructure necessary to aid policymakers in understanding whether existing restrictions should be altered.

http://www.rand.org/pubs/occasional_papers/OP354.html

RESEARCH BRIEFS

RB-4557-2

Helping Children Cope with Violence and Trauma: A School-Based Program That Works. Bradley D. Stein, Lisa H. Jaycox, Sheryl H. Kataoka, Marleen Wong, Audra Langley, Jorge L. Avila, Antonia Bonilla, Patricia Castillo-Campos, Judith A. Cohen, Kristin L. Dean, Jennifer L. DuClos, Marc N. Elliott, Pia Escudero, Arlene Fink, Susan Fuentes, Kate L. Gegenheimer, Kristie Halsey, Anthony P. Mannarino, Erum Nadeem, Victoria K. Ngo, Vincent P. O'Donoghue, Matthias Schonlau, Molly M. Scott, Priya Sharma, Wenli Tu, Douglas Walker, Catalina Zaragoza. 2011

The Cognitive-Behavioral Intervention for Trauma in Schools (CBITS) reduces symptoms of post-traumatic stress and depression in students exposed to violence. Free web-based training to deliver CBITS is available for mental health professionals.

http://www.rand.org/pubs/research_briefs/RB4557.html

RB-9508

Preventing Obesity and Its Consequences: Highlights of RAND Health Research. Roland Sturm, Deborah Cohen, Tatiana Andreyeva, Jeanne S. Ringel, Ricky N. Bluthenthal, Marielena Lara, Mary Lou Gilbert, Scott Gee, Ashlesha Datar, Nancy Nicosia, D. Phuong Do, Tamara Dubowitz, Chloe E. Bird, Nicole Lurie, Jose J. Escarce, Brian Karl Finch, Marsha Dowda, Thomas L. McKenzie, Molly M. Scott, Kelly R. Evenson, Ariane L. Bedimo-Rung, Carolyn C. Voorhees, Maria J. C. A. Almeida, Melonie Heron, Ricardo Basurto-Davila, Lauren Hale, Meenakshi Maria Fernandes, Ying-Ying Goh, Dana P. Goldman, Bessie Ko Sipple-Asher, Darius N. Lakdawalla, J. J. Griggs, Eva Culakova, Melony E. Sorbero, Michelle van Ryn, Marek S. Poniewierski, Debra A. Wolff, Jeffrey Crawford, David C. Dale, G. H. Lyman, Erin F. Gillespie, David A. Hanauer, Michael S. Sabel, Sanae Inagami, Arleen F. Brown, Steven M. Asch, Melinda Maggard Gibbons, Irina Yermilov, Margaret Maglione, Sydne Newberry, Marika Suttorp, Lara Hilton, Heena P. Santry, Paul L. Hutchinson, Nicholas Bodor, Chris M. Swalm, Thomas Farley, Janet C. Rice, John Elder, Diane Catellier, J. Scott Ashwood, Jamie F. Chriqui, Adrian Overton, Frank J. Chaloupka, Marjorie L. Pearson, Donald Rose, Shin-Yi Wu, Yuyan Shi, Pierre-Carl Michaud, Yuhui Zheng, Adam H. Gailey, Igor Vaynman, Emily J. Herrmann, Laura J. Weiser, Jennifer Hawes-Dawson, Christina H. Jagielski, Kimberly E. Uyeda, Laura M. Bogart, Josephina Olarita-Dhungana, Gery W. Ryan, Mark A. Schuster, John M. Morton, E. H. Livingston, Paul G. Shekelle, Lisa M. Powell. 2011

Summarizes key RAND studies on the causes of obesity, its economic and health consequences, and potential strategies for prevention, including work on health care costs, junk food, food deserts, school meals, and proximity of parks.

http://www.rand.org/pubs/research_briefs/RB9508.html

RB-9529-OSD

The War Within: Suicide Prevention in the U.S. Military. Rajeev Ramchand, Joie D. Acosta, Rachel M. Burns, Lisa H. Jaycox, Christopher G. Pernin. 2011

The increasing number of suicides is causing concern in the U.S. Department of Defense (DoD). Suicide-prevention programs in DoD and across the services have some (but not all) of the characteristics of comprehensive programs.

http://www.rand.org/pubs/research_briefs/RB9529/

RB-9534-CHSWC

California's Workers' Compensation Reform: Effects on Return to Work. Seth A. Seabury, Robert T. Reville, Stephanie Williamson, Christopher F. McLaren, Adam H. Gailey, Elizabeth Wilke, Frank W. Neuhauser. 2011

This brief summarizes a study of how changes to the workers' compensation system have affected return-to-work rates in California, how return-to-work trends compare with policy changes, and recent trends in benefit adequacy.

http://www.rand.org/pubs/research_briefs/RB9534/

RB-9542-OSD

Developing Custodians of Care: Military Medical Leadership. Sheila Nataraj Kirby, Julie A. Marsh, Jennifer Sloan McCombs, Harry J. Thie, Nailing Xia, Jerry M. Sollinger. 2011

The Military Health System faces a range of challenges, and effective leadership is key to meeting them. Approaches used by other organizations could guide improvements in how military health care leaders are selected, developed, and incentivized.

http://www.rand.org/pubs/research_briefs/RB9542/

RB-9555-OSD

Should the Joint Medical Education and Training Campus Have an Office of Institutional Research?. Sheila Nataraj Kirby, Julie A. Marsh, Harry J. Thie. 2011

Two goals of the joint medical training and education campus at Ft. Sam Houston are to become a high-performing learning organization and an accredited, degree-granting institution. A research and evaluation capability would help it meet these goals.

http://www.rand.org/pubs/research_briefs/RB9555.html

RB-9562-AUS

Australia's Domestic Submarine Design Capabilities: Options for the Future Submarine. John Birkler, John F. Schank, Jessie Riposo, Mark V. Arena, Robert W. Button, Paul DeLuca, James Dullea, James G. Kallimani, John Leadmon, Gordon T. Lee, Brian McInnis, Robert Murphy, Joel B. Predd, Raymond H. Williams. 2011

To design a new naval submarine domestically, Australia's industry and Government will need about 1,000 skilled draftsmen and engineers. Cultivating this workforce could take 15-20 years; partnering with foreign designers could expedite the process.

RB-9566-RE

Europe's demography: Are babies back? The recent recovery in EU period fertility due to older childbearing. Stijn Hoorens, Jack Clift, Laura Staetsky, Barbara Janta, Stephanie Diepeveen, Molly Morgan Jones, Jonathan Grant. 2011

Many European governments have been concerned about falling fertility rates, due to the welfare implications of an ageing population supported by a shrinking workforce. However, doomsday' scenarios of fertility spiralling downwards and European populations imploding have not materialised; indeed, recent snapshots of indicators for childbearing suggest some recovery in fertility. RAND Europe therefore decided to update its 2004 study into the causes and consequences of low fertility in Europe. We analysed the latest data, reviewed recent literature, and examined the situation in Germany, Poland, Spain, Sweden and the UK in depth.

http://www.rand.org/pubs/research_briefs/RB9566.html

RB-9568-NMFA

Views from the Homefront: How Military Youth and Spouses Are Coping with Deployment. Anita Chandra, Sandraluz Lara-Cinisomo, Lisa H. Jaycox, Terri Tanielian, Bing Han, Rachel M. Burns, Teague Ruder. 2011

Reports the results of a longitudinal study of youth from military families and their caregivers concerning their emotional well-being and how well they are coping with servicemembers' extended deployments.

http://www.rand.org/pubs/research_briefs/RB9568/

RB-9569-CAP

Using Student Performance to Evaluate Teachers. Jennifer L. Steele, Laura S. Hamilton, Brian M. Stecher. 2011

Performance-based teacher evaluations should incorporate multiple measures of performance. Use of student test scores must support valid, reliable inferences. Evaluating teachers of nontested

subjects/grades may require supplemental assessments.

http://www.rand.org/pubs/research_briefs/RB9569/

RB-9570

Will Adoption of Electronic Health Records Improve Quality in U.S. Hospitals?. Spencer S. Jones, John L. Adams, Eric C. Schneider, Jeanne S. Ringel, Elizabeth A. McGlynn, Mary E. Vaiana. 2011

Shares findings on the potential effects of electronic health records (EHRs) on health care quality, based on analysis of extensive data from 2003 and 2006 on EHR adoption, hospital characteristics, and hospital quality in nearly 2,100 hospitals.

http://www.rand.org/pubs/research_briefs/RB9570/

RB-9571-OSD

Results from the Congressionally Mandated Study of U.S. Combat and Tactical Wheeled Vehicle. Terrence K. Kelly, John E. Peters, Eric Landree, Louis R. Moore, Randall Steeb, Aaron L. Martin. 2011

Congress requested a study to assess the challenges in fielding U.S. ground combat and tactical wheeled vehicle fleets, including discussion of requirements; capability gaps; technology, operational, and business risks; and recommended actions.

http://www.rand.org/pubs/research_briefs/RB9571/

RB-9572

Seasonal Flu Vaccination: Why Don't More Americans Get It?. Katherine M. Harris, Juergen Maurer, Lori Uscher-Pines, Arthur L. Kellermann, Nicole Lurie. 2011

RAND researchers found that less than half of U.S. adults received flu vaccinations in 2010. Strategies to increase flu vaccination rates should include stronger efforts to address public skepticism and negative perceptions.

http://www.rand.org/pubs/research_briefs/RB9572/

RB-9573-RS

Project Retrosight: Understanding the returns from cardiovascular and stroke research. Steven Wooding, Stephen Hanney, Alexandra Pollitt, Martin Buxton, Jonathan Grant. 2011

Project Retrosight analysed 29 case studies of cardiovascular and stroke research in Australia, Canada and the UK, examining the diversity of impact produced by this kind of research and identifying factors associated with various levels of payback.

http://www.rand.org/pubs/research_briefs/RB9573/

RB-9574-DHHS

Building Community Resilience to Disasters: A Roadmap to Guide Local Planning. Anita Chandra, Joie D. Acosta, Stefanie Stern, Lori Uscher-Pines, Malcolm V. Williams, Douglas Yeung, Jeffrey Garnett, Lisa S. Meredith. 2011

Examines ways in which communities can improve their ability to withstand and recover from adversity.

http://www.rand.org/pubs/research_briefs/RB9574/

RB-9575-DOJ

Reducing the Impact of Children's Exposure to Violence: Results of the National Evaluation of Safe Start Promising Approaches. Lisa H. Jaycox, Laura J. Hickman, Dana Schultz, Dionne Barnes-Proby, Claude Messan Setodji, Aaron Kofner, Racine Harris, Joie D. Acosta, Taria Francois. 2011

RAND's evaluation of Safe Start Promising Approaches identified program successes and challenges in implementing programs for children exposed to violence. The evaluation results, though largely inconclusive, can inform similar efforts going forward.

http://www.rand.org/pubs/research_briefs/RB9575.html

RB-9576

Moving Toward Vehicle Miles of Travel Fees to

Replace Fuel Taxes: Assessing the Path Forward. Liisa Ecola, Paul Sorensen, Martin Wachs, Max Donath, Lee Munnich, Betty Serian. 2011

Assesses alternate mechanisms for implementing fees to fund the nation's road network based on vehicle miles traveled (VMT) and outlines a plan for large-scale system trials to further evaluate the most promising concepts.

http://www.rand.org/pubs/research_briefs/RB9576/

RB-9577-SANF

Expanding Measures of School Performance Under the Elementary and Secondary Education Act. Heather L. Schwartz, Laura S. Hamilton, Brian M. Stecher, Jennifer L. Steele. 2011

How can the upcoming reauthorization of the Elementary and SecondaryEducation Act encourage states to expand their measures of schoolperformance to address goals beyond just mathematics and English LanguageArts?

http://www.rand.org/pubs/research_briefs/RB9577/

RB-9578-RE

How can Europe promote labour force participation and reduce income inequality?. Christian van Stolk, , , Stijn Hoorens, Philipp-Bastian Brutscher, Priscillia Hunt, Flavia Tsang, Barbara Janta. 2011

Improving labour force participation and reducing income inequality require social investment in the groups at risk. This study identifies challenges and suggests ideas for policymakers to improve the situation.

http://www.rand.org/pubs/research_briefs/RB9578/

RB-9579

Does Employer-Based Health Insurance Discourage Entrepreneurship and New Business Creation?. Robert W. Fairlie, Kanika Kapur, Susan M. Gates. 2011

Raises concerns that the bundling of health insurance and employment may discourage business creation.

http://www.rand.org/pubs/research_briefs/RB9579/

RB-9580

A Worksite Parenting Program That Works. Mark A. Schuster, Karen L. Eastman, Rosalie Corona, Marc N. Elliott, David E. Kanouse, Megan K. Beckett, Steven Martino, David J. Klein, Gery W. Ryan, Annie Jie Zhou, Avra L. Warsofsky, Jonathan E. Fielding, Mary Jane Rotheram-Borus, Lester Breslow, Lynn L. Franzoi. 2011

Summarizes research on Talking Parents, Healthy Teens, a worksite-based parenting program designed by RAND and University of California at Los Angeles researchers that improves communication between parents and their adolescents on sexual health.

http://www.rand.org/pubs/research_briefs/RB9580/

RB-9581-SRI

The Cost of Providing Quality Early Care and Education in Saint Paul, Minnesota. Lynn A. Karoly, Heather L. Schwartz. 2011

Shares results of a RAND analysis of programs participating in Minnesota's Saint Paul Early Childhood Scholarship Program, which provides scholarships to cover the cost of high-quality early childhood education programs.

http://www.rand.org/pubs/research_briefs/RB9581/

RB-9583-SU

Monitoring and Evaluation in Stabilisation Interventions: Rationale, challenges and principles of effective monitoring and evaluation. Christian van Stolk, , , Tom Ling, Anais Reding, Matt Bassford. 2011

Reviews the state of the art in monitoring & evaluation of stabilisation operations and suggests ways forward.

http://www.rand.org/pubs/research_briefs/RB9583/

RB-9584

Are Breast Implants Linked to a Rare Form of Lymphoma?. Benjamin Kim, Carol P. Roth, Kevin C. Chung, V. Leroy Young, Kristin R. Van Busum, Christopher Schnyer, Soeren Mattke. 2011

A RAND Corporation review of the literature suggests that breast implants are associated with a rare form of lymphoma, but an expert panel believes that the disease can be managed by surgical removal of the implant.

http://www.rand.org/pubs/research_briefs/RB9584/

RB-9586

Better Understanding the Needs of Veterans in New York State. Terry L. Schell, Terri Tanielian, with Carrie M. Farmer, Lisa H. Jaycox, Grant N. Marshall, Terry L. Schell, Terri Tanielian, Christine Anne Vaughan, Glenda Wrenn. 2011

Shares results of a study assessing the broad array of challenges that returning veterans face at the state level, including a range of mental health concerns, problems finding jobs commensurate with their skills, and complicated health care systems.

http://www.rand.org/pubs/research_briefs/RB9586/

RB-9588

High-Deductible Health Plans Cut Spending but Also Reduce Preventive Care. Amelia M. Haviland, Melinda Beeuwkes Buntin, Roland McDevitt, Neeraj Sood. 2011

High-deductible plans significantly reduce health care spending but also lead consumers to cut back on their use of preventive health care—even though high-deductible plans waive the deductible for such care.

http://www.rand.org/pubs/research_briefs/RB9588/

RB-9589-CSG

How Will Health Care Reform Affect Costs and Coverage? Examples from Five States. David Auerbach, Sarah Nowak, Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

Projects how the coverage-related provisions of the Patient Protection and Affordable Care Act will affect health insurance coverage and state government spending on health care in five states.

http://www.rand.org/pubs/research_briefs/RB9589/

RB-9590-SANF

How Federal Education Policy Under the Elementary and Secondary Education Act Can Support States in School Improvement. Michael A. Gottfried, Brian M. Stecher, Matthew Hoover, Amanda Brown Cross. 2011

To improve schools, federal policymakers should consider state capacity, cost, and state politics and design policies that support more experimentation, evaluation, and dissemination of new knowledge while avoiding a one-size-fits-all approach.

http://www.rand.org/pubs/research_briefs/RB9590/

RB-9591

What Is the Impact of Workplace Policies to Promote Influenza Vaccination Among Health Care Personnel?. Katherine M. Harris, Juergen Maurer, Carla Black, Gary Euler, Srikanth Kadiyala. 2011

Presents data from a national survey of health care personnel describing a range of employer efforts to promote influenza vaccination and their associations with vaccination rates during the 2009–2010 influenza season.

http://www.rand.org/pubs/research_briefs/RB9591/

RB-9594-VHA

The Cost and Quality of VA Mental Health Services. Katherine E. Watkins, Harold Alan Pincus, Brad Smith, Susan M. Paddock, Thomas E. Mannle, Jr., Abigail Woodroffe, Jake Solomon, Melony E. Sorbero, Carrie M. Farmer, Kimberly A. Hepner, David M. Adamson, Lanna Forrest, Cath-

erine Call. 2011

The quality of mental health care delivered by the U.S. Department of Veterans Affairs (VA) is generally as good or better than care delivered by private health plans, although it falls short of the high standards set in VA guidelines.

http://www.rand.org/pubs/research_briefs/RB9594.html

RB-9596-FPS

What New York City's Experiment with Schoolwide Performance Bonuses Tells Us About Pay for Performance. Julie A. Marsh, Matthew G. Springer, Daniel F. McCaffrey, Kun Yuan, Scott Epstein, Julia Koppich, Nidhi Kalra, Catherine DiMartino, Art (Xiao) Peng. 2011

New York City's Schoolwide Performance Bonus Program did not improve student achievement at any grade level, perhaps in part because it provided no significant additional motivation beyond other accountability incentives.

http://www.rand.org/pubs/research_briefs/RB9596.html

RB-9597

Household Structure and Social Vulnerability: Lessons from Hurricane Katrina. Michael S. Rendall. 2011

The greater-than-national prevalence of extended-family households in New Orleans increased the incidence of household breakup after Hurricane Katrina. Policymakers should consider predisaster household structure in recovery planning.

http://www.rand.org/pubs/research_briefs/RB9597.html

RB-9598-OSD

China and India: The Asian Giants are Heading Down Different Demographic Paths. Julie DaVanzo, Harun Dogo. 2011

Discusses contrasting demographic trends in China and India through 2025 and what these imply for each country's economic performance.

http://www.rand.org/pubs/research_briefs/RB9598.html

RB-9599-WF

Summer Counts: Making Summer Programs Part of the Learning Equation. Jennifer Sloan McCombs, Catherine H. Augustine, Heather L. Schwartz, Susan J. Bodilly, Brian McInnis, Dahlia S. Lichter, Amanda Brown Cross. 2011

Summer learning programs can prevent the summertime loss of knowledge and skills that disproportionately affects low-income students. A study of existing programs resulted in targeted recommendations for school districts, policymakers, and funders.

http://www.rand.org/pubs/research_briefs/RB9599.html

RB-9600

What Is the Impact of Using Evidence-Based Treatments for Posttraumatic Stress Disorder and Depression in Veterans?. Beau Kilmer, Christine Eibner, Jeanne S. Ringel, Rosalie Liccardo Pacula. 2011

If all veterans suffering from major depression and posttraumatic stress disorder were to receive evidence-based treatments, policy simulations suggest that cost savings generated would be $138 million (15 percent) over two years.

http://www.rand.org/pubs/research_briefs/RB9600.html

RB-9601-CMS

How Should Drugs be Identified in Electronic Prescribing Systems?. Douglas S. Bell, Sean Michael O'Neill, Kerry A. Reynolds, Diane Schoeff. 2011

RxNorm has potential to improve how medications are represented in e-prescribing transactions.

http://www.rand.org/pubs/research_briefs/RB9601.html

RB-9602-TPP

Fulfilling the Promise of an Urban School

District: Early Progress of The Pittsburgh Promise® College Scholarship Program. Gabriella C. Gonzalez, Robert Bozick, Shannah Tharp-Taylor, Andrea Phillips. 2011

To deal with the challenges of struggling public schools, declining populations, and diminishing quality in the local workforce, Pittsburgh instituted a new college scholarship program to encourage eligible students to continue their education.

http://www.rand.org/pubs/research_briefs/RB9602.html

RB-9603-ICJ

Bankruptcy Trusts, Asbestos Compensation, and the Courts. Lloyd Dixon, Geoffrey McGovern. 2011

:People with asbestos injuries are increasingly receiving compensation from trusts set up by bankrupt asbestos defendants. This brief documents how courts handling these cases consider trust payments when determining compensation.

http://www.rand.org/pubs/research_briefs/RB9603.html

RB-9604-OSD

Assessing the Needs of Service Members and Their Families: A New Approach. Laura L. Miller, Bernard D. Rostker, Rachel M. Burns, Dionne Barnes-Proby, Sandraluz Lara-Cinisomo, Terry R. West. 2011

Describes a new survey design framework that is centered on what service members and their families believe are their greatest needs.

http://www.rand.org/pubs/research_briefs/RB9604.html

RB-9605

How Does Growth in Health Care Costs Affect the American Family?. David Auerbach, Arthur L. Kellermann. 2011

Health care costs nearly doubled between 1999 and 2009, which left the average 2009 family with only $95 more per month than in 1999. If costs had matched the consumer price index's rise, the average family would have an additional $450 per month.

http://www.rand.org/pubs/research_briefs/RB9605.html

RB-9606-OSD

Addressing Psychological Health and Traumatic Brain Injury Among Servicemembers and Their Families: Existing Department of Defense Programs and Options for Improvement. Robin M. Weinick, Ellen Burke Beckjord, Carrie M. Farmer, Laurie T. Martin, Emily M. Gillen, Joie D. Acosta, Michael P. Fisher, Jeffrey Garnett, Gabriella C. Gonzalez, Todd C. Helmus, Lisa H. Jaycox, Kerry A. Reynolds, Nicholas Salcedo, Deborah M. Scharf. 2011

Summarizes a report describing more than 200 programs sponsored or funded by the Department of Defense to address psychological health and traumatic brain injury, along with recommendations to maximize program effectiveness.

http://www.rand.org/pubs/research_briefs/RB9606.html

RB-9607

Why Are Many Emergency Departments in the United States Closing?. Renee Y. Hsia, Arthur L. Kellermann, Yu-Chu Shen. 2011

Between 1990 and 2009, the number of emergency rooms (ERs) in nonrural U.S. hospitals declined by 27 percent (from 2,446 to 1,779). Economic factors play a central role in an ER's ability to remain open.

http://www.rand.org/pubs/research_briefs/RB9607.html

RB-9608-RC

The Public Health System a Decade After 9/11: Key Successes and Continuing Challenges. Jeanne S. Ringel, Jeffrey Wasserman. 2011

Despite substantial improvements in public health systems and preparedness since 9/11, significant challenges remain, and a cultural shift is needed to engage all sectors of society in emergency preparedness, response, and recovery.

http://www.rand.org/pubs/research_briefs/RB9608.html

RB-9610

Malpractice Risk, by Physician Specialty. Anupam B. Jena, Seth A. Seabury, Darius N. Lakdawalla, Amitabh Chandra. 2011

Large variations exist across medical specialties in the frequency of malpractice claims and the amount paid on them. Most physicians face at least one claim during their careers, but most claims do not result in a payment.

http://www.rand.org/pubs/research_briefs/RB9610.html

RB-9612

Reducing Future Flood Damage in New Orleans Through Home Elevation and Land Use Changes. Jordan R. Fischbach. 2011

Describes how nonstructural measures—such as incentives for home elevation, incentives for relocation to lower-risk areas, and restrictions on the use of floodplain land—can make New Orleans less vulnerable to storm surge.

http://www.rand.org/pubs/research_briefs/RB9612.html

RB-9613-A

Collaboration Between Army Installations and Energy Utility Companies. Beth E. Lachman, Kimberly Curry Hall, Aimee E. Curtright, Kimberly Colloton. 2011

Explores how the Army can improve collaboration with utility companies to reduce energy consumption on its installations and help meet other Army energy goals.

http://www.rand.org/pubs/research_briefs/RB9613.html

RB-9614-TUV

Perceptions of Charter and Traditional Schools in New Orleans. Jennifer L. Steele, Georges Vernez, Michael A. Gottfried, Michael Schwam-Baird. 2011

RAND researchers found many similarities between charter and traditional schools in New Orleans but greater satisfaction among charter school parents with their children's schools, as well as more perceived choices.

http://www.rand.org/pubs/research_briefs/RB9614.html

RB-9615-A

Economic Assistance During Stability and Support Operations. Keith Crane, Olga Oliker, Nora Bensahel, Derek Eaton, S. Jamie Gayton, Brooke Stearns Lawson, Jeffrey Martini, John L. Nasir, Sandra Reyna, Michelle Parker, Jerry M. Sollinger, Kayla M. Williams. 2011

Designed to help U.S. Army personnel more effectively use economic assistance to support economic and infrastructure development.

http://www.rand.org/pubs/research_briefs/RB9615.html

RB-9616-A/DLA

Targeted Use of Theater Inventory to Effectively Sustain Overseas Forces While Minimizing Supply Chain Costs. Eric Peltz, Kenneth J. Girardini, Marc Robbins, Patricia Boren. 2011

Discusses how to design a distribution network that takes advantage of the respective strengths of different modes of transportation to meet combatant command needs while minimizing total supply chain costs.

http://www.rand.org/pubs/research_briefs/RB9616.html

RB-9618-A

Can the Army Deploy More Soldiers to Iraq and Afghanistan?. Timothy M. Bonds, Dave Baiocchi, Laurie L. McDonald. 2011

Assess the demands placed upon the Army by the continuing deployments of soldiers to operations in Iraq and Afghanistan.

http://www.rand.org/pubs/research_briefs/RB9618.html

RB-9619-A

Enhancing Civilian Agency Participation in Stability Operations. Thomas S. Szayna, Derek Eaton, James E. Barnett II, Brooke Stearns Lawson, Terrence K. Kelly, Zachary Haldeman. 2011

Examines the question of how the Army can assist in making key civilian agencies more capable partners to the Army in the planning and execution of stability, security, transition, and reconstruction (SSTR) operations.

http://www.rand.org/pubs/research_briefs/RB9619.html

RB-9620-A

Preparing for "Hybrid" Opponents: Israeli Experiences in Lebanon and Gaza. David E. Johnson. 2011

The experiences of the Israel Defense Forces against hybrid opponents—Hezbollah and Hamas—in the recent conflicts in Lebanon and Gaza will help the U.S. Army understand the capabilities that it and the joint force will require in the future.

http://www.rand.org/pubs/research_briefs/RB9620.html

RB-9621-A

Human Capital Strategy for the Army's Human Resources Command. Ralph Masi, Anny Wong, John E. Boon, Jr., Peter Schirmer, Jerry M. Sollinger. 2011

To assist the Army's move of its Human Resources Command from the Washington, D.C. area to Fort Knox, Kentucky, RAND Arroyo Center produced personnel competency models and a framework for training to support the future delivery of personnel services.

http://www.rand.org/pubs/research_briefs/RB9621.html

RB-9622-A

Assessment of Interactive Multimedia Instruction (IMI) Courseware Can Enhance Army Training. Susan G. Straus, Michael G. Shanley, Rachel M. Burns, Anisah Waite, James C. Crowley. 2011

Develops and tests an approach to program-level assessment of interactive multimedia instruction (IMI) courses that identifies strengths and deficiencies in technical, production quality, and pedagogical aspects of IMI courseware.

http://www.rand.org/pubs/research_briefs/RB9622.html

RB-9623-A

The Advantages and Disadvantages of Seeking Commonality in Military Equipment. Thomas Held, Bruce Newsome, Matthew W. Lewis. 2011

Examines the desirable and undesirable tradeoffs that U.S. Army decisionmakers must make regarding commonality in military equipment.

http://www.rand.org/pubs/research_briefs/RB9623.html

RB-9624-A

What Should Be Stocked in War Reserve? A New Method for Allocating Resources. Kenneth J. Girardini, Carol E. Fan, Candice Miller. 2011

Describes the methodology used to develop resource allocation and forward positioning recommendations for the sustainment stock portion of Army pre-positioned stocks, given a specific scenario and budget.

http://www.rand.org/pubs/research_briefs/RB9624.html

RB-9625-A

Standing Up a More Capable Joint Task Force Headquarters. Timothy M. Bonds, Myron Hura, Thomas-Durell Young. 2011

The U.S. Army needs to improve its ability to command and control joint, interagency, and multinational forces in diverse environments, and to prepare Army headquarters to perform as components of, or headquarters for, joint task forces.

http://www.rand.org/pubs/research_briefs/RB9625.html

RB-9626-A

Reducing Costs, Increasing Capability: A New

Equipping Strategy for Combat Support Hospitals. Matthew W. Lewis, Aimee Bower, Mishaw T. Cuyler, Rick Eden, Ronald E. Harper, Kristy Gonzalez Morganti, Adam C. Resnick, Elizabeth D. Steiner, Rupa S. Valdez. 2011

Describes a new equipping strategy for the Army's Combat Support Hospitals.

http://www.rand.org/pubs/research_briefs/RB9626.html

RB-9627-A

Building Partner Country Capacity for Stability Operations. Jefferson P. Marquis, Jennifer D. P. Moroney, Justin Beck, Derek Eaton, Scott Hiromoto, David R. Howell, Janet Lewis, Charlotte Lynch, Michael J. Neumann, Cathryn Quantic Thurston. 2011

Helps to develop an integrated strategy for building partner capacity for stability operations through an analysis of key strategic elements within the context of BPC and stability operations guidance as well as ongoing security cooperation programs.

http://www.rand.org/pubs/research_briefs/RB9627.html

RB-9628-A

Addressing Commanders' Needs for Information on “Soft” Factors. Eric V. Larson, Richard E. Darilek, Daniel Gibran, Brian Nichiporuk, Amy Richardson, Lowell H. Schwartz, Cathryn Quantic Thurston, Derek Eaton, Thomas S. Szayna, Dalia Dassa Kaye, Forrest E. Morgan, Diana Dunham-Scott, Kristin J. Leuschner. 2011

Describes a framework for thinking about commanders' critical information needs in counter-surgency operations and offers practical ways for commanders to integrate influence activities into combined arms planning and assessment.

http://www.rand.org/pubs/research_briefs/RB9628.html

RB-9629-A

Is There a Cheaper and Faster Way to Distribute Medical Supplies?. William Welser IV, Keenan D. Yoho, Marc Robbins, Eric Peltz, Ben D. Van Roo, Adam C. Resnick, Ronald E. Harper. 2011

Examines whether there is a less costly medical distribution structure for U.S. Central Command that would maintain or improve performance.

http://www.rand.org/pubs/research_briefs/RB9629.html

RB-9630-A

Army Warfighters' Forums Can Be Innovative and Successful. Bryan W. Hallmark, S. Jamie Gayton. 2011

Explores leaders' and soldiers' usage of and satisfaction with products and services offered by the Stryker Brigade Combat Team Warfighters' Forum.

http://www.rand.org/pubs/research_briefs/RB9630.html

RB-9631-A

Developing U.S. Army Officers' Capabilities for Joint, Interagency, Intergovernmental, and Multinational Environments. M. Wade Markel, Henry A. Leonard, Charlotte Lynch, Christina Panis, Peter Schirmer, Carra S. Sims. 2011

Identifies and describes the knowledge, skills, and abilities that enable Army officers to succeed in joint, interagency, intergovernmental, and multinational contexts.

http://www.rand.org/pubs/research_briefs/RB9631.html

RB-9632-PPC

Pittsburgh Community Perspectives on the Design of the New Environmental Center at Frick Park. Tamara Dubowitz, Kristy Gonzalez Morganti, Rachel M. Burns, Marla C. Haims. 2011

Many Pittsburgh residents in the communities around Frick Park are interested in environmental issues and education, and some use the park. However, awareness of the park and its Environmental Center could be improved, and barriers to use addressed.

http://www.rand.org/pubs/research_briefs/RB9632.html

RB-9633-A

Could a Rotational Equipping Strategy Save the Army Money?. Christopher G. Pernin, Edward Wu, Aaron L. Martin, Gregory Midgette, Brendan See. 2011

Analyzes how the Army might use a rotational strategy to reduce equipment in early phases of the Army Force Generation cycle, how changes might be applied to units and equipment, and how changes might affect near- and far-term budgets.

http://www.rand.org/pubs/research_briefs/RB9633.html

RB-9634-TCE

What Are the Public Health Implications of Prisoner Reentry in California?. Lois M. Davis, Malcolm V. Williams, Kathryn Pitkin Derose, Paul Steinberg, Nancy Nicosia, Adrian Overton, Lisa Miyashiro, Susan Turner, Terry Fain, Eugene Williams III. 2011

Examines the health care needs of released California prisoners, communities most affected by reentry, safety net capacity, and provider experiences with ex-prisoners, given California's Public Safety Realignment Plan and federal health care reform.

http://www.rand.org/pubs/research_briefs/RB9634.html

RB-9635

How Does Health Reform Affect the Health Care Workforce? Lessons from Massachusetts. Douglas Staiger, David Auerbach, Peter Buerhaus. 2011

Since Massachusetts enacted health reform legislation in 2006, health care employment in the state has grown more rapidly than in the rest of the United States, primarily in administrative positions.

http://www.rand.org/pubs/research_briefs/RB9635.html

RB-9636-AHF

Improving Value for Money in Funding HIV Services in Developing Countries. Sebastian Linnemayr, Gery W. Ryan, Jenny Liu, Kartika Palar. 2011

This brief summarizes options for improving value for money in HIV funding by using a case study that focuses on the two largest funders, the U.S. President's Emergency Plan for AIDS Relief and the Global Fund, and antiretroviral therapy.

http://www.rand.org/pubs/research_briefs/RB9636.html

RB-9637-MOJ

Evaluation of the Social Impact Bond: Lessons from planning and early implementation at HMP Peterborough. Emma Disley, Jennifer Rubin, Emily Scraggs, Nina Burrowes, Deirdre May Culley. 2011

RAND Europe has evaluated the world's first Social Impact Bond (SIB), an innovative payment-by-results mechanism to fund public services which aims to reduce reoffending by prisoners. This report presents the initial findings of the evaluation.

http://www.rand.org/pubs/research_briefs/RB9637.html

RGS DISSERTATIONS

RGSD-267

Access Challenges and Implications for Airpower in the Western Pacific. Eric Stephen Gons. 2011

This dissertation examines the risk of U.S.-China conflict based on a variety of theoretical works on conflict, applied to the U.S.-China relationship. Following this examination, and finding that the U.S.-China relationship does include elements of risk, the dissertation examines the implications of anti-access weapons on USAF sortie generation. The dissertation develops a simple sortie-generation model and air combat framework, using open-source data to estimate the forces that the USAF and the PLAAF can bring to bear, and predicts the results of air combat between two forces of dissimilar performance and quantity. Finally the dis-

sertation examines options for increasing USAF performance in the face of antiaccess weapons, which includes a methodology to assess the effectiveness of strike employed to achieve air superiority.

RGSD-276

High School Graduation Rates in the United States and the Impact of Adolescent Romance. Chung Pham. 2011

This document reviews the controversy over the true high school graduationrate in the United States, provides a comprehensive review of the debate,discusses shortcomings of current methods, and proposes new methods thataddress those shortcomings. The author concludes that current methods thatare widely used are flawed: High school graduation rates in the UnitedStates are well above 80 percent, with high racial disparity; the graduationrates for white and Asian students are around 85 percent, and the rates forHispanic and African American students are around 70-80 percent. Moderatedating has a positive impact on college readiness and college enrollment;serious dating and early sex has a significant negative impact on graduationand college enrollment.

RGSD-277

Managing Residential Energy Demand Through Provision of Better Feedback. Myles T. Collins. 2011

New and affordable technology for providing detailed feedback on household electricity usage presents a host of opportunities for utilities and policy-makers to manage demand. This dissertation examines ways to use these devices to reduce – and shift the timing of - energy use in the residential sector by influencing consumers' behavior. The first portion of the study analyzes the impact of programmable thermostats on energy use, focusing on residents' knowledge of climate control settings in the dwelling. The main portion of the dissertation focuses specifically on the potential for better feedback on electricity usage to reduce household energy consumption. This study also examines how energy consumption devices should display feedback on greenhouse gas emissions from electricity use under a real-time pricing program. Finally, this dissertation explores ways to maximize the effect of feedback by evaluating which appliances may be best suited for appliance-specific feedback.

RGSD-278

Sustaining the Air Force Nuclear Enterprise through Officer Workforce Planning. Brandon T. Dues. 2011

This study examines how the United States Air Force (USAF) can sustain sufficient nuclear skills and experience within the Air Force Nuclear Enterprise. The research specifically examines the overall officer nuclear workforce's accumulated nuclear experience and determines where skill gaps exist based on the competencies required for nuclear-related jobs. Nuclear personnel without sufficient nuclear skill are less likely to adequately perform their nuclear-oriented jobs and their decreased job performance likely impairs or at least creates inefficient operations for the USAF's nuclear deterrence capability. Assuming that human capital development is one relevant factor that helps produce effective nuclear operations, this dissertation investigates how nuclear workforce policies might properly develop and sustain useful and effective human capital that consequently provides the USAF with safe, secure, and credible nuclear operations. These workforce policies will examine ways to improve the development and utilization of officer personnel within the new Air Force Global Strike Command (AFGSC) and identify viable policy alternatives that allow Nuclear Enterprise policymakers to shape the career fields in preferred ways.

RGSD-279

Beyond Rivalry and Camaraderie: Explaining Varying Asian Responses to China. John F. Fei. 2011

Asian states often make tradeoffs between economic and military security goals, and shifts in states' preferences for economic advantage versus military strength explain variation and diversity in their responses to China. Countries that prioritize technological advantage and economic strength respond differently to China than those that do not because they accept a greater degree of security risk to realize economic gains from interactions with China. This dissertation assesses the security and economic policy responses of a representative sample of Asian states to China between 1992 and 2008. The responses of Japan, Korea and Thailand have defied predictions of the dominant international relations paradigm—realism—that states would either balance against or bandwagon with a rising China. However, the three states have not discarded consideration of external security threats. Differences in how Japan, Korea and Thailand have responded to China over time are explained not only by changes in China's military threat, but perceptions of the threat as weighed against changing economic priorities. Domestic strategic evolution—change in political structure and grand strategy—has had an important impact on the manner in which the three nations have responded to China. The findings of this dissertation bear on both the study and practice of international security policy. Domestic politics and state preferences are important factors to consider when explaining the responses of Asian states to China, responses which would not have been implied by the consideration of external threats alone. Understanding the determinants of Asian nations' different and evolving preferences for the ratio of economic versus military strength will aid U.S. officials in formulating policies that affirm these states' strategic interests.

RGSD-281

Evidence-Based Approaches to Law Enforcement Recruitment and Hiring. Carl F. Matthies. 2011

Recruiting diverse, qualified candidates is a continual challenge for law enforcement. With the downturn in the economy came a flood of applicants, but also, eventually, slashed funding for recruitment and hiring. The Los Angeles Police Department (LAPD) has felt the recession keenly: Its advertising budget was cut by 60 percent in fiscal year 2009, and, in 2011, the Los Angeles City Council approved a three-month hiring freeze. The LAPD, and law enforcement in general, can clearly benefit from evidence-based approaches to evaluating recruitment programs and streamlining the application process. Using LAPD and city administrative data from fiscal years 2007 and 2008, the author estimates impacts—in terms of applicant numbers—for LAPD's recruitment efforts and proposes a revised model for prioritizing applicants. While the results of these analyses may be of particular interest to LAPD, the methods employed, as well as those recommended for future studies, are applicable to any law enforcement agency interested in attracting and identifying high-quality applicants more efficiently.

RGSD-282

How Do Quality Improvement Interventions Succeed? Archetypes of Success and Failure. Sean Michael O'Neill. 2011

The quality of heath care in the United States is suboptimal and needs to be improved as part of increasing the value of costly health care services. Achieving broad quality improvements will require reproducing local quality improvement intervention (QII) successes on a larger scale. Such replication has been difficult to come by, however, because we don't understand the “how” of quality improvement very well. The goal of this analysis was to ascertain the predominant themes and patterns likely to be associated with producing successful QIIs. Cases were compared according to each dimension of the framework. The general approach involved establishing the range (the maximally diverse exemplars), the central tendency (the modal example) and the distribution (the pattern of variation) within each dimension and subcategory. The author assessed cases first on a univariate basis and then on a multivariate basis by grouping them

according to more and less successful cases, different domains of care, and different degrees of organizational integration. The strengths of this study include its comparative case study design as well as its unique investigator-based sampling strategy, which sought to maximize the observed variation across cases while achieving an equal balance of "more" and "less" successful cases. Future research endeavors should attempt to operationalize and validate the archetypes suggested by this study. Doing so will produce broadly generalizable and practical tools for explaining how quality improvement results are generated, and for strategizing for success when implementing interventions in different settings.

RGSD-283

Paying for War: Funding U.S. Military Operations Since 2001. Aaron L. Martin. 2011

The challenge of budgeting for military operations was not a new one that the U.S. faced in the early 2000s. Since World War II, the U.S. has conducted major multiyear military operations in Korea and Vietnam. Yet the methods used to budget for operations since 2001 were very different than during these previous operations. In prior operations, the wartime budgets were largely merged or subsumed within the annual defense budgets within two or three years. However, an alternate wartime budget, either in the form of supplemental appropriations or a separate title in the annual appropriations bill, has been used throughout recent operations in Iraq and Afghanistan. This dissertation documents the findings and recommendations from an analysis of the outcomes from using separate wartime budgets during prolonged operations. The outcomes explored within the dissertation range from the changes in budgetary influence that the executive and legislative branches have in certain situations to identifying budgetary challenges that will likely emerge as operations conclude.

RGSD-284

Agency, Governance, and Performance in the Securities Industry. Emre Erkut. 2011

Motivated by a recognition of the importance of financial institutions, a gap in corporate governance literature, and the recent financial crisis, this dissertation examines the economics of financial firms, their governance practices, and governance-performance links in such firms. The research combines an extensive literature review, microeconomic modeling, secondary data collection, and a set of empirical analyses. It focuses on the board of directors as the key governance mechanism that is subject to policy making by both public and private decision makers. Within the wide range of financial firms, it focuses on firms in the business of managing client assets, where the most obvious gap in governance literature is.

RGSD-285

Where in Social and Sexual Networks Should HIV Interventions Target? Identifying Similarities in Social Contexts Characteristics and Mutual Disclosure Behaviors of HIV Status and MSM Identity Across Social and Sexual Networks. Alexis K. Huynh. 2011

Disclosure of HIV status and men who have sex with men (MSM) identity both have public health significance (as a strategy to prevent further transmission by those infected with HIV) and personal health benefits for HIV-positive individuals (such as greater treatment adherence, greater social support, higher self-esteem, and lower levels of depression). Understanding where similarities in social context characteristics and disclosure behaviors lie in respondents' various sexual and social networks has important implications for developing new and innovative HIV interventions.

RGSD-286

Diabetes Care in China: Impacts of Traditional Chinese Medicine(TCM) and Insurance on Quality and Utilization. Zhen Wang. 2011

Today, China is facing a serious and fast growing challenge of a diabetes epidemic. With the largest diabetic population in the world, 9.7% of Chinese aged 20 and over have diabetes. How-

ever, diabetes care is far from satisfactory. The problem is further complicated by the widespread use of Traditional Chinese Medicine (TCM) and by disparities in insurance coverage. This dissertation intends to explore quality and utilization of diabetes care in China.

RGSD-287

Three Essays on Economics of Health Behavior in China. Yuyan Shi. 2011

This dissertation consists of three essays, each focusing on one topic in economics of health behaviors in China. The first essay attempts to examine the determinants of alcohol demand with concentration on impact of alcohol price among Chinese adult population. The second essay estimates healthcare expenditure in China and evaluates the performance of econometric models. The objective of the third essay is to examine the time trend of obesity disparities across sociodemographic groups in school-aged youth population from 1991 to 2006 in mainland China.

RGSD-288

Developing Stability: Community-Driven Development and Reconstruction in Conflict-Affected Settings. Brooke Stearns Lawson. 2011

From drug trafficking in Mexico and Central America, to violent extremism in the Horn of Africa, to insurgents in Colombia, to all three in Afghanistan and Pakistan, significant weaknesses in governance and economic development underlie many of the greatest security threats currently facing the United States. A solely military solution to these issues will not achieve long-term success without efforts to improve the underlying conditions that foster the insecurity in the first place. More specifically, development and reconstruction efforts need to bolster the legitimacy, effectiveness, and reach of the indigenous government, as well as address the population's grievances. Although the international community has widely accepted the importance of addressing the root causes of instability, significant questions remain over whether – and how – actors can feasibly implement these critical activities in insecure environments. Using a comparative case study approach, this dissertation tests the hypothesis that development and reconstruction actors can feasibly implement sound development and reconstruction across a relatively wide spectrum of conflict, but varying levels and natures of violence can affect its delivery. The dissertation develops an analytic framework that defines seven principles of sound development and reconstruction and identifies three aspects of the conflict context – the background; the current social, economic and political factors; and the security environment – that affect these principles.

RGSD-289

Three Essays on Terrorism, its Relationship with Natural Disasters and its Effect on Female Labor Force Participation. Jordan Ostwald. 2011

Nature's disasters and their aftermath have engendered fear and fascination in human minds for thousands of years. They have shaped the earth, the climate, and the makeup of human civilization for perhaps even longer. As societies have expanded, they have adapted in an attempt to mitigate the effects of these devastating events, but all too often the propensity of disasters to overwhelm human adaptations has proved both humbling and daunting. The aftermath of a disaster is a particularly trying time for any government. A society vests much of its security within its government's ability to protect; thus, the effectiveness and efficiency of disaster preparedness and recovery measures are crucial to maintaining a government's legitimacy. As a result, natural disasters as possible catalysts of terrorism have serious implications for both national security and disaster policy both locally and regionally. The aim of this dissertation is to explore and illuminate the relationship between natural disasters and terrorism. The research will examine and test this link across many dimensions of both disasters and terrorism. Furthermore, these natural events introduce essentially random exogenous shocks which could

affect terrorism. An added benefit of this randomness is that it can be used as an instrument to assess causal effects of terrorism on other factors. In particular, it utilizes this fact to investigate and clarify causal links between terrorism, female labor force participation, and larger gender disparities in the labor market.

RGSD-290

Forecasting the Future of Iran: Implications for U.S. Strategy and Policy. Eric Jesse. 2011

Diplomatic relations between the US and Iran have been frozen since the 1979 Islamic Revolution. The current overlaps in US and Iranian interests make the ongoing bilateral impasse ripe for reassessment, but while the potential to advance relations exists, progress will be measured by the development of several key political, economic, civil society, foreign policy, and national security issues in Iran. This study employs an expected utility model to predict how Iranian policy is developing on several of these key issues and explores US strategy and policy options for influencing their development.

RGSD-291

Actualizing Flexible National Security Space Systems. Kenneth Grosselin III. 2011

The National Space Policy of the United States of America (2010) calls on the National Security Space (NSS) community to continue to "develop and apply advanced technologies and capabilities that respond to changes to the threat environment." This national policy reinforces a trend within the NSS community that places a greater emphasis on the ability of NSS systems to operate in an uncertain future. This dissertation informs policymaking by presenting three essays that address some of the challenges associated with improving the flexibility of NSS capabilities. In addition, each essay includes an application of the decision logic that would be required to optimally support the next generation of flexible space systems.

REPRINTS

RP-1426-WFHF/DCKF/STF

Deregulating School Aid in California: How 10 Districts Responded to Fiscal Flexibility, 2009-2010. Bruce Fuller, Julie A. Marsh, Brian M. Stecher, Tom Timar. 2011

In 2009, California state legislators freed local educators from the specific guidelines that previously regulated spending on 40 categorical-aid programs known as Tier 3 programs. This Tier 3 flexibility reform, which deregulates $4.5 billion in education funding, was enacted at the same time the legislature made cuts in education spending in response to the economic recession. Drawing on interviews with school district leaders from around the state and with policymakers in Sacramento, this report details how leaders in 10 California school districts are responding to the Tier 3 flexibility reform, including what districts are doing with the newly flexible funds, how allocation decisions were made, and what their consequences have been. The researchers found that school districts felt uncertainty about the new flexibility and generally remained committed to the goals of the Tier 3 programs.

http://www.rand.org/pubs/reprints/RP1426.html

RP-1428

K-12 Education Reform in Qatar. Gail L. Zellman, Louay Constant, Charles A. Goldman. 2011

In 2002, Qatar began implementing a standards-based K-12 reform that established new publicly-funded, privately-operated ⊠Independent schools.' The reform built on four principles: autonomy, accountability, variety, and choice. Early data reveal more student-centered classroom practices and higher student achievement in the new schools. But as all Ministry schools convert to independent status, many challenges remain to achieving the reform's ambitious goals. Posted here with permission from Orient, I / 2011, pp. 55–60. Copyright 2011 Duetsches Orient-Institut.

http://www.rand.org/pubs/reprints/RP1428.

html

RP-1429

Intervening in Gun Markets: An Experiment to Assess the Impact of Targeted Gun-Law Messaging. Greg Ridgeway, Anthony A. Braga, George Tita, Glenn L. Pierce. 2011

The objective of this study was to assess whether targeting new gun buyerswith a public safety message aimed at improving gun law awareness can modify gunpurchasers' behaviors. Between May 2007 and September 2008, 2,120 guns werepurchased in two target neighborhoods of the City of Los Angeles. Starting in August2007, gun buyers initiating transactions on odd-numbered days received a letter signed byprominent law enforcement officials, indicating that law enforcement had a record of theirgun purchase and that the gun buyer should properly record future transfers of the gun.The letters arrived during buyers' 10-day waiting periods, before they could legally returnto the store to collect their new gun. Subsequent gun records were extracted to assess theletter's effect on legal secondary sales, reports of stolen guns, and recovery of the gun in acrime. An intent-to-treat analysis was also conducted as a sensitivity check to remedy alapse in the letter program between May and August 2007.The letter appears to have noeffect on the legal transfer rate or on the short-term rate of guns subsequently turning up ina crime. However, we found that the rate at which guns are reported stolen for those whoreceived the letter is more than twice the rate for those who did not receive the letter (pvalue=0.01). Those receiving the letter reported their gun stolen at a rate of 18 guns per1,000 gun-years and those not receiving the letter reported their gun stolen at a rate of 7guns per 1,000 gun-years. Of those receiving the letter, 1.9% reported their gun stolenduring the study period compared to 1.0% for those who did not receive the letter. Thepercentage of guns reported stolen in these neighborhoods is high, indicating a high rateof true gun theft, a regular practice of using stolen-gun reports to separate the gun buyerfrom future misuse of the gun, or some blend of both. Simple, targeted gun lawawareness campaigns can modify new gun buyers' behaviors. Additional follow-up ormodifications to this initiative might be needed to impact the rate at which guns enter theillegal gun market and ultimately are recovered in crimes. Posted here with permission from Journal of Experimental Criminology, Vol. 7, No. 1, March 2011, pages 103–109. Springer Press.

http://www.rand.org/pubs/reprints/RP1429.html

RP-1430

Missing Data in Value-Added Modeling of Teacher Effects. Daniel F. McCaffrey, J. R. Lockwood. 2011

The increasing availability of longitudinal student achievement data has heightened interest among researchers, educators, and policymakers in using these data to evaluate educational inputs, as well as for school and possibly teacher accountability. Researchers have developed elaborate “value-added models” of these longitudinal data to estimate the effects of educational inputs (e.g., teachers and schools) on student achievement while using prior achievement to adjust for nonrandom assignment of students to schools and classes. A challenge to such modeling efforts is the extensive numbers of students with incomplete records and the tendency for those students to be lower-achieving. These conditions create the potential for results to be sensitive to violations of the assumption that data are missing at random, an assumption that is commonly used when estimating model parameters. The current study extends recent value-added modeling approaches for longitudinal student achievement data developed by Lockwood et al. to allow data to be missing not at random via random effects selection and pattern mixture models, and we apply these methods to data from a large urban school district to estimate effects of elementary school mathematics teachers. We find that allowing the data to be missing not at random has little impact on estimated teacher effects. The robustness of estimated teacher effects to the missing data assumption appears to result from both the relatively

small impact of model specification on estimated student effects compared with the large variability in teacher effects and the downweighting of scores from students with incomplete data. Posted here with permission from The Annals of Applied Statistics, 2011, Vol. 5, No. 2A, pp. 773–797. Copyright © 2011 Institute of Mathematical Statistics.

http://www.rand.org/pubs/reprints/RP1430.html

RP-1431

Interview with Willis Ware. David Walden. 2011

This inaugural installment of the Annals Interviews column includes an interview with Willis Ware, who has been involved in digital computing since the mid-1940s. Ware had a knack for being at the right place at the right time and was involved in several important steps in the spread of digital computing. His professional experience includes Hazeltine Electronics Corporation (1942–1946), Institute for Advanced Study (1946–1951), North American Aviation (1951–1952), and RAND (1952–1992). He was also the first president of the American Federation of Information Processing Societies (AFIPS) and chair of the Special Advisory Committee on Automated Personal Data Systems, which developed policy recommendations that funneled into the Privacy Act of 1974. Copyright © 2011 IEEE. Reprinted with permission from IEEE Annals of the History of Computing, Vol. 33, No. 3, July–September 2011. This material is posted here with permission of the IEEE. Such permission of the IEEE does not in any way imply IEEE endorsement of any of RAND Corporation's products or services. Internal or personal use of this material is permitted. However, permission to reprint/republish this material for advertising or promotional purposes or for creating new collective works for resale or redistribution must be obtained from the IEEE by writing to pubs-permissions@ieee.org. By choosing to view this document, you agree to all provisions of the copyright laws protecting it.

http://www.rand.org/pubs/reprints/RP1431.html

RP-1433

Implementation of an Electronic Referral System for Outpatient Specialty Care. Susan G. Straus, Alice Hm Chen, Hal F. Yee, Jr., Margot B. Kushel, Douglas S. Bell. 2011

Poor communication between primary care and specialists often leads to delays, inefficiencies and sub-optimal patient outcomes. This study examined implementation of an electronic referral system (eReferral) that creates direct communication between primary care providers and specialist reviewers. Semi-structured interviews were conducted to assess factors affecting the success of eReferral implementation; transcripts were analyzed using qualitative methods. Primary and specialty care providers were enthusiastic about the system. Primary care providers had favorable attitudes despite a number of challenges including increased workload due to a shift in tasks from specialists and administrative personnel, poor connectivity, and insufficient hardware. System acceptance was driven by perceptions of improved access to specialty care, better appointment tracking, and improved communication between primary and specialty care providers. Synergy among development processes, implementation practices, and technical factors, including human-centered design, iterative development, a phased rollout, and an intuitive user interface, also fostered uptake of the system. Posted here with permission from AMIA Annual Symposium Proceedings, pp. 1337–1346, October 2011. Copyright © 2011 American Medical Informatics Association.

http://www.rand.org/pubs/reprints/RP1433.html

TECHNICAL REPORTS

TR-1007-AOUSC

Case Weights for Federal Defender Organizations. Nicholas M. Pace, Greg Ridgeway, James M. Anderson, Cha-Chi Fan, Mariana Horta. 2011

Attorneys working at federal defender orga-

nizations (FDOs) represent financially eligible individuals in federal criminal prosecutions and related proceedings, both at the trial court level and on appeal. This report describes a statistically reliable system of case weights, based on the national averages of attorney hours expended in various types of cases, and examines issues related to factors, other than the type of case, that might affect the amount of resources necessary for providing an effective defense. It also asks whether employing case weights makes sense for evaluating and projecting FDO resource needs, what might be the best ways for calculating those weights, and what appeared to be the most-significant limitations on their application in this manner. It presents the main findings regarding a functional case-weighting system for FDOs, discusses the examination of factors that could influence attorney time expenditures, examines issues related to caseload projections, sets forth historical weighted caseload totals for the federal defender system, and makes recommendations for increasing the accuracy and functionality of any future case-weight update.

http://www.rand.org/pubs/technical_reports/TR1007.html

TR-1010-DH

Alternatives to peer review in research project funding. Helen Wu, Sharif Ismail, Susan Guthrie, Steven Wooding. 2011

Peer review is considered the gold standard for reviewing research proposals. However, it is not always the best methodology for every research funding process. Public and private funders that support research as wide-ranging as basic sciences, defence technologies and social sciences utilise a diverse set of strategies to advance knowledge in their respective fields. This report highlights a set of established approaches that offer unique alternatives to traditional peer review – alternatives that address many of the shortcomings in peer review effectiveness and efficiency. The appropriateness of these different approaches will depend on the funder's organisational structure and mission, as well as short- and long-term financial realities. We hope that the information presented in this folio of cards will inspire thinking amongst research funders by showing how the research funding process can be changed, and give funders the confidence to try novel methods by explaining where and how similar approaches have been used previously.

http://www.rand.org/pubs/technical_reports/TR1010.html

TR-1013-RGF

Map the Gap: a critical review of the literature on gambling-related harm. Emma Disley, Alexandra Pollitt, Deirdre May Culley, Jennifer Rubin. 2011

This report, commissioned by the Responsible Gambling Fund (RGF), aims to 'map the gaps' in the current evidence base relating to harmful gambling. It sets out findings from a Rapid Evidence Assessment of academic and 'grey' literature, describing the quantity and quality of existing research in this field, and highlighting areas in which evidence and knowledge are sparse or lacking. This report looks at: The prevalence of problem gambling among prisoners, the homeless and members of the armed forces The effectiveness of preventative measures, treatment, and other interventions including self-exclusion, self-limitation, and support by those working in the gambling industry or in health professions The evidence on situational features (the geographical density, clustering and distribution of gambling venues or machines) and of structural features of electronic gaming machines (such as speed of play, lights and sounds, stop buttons and whether the player can use notes or coins). The conclusion from this REA is that the evidence available to policy- and decision-makers in Britain on problem gambling is limited.

http://www.rand.org/pubs/technical_reports/TR1013.html

TR-1121-OSD

How Successful Are U.S. Efforts to Build Capacity in Developing Countries? A Framework to Assess the Global Train and Equip "1206" Program. Jennifer D. P. Moroney, Beth Grill, Joe Hogler,

Lianne Kennedy-Boudali, Christopher Paul. 2011

The U.S. government has long worked with allies and partners in a security cooperation context. Assessing the effect of such activities, and particularly how they contribute to U.S. objectives, is extremely important. The Global Train and Equip "1206" Program is a multiagency security cooperation program that would benefit from an improved framework for thinking about, planning for, and implementing security cooperation assessments. The program, established in Section 1206 of the National Defense Authorization Act for Fiscal Year 2006, supports U.S.-led capacity-building activities focused on counterterrorism and stability operations with foreign military partners. The process to develop an assessment framework for the 1206 program began with a series of discussions with policymakers and subject-matter experts to identify current roles, data sources, and assessment processes. These discussions formed the basis for a survey of program stakeholders on the processes, responsibilities, assessment guidance, and skills needed to conduct assessments. An analysis of the survey results revealed the need for formal guidance on the assessment of 1206 projects, gaps in data collection and reporting, unclear roles, and inconsistent levels of communication across the program. However, it also showed that a two-track (short- and longer-term) approach to implementing an assessment framework, closing gaps, and improving coordination would be the best fit for the 1206 Program's structure.

http://www.rand.org/pubs/technical_reports/TR1121.html

TR-1122-NAVY

Information Systems Technician Rating Stakeholders: Implications for Effective Performance. Margaret C. Harrell, Harry J. Thie, Roland J. Yardley, Maria C. Lytell. 2011

An organization must make decisions along two dimensions of goals: effectiveness and efficiency. Goals may be in conflict if the organizational structure that fixes stakeholder decision-making leads some parts of the organization to focus on effectiveness, without considering efficiency, and other parts to focus on efficiency, without considering effectiveness. There is a potential tension between effectiveness and efficiency. The authors discuss the relationships among stakeholders involved in manpower, personnel, and training processes for managing the U.S. Navy information systems technician rating. The authors recommend that U.S. Navy leadership be cognizant of the goal orientation and strategy of organizations in order to assess whether those goal orientations are the most appropriate for organizations. Further, awareness of differing goal orientations can facilitate interactions by bringing explicit awareness of differing stakeholder strategies. The authors' recommendations are specific to the U.S. Navy information technician community but might also apply to other U.S. Navy communities.

http://www.rand.org/pubs/technical_reports/TR1122.html

TR-1140-EC

Study on Appropriate Methodologies to Better Measure Consumer Preferences for Postal Services: Final Report. Charlene Rohr, Urs Trinkner, Alison Lawrence, Priscillia Hunt, Chong Woo Kim, Dimitris Potoglou, Rob Sheldon. 2011

Post services have steadily evolved over centuries as the key means for long-distance communication between people. Every year European consumers hand over about 135 billion postal items to postal operators, who deliver them throughout the European Community. However, the postal sector is facing a series of challenges calling for significant transformation. The past decades have brought about a rapid development of new communication and information technologies which have an impact on consumers' needs and priorities for postal services. Some of these technologies have had the role of replacing more traditional mail services, and have led to pronounced erosion in postal volumes, whilst others have spurred the growth of certain market segments, like parcels and small packets. In the case of regulated services, like postal services, such developments in consumer demand are not immediately matched by changes

in supply – they must be identified and addressed through policy decisions. It is therefore vitally important that policy makers understand consumers' needs and preferences for postal services. This study aims to provide such information by developing a methodology, based around stated preference discrete choice experiments, and implementing it in three member states: Italy, Poland and Sweden. We examine and quantify consumers' preferences for postal services, for business and residential consumers, for letter and parcel services. Based on the findings and lessons learned, the study provides a toolkit for member states that wish to conduct quantitative market research to better understand their citizens' needs for postal services.

http://www.rand.org/pubs/technical_reports/TR1140.html

TR-1145-TUV

The Transformation of a School System: Principal, Teacher, and Parent Perceptions of Charter and Traditional Schools in Post-Katrina New Orleans. Jennifer L. Steele, Georges Vernez, Michael A. Gottfried, Michael Schwam-Baird. 2011

Hurricane Katrina set the stage for a transformation of public education in New Orleans, replacing the city's existing school system with a decentralized choice-based system of both charter and district-run schools. Using principal, teacher, and parent surveys administered three years after Katrina, this study examined schools' governance and operations, educational contexts, educator quality and mobility, and parental choice and involvement. The authors note that questions still remain about the variation in schools' policies and practices in the wake of the reform and about parents' experiences in an environment of school choice.

http://www.rand.org/pubs/technical_reports/TR1145.html

TR-1146-RWJ/TQF

Mapping the Gaps: Ideas for Using GIS to Enhance Local Health Department Priority Setting and Program Planning. Malcolm V. Williams, Tamara Dubowitz, Dawn Jacobson, Kristin J. Leuschner, Lisa Miyashiro, Elizabeth D. Steiner, Margaret M. Weden. 2011

To determine whether the services they provide are meeting population needs, local health departments (LHDs) use a variety of formal and informal assessments, including community health assessments and communitywide health-improvement plans. Despite these efforts, the services do not always meet the needs, for a variety of reasons, including competing funding priorities, political mandates, and natural shifts in population makeup and health concerns. Geographic information system (GIS) mapping software provides a promising tool to enhance priority-setting and resource allocation for LHDs by displaying complex geospatial information in an integrated and visual way, enabling staff to compare the geographic distribution of population health in a community (i.e., where services are needed) with the geographic distribution of LHD programs and expenditures (i.e., where services are provided). Using such an approach, LHDs can identify gaps between program services and community health needs. This report presents findings from interviews with 65 staff at four LHDs and three case studies to test potential solutions for how maps can be used to address the gaps between public health needs and LHD services. It describes options for accessing easy-to-use, no-cost GIS data and tools and suggests ways in which LHDs can integrate new GIS approaches into their activities.

http://www.rand.org/pubs/technical_reports/TR1146.html

TR-1148-NQF

An Evaluation of the Use of Performance Measures in Health Care. Cheryl L. Damberg, Melony E. Sorbero, Susan L. Lovejoy, Katharine Lauderdale, Samuel Wertheimer, Amber Smith, Daniel Waxman, Christopher Schnyer. 2011

The National Quality Forum (NQF), a private, nonprofit membership organization committed to improving health care quality performance measurement and reporting, was awarded a contract with the U.S. Department of Health and Human

Services (HHS) to establish a portfolio of quality and efficiency measures. The portfolio of measures would allow the federal government to examine how and whether health care spending is achieving the best results for patients and taxpayers. As part of the scope of work under the HHS contract, NQF was required to conduct an independent evaluation of the uses of NQF-endorsed measures for the purposes of accountability (e.g., public reporting, payment, accreditation, certification) and quality improvement. In September 2010, NQF entered into a contract with the RAND Corporation for RAND to serve as the independent evaluator. This report presents the results of the evaluation study. It describes how performance measures are being used by a wide array of organizations and the types of measures being used for different purposes, summarizes key barriers and facilitators to the use of measures, and identifies opportunities for easing the use of performance measures moving forward.

http://www.rand.org/pubs/technical_reports/TR1148.html

TR-1158-AHF

Value for Money in Donor HIV Funding. Sebastian Linnemayr, Gery W. Ryan, Jenny Liu, Kartika Palar. 2011

Countries with the highest burden of human immunodeficiency virus (HIV) disease are heavily reliant on donor funding from such sources as the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis and Malaria for their HIV programs. In recent years, commitments from these organizations have flattened while demand for HIV/AIDS care continues to rise. To meet the continued need for more HIV services in developing countries, existing resources need to be better leveraged, i.e., to provide improved value for the money. This report examines options for improving value for money in HIV funding by using a case study that focuses on the two largest funders, PEPFAR and the Global Fund, with funding for antiretroviral therapy (ART) as its leading example. The authors' assessment of available input and output data suggests that current spending allocations across direct and indirect services are not based on increasing value for money. The authors recommend that expenditure data for PEPFAR be made available to the public in a transparent fashion on an annual basis in a usable format and that the Global Fund make its data accessible for each program funded. They find that program output indicators to track indirect services are incomplete and need to be further developed. The trade-off between providing current services and providing future ones needs to be stated clearly, and funding decisions made accordingly. Finally, given projections that funding for HIV will likely not increase, particularly for low-income countries facing the highest HIV burden, an explicit emphasis on improving value for money by finding ways to better leverage existing monies is imperative.

http://www.rand.org/pubs/technical_reports/TR1158.html

TR-1163-WB

The impact of information and communication technologies in the Middle East and North Africa. Flavia Tsang, Ohid Yaqub, Desiree van Welsum, Tony G. Thompson-Starkey, Joanna Chataway. 2011

This report, prepared for and funded by the World Bank, presents the results of an exploratory study to understand the impact of information and communication technologies (ICT) in the Middle East and North Africa (MENA) region. The main objective is to provide a series of analyses and inputs to the World Bank that will help to frame their thinking about ICT use in MENA.

http://www.rand.org/pubs/technical_reports/TR1163.html

TR-1166-MOJ

Lessons learned from the planning and early implementation of the Social Impact Bond at HMP Peterborough. Emma Disley, Jennifer Rubin, Emily Scraggs, Nina Burrowes, Deirdre May Culley. 2011

At a time when government finances are stretched there is growing interest in finding new

ways to fund public services which improve social outcomes. One new funding model currently being tested is a Social Impact Bond (SIB). A SIB is a form of payment by results (PBR) in which funding is obtained from private investors to pay for interventions to improve social outcomes. If these interventions succeed in improving outcomes, this should result in savings to government and wider benefits to society. As part of a SIB, the government agrees to pay a proportion of these savings back to the investors. If outcomes do not improve, investors do not receive a return on their investment. In September 2010 the first ever SIB was launched in the UK. Approximately £5 million of investment funding from private individuals and charities is being used to pay for interventions for offenders serving short prison sentences (less than 12 months) at HMP Peterborough, a prison in eastern England. RAND Europe has been commissioned to evaluate the development, implementation and operation of this first ever SIB. This report is the first output from the evaluation. It identifies early lessons from the development and implementation of SIB at HMP Peterborough. Such lessons may inform future SIBs or wider payment-by-results (PBR) pilots under consideration by the Ministry of Justice and other government departments.

http://www.rand.org/pubs/technical_reports/TR1166.html

TR-1167-CIGNA

Patient Incentives to Motivate Doctor Visits and Reduce Hypertension Disparities. Laurie T. Martin, Joie D. Acosta, Teague Ruder, Matthias Schonlau, Allen Fremont. 2011

In 2009, CIGNA Healthcare and RAND partnered in an initiative that examined the extent to which small financial incentives for patients can motivate physician visits and reduce racial/ethnic disparities in hypertension (HTN). The aims were (1) To assess whether a one-time $15 patient financial incentive, along with educational materials sent to patients, would be effective in motivating individuals with HTN to see their personal physician, compared with educational materials only or no intervention; (2) to determine if patient incentives encourage the control of or improvement in BP for high-risk individuals relative to educational materials only or no intervention; and (3) to assess whether patient incentives and educational materials are differentially effective across racial/ethnic groups in motivating physician visits and improving BP control and whether these differential effects lead to a reduction in racial/ethnic disparities in HTN. The initiative had a significant effect on those who had not seen a physician in over a year. Although individuals with systolic blood pressure (SBP) between 120 and 139 or diastolic blood pressure (DBP) between 80 and 89 at baseline demonstrated significant and sustainable reductions in SBP over time, the initiative did not have a differential impact on lowering blood pressure over time by race/ethnicity. The report also includes evaluations of the initiative by patients and physicians.

http://www.rand.org/pubs/technical_reports/TR1167.html

TR-1168-PPC

Community Engagement as Input to the Design of the Environmental Center at Frick Park and Beyond. Tamara Dubowitz, Kristy Gonzalez Morganti, Rachel M. Burns, Marla C. Haims. 2011

In 2011, the Pittsburgh Parks Conservancy focused its park restoration efforts on the design and development of the new Environmental Center at Frick Park (ECFP) building, paying special attention to underserved communities and children within the vicinity of the park who have not historically participated in environmental education programming at the center. To obtain community group and resident input into the ECFP design, and to acquire information about residents' attitudes toward and use of Frick Park more generally, RAND Corporation researchers conducted community focus groups and brief informal interviews with a total of 81 local residents.The researchers found that many residents are interested in environmental issues and education and that some currently use Frick Park. However, there is a general lack of awareness of ECFP programs and ac-

tivities, and there are also many barriers to using the park. The authors offer recommendations for the design of the new building, for the structuring and content of ECFP programs, for improving access to the park and the center, and for successfully marketing park programs.

http://www.rand.org/pubs/technical_reports/TR1168.html

TR-1187-MAC

The impact of migration on transport and congestion. Flavia Tsang, Charlene Rohr. 2011

RAND Europe has been commissioned by the Migration Advisory Committee (MAC) to collate evidence on how migration is likely to impact transport networks and congestion. This study was comprised of two research phases: a literature review followed by empirical analysis. Through the targeted literature review, we mapped the state of knowledge on the travel behavior of migrants (including travel frequency, mode choice, home and work location) and the associated impacts on the transport network. Almost all of the existing evidence found was from outside the UK. In the second phase, we undertook empirical analyses using UK data to provide a quantitative understanding of UK migrants' specific travel behaviour and impacts. This study informed the UK Migration Advisory Committee's (MAC's) thinking on the social impacts of migration. It provides one of the first studies using UK data to provide an empirical evidence base about migrants' travel behaviour and impacts.

http://www.rand.org/pubs/technical_reports/TR1187.html

TR-700-OPTA

Responding to Convergence: Different approaches for Telecommunication regulators. Constantijn van Oranje-Nassau, Jonathan Cave, Martin van der Mandele, Rebecca Schindler, Seo Yeon Hong, Ilian Iliev, Ingo Vogelsang. 2011

The objective of this study has been to define and describe ⊠convergence' of the communications and audiovisual content markets; to determine its impact on regulations and market governance; to explore specific issues, such as spectrum policy and net neutrality; and to review different regulatory and governance approaches in the United States, United Kingdom and South Korea. This report develops general insights. In setting the scope of this study, OPTA decided to exclude specific assessment of the situation in the Netherlands, or the application of the study findings to the Dutch context. This report is thus intended to provide background information to a wider debate in the Netherlands on the review of the overall regulatory and governance approach; and not pre-empt such a discussion. It is written for an audience with a basic understanding of the underlying economics. The context of this report reflects the findings and views of the authors and neither represents the opinion nor policies of OPTA. The study was conducted over the period March 2008- August 2008.

http://www.rand.org/pubs/technical_reports/TR700.html

TR-763-AF

A Methodology for Comparing Costs and Benefits of Management Alternatives for F-22 Sustainment. Cynthia R. Cook, Michael Boito, John C. Graser, Edward G. Keating, Michael J. Neumann, Ian P. Cook. 2011

The U.S. Air Force asked RAND Project AIR FORCE to perform a congressionally required assessment of contractor versus organic sustainment strategies to determine the most cost-effective approach for the F-22 air vehicle and F119 engine sustainment. This report describes the methodology used in that analysis, which involved the development and use of notional organic organizations as a point of comparison in the resulting cost estimates. These analogous government sustainment organizations were developed through interviews with personnel at combat aircraft and engine program offices and assumptions about the likely sustainment approach for the F-22, such as the locations of the depot work for both the engine and the air vehicle. The methodology for the analysis considered the contractor management functions that would be retained under either ap-

proach, as well as the timing of the transition. An examination of the asserted benefits of the contractor versus organic approach, including those related to information management, funding flexibility, and technological advantages, and issues of concern for analysts (such as technical data rights), rounded out the analysis.

http://www.rand.org/pubs/technical_reports/TR763/

TR-768-RC

Resource-Constrained Spatial Hot Spot Identification. Ryan Keefe, Thomas Sullivan. 2011

The term "hot spot" has been adopted to indicate areas where a greater than average number of historical or anticipated problem events exists. RAND modified existing spatial analysis tools to identify improvised explosive device (IED) hot spots that were constructed to match the scarce resources available to tactical commanders in Iraq. This report details a generalized version of this "actionable hot spot" (AHS) methodology that can be used to select and prioritize resources to be deployed to disorder areas when the policymaker is faced with spatial, temporal, and quantity constraints. The success of the approach is based on the degree to which clustering is present in the historical data and whether available resources can be deployed that will be spatially and temporally matched against the disorder activity. The methodology provides both a means of measuring the expected effectiveness that would result by deploying scarce resources against the problem and a way to compare the potential effectiveness of alternative resources. Case studies describe the application of the AHS methodology to public health screening, piracy in the Gulf of Aden, and fighting neighborhood crime.

http://www.rand.org/pubs/technical_reports/TR768/

TR-781-ICJ

Business-to-Business Arbitration in the United States: Perceptions of Corporate Counsel. Douglas Shontz, Fred Kipperman, Vanessa Soma. 2011

Proponents of commercial, or business-to-business (B2B), arbitration point to its potential benefits for dispute resolution compared with traditional litigation, including reduced congestion and costs for the courts, as well as expedited and less costly outcomes. However, a recurring complaint in the press and academic literature is that arbitration has become as costly and time-consuming as litigation, with sharp increases in pre-hearing discovery and motion work. Evidence suggests that arbitration clauses, though common in consumer contracts, are uncommon in domestic commercial contracts, but research on why this may be so is scant. The goal of this study was to use a survey and follow-on interviews of corporate counsel to discover what they thought about the relative benefits of arbitration and litigation in resolving B2B disputes. The findings highlight issues of importance to policymakers and practitioners concerned with arbitration as a valuable alternative to litigation. Key findings were that a majority of respondents believe that (1) contractual arbitration is better, faster, and cheaper than litigation (although most see it as just "somewhat" so); (2) professional arbitrators tend to split awards rather than rule strongly in favor of one party; (3) factors (beyond time and cost savings) encouraging the use of arbitration are avoiding exposure to potentially uncertain jury awards, control of arbitrator qualifications, confidentiality of proceedings and decisions, and complexity of cases and/or contracts; and (4) the one factor discouraging the use of arbitration is the absence of the right of appeal. These results may help to explain the apparent lack of enthusiasm for including arbitration clauses in domestic B2B contracts, but further research is needed.

http://www.rand.org/pubs/technical_reports/TR781/

TR-784-OSD

Developing a Prototype Handbook for Monitoring and Evaluating Department of Defense Humanitarian Assistance Projects. Marla C. Haims, Melinda Moore, Harold D. Green, Jr., Cynthia Clapp-Wincek. 2011

Humanitarian assistance has long been a part

of the U.S. Department of Defense (DoD) in direct support of the broader strategic goals underlying U.S. policy, such as reconstruction and stabilization. Thus, although they are often short-term, such projects must be designed and implemented with a longer-term vision so they are compatible with these broader policy goals. Project assessment is central to achieving this objective. In response, the Office of the Secretary of Defense asked RAND to develop a handbook to support the monitoring and evaluation (M&E) of humanitarian assistance projects to assist DoD staff and their civilian counterparts in developing, monitoring, and assessing these projects and in collaborating to achieve broader strategic-level goals. The prototype handbook includes two parts: an M&E primer, which provides a thorough introduction to M&E terms, approaches, and best practices, and a step-by-step user's guide to walk project teams through the data collection and monitoring processes at various stages, including project planning, implementation, completion, and follow-up. It also includes guidelines for involving the local population and avoiding bias when conducting surveys, interviews, and focus groups. The accompanying worksheets guide users through the planning and monitoring requirements for humanitarian assistance projects, including management and core indicators for all humanitarian assistance projects and additional indicators for each specific type of project currently undertaken by DoD. Further testing and feedback from project staff in the field will help refine the prototype handbook and increase its utility in future project assessment initiatives.

http://www.rand.org/pubs/technical_reports/TR784/

TR-808-AF

Managing Air Force Joint Expeditionary Taskings in an Uncertain Environment. John A. Ausink, Cynthia R. Cook, Perry Shameem Firoz, John G. Drew, Dahlia S. Lichter. 2011

Joint tasking situations arise when the “preferred provider” service (usually the Army) has insufficient personnel to meet a certain need and another military service is required to fill it. Since 2004, the U.S. Air Force has provided personnel for “joint sourcing solution” assignments in Iraq and Afghanistan, in addition to supplying military support under its planned Air Expeditionary Force construct for ongoing major combat operations in the U.S. Central Command region. As a result, certain Air Force career fields are experiencing deployment strains beyond what would be expected under planned Air Expeditionary Force deployments. A better understanding of the impact of fulfilling new requirements will help the Air Force make resource allocation decisions that will ensure that it can satisfy the full range of demands for its capabilities. Air Force personnel and deployment data were used to populate a RAND-developed model that compares the supply of Air Force personnel and various types of capabilities to demand for them as outlined in requests for forces. Because the impact of these requirements on individuals, units, specific career fields, combat support capabilities, and the Air Force as a whole is not well understood, such a model potentially offers valuable insights to allow the Air Force to assess and forecast its ability to satisfy demands for its personnel and capabilities.

http://www.rand.org/pubs/technical_reports/TR808.html

TR-809-CHSWC

RAND/UCLA Quality-of-Care Measures for Carpal Tunnel Syndrome: Tools for Assessing Quality of Care and Appropriateness of Surgery. Teryl K. Nuckols, Anne Griffin, Steven M. Asch, Douglas A. Benner, Erika Bruce, Mary Cassidy, Walter T. Chang, Neil G. Harness, Liisa Hiatt, Charles K. Jablecki, Joanne Jerome, Karl J. Sandin, Rebecca Shaw, Haoling H. Weng, Melinda Maggard Gibbons. 2011

Claims relating to carpal tunnel syndrome (CTS) are common in workers' compensation systems. Given that the human and economic costs related to CTS are considerable, healthcare organizations must be able to offer high-quality care to people affected by this condition. The study on which this report is based is a step toward improving care for CTS. It has produced two unique tools for institu-

tions to use, one for assessing the quality of care received by a population of patients who have or may have CTS, and the other for identifying the appropriateness of surgery for individual patients. Tools that assist in measuring quality of care are fundamental to efforts to improve healthcare quality. Tools that assess the appropriateness of surgery ensure that people who need surgery receive it and, conversely, that people are not subjected to inappropriate operations. Applied in this way, these two tools are likely to improve clinical circumstances and economic outcomes for people with CTS. Together, they can be useful to provider organizations, medical groups, medical certification boards, and other associated decisionmakers attempting to assess, monitor, and provide appropriate care for people with CTS.

http://www.rand.org/pubs/technical_reports/TR809.html

TR-813-AF

Analysis of the Air Force Logistics Enterprise: Evaluation of Global Repair Network Options for Supporting the C-130. Ben D. Van Roo, Manuel Carrillo, John G. Drew, Thomas Lang, Amy L. Maletic, Hugh G. Massey, James M. Masters, Ronald G. McGarvey, Jerry M. Sollinger, Brent Thomas, Robert S. Tripp. 2011

The U.S. Air Force has been continually engaged in deployed operations in Southwest Asia and in other locations since the 1990s. Recent Office of the Secretary of Defense planning guidance directs the services to plan for continued engagement at high levels, although their nature, locations, durations, and intensity may be unknown. Air Force senior leaders recognized that the new guidance might impose different demands on the Air Force's logistics system so they asked RAND Project AIR FORCE to undertake a logistics enterprise analysis. This technical report describes the benefits of reallocating certain maintenance activities between mission-generation locations and a repair network to support the C-130 fleet and consolidating repair network activities to centralized repair facilities. The report also provides an initial assessment of maintenance concepts that integrate wing-level and depot-level maintenance processes. The authors found that consolidating wing-level scheduled inspections and component back-shop maintenance capabilities provides efficiency and effectiveness gains to the C-130 maintenance network and that integration of wing-level and depot level activities may provide further gains.

http://www.rand.org/pubs/technical_reports/TR813.html

TR-823-EC

Assessing the impacts of Revising the Tobacco Products Directive: Study to support a DG SANCO Impact Assessment. Jan Tiessen, Priscillia Hunt, Claire Celia, Mihaly Fazekas, Han de Vries, Laura Staetsky, Stephanie Diepeveen, Lila Rabinovich, Helen Ridsdale, Tom Ling. 2011

Tobacco use is one of the largest avoidable causes of morbidity and premature death in the EU. Whilst smoking prevalence in the EU has been declining over the past 30 years, smoking has remained more prevalent among men than women in the EU-27, with some of the new Member States reporting the widest gaps between male and female smokers. For young smokers (13 to 15 years old) this situation is somewhat reversed, with slightly more girls than boys smoking. Against this background, the European Commission Directorate-General for Health and Consumer Protection (DG SANCO) considered a revision of the Tobacco Products Directive 2001/37/EC across five general areas: scope of the directive, labelling requirements, registration and market control fees, ingredients, and sales arrangements. More specifically, the types of policy options under consideration included (but were not limited to): an increase of warning label sizes on the back of packaging to 100%, a restriction for the display of products at retail outlets and an introduction of additional measurement method for TNCO (the modified ISO method) with maximum limits set accordingly. DG SANCO commissioned RAND Europe to provide support in assessing the potential health, macroeconomic, and compliance cost and administrative burden impacts of revising

the Tobacco Products Directive. In addition to assessing impacts, the study provides an up-to-date overview of the evidence and basis for current tobacco product regulation that may be of interest to a wider audience interested in tobacco control policies.

http://www.rand.org/pubs/technical_reports/TR823/

TR-831-AF

Retaining F-22A Tooling: Options and Costs. John C. Graser, Kevin Brancato, Guy Weichenberg, Soumen Saha, Akilah Wallace. 2011

The last F-22A aircraft is scheduled for delivery in early 2012. The Air Force plans to continue contracts that provide for F-22A modernization and sustainment work but not those that provide for new production. As the last F-22A component is fabricated, assembled, or integrated at each of the many facilities involved in producing the aircraft, decisions must be made as to what tooling will be retained and what tooling will be disposed of. In this report, the authors estimate (1) how much more it would cost to retain all the F-22A unique government tooling required for a future production restart than to retain only the tooling required for sustainment support and (2) how much it would cost to restart production at some future date. Based on a plan to preserve tooling using containers for storage, the authors calculate the difference in cost between retaining all and retaining only some of the tooling. They find that, for a modest, one-time additional cost of $17 million and a very small additional annual recurring cost, the Air Force can retain all F-22A unique government tools. The authors also find a difference of less than $1 billion between the costs of two different restart options.

http://www.rand.org/pubs/technical_reports/TR831.html

TR-838-NPIA

Testing the Police Workforce Resilience Hypothesis: An application of labour economics to policing management. Priscillia Hunt, Barrie Irving, Luca Farnia. 2011

The UK National Policing Improvement Agency developed a National Workforce Modernisation Programme', which identified challenges regarding police force capacity and capability to cope with demands for day-to-day policing and policing of national imperatives, such as the 2012 Olympics. This study clarifies key concepts in policing workforce management and quantifies the relationship between police force human resource levels and composition and demand for policing. By employing an innovative and novel econometric approach, we are able to estimate the number of police officers needed to control crime.This study starts with an introduction to the workforce programme and resiliency issues facing the police forces in England and Wales. We then build a framework to understand the ability of the police service to meet demands for policing as changes are made in the level and composition of its workforce. We pay particular attention to the relationship between police officers and police staff. We then provide empirical evidence regarding the number and composition of the workforce to meet different levels of demand. Whilst the empirical work in this study may be considered an academic exercise, it brings to light many issues facing police force management, such as how to think about the optimal investment decisions, ways of reducing costs and the nature of the relationship between police force numbers and crime rates. The report concludes with a discussion of data and knowledge gaps.

http://www.rand.org/pubs/technical_reports/TR838.html

TR-841-NQF

Payment Reform: Analysis of Models and Performance Measurement Implications. Eric C. Schneider, Peter S. Hussey, Christopher Schnyer. 2011

Insurers and purchasers of health care in the United States are on the verge of potentially revolutionary changes in the approaches they use to pay for health care. Recently, purchasers and insurers have been experimenting with payment approaches that include incentives to improve qual-

ity and reduce the use of unnecessary and costly services. The Patient Protection and Affordable Care Act of 2010 is likely to accelerate payment reform based on performance measurement. This technical report catalogues nearly 100 implemented and proposed payment reform programs, classifies each of these programs into one of 11 payment reform models, and identifies the performance measurement needs associated with each model. A synthesis of the results suggests near-term priorities for performance measure development and identifies pertinent challenges related to the use of performance measures as a basis for payment reform. The report is also intended to create a shared framework for analysis of future performance measurement opportunities. This report is intended for the many stakeholders tasked with outlining a national quality strategy in the wake of health care reform legislation.

http://www.rand.org/pubs/technical_reports/TR841/

TR-846-RC

Governing Geoengineering Research: A Political and Technical Vulnerability Analysis of Potential Near-Term Options. Robert J. Lempert, Don Prosnitz. 2011

Geoengineering, the deliberate altering of the earth's climate, represents a risky and, for many, a frightening proposition. But the concept has attracted increasing interest in recent years because of its potential ability to transform the portfolio of options for limiting the magnitude of future climate change. In contrast to most approaches for reducing greenhouse gas emissions, some geoengineering approaches could prove fast acting and inexpensive and could be deployed by one or a few nations without global cooperation. These characteristics present significant challenges for risk management, national security, and international governance that have only just begun to be seriously considered. This report provides an initial examination and comparison of the risks associated with alternative international approaches the United States might pursue to govern solar radiation management geoengineering research and deployment. To handle the extensive, wide-ranging uncertainties, the authors employ a multi-scenario vulnerability and response option analysis specifically designed to identify scenarios in which alternative U.S. government policies toward geoengineering governance might fail to meet their goals. In particular, the study used a simple simulation model to conduct the first steps of a robust decisionmaking analysis in order to identify some of the risks of three commonly debated near-term approaches to managing geoengineering: establishing strong norms for research, banning research entirely, or leaving research unregulated.

http://www.rand.org/pubs/technical_reports/TR846/

TR-852-NAVY

Shared Modular Build of Warships: How a Shared Build Can Support Future Shipbuilding. Laurence Smallman, Hanlin Tang, John F. Schank, Stephanie Pezard. 2011

Some recent shipbuilding programs in the United States and Europe have involved multiple shipyards constructing major modules of each ship for final integration and testing at one shipyard. Most modern shipyards have the capability to build and integrate modules, whether those modules originate at that shipyard or at another. Some yards might need to modify their facilities, however, to handle large blocks, rather than completed vessels, at the waterfront. Shared build might not maintain skills at all shipyards equally, but it might help maintain skills at multiple shipyards. It requires the cooperating shipyards to set aside any competitive tendencies and help each other to the overall benefit of the program. Potential benefits include maximizing the learning curve, cross-yard learning, and outsourcing benefits. The Navy needs to decide what it wants from a shared-build strategy, then monitor and manage the program to ensure that it delivers the required outcome, as well as the vessels called for in the program.

http://www.rand.org/pubs/technical_reports/TR852/

TR-856-OSD

Identifying Arabic-Language Materials for Children That Promote Tolerance and Critical Thinking. Gail L. Zellman, Jeffrey Martini, Michal Perlman. 2011

Building a society that supports and values the production, diffusion, and application of new knowledge and the expression of new ideas is critical for human development. This report is part of a broader effort to identify and disseminate materials whose messages encourage tolerance and support the development and use of critical thinking skills in the Arabic–speaking world. It focuses on identifying Arabic language materials targeted to children ages 4–14. A focus on children, whose ideas are still being developed, may be more effective in promoting tolerance and critical thinking than efforts directed toward adults, whose attitudes are already established or in place. The authors describe the creation of developmentally appropriate criteria used to identify and screen indigenous Arabic-language works for children that promote tolerance and critical thinking. They also describe the characteristics of the materials that were found and present several examples of works that met criteria. They also discuss barriers that prevent the development and dissemination of more such works, and suggest ways to address and overcome these barriers.

http://www.rand.org/pubs/technical_reports/TR856/

TR-858-1-HO

Preliminary assessment of economic impacts of alcohol pricing policy options in the UK. Priscillia Hunt, Lila Rabinovich, Ben Baumberg. 2011

In an effort to understand the economic implications associated with various possible measures to tackle alcohol harms, the Home Office commissioned RAND Europe to undertake research into three particular policies – minimum pricing, ban on below-cost sales, and taxation. This study presents evidence on the links between alcohol prices and consumption and the economic impacts of each policy option, the statistical data describing the market for alcohol and findings from interviews with key stakeholders.Main findings for each policy option are as follows: Ban on below cost sales (cost defined as VAT + duty): The effect on consumption may be relatively small compared with broader restrictions on discounts and promotions, and also with the introduction of certain minimum prices or tax hikes. Nevertheless, even if the effect is small, where it increases the price of the cheapest drinks, the ban could potentially lead to some reduction in hazardous/harmful drinking. Increased taxation: When the taxes are passed on, taxes affect all drinkers, which is why taxation has been considered a blunt instrument' that does not target those drinkers who cause harms, instead affecting all consumers to some extent. Minimum price: Depending on the minimum price introduced, the effect of this policy is especially strong for low-cost alcohol. Thus, minimum pricing has important implications for young and hazardous/harmful drinkers and low-income groups, who are more likely to purchase cheaper drinks.

http://www.rand.org/pubs/technical_reports/TR858/

TR-858-HO

Economic impacts of alcohol pricing policy options in the UK. Priscillia Hunt, Lila Rabinovich, Ben Baumberg. 2011

In an effort to understand the economic implications associated with various possible measures to tackle alcohol harms, the Home Office commissioned RAND Europe to undertake research into three particular policies – minimum pricing, ban on below-cost sales, and taxation. This study presents evidence on the links between alcohol prices and consumption and the economic impacts of each policy option, the statistical data describing the market for alcohol and findings from interviews with key stakeholders.Main findings for each policy option are as follows: Ban on below cost sales (cost defined as VAT + duty): The effect on consumption may be relatively small compared with broader restrictions on discounts and promotions, and also with the introduction of certain minimum prices or tax hikes. Nevertheless, even if the effect is small, where it increases the price of

the cheapest drinks, the ban could potentially lead to some reduction in hazardous/harmful drinking. ⊠ Increased taxation: When the taxes are passed on, taxes affect all drinkers, which is why taxation has been considered a ⊠blunt instrument' that does not target those drinkers who cause harms, instead affecting all consumers to some extent.⊠ Minimum price: Depending on the minimum price introduced, the effect of this policy is especially strong for low-cost alcohol. Thus, minimum pricing has important implications for young and hazardous/harmful drinkers and low-income groups, who are more likely to purchase cheaper drinks.

http://www.rand.org/pubs/technical_reports/TR858/

TR-862-AF

Air Force Contingency Contracting: Reachback and Other Opportunities for Improvement. John A. Ausink, Laura Werber, Mary E. Chenoweth. 2011

Operations Iraqi Freedom and Enduring Freedom have placed great demands on the Air Force's highly skilled contracting workforce. This report examines “reachback”—the use of contracting capability outside the theater of operations to accomplish contracting tasks for customers in the theater—as a potential means for reducing the deployment burden on military personnel. The authors analyze after-action reports written by contingency contracting officers (CCOs) who served in Iraq and Afghanistan, the results of focus groups with CCOs, interviews with subject matter experts, and purchasing data, and conclude that reachback might improve performance in some areas because of greater personnel continuity, standardization of processes, and the ability to access personnel with higher-level skills. Although reachback has the potential to reduce deployments and increase the effectiveness of some contracting functions, there is also a need for policy and procedural changes to address other causes of stress on contracting officers, so that they can concentrate more fully on their primary duty of purchasing goods and services for the warfighter.

http://www.rand.org/pubs/technical_reports/TR862/

TR-869-AF

Balancing Rated Personnel Requirements and Inventories. James H. Bigelow, Albert A. Robbert. 2011

For at least a decade, the Air Force has attempted to balance requirements for rated personnel with inventories by producing and absorbing rated personnel as fast as possible. However, shortages have persisted and have even grown, so the Air Force has shifted emphasis to reducing the requirements for rated personnel. In February 2009, the Vice Chief of Staff of the Air Force chartered a Rated Staff Requirements interdisciplinary project team (IPT) to recommend courses of action for achieving and maintaining the balance between requirements and inventories. The IPT rejected the notion of eliminating requirements and directed the owners of rated positions to recategorize specified numbers of staff positions to enable other than active rated officers to fill them. This report describes a process that could maintain the balance between rated requirements and inventory over the long term. The process includes (1) institutionalizing a version of the recategorization process pioneered by the IPT; (2) streamlining the processes for converting the recategorized positions; (3) planning for the effects of major actions on rated requirements; (4) redesigning positions to concentrate tasks that require rated expertise in fewer rated positions and assign tasks that do not require rated expertise into new, non-rated positions; and (5) making the aircrew management system responsive to avoid having changes throw it out of balance. An enforcement mechanism should also be included to ensure that owners of rated positions live within their rated authorization quotas.

http://www.rand.org/pubs/technical_reports/TR869/

TR-871-AF

Investment Strategies for Improving Fifth-Generation Fighter Training. John A. Ausink, William W. Taylor, James H. Bigelow, Kevin Brancato. 2011

It is increasingly difficult to train combat aircrews the way they will fight. U.S. Air Force experts believe that the increased use of simulators; distributed mission operations; and live, virtual, and constructive (LVC) training are required to improve training. The authors determine that realistic training requirements for 5th-generation fighter aircraft are not well documented in any standard Air Force reference. However, using a variety of data sources to assess the quality of current training, they conclude that there is strong evidence for a training gap. The authors show that high costs of providing adversary aircraft in live training mean that, in the long run, developing the LVC ability to inject threats into live aircraft may be the only fiscally responsible approach to improving training. The Air Force must systematically document currently unattainable training needs. LVC technology holds the potential to make the best and most affordable use of live training. However, the technical risk in much LVC technology is currently too high to shift primary focus to this approach. Instead, the Air Force should (1) be more consistent and thorough in funding for networked simulators and (2) make smaller, targeted investments in the development of LVC technology.

http://www.rand.org/pubs/technical_reports/TR871/

TR-874-AF

Preserving Range and Airspace Access for the Air Force Mission: Striving for a Strategic Vantage Point. William A. Williams, Raymond E. Conley, Albert A. Robbert, John E. Boon, Jr.. 2011

The Air Force requires access to ranges and their airspace to conduct critical training and testing. Whether or not the service actually owns the facilities, ranges, and airspace it uses, scheduling their use and investments in their infrastructures are challenging and have been becoming more so. Encroachment is one challenge. Communities have continued to spread into what was once rural or low population density land. And then there is the growing challenge of civilian aviation, most notably the Federal Aviation Administration's Next Generation Transportation System. With it and flight trajectory information based on Global Positioning System reporting, air traffic controllers and pilots will soon have dynamic information about U.S. airspace. That authority might extend over test and training range airspace where in emergencies, possibly with bad timing, making military liaisons critical at the national level. Range managers must still fulfill their primary purpose, facilitating realistic tests and training. The best way to do that is to understand what the goals are, what is required to meet them, and why the activity is critical. This report looks at a method that leverages an Air Force centralized scheduling program and, as an example, uses an update of an existing RAND tool (provided on CD) to gain such an understanding.

http://www.rand.org/pubs/technical_reports/TR874/

TR-876-DOE

Supplying Biomass to Power Plants: A Model of the Costs of Utilizing Agricultural Biomass in Cofired Power Plants. Tom LaTourrette, David S. Ortiz, Eileen Hlavka, Nicholas Burger, Gary Cecchine. 2011

U.S. power plants seek to diversify their fuel sources. Biomass energy is a renewable resource, generally with lower emissions than fossil fuels, and has a large, diverse base. To make decisions about investing in a facility that utilizes biomass, prospective users need information about infrastructure, logistics, costs, and constraints for the full biomass life cycle. The model developed in this work is designed to estimate the cost and availability of biomass energy resources from U.S. agricultural lands from the perspective of an individual power plant. As an illustrative example, the model estimates the availability and cost of using switchgrass or corn stover to power a cofired power plant in Illinois and estimates the plant-gate cost of producing biomass fuel, the relative proportions of switchgrass and corn stover, the mix of different land types, and the total area contributing the supplied energy. It shows that small variations in crop yields can lead to substantial changes in the amount, type, and spatial distribution of land

that would produce the lowest-cost biomass for an energy facility. Land and crop choices would be very sensitive to policies governing greenhouse-gas emissions and carbon pricing, and the model demonstrates important implications for total land area requirements for supplying biomass fuel.

http://www.rand.org/pubs/technical_reports/TR876/

TR-879-AF

Year of the Air Force Family: 2009 Survey of Active-Duty Spouses. Laura L. Miller, Sarah O. Meadows, Lawrence M. Hanser, Stephanie L. Taylor. 2011

Air Force leaders care not only about the well-being of their airmen but also that of their families. Already aware of the stresses of military life, the Air Force has already created a number of programs to assist families. But are these programs doing enough? What factors do families associate with these problems? And, despite the problems, do airmen's spouses understand that the leadership cares, and are they generally satisfied with Air Force life? To answer these questions, the Air Force asked RAND to conduct a survey at the start of the Year of the Air Force Family. That survey asked a representative sample of military spouses of active-duty airmen questions focused on specific issues and associated factors. The authors found that sizable segments of the population have experienced negative effects on child behavior, family finances, and spousal employment after moves and deployments. They also found that spouses were not always aware that programs exist to address their problems or were unable to take advantage of them. The report concludes with a series of options for improving the available support; these include expanding assistance during moves and deployments, increasing the availability of child care and youth recreational activities, developing partnerships with national companies and contractors to improve employment opportunities for spouses, and centrally maintaining direct contact information for spouses.

http://www.rand.org/pubs/technical_reports/TR879/

TR-880-AF

Customized Learning: Potential Air Force Applications. Thomas Manacapilli, Edward O'Connell, Cheryl Benard. 2011

The U.S. Air Force has a continuing interest in reducing training costs while maintaining or improving the training product. This study looks at educational approaches that would customize training to the individual, with the intent of minimizing the trainee's time in training, focusing the training on the trainee's needs, and getting the trainee productive sooner, all leading to reduced costs. The authors consulted experts in and out of the military, reviewed literature on personalized learning, reviewed meta-analyses on case studies of personalized learning, and assessed some contemporary models. Learning style feedback shows the student how to enhance his or her own learning, and it fosters a discourse between student and teacher on how the student can improve in a course. Customized learning increases the probability of creating lifelong learners. As individuals discover their learning styles, they are motivated to use that knowledge. If they have had bad experiences in the past, the new knowledge gives them a fresh point at which to reengage in learning. The authors recommend that the Air Force conduct some experiments with Air Force vocational training before implementation across Air Force training is considered.

http://www.rand.org/pubs/technical_reports/TR880/

TR-885-NAVY

The Universal Core Information Exchange Framework: Assessing Its Implications for Acquisition Programs. Daniel Gonzales, Chad J. R. Ohlandt, Eric Landree, Carolyn Wong, Rima Bitar, John Hollywood. 2011

Universal Core (UCore) 2.0 is a DoD and intelligence community information exchange framework that may be able to significantly improve interoperability between Department of Defense (DoD) information systems. UCore can support a broad range of data models with its data wrap-

ping and extensibility capabilities. Before the Navy and DoD accelerate adoption of UCore, however, several issues must be addressed, including bandwidth, implementation option guidance, and implementation costs. The authors identify unanswered questions in each of these areas. To date, UCore pilot projects and related testing have not produced sufficient data on UCore bandwidth demands and cost implications, two factors that are very important to program managers. Furthermore, current DoD policy does not provide clear policy direction on UCore. To realize UCore's benefits, the Navy and DoD should continue to develop the UCore data exchange framework; encourage program experimentation with UCore; and capture detailed performance and cost data from future UCore pilot efforts to ensure that bandwidth, implementation, and cost issues are addressed.

http://www.rand.org/pubs/technical_reports/TR885.html

TR-887-DH

How health systems make available information on service providers: Experience in seven countries. Mirella Cacace, Stefanie Ettelt, Laura Brereton, Janice S. Pedersen, Ellen Nolte. 2011

The report reviews and discusses information systems reporting on the quality or performance of providers of healthcare (quality information systems') in seven countries: Denmark, England, Germany, Italy, the Netherlands, Sweden and the United States. Data collection involves a review of the published and grey literature and is complemented by information provided by key informants in the selected countries using a detailed questionnaire. Quality information systems typically address a number of audiences, including patients (or respectively the general public before receiving services and becoming patients), commissioners, purchasers and regulators. We observe that as the policy context for quality reporting in countries varies, so also does the nature and scope of quality information systems within and between countries. Systems often pursue multiple aims and objectives, which typically are (a) to support patient choice (b) to influence provider behaviour to enhance the quality of care (c) to strengthen transparency of the provider–commissioner relationship and the healthcare system as a whole and (d) to hold healthcare providers and commissioners to account for the quality of care they provide and the purchasing decisions they make. We emphasise that the main users of information systems are the providers themselves as the publication of information provides an incentive for improving the quality of care. Finally, based on the evidence reviewed, we identify a number of considerations for the design of successful quality information systems, such as the clear definition of objectives, ensuring users' accessibility and stakeholder involvement, as well as the need to provide valid, reliable and consistent data.

http://www.rand.org/pubs/technical_reports/TR887/

TR-890-A

Army Tactical Wheeled Vehicles: Current Fleet Profiles and Potential Strategy Implications. Carolyn Wong, Louis R. Moore, Elvira N. Loredo, Aimee Bower, Brian Pascuzzi, Keenan D. Yoho. 2011

The Army's medium and heavy tactical wheeled vehicle (TWV) fleets are critical to sustaining its global operations: these are the vehicles that move supplies and equipment to and around the battlespace. The Army has maintained a significant program and made major investments in its TWV fleets because they are such critical assets. The Army's TWV strategy is a key element toward managing its TWV investments prudently. To update the TWV strategy effectively, the Army must be able to make informed decisions that are dependent on a clear understanding of how many of what types of vehicles it currently has and some indication of their age and condition. This study produced status profiles of the Army's medium and heavy TWV fleets. The status profiles show how many medium and heavy TWVs of each type the Army has and the years of useful life remaining for each group of vehicles.

http://www.rand.org/pubs/technical_reports/TR890/

TR-894-EC

Disease management evaluation: A comprehensive review of current state of the art. Annalijn Conklin, Ellen Nolte. 2011

Many countries across Europe and elsewhere have been experimenting with various structured approaches to manage patients with chronic illness as a way to improve quality of care, reduce costs and lead to better population health outcomes in the long run. Despite a body of studies of disease management interventions, uncertainty about the effects of these remains not least because current guidance on evaluation methods and metrics require further development to enhance scientific rigour while also being practical in routine operations. This report reviews the academic and grey literature to help advance the task of improving the science of assessing disease management initiatives in Europe. It provides a comprehensive inventory of current evaluation methods and performance measures, and highlights potential challenges to evaluating complex interventions such as disease management. Challenges identified are methodological, analytical and conceptual in nature, with a key issue being the establishment of the counterfactual. An array of sophisticated statistical techniques and analytical frameworks can assist in the construction of a sound comparison strategy when a randomised controlled trial is not possible. Issues to consider include: a clear framework of the mechanisms of action and expected effects of disease management; an understanding of the characteristics of disease management (scope, content, dose, context), and of the intervention and target populations (disease type, severity, case-mix); a period of observation over multiple years; and a logical link between performance measures and the intervention's aims and underlying theory of behaviour change.

http://www.rand.org/pubs/technical_reports/TR894/

TR-898-AF

Feasibility of Laser Power Transmission to a High-Altitude Unmanned Aerial Vehicle. Richard Mason. 2011

Solar-powered unmanned aerial vehicles (UAVs) have demonstrated interesting capabilities for high altitude and long endurance. However, current solar-powered UAVs are extremely light and fragile and have small payloads. This report examines whether a laser-beam-powered UAV could be scaled up to a sufficient size to be of practical interest, and identifies some of the concept's limiting factors. The report focuses on the physical parameters of flight—altitude, range, persistence, and power—that are possible for a laser-photovoltaic aircraft that uses current technology. Commercially available lasers and photovoltaic cells could provide a UAV with performance characteristics that are beyond the performance envelope of existing air vehicles, especially sustained extremely high altitude. If the laser is beamed from the ground or from a ship, the UAV is closely "tethered" to the beam source, although it could fly at extremely high altitudes over it, and clouds could interrupt the beam and force the UAV to descend below the cloud layer from time to time. If the laser were placed on a conventional aircraft, however, the UAV would be powered by an air-to-air transmission; the "tether" to the power source could be much longer (hundreds of kilometers), and clouds would no longer be a likely threat. The performance niche opened by this concept could be worth further consideration if an important mission were identified for an air vehicle with ultra-high operating altitude and moderate persistence and payload.

http://www.rand.org/pubs/technical_reports/TR898.html

TR-899-DFT

Modelling Demand for Long-Distance Travel in Great Britain: Stated preference surveys to support the modelling of demand for high-speed rail. Peter Burge, Chong Woo Kim, Charlene Rohr. 2011

The UK Department for Transport has developed a model to predict passenger demand for long-distance travel that will be used to examine a number of policy interventions, including demand

for high-speed rail.As part of the model development, a stated preference study was undertaken to examine the propensity of those making long distance trips to switch to high-speed rail and to provide key parameter values for modelling demand for high-speed rail services.Surveys were undertaken with over 3,000 travellers making long-distance trips, that is trips in excess of 50 miles by air, car, or existing rail services, within a realistic catchment area for a hypothetical north-south high-speed rail service. As a result, this study provides an incredibly rich dataset for the analysis of long-distance mode choice decisions under a broad range of scenarios, and allows the identification of cases where a new high-speed rail service may (or may not) act as an attractive substitute.The stated preference choice experiments examined choices between car, air, rail and high-speed rail. In addition to usual service characteristics, the choice experiments also examined the importance of service reliability and crowding to better isolate these aspects of a high-speed rail service which in previous studies may have been confounded in the mode-specific constants.This report provides new empirical evidence about the factors influencing demand for high-speed rail in the UK and the forecasts developed from these models will inform the debate around the future of high-speed rail in the UK.

http://www.rand.org/pubs/technical_reports/TR899.html

TR-901-AF

Upgrading the Extender: Which Options Are Cost-Effective for Modernizing the KC-10?. Anthony D. Rosello, Sean Bednarz, David T. Orletsky, Michael Kennedy, Fred Timson, Chuck Stelzner, Katherine M. Calef. 2011

The U.S. Air Force's KC-10 air refueling fleet has been in operation since 1981 without significant modernization. The Air Force is considering upgrades to the KC-10 in several areas: avionics, command and control, multipoint refueling, defensive systems, and compatibility with night-vision systems. To be cost-effective, an upgrade must return a benefit that outweighs its cost over the lifetime of the fleet. For some options, this calculation depends heavily on the KC-10's mission mix, the type of role it plays (refueling only, airlift only, or dual-role), distance from base, and the number of fighters it must refuel. An assessment of options to upgrade the KC-10—specifically, to add a tactical data link, advanced avionics, additional multipoint refueling capability, a suite of defensive systems, and lighting that is compatible with night-vision devices—weighed the costs and potential benefits of the upgrades against demands in homeland defense, theater employment, deployment, and air bridge operations and other KC-10 roles. The tactical data link, avionics upgrade, and additional multipoint refueling capability were the most cost-effective options. Defensive system upgrades could be cost-effective with the right mission mix and KC-10 role. The findings show that the night vision–compatible lighting upgrade would not be cost-effective for the KC-10. The full avionics upgrade analysis is documented Assessing the Cost-Effectiveness of Modernizing the KC-10 to Meet Global Air Traffic Management Mandates.

http://www.rand.org/pubs/technical_reports/TR901/

TR-906-RC

Mitigating Corruption in Government Security Forces: The Role of Institutions, Incentives, and Personnel Management in Mexico. Beth J. Asch, Nicholas Burger, Mary Manqing Fu. 2011

Mexico has undertaken reforms in recent years to professionalize its police. This report draws on the literature on corruption and personnel incentives and analyzes information related to police reform in Mexico. It addresses questions about the roots of corruption and the tools that could be used to mitigate corruption, with a focus on compensation and personnel management policies. It also provides an initial assessment about the effects of Mexico's attempts at reform. The results suggest progress on some fronts. Although police corruption has remained generally stable at a high level, compared with corruption levels in other organizations, it appears to have fallen. The types of reforms being introduced are consistent with the literature on incentive mechanisms for effective workforce management, though evidence is absent on their effectiveness. The authors argue

that continuity in elected officials and their policies, coordination within and between levels of government, and transparency and accountability can contribute to reducing police corruption.

http://www.rand.org/pubs/technical_reports/TR906.html

TR-910-OSD

What Do Iranians Think? A Survey of Attitudes on the United States, the Nuclear Program, and the Economy. Sara Beth Elson, Alireza Nader. 2011

The June 2009 Iranian presidential election and the subsequent popular protests revealed the importance of public opinion in driving change in the Islamic Republic of Iran, a country of strategic importance for the United States. To gauge Iranian attitudes on critical issues affecting U.S. interests, RAND conducted a phone survey of Iranian public opinion, asking questions about U.S.-Iranian relations and related topics, such as sanctions, the state of the Iranian economy, and the Iranian nuclear program. The survey also delved into public opinion on the United States, examining attitudes toward historical and current factors shaping relations between the two countries, U.S. policies toward Iran, and the Obama administration. The survey revealed that respondents were deeply divided on issues that define Iranian politics, including the state of the economy, the nuclear program, and U.S.-Iranian relations. Nevertheless, a majority of those expressing an opinion opposed the reestablishment of U.S.-Iranian ties, and there was also significant support for development of nuclear weapons. In addition, negative attitudes toward the Iranian economy were less prevalent than expected, and many respondents did not consider sanctions to have had a significant negative impact on Iran's economy. The survey also suggested that Iranians with higher incomes, higher levels of education, and access to multiple sources of information may be more supportive of Iranian policies that are more favorable to U.S. interests. U.S. policies meant to shape Iranian behavior may be more effective if they focus on this particular sector of the Iranian population.

http://www.rand.org/pubs/technical_reports/TR910/

TR-912-AF

Future Challenges for the Arab World: The Implications of Demographic and Economic Trends. Keith Crane, Steven Simon, Jeffrey Martini. 2011

This report assesses likely demographic and economic trends in the Arab world through 2020, focusing on changes that are likely to affect U.S. defense planning and U.S. policy in the region. The report assesses how long-term trends in demographic changes and the economies in this region are likely to affect U.S. interests. The report explores population shifts and economic changes in both energy-rich and energy-poor countries. Implications for U.S. policy from this report include slower population growth easing pressures on natural resources and public services and U.S. support for such programs as family planning and female education encouraging trends toward lower fertility rates. More-relaxed U.S. and European immigration and visa policies toward the citizens of the Middle East can enhance political and community ties between Arabs and the West. The United States, through the World Bank and the International Monetary Fund, should encourage economic liberalization and free trade within the region.

http://www.rand.org/pubs/technical_reports/TR912/

TR-913-NMFA

Views from the Homefront: The Experiences of Youth and Spouses from Military Families. Anita Chandra, Sandraluz Lara-Cinisomo, Lisa H. Jaycox, Terri Tanielian, Bing Han, Rachel M. Burns, Teague Ruder. 2011

As the United States continues deployments of service members to support operations in Iraq and Afghanistan, it is increasingly important to understand the effects of this military involvement, not only on service members but also on the health and well-being of their spouses and youth. The purpose of this report is to examine the functioning of a sample of youth in military families who

applied to a free camp for children of military personnel and to specifically assess how these youth are copingwith parental deployment. The report addresses the general well-being of military youth during and after parental deployment, with attention to their emotional, social, and academic functioning. It also examines the challenges that their nondeployed caregivers face. The study includes quantitative and qualitative components: three waves of phone surveys with youth and nondeployed caregivers, and in-depth interviews with a subsample of caregivers. The researchers found that children and caregivers who had applied to attend the camp confronted significant challenges to their emotional well-being and functioning. Four factors in particular (1) caregiver emotional well-being, (2) more cumulative months of deployment, (3) National Guard or Reserve status, and (4) quality of caregiver-youth communication were strongly associated with greater youth or caregiver difficulties.

http://www.rand.org/pubs/technical_reports/TR913.html

TR-915-DHHS

Building Community Resilience to Disasters: A Way Forward to Enhance National Health Security. Anita Chandra, Joie D. Acosta, Stefanie Stern, Lori Uscher-Pines, Malcolm V. Williams, Douglas Yeung, Jeffrey Garnett, Lisa S. Meredith. 2011

Community resilience, or the sustained ability of a community to withstand and recover from adversity has become a key policy issue at federal, state, and local levels, including in the National Health Security Strategy. Because resources are limited in the wake of an emergency, it is increasingly recognized that resilience is critical to a community's ability to reduce long recovery periods after an emergency. This report provides a roadmap for federal, state, and local leaders who are developing plans to enhance community resilience for health security threats and describes options for building community resilience in key areas. Based on findings from a literature review and a series of community and regional focus groups, the authors provide a definition of community resilience in the context of national health security and a set of eight levers and five core components for building resilience. They then describe suggested activities that communities are pursuing and may want to strengthen for community resilience, and they identify challenges to implementation.

http://www.rand.org/pubs/technical_reports/TR915/

TR-919-A

Improving Soldier and Unit Effectiveness with the Stryker Brigade Combat Team Warfighters' Forum. Bryan W. Hallmark, S. Jamie Gayton. 2011

This research examined leader-, soldier- and unit-level outcomes associated with the Army's first warfighters' forum, the Stryker Brigade Combat Team Warfighters' Forum (SWfF). Specifically, the study explored leaders' and soldiers' usage of and satisfaction with products and services offered by SWfF; the extent to which a SWfF-offered tactical training tool improved individuals' tactical knowledge; and whether a handbook derived from combat returnees' experiences improved unit-level tactical performance. Its broader purpose was to determine whether and how SWfF products are associated with knowledge acquisition and tactical proficiency, as well as to explore ways in which SWfF, and similar forums, could better support tactical units in the future. The results show that SWfF supports training and preparation for war, and that its methods can help the Army adapt to changing tactical landscapes. SWfF usage and satisfaction levels were high. Training tools provided by SWfF were statistically associated with gains in individual-level tactical knowledge and unit-level performance at the Combat Training Centers. The study suggests that warfighters' forums should continue to be developed, remain focused on providing information as quickly as possible, and continually monitor the views of their communities regarding the products and services they offer. In addition, the study offers two broader considerations for the Army training community. First, embed feedback reports into more training tools. Second, continue to develop and refine the technique demonstrated in this study for converting soldier and leader combat experience into information that can be easily used by units preparing for deployment.

http://www.rand.org/pubs/technical_reports/TR919.html

TR-920-NYSHF

A Needs Assessment of New York State Veterans: Final Report to the New York State Health Foundation. Terry L. Schell, Terri Tanielian, with Carrie M. Farmer, Lisa H. Jaycox, Grant N. Marshall, Terry L. Schell, Terri Tanielian, Christine Anne Vaughan, Glenda Wrenn. 2011

Mental health disorders and other types of impairments resulting from deployment experiences are beginning to emerge, but fundamental gaps remain in our knowledge about the needs of veterans returning from Iraq and Afghanistan, the services available to meet those needs, and the experiences of veterans who have tried to use these services. The current study focuses directly on the veterans living in New York state; it includes veterans who currently use U.S. Department of Veterans Affairs (VA) services as well as those who do not; and it looks at needs across a broad range of domains. The authors collected information and advice from a series of qualitative interviews with veterans of Operation Iraqi Freedom (OIF)/Operation Enduring Freedom (OEF) residing in New York, as well as their family members. In addition, they conducted a quantitative assessment of the needs of veterans and their spouses from a sample that is broadly representative of OEF/OIF veterans in New York state. Finally, they conducted a review the services currently available in New York state for veterans. The study found substantially elevated rates of post-traumatic stress disorder (PTSD) and major depression among veterans. It also found that both VA and non-VA services are critically important for addressing veterans' needs, and that the health care systems that serve veterans are extremely complicated. Addressing veterans' mental health needs will require a multipronged approach: reducing barriers to seeking treatment; improving the sustainment of, or adherence to, treatment; and improving the quality of the services being delivered. Finally, veterans have other serious needs besides mental health care and would benefit from a broad range of services.

http://www.rand.org/pubs/technical_reports/TR920.html

TR-921-RCUH

Hawai'i P-3 Initiative: Findings from the First Year of the Evaluation. Gail L. Zellman, M. Rebecca Kilburn. 2011

Recent efforts to improve K–12 educational outcomes have had mixed success. One possible reason is that many students entering kindergarten lack the basic skills to succeed in school. In 2007, with support from the W. K. Kellogg Foundation, Hawai□i launched its P–3 (preschool through third-grade) initiative, the early childhood component of the state's P–20 (preschool through higher-education) work. The initiative is overseen by the P–20 Partnerships for Education, housed at the University of Hawai□i, and its goal is for every child in the state to read at grade level by third grade. The first year of RAND's multiyear evaluation of the P–3 initiative examined plans, activities, and policy in two demonstration sites and at the P–20 level. The focus was on identifying and developing measures to assess progress and determining how the system underlying P–3 monitors, incentivizes, and supports efforts to promote early literacy. The evaluation team worked with the two demonstration sites and the P–20 team to refine logic models that will help identify measures to assess P–3 implementation and progress. The findings are organized according to seven focus areas and rely, in part, on a five-component systems-change framework intended to help align ongoing efforts and promote the goals of the individual sites and the P–20 partnership.

http://www.rand.org/pubs/technical_reports/TR921.html

TR-923-ANT

Exploring Patterns of Behaviour in Violent Jihadist Terrorists: An analysis of six significant terrorist conspiracies in the UK. Lindsay Clutterbuck, Richard Warnes. 2011

The aim of this research was to see whether the groups/cells and their 38 core individuals who had

taken part in the six most serious terrorist conspiracies and attacks in the UK between 2004 and 2007, all of which were driven by the ideology of violent Jihadism as espoused by Al Qaeda, exhibited any specific types of behaviour. In each case the terrorists successfully launched or unsuccessfully attempted an attack, or were arrested and convicted of conspiring to carry out a terrorist attack. The research provides a detailed examination of the behaviours exhibited by violent Jihadist groups/cells and the individuals within them. The report outlines the history and background before examining the organisation, characteristics and behaviour of the groups/cells involved. It also examines individual behaviours carried out on behalf of the group/cell and individual behaviour more broadly. It demonstrates there are certain distinctive behavioural characteristics displayed with their planning, preparation and implementation of an act of terrorism. The six UK case studies show three categories of behaviours, from "radicalisation" into "transition to violent Jihad" and finally to "terrorist attack planning and preparation". These findings open up the possibility of identifying through their behaviour individuals and groups engaged in the planning and preparation of a terrorist attack, thus allowing such attacks to be prevented or disrupted before they can be implemented. However, additional refinement and testing will be necessary to identify substantive "signal indicators" of potential use to police and security forces.

http://www.rand.org/pubs/technical_reports/TR923.html

TR-925-RS

Project Retrosight: Understanding the returns from cardiovascular and stroke research: Methodology Report. Alexandra Pollitt, Steven Wooding, Stephen Hanney, Martin Buxton, Jonathan Grant. 2011

This project explores the impacts arising from cardiovascular and stroke research funded 15–20 years ago and attempts to draw out aspects of the research, researcher or environment that are associated with high or low impact.The project is a case study-based review of 29 cardiovascular and stroke research grants, funded in Australia, Canada and UK between 1989 and 1993. The case studies focused on the individual grants but considered the development of the investigators and ideas involved in the research projects from initiation to the present day. Grants were selected through a stratified random selection approach that aimed to include both high- and low-impact grants. The key messages are as follows: 1) The cases reveal that a large and diverse range of impacts arose from the 29 grants studied. 2) There are variations between the impacts derived from basic biomedical and clinical research. 3) There is no correlation between knowledge production and wider impacts 4) The majority of economic impacts identified come from a minority of projects. 5) We identified factors that appear to be associated with high and low impact.This report presents the detailed methodology of the study. It will be of interest to those involved in research and impact evaluation.

http://www.rand.org/pubs/technical_reports/TR925/

TR-927-1-OSD

A Review of the Army's Modular Force Structure. Stuart E. Johnson, John E. Peters, Karin E. Kitchens, Aaron L. Martin, Jordan R. Fischbach. 2011

In 2003, the U.S. Army began implementing a set of ambitious changes to its force structure to address the challenges of waging war and conducting extended stabilization operations. A key change involved transitioning the Army from a traditional, division-based force into a brigade-based force, a concept that has come to be known as "modularity." Some important capabilities that were formerly part of the host division were made organic to the brigade combat team organization. The Army also reduced the range of combat brigade types from 17 to three: infantry, Stryker, and heavy. Congress has taken an interest in the Army's transition to a modular force and requested a study of the process and outcomes of the initiative. The U.S. Department of Defense asked RAND to prepare a study addressing the questions posed

by Congress as part of the National Defense Authorization Act for Fiscal Year 2010, including the Army's capability to provide ground support to joint operations; its flexibility and versatility across a range of operations; the tactical, operational, and strategic risks it faces under the new force structure; and the sufficiency of the modular force structure's end strength. Analyses, interviews, and lessons learned from current operations indicate that the Army's modular force structure is superior to the division-based structure in terms of deployability, employability, and sustainability.

http://www.rand.org/pubs/technical_reports/TR927-1.html

TR-932-DH

Healthcare Technology Co-operatives: Filling a niche in the English R&D landscape. David Kryl, Sonja Marjanovic, Siobhan Ni Chonaill, Helen Ridsdale, Ohid Yaqub. 2011

The Department of Health (England) commissioned this evaluation of the pilot Health Technology Cooperatives (HTCs), which are part of its research infrastructure. Its purpose is to explore how this initiative has affected relationships between clinical, industrial and academic partners; how the HTCs fit into the current health innovation landscape; and the alignment of HTC activities to the goals set out in the NIHR strategy.Since the HTC scheme was intended to focus on medical devices, this review investigated how medical device development is being pursued by other similar entities in England, Australia and the USA. The key question was whether the institutional relationships initiated by the HTCs are contributing to the health research system in England and if this scheme is the most effective way of pursuing these relationships.This review had no specific theory or hypothesis to test, so information was gathered so as to allow key conclusions to be drawn and linked to existing theories. This review used documented evidence from the institutions involved as well as interviews.The pilot HTCs have shown that there are different, but equally legitimate, management approaches to the clinician-industry-patient relationship. These different approaches are reflections both of the disease field and the host institution culture. Neither HTC has concluded how best to sustain activities in the long term, particularly core management facilities such as supporting initial meetings with potential partners and early development of technologies from non-commercial sources.Recommendations focussed on how best to support core HTC activities in the future.

http://www.rand.org/pubs/technical_reports/TR932/

TR-933-EC

The Cloud: Understanding the Security, Privacy and Trust Challenges. Neil Robinson, Lorenzo Valeri, Jonathan Cave, Tony G. Thompson-Starkey, Hans Graux, Sadie Creese, Paul Hopkins. 2011

The overall objective of The Cloud: Understanding the Security, Privacy and Trust Challenges study is to advise on policy and other interventions which should be considered in order to ensure that European users of cloud environments are offered appropriate protections, and to underpin a world-leading European cloud ecosystem. Cloud computing is increasingly subject to interest from policymakers and regulatory authorities. The European Commission's recent Digital Agenda highlighted a need to develop a pan-European cloud strategy' that will serve to support growth and jobs and build an innovation advantage for Europe. However, the concern is that currently a number of challenges and risks in respect of security, privacy and trust exist that may undermine the attainment of these broader policy objectives. Our approach has been to undertake an analysis of the technological, operational and legal intricacies of cloud computing, taking into consideration the European dimension and the interests and objectives of all stakeholders (citizens, individual users, companies, cloud service providers, regulatory bodies and relevant public authorities). We undertook literature and document review, interviews, case studies and held an expert workshop to identify, explore and validate these issues in more depth. The present paper represents the final consolidation of all inputs, suggestions and

analyses and contains our recommendations for policy and other interventions.

http://www.rand.org/pubs/technical_reports/TR933/

TR-936-EC

Development of a European Crime Report: Improving safety and justice with existing crime and criminal justice data. Priscillia Hunt, Beau Kilmer, Jennifer Rubin. 2011

Understanding crime in the European Union (EU) is a complex endeavour. National differences in how crime data are collected and reported are important, albeit partial, explanations for the complexity. To improve cross-national comparisons and benchmarking in crime and criminal justice policy, the European Commission Directorate-General for Home Affairs commissioned RAND Europe to create a framework for developing a European Crime Report (ECR). In particular, RAND Europe scoped data availability issues and current projects and information that could feed into an ECR. Furthermore, a variety of stakeholders were interviewed to provide a more comprehensive, reliable assessment of opportunities and challenges to developing an ECR. Research uncovered it is not necessary to collect new data to begin developing an ECR. What is essential, however, is to use available data through "Smart Aggregation", a term we introduce referring to the provision of contextual information highlighting definitional differences in a more intelligent way. Smart Aggregation brings together existing CCJ data and reporting in a manner that facilitates informed comparisons and discourages less useful comparisons and analysis. Three decision areas identified as noteworthy for enhancing sustainability of an ECR are: funding streams, model of implementation, and dissemination and communication strategy. The report develops recommendations on how to address each of these key decisions areas with a possible timeline for implementation over the course of three years. The report also provides an indicative table of contents for a report, a website snapshot to disseminate the report and a method for generating bespoke reports for users.

http://www.rand.org/pubs/technical_reports/TR936.html

TR-937-NIST

Influences on the Adoption of Multifactor Authentication. Martin C. Libicki, Edward Balkovich, Brian A. Jackson, Rena Rudavsky, Katharine Watkins Webb. 2011

Passwords are presently the primary method by which users authenticate themselves to computer systems. But passwords are proving less and less capable of protecting systems from abuse. Multifactor authentication (MFA)—which combines something you know (e.g., a PIN), something you have (e.g., a token), and/or something you are (e.g., a fingerprint)—is increasingly being required. This report investigates why organizations choose to adopt or not adopt MFA—and where they choose to use it. The authors reviewed the academic literature and articles in the trade press and conducted structured conversations with selected organizations that use or have contemplated using MFA. They found that the type of organization—for example, defense contractor, bank, hospital—affected its MFA choices. MFA is mandated for U.S. government agencies, which tend to use PINs and tokens for remote access. Among private users of MFA, tokens that generate one-time passwords, rather than biometrics, predominate. The researchers recommend that the U.S. government develop methodologies by which the costs and benefits of mandating MFA can be evaluated. Guidance by the National Institute of Standards to government agencies may be useful in helping them sort out the various arguments for and against mandating MFA in a given sector.

http://www.rand.org/pubs/technical_reports/TR937.html

TR-941-CMS

Evaluation of RxNorm in Ambulatory Electronic Prescribing. Douglas S. Bell, Sean Michael O'Neill, Kerry A. Reynolds, Diane Schoeff. 2011

Drug prescriptions need to accurately identify the medications that prescribers intend for

pharmacists to dispense. However, the set of computer-interpretable identifiers currently used in electronic prescribing (e-prescribing) does not support the specific needs of the prescribers and pharmacists who conduct e-prescribing transactions.RxNorm, a drug nomenclature from the National Library of Medicine, assigns a rigorously derived, centrally maintained, and publicly available unique identifier to each clinically distinct drug. It therefore has the potential to greatly improve drug identification in e-prescribing transactions. Through laboratory research and pilot testing, the authors evaluated RxNorm's potential to improve how medications are represented in e-prescribing transactions. They found that RxNorm is highly complete for prescription drugs used in ambulatory practice that are within its scope and that it offers substantial efficiency and parsimony gains for communicating health plan formulary information to prescribers. The errors that arose during use were of low clinical significance. In live pilot testing, RxNorm identifiers were successfully added to prescription transactions sent between participating prescribers and pharmacies, and the pharmacies were able to use this information to check for dispensing errors or to disambiguate prescriptions. The authors found that RxNorm appears to provide drug identifiers that more accurately reflect the prescriber's intent than the drug identifier set currently used.

http://www.rand.org/pubs/technical_reports/TR941.html

TR-944-NAVY

A Methodology for Implementing the Department of Defense's Current In-Sourcing Policy. Jessie Riposo, Irv Blickstein, Stephanie Young, Geoffrey McGovern, Brian McInnis. 2011

Identifying the appropriate balance between contractor and government staff is not a new challenge for the government. However, recent direction from Department of Defense (DoD) leadership has led to increased awareness of the importance of finding this balance. During the past decade, in-sourcing has received increased support from members of Congress and the Obama administration. Unfortunately, producing definitive guidance that can be used to objectively determine the appropriate balance between contractor and government staff has proven quite challenging.The authors review the recent history of outsourcing and in-sourcing in DoD, assess relevant laws and policies, and offer interpretations of key terms. Using this information, they describe an approach to implementing current in-sourcing guidance and present a questionnaire designed to help officials make in-sourcing assessments in accordance with DoD policy.

http://www.rand.org/pubs/technical_reports/TR944.html

TR-946-KBV

Informing the development of a resource allocation framework in the German healthcare system. Ellen Nolte, Martin Roland, Cheryl L. Damberg, Soeren Mattke, Mirella Cacace, Simo Goshev, Laura Brereton, Annalijn Conklin, Liisa Hiatt, Denise D. Quigley, Susan L. Lovejoy. 2011

In the German statutory health insurance (SHI) system, the payment of office-based physicians in the ambulatory care sector is based on a complex system involving national and regional stakeholders. Payment rates are derived from a national relative value scale but, as budgets are negotiated at the regional level, conversion factors for the relative values and thus prices for the same service can vary by region. Against this background, the National Association of Statutory Health Insurance Physicians (KBV) in Germany is looking to develop a national approach that allocates funds according to a unified framework, while taking account of regional characteristics. As part of this new approach, the KBV seeks to incorporate quality indicators into the allocation formula so as to improve the overall quality of care provided by SHI physicians. This report aims to inform the development of the quality component of the proposed national resource allocation framework in the German statutory healthcare system by providing an overview of quality indicator systems and quality measurement approaches, including criteria for selecting measures of quality currently used for

high stakes' assessment in high-income countries globally. High stakes uses of performance measures mean that the provider's performance scores are used for public accountability (making results transparent through public reporting) and/or for differentially allocating resources (pay-for-performance or P4P).

http://www.rand.org/pubs/technical_reports/TR946/

TR-947-SRI

Cost Study of the Saint Paul Early Childhood Scholarship Program. Heather L. Schwartz, Lynn A. Karoly. 2011

In 2008, the Minnesota Early Learning Foundation created the Saint Paul Early Childhood Scholarship Program, a pilot program to provide families with scholarships to cover the cost of high-quality early childhood education (ECE) programs. Although there is a large body of research about the benefits of preschool specifically and early learning programs more generally, there is little research that clearly identifies the cost components of ECE programs. This report provides detailed cost data for a sample of 12 ECE programs participating in the scholarship program. It also provides data on the extent of services, program features, and characteristics of children served at the different types of ECE programs participating in the Saint Paul Early Childhood Scholarship Program and the sources and amounts of funds used to pay for children attending the programs. On a per-hour per-child basis, the 12 sampled ECE programs' costs ranged from $3.47 to $19.06.

http://www.rand.org/pubs/technical_reports/TR947/

TR-948-NIJ

Cold-Case Investigations: An Analysis of Current Practices and Factors Associated with Successful Outcomes. Robert C. Davis, Carl Jensen, Karin E. Kitchens. 2011

The number of cold-case units and the expenditures to fund them are increasing, but little is known about the return on this investment. This report seeks to help better understand cold-case investigation, discussing the status of cold-case investigations in the United States and examining factors associated with successful cold-case investigations. It asks what the current practices of law enforcement agencies are with respect to investigating cold cases and what strategies agencies can use, based on the likelihood of success, to prioritize cold-case investigations. A national survey of law enforcement agencies was used to determine whether and how agencies conducted cold-case investigations, while samples were drawn from investigative case files in four cities to determine attributes of cold cases that are associated with case clearance, arrest, and conviction. The survey revealed that most agencies do little cold-case work, cold-case funding is tenuous, success rates for cold-case investigations are low, and agency factors associated with higher clearance rates included level of funding and access to investigative databases. The case-file analysis revealed that one can identify factors that predict whether a cold-case investigation will be successful, including the basis for initiating the cold-case investigation, characteristics of the victim and crime, progress made during the initial investigation, and actions of cold-case investigators; clearing a cold case does not automatically lead to making an arrest; in sexual-assault cold cases, even when a suspect DNA match has been made, about one-third of cases are not filed because of problems with victim cooperation, credibility, or availability of suspects who are deceased or in prison, but those cases that are prosecuted resulted in convictions and lengthy prison terms more than 90 percent of the time; and cooperation between police and prosecutors can improve both the efficiency and effectiveness of cold-case investigations.

http://www.rand.org/pubs/technical_reports/TR948.html

TR-950-OSD

Programs Addressing Psychological Health and Traumatic Brain Injury Among U.S. Military Servicemembers and Their Families. Robin M. Weinick, Ellen Burke Beckjord, Carrie M. Farmer, Laurie T. Martin, Emily M. Gillen, Joie D. Acosta,

Michael P. Fisher, Jeffrey Garnett, Gabriella C. Gonzalez, Todd C. Helmus, Lisa H. Jaycox, Kerry A. Reynolds, Nicholas Salcedo, Deborah M. Scharf. 2011

Over the last decade, U.S. military forces have been engaged in extended conflicts that are characterized by increased operational tempo, most notably in Iraq and Afghanistan. While most military personnel cope well across the deployment cycle, many will experience difficulties handling stress at some point; will face psychological health challenges, such as post-traumatic stress disorder or major depression; or will be affected by the short- and long-term psychological and cognitive consequences of a traumatic brain injury (TBI). Over the past several years, the Department of Defense (DoD) has implemented numerous programs that address various components of psychological health along the resilience, prevention, and treatment continuum and focus on a variety of clinical and nonclinical concerns. This comprehensive catalog of programs currently sponsored or funded by DoD to address psychological health and TBI provides overviews and detailed descriptions of 211 programs, along with a description of how programs relate to other available resources and care settings. It also provides recommendations for clarifying the role of programs, examining gaps in routine service delivery that could be filled by programs, and reducing implementation barriers. Barriers include inadequate funding and resources, concerns about the stigma associated with receiving psychological health services, and inability to have servicemembers spend adequate time in programs. The authors found that there is significant duplication of effort, both within and across branches of service. As each program develops its methods independently, it is difficult to determine which approaches work and which are ineffective. Recommendations include strategic planning, centralized coordination, and information-sharing across branches of service, combined with rigorous evaluation. Programs should be evaluated and tracked in a database, and evidence-based interventions should be used to support program efforts.

http://www.rand.org/pubs/technical_reports/TR950.html

TR-951-DHHS

Source Materials for the Healthy Communities Toolkit: A Resource Guide for Community and Faith-Based Organizations. Joie D. Acosta, Anita Chandra, Malcolm V. Williams, Lois M. Davis. 2011

The Patient Protection and Affordable Care Act places significant emphasis on the role of community-based health promotion initiatives; within this focus, community and faith-based organizations (CFBOs) are seen as critical partners for improving community well-being. This report provides the content for a toolkit that will prepare community and faith-based organizations to take advantage of opportunities presented in the Patient Protection and Affordable Care Act and engage faith and community leaders in promoting health in their communities. This includes key facts and figures about health topics, handouts for community groups, and web links for resources and other information in the following areas: healthcare reform; community health centers and development of the community health workforce; promotion of healthy families; mental health; violence and trauma; prevention of teen and unintended pregnancy and HIV/AIDS; and chronic disease prevention. The report also includes recommendations for testing the content of the toolkit with communities and considerations for its implementation.

http://www.rand.org/pubs/technical_reports/TR951/

TR-954-BTS

Sydney Strategic Model Population Synthesiser, 2006 Base. James Fox, Andrew Daly, Bhanu Patruni, Flavia Tsang. 2011

The Sydney Strategic Model (STM) was originally developed between 1999 and 2002, and informs long term transport planning, policy development and infrastructure assessment in Greater Sydney. During 2009 and 2010, the individual models that comprise the STM were re-estimated to use more recent survey data, the geographic scope of the model was extended, and additional model components were incorporated to predict

demand for toll roads and park-and-ride schemes. During 2010 and 2011, three parallel projects were undertaken to implement the new models in the STM. This report describes the work to update the Population Synthesiser component of the STM. The Population Synthesiser is run to create forecasts of the future Sydney population segmented by spatial area and socio-economic segment. The Population Synthesiser predicts future levels of licence holding, representing both cross-sectional changes and cohort effects to incorporate the impact of trends in licence holding over time, in particular delayed licence acquisition for younger people, and higher female licence holding for older persons. The model also predicts future car ownership levels, and a key improvement in the new version if a process to 'pivot' off car ownership levels in the base year so that the observed pattern of spatial variation in car ownership levels is fully represented in the base year forecasts. The report also documents the updated prototypical sampling procedure, which is run to expand the base year population to best match future targets defined for each model zone.

http://www.rand.org/pubs/technical_reports/TR954.html

TR-956-VHA

Veterans Health Administration Mental Health Program Evaluation: Capstone Report. Katherine E. Watkins, Harold Alan Pincus, Brad Smith, Susan M. Paddock, Thomas E. Mannle, Jr., Abigail Woodroffe, Jake Solomon, Melony E. Sorbero, Carrie M. Farmer, Kimberly A. Hepner, David M. Adamson, Lanna Forrest, Catherine Call. 2011

This report summarizes a four-year evaluation of mental health services provided by the Veterans Administration (VA) for veterans with schizophrenia, bipolar disorder, posttraumatic stress disorder, major depression, and substance use disorders. The population of veterans with the diagnoses included in the study comprises a large and growing number of veterans with severe and complex general medical and mental disorders and accounts for a disproportionately large proportion of utilization and costs for the VA. Study veterans represented 15.4 percent of all veterans who used VA services in 2007 but accounted for 32.9 percent of the costs due to higher utilization of inpatient and outpatient services. Across the country, VA facilities report substantial capacity for treating seriously mentally ill veterans. Although capacity has increased since the implementation of the Mental Health Strategic Plan in 2005, important gaps remain. The proportion of veterans receiving recommended care varies widely, and there is variation in many of the performance indicators assessed with regard to specific populations, services, and locations. In most instances, VA care performance is as good as or better than that reported by other groups or shown by direct comparisons with other systems of care, but the level often does not meet implicit VA expectations. Most performance indicators did not show substantial improvement from FY 2004 through FY 2007, but recent structural enhancements and increased availability of services may yield improvements in the future, and the number of veterans in the study cohorts who were served during the study period increased annually. Veterans' perceptions of VA services were favorable, although they did not perceive significant improvement in their conditions. Opportunities for further investigation are identified, along with specific problem areas and strategies for improving performance and methods to enhance capacity for quality monitoring and improvement.

http://www.rand.org/pubs/technical_reports/TR956.html

TR-962-SU

Monitoring and evaluation in stabilisation interventions: Reviewing the state of the art and suggesting ways forward. Christian van Stolk, , , Tom Ling, Anais Reding, Matt Bassford. 2011

This report reviews the state of the art in monitoring and evaluation in stabilisation environments and suggests ways to improve practice. The report was commissioned by the United Kingdom's Stabilisation Unit and is based on a documentary review and a dozen interviews conducted with experts in the United Kingdom, the United States, Australia, the United Nations, the European Com-

mission and the World Bank. The report argues that theories of change are central to effective M&E but remain scarcely applied in the field. It is suggested that contribution stories be used to develop these theories of change in a way which is adapted to the complex and turbulent environments in which stabilisation operations take place. The report also points to the importance of moving from a view of M&E as an ad hoc process to integrating it to stabilisation operations. Given the complexity and turbulence of stabilisation environments, this would also allow to retain flexibility, and adapt indicators when necessary.

http://www.rand.org/pubs/technical_reports/TR962/

TR-968-SANF

Expanded Measures of School Performance. Heather L. Schwartz, Laura S. Hamilton, Brian M. Stecher, Jennifer L. Steele. 2011

The upcoming reauthorization of the Elementary and Secondary Education Act provides an opportunity to reconsider what factors school performance-reporting systems should include. Critics of No Child Left Behind (NCLB) have pointed to the narrowing effects of the law's focus on mathematics and reading achievement, and they have called for efforts to broaden the measures used to rate schools. This report poses and addresses questions regarding expanded measures of school quality to reflect the multiple goals of schooling. The authors convened a panel of five experts on school accountability policies, scanned published research about expanded measures of school performance, conducted ten semistructured phone interviews with staff from local or state education agencies and research institutions, and reviewed the measures employed in each state that publishes its own school ratings in addition to those required under NCLB. After classifying the measures state education agencies use to develop their own school ratings, they then describe categories of measures that research indicates are the most rapidly growing in usage by state and local education agencies. They supplement categories of measures with more detailed examples of localities that have adopted them, examining why they adopted the measures and how the measures are employed. This report describes promising directions for expanding the set of measures that schools have at their disposal while acknowledging the need for more research on how the availability of such measures affects educational practice and student achievement.

http://www.rand.org/pubs/technical_reports/TR968/

TR-971-DOL

Employer Self-Insurance Decisions and the Implications of the Patient Protection and Affordable Care Act as Modified by the Health Care and Education Reconciliation Act of 2010 (ACA). Christine Eibner, Federico Girosi, Amalia R. Miller, Amado Cordova, Elizabeth A. McGlynn, Nicholas M. Pace, Carter C. Price, Raffaele Vardavas, Carole Roan Gresenz. 2011

The Patient Protection and Affordable Care Act as amended by the Health Care and Education Reconciliation Act of 2010 (ACA) changes the regulatory environment within which health insurance policies on the small-group market are bought and sold. New regulations include rate bands that limit premium price variation, risk-adjustment policies that will transfer funds from low-actuarial-risk to high-actuarial-risk plans, and requirements that plans include “essential health benefits.” While the new regulations will be applied to all non-grandfathered fully insured policies purchased by businesses with 100 or fewer workers, self-insured plans are exempt from these regulations. As a result, some firms may have a stronger incentive to offer self-insured plans after the ACA takes full effect. In this report we identify factors that influence employers' decisions to self-insure and estimate how the ACA will influence self-insurance rates. We also consider the implications of higher self-insurance rates for adverse selection in the non-self-insured small-group market and whether enrollees in self-insured plans receive different benefits than enrollees in fully-insured plans. Results are based on data analysis, literature review, findings from discussions with stakeholders, and microsimula-

tion analysis using the COMPARE model. Overall, we find little evidence that self-insured plans differ systematically from fully insured plans in terms of benefit generosity, price, or claims denial rates. Stakeholders expressed significant concern about adverse selection in the health insurance exchanges due to regulatory exemptions for self-insured plans. However, our microsimulation analysis predicts a sizable increase in self-insurance only if comprehensive stop-loss policies become widely available after the ACA takes full effect and the expected cost of self-insuring with stop-loss is comparable to the cost of being fully insured in a market without rating regulations.

http://www.rand.org/pubs/technical_reports/TR971.html

TR-972-AF

Lessons from U.S. Allies in Security Cooperation with Third Countries: The Cases of Australia, France, and the United Kingdom. Jennifer D. P. Moroney, Celeste Ward Gventer, Stephanie Pezard, Laurence Smallman. 2011

Like the U.S. Air Force, many U.S. allies work with partner countries on security matters, sometimes even with the same partners, but on a smaller scale. But how, where, and why do these allies engage the same countries? Would working together in particular areas be worthwhile or viable and can specific lessons be learned from their experiences, for example, in the areas of planning, resourcing and assessments? This report explores these questions by examining both the positive aspects and the challenges of the security cooperation approaches of three U.S. allies, Australia, France, and the United Kingdom. These three capable allies are experienced in working with civilian counterparts and benefit from higher-level departmental guidance. They generally do so with relatively small budgets, leading them to learn to economize, pool resources, and take advantage of joint and interagency planning. These strategies can inform current U.S. thinking on security cooperation. They also suggest venues for further collaboration between allies, particularly in the three key areas of staff talks, exercises, and training followed by exercises.

http://www.rand.org/pubs/technical_reports/TR972.html

TR-973/1-CSG

The Impact of the Coverage-Related Provisions of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in Connecticut: An Analysis from RAND COMPARE. David Auerbach, Sarah Nowak, Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

The Patient Protection and Affordable Care Act (ACA) contains substantial new requirements aimed at increasing rates of health insurance coverage. Because many of these provisions impose additional costs on the states, officials need reliable estimates of the likely impact of the ACA in their state. To demonstrate the usefulness of modeling for state-level decisionmaking, RAND undertook a preliminary analysis of the impact of the ACA on five states—California, Connecticut, Illinois, Montana, and Texas—using the RAND COMPARE microsimulation model. For Connecticut, the model predicts that, in 2016 (the year that all of the provisions in the ACA related to coverage expansion will be fully implemented), the uninsured rate in Connecticut will fall to 5 percent; without the law, it would remain at 11 percent. The model projects that total state government spending on health care will be 10 percent lower for the combined 2011–2020 period than it would be without the ACA, mostly because of federal subsidies for residents who would have been covered by Connecticut's state-run health insurance program (State-Administered General Assistance).

http://www.rand.org/pubs/technical_reports/TR973z1.html

TR-973/2-CSG

The Impact of the Coverage-Related Provisions of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in Montana: An Analysis from RAND COMPARE. David Auerbach, Sarah Nowak,

Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

The Patient Protection and Affordable Care Act (ACA) contains substantial new requirements aimed at increasing rates of health insurance coverage. Because many of these provisions impose additional costs on the states, officials need reliable estimates of the likely impact of the ACA in their state. To demonstrate the usefulness of modeling for state-level decisionmaking, RAND undertook a preliminary analysis of the impact of the ACA on five states—California, Connecticut, Illinois, Montana, and Texas—using the RAND COMPARE microsimulation model. For Montana, the model predicts that, in 2016 (the year that all of the provisions in the ACA related to coverage expansion will be fully implemented), the uninsured rate in Montana will fall to 3 percent; without the law, it would remain at 18 percent. The model projects that total state government spending on health care will be 3 percent higher for the combined 2011–2020 period because of the ACA.

http://www.rand.org/pubs/technical_reports/TR973z2.html

TR-973/3-CSG

The Impact of the Coverage-Related Provisions of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in California: An Analysis from RAND COMPARE. David Auerbach, Sarah Nowak, Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

The Patient Protection and Affordable Care Act (ACA) contains substantial new requirements aimed at increasing rates of health insurance coverage. Because many of these provisions impose additional costs on the states, officials need reliable estimates of the likely impact of the ACA in their state. To demonstrate the usefulness of modeling for state-level decisionmaking, RAND undertook a preliminary analysis of the impact of the ACA on five states—California, Connecticut, Illinois, Montana, and Texas—using the RAND COMPARE microsimulation model. For California, the model predicts that, in 2016 (the year that all of the provisions in the ACA related to coverage expansion will be fully implemented), the uninsured rate in California will fall to 4 percent; without the law, it would remain at 20 percent. The model projects that total state government spending on health care will be 7 percent higher for the combined 2011–2020 period because of the ACA.

http://www.rand.org/pubs/technical_reports/TR973z3.html

TR-973/4-CSG

The Impact of the Coverage-Related Provisions of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in Texas: An Analysis from RAND COMPARE. David Auerbach, Sarah Nowak, Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

The Patient Protection and Affordable Care Act (ACA) contains substantial new requirements aimed at increasing rates of health insurance coverage. Because many of these provisions impose additional costs on the states, officials need reliable estimates of the likely impact of the ACA in their state. To demonstrate the usefulness of modeling for state-level decisionmaking, RAND undertook a preliminary analysis of the impact of the ACA on five states—California, Connecticut, Illinois, Montana, and Texas—using the RAND COMPARE microsimulation model. For Texas, the model predicts that, in 2016 (the year that all of the provisions in the ACA related to coverage expansion will be fully implemented), the uninsured rate in Texas will fall to 6 percent; without the law, it would remain at 28 percent, the highest in the nation. The model projects that total state government spending on health care will be 10 percent higher for the combined 2011–2020 period because of the ACA.

http://www.rand.org/pubs/technical_reports/TR973z4.html

TR-973/5-CSG

The Impact of the Coverage-Related Provisions

of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in Illinois: An Analysis from RAND COMPARE. David Auerbach, Sarah Nowak, Jeanne S. Ringel, Federico Girosi, Christine Eibner, Elizabeth A. McGlynn, Jeffrey Wasserman. 2011

The Patient Protection and Affordable Care Act (ACA) contains substantial new requirements aimed at increasing rates of health insurance coverage. Because many of these provisions impose additional costs on the states, officials need reliable estimates of the likely impact of the ACA in their state. To demonstrate the usefulness of modeling for state-level decisionmaking, RAND undertook a preliminary analysis of the impact of the ACA on five states—California, Connecticut, Illinois, Montana, and Texas—using the RAND COMPARE microsimulation model. For Illinois, the model predicts that, in 2016 (the year that all of the provisions in the ACA related to coverage expansion will be fully implemented), the uninsured rate in Illinois will fall to 3 percent; without the law, it would remain near 15 percent. The model projects that total state government spending on health care will be 10 percent higher for the combined 2011–2020 period because of the ACA.

http://www.rand.org/pubs/technical_reports/TR973z5.html

TR-974-AF

Integrating the Full Range of Security Cooperation Programs into Air Force Planning: An Analytic Primer. Jennifer D. P. Moroney, Joe Hogler, Lianne Kennedy-Boudali, Stephanie Pezard. 2011

The Air Force and other Department of Defense entities conduct a host of security cooperation activities with partner air forces. Many programs are available for use when working with partner countries in a variety of contexts. However, there is currently no process for systematically tracking all these programs and activities. This report supplies Air Force planners with more-accessible information about resources for security cooperation, the rules that govern their use, and their application methods. It does so via an analytical construct created to illustrate how these resources can be employed in partner countries with varying degrees of capability, capacity, and willingness to work with the United States. The authors present an illustrative vignette to demonstrate how this construct may be used in a situation that requires a security cooperation plan. A set of program pages is also included to help security cooperation planners determine the key components of a security cooperation plan: the partner countries to be addressed by the plan, the programs to be used, the types of activities to be conducted through those programs, and program funding information.

http://www.rand.org/pubs/technical_reports/TR974.html

TR-975-A

The Effect of the Assessment of Recruit Motivation and Strength (ARMS) Program on Army Accessions and Attrition. David S. Loughran, Bruce R. Orvis. 2011

The fraction of American youth meeting U.S. Army enlistment standards for weight and body fat has decreased markedly over the past three decades. In response to this adverse trend, in 2005, the Army allowed six Military Entrance Processing Stations (MEPS) to grant an enlistment waiver to applicants who exceeded weight and body fat standards as long as they passed a physical endurance, motivation, and strength test known as the Assessment of Recruit Motivation and Strength (ARMS) test. The test was developed by Army medical scientists who believed that it complements existing physical tests used to identify potential enlistees who would and would not fare well in the military. The Army implemented ARMS at eight additional MEPS in February 2006 and then at the remaining 51 MEPS in April 2006. The authors find that ARMS increased male and female accessions of overweight applicants in the six ARMS study sites by 35 and 62 percent, respectively, between 2004 and 2005. They also report that this substantial increase in overweight accessions had no effect on 6- and 18-month attrition rates. Given the low cost of implementing the program, the authors conclude that ARMS is

a highly cost-effective means of screening overweight applicants for military service.

http://www.rand.org/pubs/technical_reports/TR975.html

TR-977/1-NIAAA

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT): A Group Cognitive Behavioral Therapy for Depression in Clients with Co-Occurring Alcohol and Drug Use Problems — Group Leader's Manual. Kimberly A. Hepner, Jeanne Miranda, Stephanie Woo, Katherine E. Watkins, Isabel Lagomasino, Shelley H. Wiseman, Ricardo F. Munoz. 2011

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT) is a manualized group cognitive behavioral therapy program for depression in individuals with co-occurring alcohol and drug use problems. BRIGHT has been designed so that non–mental health practitioners, and practitioners with less formal training than professional mental health counselors, can deliver the program, thus providing evidence-based depression treatment to individuals who often do not receive it. BRIGHT is a 16-week program consisting of four modules, each of which focuses on a specific topic—thoughts, activities, people interactions, and substance abuse—and how it can affect a person's mood. The BRIGHT manual consists of a leader's introduction, a session-by-session group leader manual, and a session-by-session group member's workbook. This volume includes the leader's introduction and leader's manual; the leader's manual includes the same material provided to group members, except that it also includes instructions, highlighted in shaded text boxes, to help the group leader present the program material.

http://www.rand.org/pubs/technical_reports/TR977z1.html

TR-977/2-NIAAA

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT): A Group Cognitive Behavioral Therapy for Depression in Clients with Co-Occurring Alcohol and Drug Use Problems — Group Member's Workbook. Kimberly A. Hepner, Jeanne Miranda, Stephanie Woo, Katherine E. Watkins, Isabel Lagomasino, Shelley H. Wiseman, Ricardo F. Munoz. 2011

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT) is a manualized group cognitive behavioral therapy program for depression in individuals with co-occurring alcohol and drug use problems. BRIGHT has been designed so that non–mental health practitioners, and practitioners with less formal training than professional mental health counselors, can deliver the program, thus providing evidence-based depression treatment to individuals who often do not receive it. BRIGHT is a 16-week program consisting of four modules, each of which focuses on a specific topic—thoughts, activities, people interactions, and substance abuse—and how it can affect a person's mood. The BRIGHT manual consists of a leader's introduction, a session-by-session group leader manual, and a session-by-session group member's workbook; this volume is the group member's workbook.

http://www.rand.org/pubs/technical_reports/TR977z2.html

TR-978/1-NIDA

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT-2): An Integrated Group Cognitive Behavioral Therapy for Co-Occurring Depression and Alcohol and Drug Use Problems — Group Leader's Manual. Kimberly A. Hepner, Ricardo F. Munoz, Stephanie Woo, Karen Chan Osilla, Shelley H. Wiseman, Katherine E. Watkins. 2011

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT-2) is a manualized group cognitive behavioral therapy program for co-occurring depression and alcohol and drug use problems. BRIGHT-2 has been designed so that non–mental health practitioners, and practitioners with less formal training than professional mental health counselors, can deliver the program, thus providing evidence-based depression treatment to individuals who often do not receive it. BRIGHT-2 is an 18-week program consisting of three mod-

ules, each of which focuses on a specific topic—thoughts, activities, and people interactions—and how it can affect a person's mood and desire to drink or use drugs. The BRIGHT-2 manual consists of a leader's introduction, a session-by-session group leader manual, and a session-by-session group member's workbook. This volume includes the leader's introduction and leader's manual; the leader's manual includes the same material provided to group members, except that it also includes instructions, highlighted in shaded text boxes, to help the group leader present the program material.

http://www.rand.org/pubs/technical_reports/TR978z1.html

TR-978/2-NIDA

Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT-2): An Integrated Group Cognitive Behavioral Therapy for Co-Occurring Depression and Alcohol and Drug Use Problems — Group Member's Workbook. Kimberly A. Hepner, Ricardo F. Munoz, Stephanie Woo, Karen Chan Osilla, Shelley H. Wiseman, Katherine E. Watkins. 2011

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http://www.rand.org/pubs/technical_reports/TR978z2.html

TR-979-ASPE

Policy Options for Addressing Medicare Payment Differentials Across Ambulatory Settings. Barbara O. Wynn, Peter S. Hussey, Teague Ruder. 2011

Under Medicare, many health care services can be provided in a range of ambulatory settings, and improvements in technology and delivery mean that many services no longer require an inpatient hospital stay. Medicare's payment for physician work and malpractice liability expenses is the same regardless of where a service is provided. However, payment differentials exist between settings for the facility-related components of care, such as nursing and other staff salaries, equipment, buildings, and supplies. A three-phase RAND study examined the available data on various procedure costs and payment differentials and the bundling or packaging of services offered to Medicare beneficiaries in physician offices, ambulatory surgical centers, and hospital outpatient departments. Building on exploratory analyses conducted in the first two phases of the study, this report documents findings from the third phase, which sought to identify options for modifying Medicare payment policies to improve the value of services and address the differential in the amount that Medicare pays for similar facility-related services in various settings. The findings confirm that payments tend to be highest for services provided in hospitals, but they also indicate that payment differentials generally exceed cost differentials and vary by procedure. The proposed policy options offer solutions to standardize these differentials and potentially reduce Medicare spending.

http://www.rand.org/pubs/technical_reports/TR979.html

TR-980-NIDA/NIAAA

A Fidelity Coding Guide for a Group Cognitive Behavioral Therapy for Depression. Kimberly A. Hepner, Stefanie Stern, Susan M. Paddock, Sarah B. Hunter, Karen Chan Osilla, Katherine E. Watkins. 2011

This report describes the development of the

fidelity rating tools for the Building Recovery by Improving Goals, Habits, and Thoughts (BRIGHT) and BRIGHT-2 interventions—cognitive behavioral therapy interventions for clients with co-occurring depression and substance use problems. The tools, which assess adherence to and competence in administering the BRIGHT treatments, and their interrater reliability are discussed, and a recommended training plan for fidelity coders in research settings is presented. The training plan includes coder selection, initial training, and ongoing training. Finally, specific guidance is provided on how to apply the fidelity tools. This guidance is based on experience using the tools within a research context, but it should be helpful for supervisors in clinical settings as well.

http://www.rand.org/pubs/technical_reports/TR980.html

TR-981-DTRA

Assessing the Effectiveness of the International Counterproliferation Program. Jennifer D. P. Moroney, Aidan Kirby Winn, Jeffrey Engstrom, Joe Hogler, Thomas-Durell Young, Michelle Spencer. 2011

The threat posed by the proliferation of weapons of mass destruction (WMD) is among the central strategic national security challenges that the United States is facing. The breadth and scope of this challenge requires interagency cooperation, as well as coordination with a broad array of international partners. To effectively confront the threat of WMD proliferation, the United States relies on the will and capacity of its allies and international partners for assistance. This cooperation often requires investments in security cooperation programs aimed at enhancing partner capacity. Assessing the impact of security cooperation efforts is inherently difficult. However, such assessments generate data on which more-informed decisions about program funding at all levels of government can be based. In addition to serving the needs of decisionmakers, assessments provide information to those directly involved in the planning and implementation of security cooperation programs. This report demonstrates how an assessment framework developed in previous RAND research can be applied to combating WMD programs by illustrating its utility for the International Counterproliferation Program.

http://www.rand.org/pubs/technical_reports/TR981.html

TR-984-NETL

Near-Term Opportunities for Integrating Biomass into the U.S. Electricity Supply: Technical Considerations. David S. Ortiz, Aimee E. Curtright, Constantine Samaras, Aviva Litovitz, Nicholas Burger. 2011

In light of potential regulatory limits on greenhouse-gas (GHG) emissions, requirements for greater use of renewable fuels, and higher prices for some conventional fossil resources, over the course of the next few decades, biomass is expected to become an increasingly important source of electricity, heat, and liquid fuel. One near-term option for using biomass to generate electricity is to cofire biomass in coal-fired electricity plants. Doing so allows such plants to reduce GHG emissions and, in appropriate regulatory environments, to generate renewable-energy credits to recover costs. This report focuses on two aspects of biomass use: plant-site modifications, changes in operations, and costs associated with cofiring biomass; and the logistical issues associated with delivering biomass to the plant. The authors find that the main challenge is maintaining a consistent fuel supply; technical and regulatory factors can drive the decision to cofire; cofiring can increase costs, decrease revenue, and reduce GHG emissions; densification does not reduce plant costs but can reduce transportation costs, however current markets cannot support use of densified fuels.

http://www.rand.org/pubs/technical_reports/TR984.html

TR-986-BD

Translational Research and Knowledge in agriculture and food production. Watu Wamae, Pauline Goyal-Rutsaert, Molly Morgan Jones, Siobhan Ni Chonaill, Joyce Tait, Joanna Chataway. 2011

This report considers how translational research and knowledge exchange can be enhanced throughout the food and agricultural value chain so that best use is made of public and private investment in research and knowledge generation. The project's aims were: to generate a robust, generic and transferable methodology for examining translational research and knowledge exchange across an entire value chain; apply and validate this methodology to deliver a robust evidence base for translational research and knowledge exchange in the wheat value chain in the UK; and outline mechanisms for maintaining the evidence bases. Important enablers of translational research include: the development of fora to facilitate knowledge exchange and to enable development of a synthesis of existing knowledge on specific topics; involving key actors and targeting end users across the value chain in a more systematic and informed manner; the effective use of policy.

http://www.rand.org/pubs/technical_reports/TR986.html

TR-989-SANF

Federal and State Roles and Capacity for Improving Schools. Michael A. Gottfried, Brian M. Stecher, Matthew Hoover, Amanda Brown Cross. 2011

U.S. educators and policymakers are concerned about the poor performance of the public schools, particularly schools that serve students from low-income families. Although education is primarily a state function, the federal government also has a longstanding interest in improving education for disadvantaged students, and it targets funding to this group. Federal involvement in states' provision of education has grown since the passage of the Elementary and Secondary Education Act (ESEA) in 1965, and the 2002 reauthorization of ESEA, known as No Child Left Behind, represented a significant increase in federal intervention, particularly in terms of school improvement. ESEA could be reauthorized in 2011, and there is much discussion about the most-effective way to balance federal and state responsibilities for improving schools and how best to frame federal policy to promote this goal. This report reviews the literature on the state and federal roles in education, examines the effectiveness of states' ongoing school-improvement efforts, and considers options for framing future federal guidance and support of state school-reform efforts. Three general conclusions stand out: (1) the federal government has multiple policy alternatives from which to choose, and reauthorized ESEA legislation need not merely replicate approaches from the past; (2) the challenge that educators and policymakers face at present involves developing rather than replicating successful strategies to improve low-performing schools; (3) states vary tremendously in terms of their strategies and capacity to improve low-performing schools. Consequently, the optimal federal–state relationship would entail flexibility and incorporate a range of policy levers.

http://www.rand.org/pubs/technical_reports/TR989.html

TR-991-1-DOJ

National Evaluation of Safe Start Promising Approaches: Assessing Program Outcomes. Lisa H. Jaycox, Laura J. Hickman, Dana Schultz, Dionne Barnes-Proby, Claude Messan Setodji, Aaron Kofner, Racine Harris, Joie D. Acosta, Taria Francois. 2011

Safe Start Promising Approaches (SSPA) is the second phase of a community-based initiative focused on developing and fielding interventions to prevent and reduce the impact of children's exposure to violence (CEV). This report shares the results of SSPA, which was intended to implement and evaluate promising and evidence-based programs in community settings, and includes all data available in the project, updating an earlier report. Fifteen program sites across the country were selected to implement a range of interventions for helping children and families cope with the effects of CEV. The settings, populations served, intervention types, types of violence addressed, community partners, and program goals differed across the 15 sites. The main body of this report provides information on the designs of the stud-

ies, instruments used, data collection and cleaning, analytic methods, and an overview of the results across the 15 sites. The appendixes provide a detailed description of the outcome evaluation conducted at each SSPA program, including a description of the enrollees, enrollment and retention, the amount and type of services received, and child and family outcomes over time.

http://www.rand.org/pubs/technical_reports/TR991-1.html

TR-991-DOJ

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http://www.rand.org/pubs/technical_reports/TR991.html

TR-995-A

The Effect of Military Enlistment on Earnings and Education. David S. Loughran, Paco Martorell, Trey Miller, Jacob Alex Klerman. 2011

Each year, more than 150,000 young men and women enlist in the active component of the U.S. military. The experience of these enlistees while serving their country undoubtedly influences their long-run labor market outcomes, but exactly how is not well understood. Military service develops technical and other skills and subsidizes the cost of postsecondary education, but military experience does not perfectly substitute for civilian labor market experience. The research reported in this volume estimates, for as many as 18 years following enlistment, the causal effect of military service on labor market and educational outcomes. The authors address the empirical problems associated with the selective nature of military service by restricting their analysis to military applicants, some of whom enlist and some of whom do not, and by controlling for a rich array of applicant characteristics available on the military application record. The authors find that military enlistment increases earnings in both the short and long term: The percentage increase in earnings attributable to enlistment is about 40 percent in the first few years following application and diminishes to about 11 percent 14–18 years following application. Enlistment significantly delays college education in the short run. In the longer run, enlistment slightly increases the likelihood of attaining a two-year college degree, but it also decreases the likelihood of attaining a four-year college degree, especially among higher-aptitude youth.

http://www.rand.org/pubs/technical_reports/TR995.html

TR-996-OSD

How Much Does Military Spending Add to Hawaii's Economy?. James Hosek, Aviva Litovitz, Adam C. Resnick. 2011

The presence of defense activity in Hawaii is significant, but how much does it add to Hawaii's economy? We collected data on defense expenditures on personnel and procurement and estimated the relationship between these expen-

ditures and the levels of output, employment, and earnings in Hawaii's economy. The analysis uses an input-output model for Hawaii that describes the relationship among industries and final demand. DoD expenditures in Hawaii during FY 2007–2009 averaged $6.5 billion per year in 2009 dollars—$4.1 billion for personnel and $2.4 billion for procurement. These expenditures were associated with $12.2 billion worth of Hawaii's output—18 percent of Hawaii's 2009 GDP—and 101,000 jobs. We considered the sensitivity of the estimates to a number of factors, including undercounting or overcounting defense procurement, Hawaii state taxes paid by defense personnel, the savings rate of defense personnel, Impact Aid to Hawaii schools, spending by afloat and deployed personnel, and procurement by commissaries and exchanges. Most factors made little difference, but the savings rate of personnel and where the earnings of afloat and deployed personnel are spent could decrease the results by approximately 10 percent.

http://www.rand.org/pubs/technical_reports/TR996.html

TR-997-DHHS

The Modified Kalman Filter Macro: User's Guide. Claude Messan Setodji, J. R. Lockwood, Daniel F. McCaffrey, Marc N. Elliott, John L. Adams. 2011

The Modified Kalman Filter approach for pooling information across time and across outcomes is shown to improve accuracy in national estimates of health outcomes including cancer, diabetes, and hypertension especially in small racial/ethnic subgroups. The developed SAS macro models true health states in each subgroup assuming a linear time evolution and an autoregressive deviation around such trend. The macro provides multiple options for users.

http://www.rand.org/pubs/technical_reports/TR997.html

TR-998-NSF

Steps Toward a Formative Evaluation of NSDL. Tora K. Bikson, Nidhi Kalra, Lionel A. Galway, Grace Agnew. 2011

The National Science Foundation's (NSF) National Science Digital Library/Distributed Learning (NSDL) program turned 10 years old in 2010. This report presents results of a preliminary program evaluation carried out by RAND and is organized around three principal goals: Provide an initial evaluation of NSDL based on existing information resources, including results of a prior phase of evaluation; Conduct limited primary data collection studies to pilot test instruments and approaches and complement findings from extant information; and Design a robust formative evaluation for a final phase of effort, refining research questions and methods.An interdisciplinary team directed project research efforts to: examine the state of health of the digital resource collections; assess the evidence that currently used web metrics provide about activities users undertake to find and access those resources; and identify early indicators of positive effects from the use of NSDL resources among science teachers or learners in NSDL-supported research projects.Initial answers to these questions are supplemented by primary data collection aimed at exploring the appropriateness of metadata intended to assist users in finding, identifying, selecting and obtaining sought digital contents and at investigating the usability of available resources for accomplishing selected routine tasks in science teaching. A minicase study explored one full instantiation of the NSDL program model—a demonstration of curriculum customization to meet the needs of earth science teachers using resources from the Digital Library for Earth System Education (DLESE).The report synthesizes the findings from these exercises to yield results and recommendations, both for what NSF and NSDL should do now as well as for the design of a full formative evaluation in the future.

http://www.rand.org/pubs/technical_reports/TR998.html

TR-999-NASA

Pricing Strategies for NASA Wind-Tunnel Facilities. Thomas Light, Chad J. R. Ohlandt, Jan Osburg. 2011

The National Aeronautics and Space Administration (NASA) maintains a large array of national-class aeronautics testing capabilities, but there has been an overall downward trend in the use of its wind-tunnel test facilities. Fiscal pressures have increased incentives to cut costs and create additional sources of revenue to sustain and expand the testing capabilities that NASA offers. The authors explore six potential approaches to pricing the use of these facilities: (1) marginal cost pricing, (2) two-part pricing with full cost recovery, (3) two-part pricing with subsidization, (4) average cost pricing, (5) average cost pricing with subsidization, and (6) no charge. Evaluating each approach against three criteria—efficiency, fiscal impact, and fairness—the authors find that the no-charge policy performs poorly across the board and that no one strategy performs well across all three criteria. However, each of the first five options performs well against at least one criterion.

http://www.rand.org/pubs/technical_reports/TR999.html

WORKING PAPER BRIEFS

WB-111-1

Do Disability Benefits Discourage Work?. Nicole Maestas, Kathleen J. Mullen. 2011

Social Security Disability Insurance (SSDI) is intended to replace lost income for people suffering from a disability that is likely to cause substantial long-term losses in earnings. A concern has been that SSDI may have a disincentive effect on the willingness of recipients to work—that is, that some SSDI beneficiaries would work if they did not receive benefits. This study examined SSDI applications between 2005 and 2006, focusing on a "natural experiment" that arises from the disability determination process itself: Some of the disability examiners who decide these cases are more stringent than others. This allowed the study team to compare work activity among similar applicants who were initially allowed or denied benefits only because their applications were randomly assigned to disability examiners with different propensities to allow benefits. The researchers found that those who have impairments that are on the margin of allowance for SSDI benefits are strongly discouraged from returning to work if they are awarded benefits. They also found that those who are relatively less impaired are substantially more likely to return to work if denied benefits, whereas beneficiaries with the most severe impairments would not be any more likely to work if they had not received SSDI.

http://www.rand.org/pubs/working_briefs/WB111.html

WB-112

401(k) Loan Defaults: Who Is at Risk and Why?. Timothy (Jun) Lu, Olivia S. Mitchell, Stephen P. Utkus. 2011

Many 401(k) retirement plans allow participants to take loans from their accounts before they retire. However, if they have not paid them off before leaving their jobs, they must pay them in full immediately. Based on a large dataset from Vanguard, this study is the first of its kind to quantify how many people take out loans and, of those, how many default. It proposes changes in retirement policy to reduce the financial risk posed by these loans, particularly for vulnerable groups.

http://www.rand.org/pubs/working_briefs/WB112.html

WORKING PAPERS

WR-240/22-LAFANS

The Los Angeles Family and Neighborhood Survey, Wave 2: Interviewer Computer Manual. Anne R. Pebley, Narayan Sastry, Christine E. Peterson, Karen Yuhas. 2011

Interviewer computer manual for the Los Angeles Family and Neighborhood Survey.

http://www.rand.org/pubs/working_papers/WR240z22.html

WR-240/23-LAFANS

The Los Angeles Family and Neighborhood Survey, Wave 2: Interviewer Training Manual. Anne R. Pebley, Narayan Sastry, Christine E. Peterson, Karen Yuhas. 2011

Interviewer training manual for the Los Angeles Family and Neighborhood Survey.

http://www.rand.org/pubs/working_papers/WR240z23.html

WR-524-1

Intervivos Giving Over the Lifecycle. Michael D. Hurd, James P. Smith, Julie Zissimopoulos. 2011

The authors use longitudinal data from the Health and Retirement Study on money parent give to adult children over sixteen years. They study the scale of giving, regularity over time, and factors shaping it. Parents give $5,000 to children with the one-third of parents who give, averaging $14,000 over two years. There is persistence in giving declining with age and resulting in total gifts of $50,000 from age 53 to death excluding bequests. Single parents who expect a long life span and are risk averse give less money to children; consistent with a lifecycle model of consumption including transfers.

http://www.rand.org/pubs/working_papers/WR524-1.html

WR-705-1

Income Taxes, Compensating Differentials, and Occupational Choice: How Taxes Distort the Wage-Amenity Decision. David Powell, Hui Shan. 2011

The link between taxes and occupational choices is central for understanding the welfare impacts of income taxes. Just as taxes distort the labor-leisure decision, they also distort the wage-amenity decision. Yet, there have been few studies on the full response along this margin. When tax rates increase, workers favor jobs with lower wages and more amenities. The authors introduce a two-step methodology which uses compensating differentials to characterize the tax elasticity of occupational choice. They estimate a significant compensated elasticity of 0.03, implying that a 10% increase in the net-of-tax rate causes workers to change to a 0.3% higher wage job.

http://www.rand.org/pubs/working_papers/WR705-1.html

WR-706-1

Heterogeneity in Income Tax Incidence: Are the Wages of Dangerous Jobs More Responsive to Tax Changes than the Wages of Safe Jobs?. David Powell. 2011

Income taxes distort the relationship between wages and non-taxable amenities. When the marginal tax rate increases, amenities become more valuable as the compensating differential for low-amenity jobs is taxed away. While there is evidence that the provision of amenities responds to taxes, the literature has ignored the consequences for job characteristics which cannot fully-adjust. This paper compares the wage response of dangerous jobs to the wage response of safe jobs. When tax rates increase, we should see the pre-tax compensating differential for on-the-job risk increase. Empirically, this paper finds large differences in the wage response of jobs based on their riskiness.

http://www.rand.org/pubs/working_papers/WR706-1.html

WR-710-1

Unconditional Quantile Regression for Panel Data with Exogenous or Endogenous Regressors. David Powell. 2011

Unconditional quantile treatment effects are difficult to estimate in the presence of fixed effects. Panel data are frequently used because fixed effects or differences are necessary to identify the parameters of interest. The inclusion of fixed effects or differencing of data, however, redefines the quantiles. This paper introduces a quantile estimator for panel data which conditions on fixed effects for identification but allows the parameters of interest to be interpreted in the same manner as cross-sectional quantile estimates. The quantile treatment effects are unconditional in the fixed effect but identification originates from differences in the covariates or instruments. The fixed effects are never estimated and the estimator is consistent for small T.

http://www.rand.org/pubs/working_papers/WR710-1.html

WR-718

Development, Validation and Testing of an Epidemiological Case Definition of Interstitial Cystitis/Painful Bladder Syndrome: Supplementary Tables. Sandra H. Berry, Laura M. Bogart, Chau Pham, Karin Liu, Leroy M. Nyberg, Michael A. Stoto, Marika Suttorp, J. Quentin Clemens. 2011

Supplementary tables to EP-20100091.

http://www.rand.org/pubs/working_papers/WR718.html

WR-753-WB

To strengthen the governance dimension in social safety net programs in the ASEAN region. Christian van Stolk, , . 2011

The World Bank commissioned RAND Europe to write a report on strengthening of the governance dimension of social safety net (SSN) programs in the Association of Southeast Nations (ASEAN) region. The World Bank, AUSAID and the ASEAN Secretariat embarked on an eighteen-month programme of research, analysis and knowledge management in the Summer of 2009 which aims to contribute to the development of more effective social safety net programmes in the region. The aim is ultimately to contribute to improvements in the social protection and labour market outcomes of the poor and vulnerable in ASEAN countries.

http://www.rand.org/pubs/working_papers/WR753.html

WR-761

Influence of New Media on Adolescent Sexual Health: Evidence and Opportunities. Rebecca L. Collins, Steven Martino, Rebecca Shaw. 2011

Sexual risk behavior among U.S. adolescents is a major public health concern, with young people accounting for a disproportionate number of unplanned pregnancies and sexually transmitted infection diagnoses. Although a great deal of research attention has been devoted to understanding what puts adolescents at risk for these outcomes, it is clear that more must be done to address risky sexual activity among youth. One route is by identifying additional contributors that have been understudied—factors that put youth at risk and levers that can be used in preventive interventions. Over the past decade, new research has identified media as having the potential to serve both roles. A review of the literature linking media use to adolescent sexual attitudes and behavior, focusing primarily on newer media, reveals what may be largely unintended effects of exposure to sexual content. “New media” refers to content created and delivered via the Internet, including social networking and other specialized kinds of websites, as well as content delivered on other digital platforms, such as cell phones. A review of new-media interventions designed to improve adolescent sexual health also helps clarify what is already known and identify where there is the strongest need for further study in this rapidly changing area of adolescent life.

http://www.rand.org/pubs/working_papers/WR761.html

WR-776-1

Education, Training and Innovation in Transition Economies: Is there a Link?. Zafar Nazarov, Alisher Akhmedjonov. 2011

The aim of this paper is to establish the effect of on-the-job-training and university education on the firm's innovation decision in transition economies of Eastern Europe and the Former Soviet Union. The authors use the 2002 and 2005 waves of the Business Environment and Enterprise Performance Surveys. Their findings, based on a mixed discrete-continuous model with endogenous variables in the firm's innovation equation, suggest that further investments in education will not lead to necessary improvements in the firm's demonstrated ability to innovate. This is in contrast to on-the-job-training, which they show increases a firm's ability to innovate in countries with transition economies.

http://www.rand.org/pubs/working_papers/WR776-1.html

WR-778-AF

Comparing the Cost of Penetrating Bombers to Expendable Missiles Over Thirty Years: An Initial Look. Thomas Hamilton. 2011

Project AIR FORCE (PAF) developed preliminary life cycle costs estimates for a new penetrating bomber, including the cost per day of fighting one or more conflicts against adversaries that possess even moderate air defenses. PAF also developed preliminary cost estimates for cruise missiles launched from standoff distances by non-stealthy platforms. Procurement costs for the cruise missile launch platforms were not included and PAF assumed that cruise missiles do not require more ISR support than bombers. The findings show that penetrating stealth bombers cost less than expendable missiles for similar missions. The paper also identifies other negative aspects of relying on expendable missile options.

http://www.rand.org/pubs/working_papers/WR778.html

WR-806-CMS

Review of the Current Literature on Outcome Measures Applicable to the Medicare Population for Use in a Quality Improvement Program: Project Deliverable 2a, 2b. Susanne Hempel, David A. Ganz, Megan Clifford, Sydne Newberry, Yee-Wei Lim, Jody Larkin, Roberta M. Shanman, Samuel Wertheimer, Neil S. Wenger, Carol P. Roth, Paul G. Shekelle. 2011

This paper reviews measures that have been used to assess quality improvement programs in Medicare or equivalent populations. The authors searched MEDLINE for evaluations of quality improvement programs for applicable populations in US settings published between 2000 and October 2010. The definition of a quality improvement program they adopted was "a change in how routine care is delivered." Available publications reporting on effects of interventions with concurrent control groups, or before-and-after studies, were eligible for inclusion in the review. They used methods to minimize reviewer error and bias throughout to provide a reliable, valid, and transparent overview, but this scoping review does not constitute a comprehensive systematic review. The search identified 2,786 publications, of which 690 were considered potentially relevant based on the title and abstract. Of these, 539 were obtained and screened as full text publications. In all, 180 publications met inclusion criteria and were abstracted. The study details are documented in an evidence table. Studies reported on patient health status outcomes, other patient and caregiver measures such as satisfaction with care, and provider and organizational measures such as costs or quality indicators satisfied. The existing literature demonstrates a wide variety of potential outcome measures, each with inherent advantages and disadvantages. Thus, a transparent and valid strategy is needed to select measures that will be useful for evaluating quality improvement programs applicable to the Medicare population.

http://www.rand.org/pubs/working_papers/WR806.html

WR-815-NMFA

The Experience of Outdoor Education at Operation Purple® Camp: Findings from a Sample of Youth Participants. Rachel M. Burns, Anita Chandra, Sandraluz Lara-Cinisomo. 2011

In summer 2008, the Sierra Club partnered with the National Military Family Association to implement outdoor education activities in Operation Purple® camps, which are free camps for youth from military families. Overall, campers and their parents reported taking part in a wide range of outdoor education activities at camp and discussing these activities upon returning home. The authors suggest several directions for programming and additional research. It may be useful to review the content of the outdoor education activities to determine if and how curriculum should align with youth interests by age and gender. Future assessments of outdoor education should include a precamp survey to capture the activities that youth and families are already pursuing in order to more adequately capture change in activity participation over time.

http://www.rand.org/pubs/working_papers/WR815.html

WR-818-ISEC

Sunday Liquor Laws and Crime. Paul Heaton. 2011

Many jurisdictions have considered relaxing Sunday alcohol sales restrictions, yet such restrictions' effects on public health remain poorly understood. This paper analyzes the effects of legalization of Sunday packaged liquor sales on crime, focusing on the phased introduction of such sales in Virginia beginning in 2004. Differences-in-differences and triple-differences estimates indicate the liberalization increased minor crime by 5% and alcohol-involved serious crime by 10%. The law change did not affect domestic crime or induce significant geographic or inter-temporal crime displacement. The costs of this additional crime are comparable to the state's revenues from increased liquor sales.

http://www.rand.org/pubs/working_papers/WR818.html

WR-820-NIHRSDO

Delivering the aims of the CLAHRCs: evaluating CLAHRCs' strategies and contributions: Interim report: Phase I. Tom Ling, Bryony Soper, Sonja Marjanovic, Claire Celia, Ohid Yaqub, Anais Reding, Timothy Milewa, Stephen Hanney. 2011

This report catalogues work undertaken in the first of three phases of an evaluation of the nine Collaborations for Leadership in Applied Health Research and Care (CLAHRCs) established in October 2008 by the UK National Institute for Health Research (NIHR). The CLAHRCs aim to encourage and strengthen collaboration between universities and local NHS organisations so that patient outcomes are improved through the conduct of applied health research and its implementation. Each of the nine CLAHRCs, established in October 2008, will receive up to 10 million pounds over five years. The focus of Phase I of the research was to work collaboratively with all the CLAHRCs to build an understanding of their approaches and theories of change to address what is traditionally called the 'second translation gap' (i.e. the gap in health research translation that refers to implementing research-informed product and service innovations into clinical practice). Phase II will focus on exploring the following issues: the extent and ways in which the NHS influences the CLAHRCs' evolution, outcomes and impacts; the CLAHRCs' role in building effective multi-stakeholder and multi-disciplinary teams for service improvements and the mechanisms through which CLAHRCs attempt to use research knowledge and evidence to change commissioning and clinical behaviour for patient benefit. The third phase will explore the implications of our findings for improving current policy and practice in the establishment of 'beneficial forward-looking partnerships between universities and their surrounding NHS organisations', including contributions to increase the capacity of NHS organisations to engage with and apply research ('absorptive capacity') and to encourage the effective involvement of patients and the public.

http://www.rand.org/pubs/working_papers/WR820.html

WR-823

Toward Standardization of Benefit-Cost Analyses of Early Childhood Interventions. Lynn A. Karoly. 2011

A growing body of benefit-cost analyses (BCAs) of early childhood programs has been prompted by the increased demand for results-based accountability when allocating public and private sector resources. While the BCAs of early childhood programs serve to make such investments more compelling, there are limitations in the current state of the art, including a lack of standardization in the BCA methods used, from discount rates to shadow prices. The objective of this paper is to delineate a set of standards for conducting BCAs of early childhood programs. The paper reviews the existing evidence of the economic returns from early childhood programs that serve children and families in the first five years of life, discusses the challenges that arise in applying the BCA methodology such programs, highlights the variation in current methods used, and proposes a set of standards for applying the BCA methodology to early childhood programs. The recommendations

concern issues such as the discount rate to use and the age to which costs and benefits should be discounted; stakeholder disaggregation; outcomes to value, the associated values, and projections of future outcomes; accounting for uncertainty; sensitivity analysis; and reporting of results. The proposed standards can guide the choices that analysts need to make about the methods to use when performing BCAs for one or more early childhood programs and they can support greater transparency in the results the analysts provide. The standards can also support consumers of the BCA results in their need to understand the methods employed and the comparability across different studies.

http://www.rand.org/pubs/working_papers/WR823.html

WR-824

Unconditional Quantile Regression for Exogenous or Endogenous Treatment Variables. David Powell. 2011

This paper introduces an unconditional quantile regression (UQR) estimator that can be used for exogenous or endogenous treatment variables. Traditional quantile estimators provide conditional treatment effects. Typically, we are interested in unconditional quantiles, characterizing the distribution of the outcome variable for different values of the treatment variables. Conditioning on additional covariates, however, may be necessary for identification of these treatment effects. With conditional quantile models, the inclusion of additional covariates changes the interpretation of the estimates. The UQR and IV-UQR estimators allow for one to condition on covariates without altering the interpretation. This estimator is a more general version of traditional quantile estimators.

http://www.rand.org/pubs/working_papers/WR824.html

WR-828-CHSWC

Use of Compound Drugs, Medical Foods, and Co-Packs in California's Workers' Compensation Program: An Overview of the Issues. Barbara O. Wynn. 2011

There is considerable controversy over the growing use of compound drugs, medical foods, and co-packs for workers' compensation (WC) patients. The issues surrounding the use of these products rest on uncertainties regarding whether the products are medically appropriate and whether payments are reasonable. Clarifying the coverage and payment rules and removing inappropriate financial incentives for physician-dispensing would help address these issues.

http://www.rand.org/pubs/working_papers/WR828.html

WR-829-DH

Bibliometric analysis of highly cited publications of health research in England, 2002-2006. Thed van Leeuwen, Jonathan Grant, Siobhan Ni Chonaill. 2011

This paper describes a bibliometric analysis to support the selection of candidate National Institute of Health Research Biomedical Research Centres (BRCs) and Biomedical Research Units (BRUs). It is intended to assist potential applicants in deciding whether to submit a pre-qualifying questionnaire as part of the procurement process and to inform the deliberations of the selection panel for the BRCs and BRUs. The work presented in this paper is a collaboration between the Centre for Science and Technology Studies in the Netherlands (CWTS) and RAND Europe.

http://www.rand.org/pubs/working_papers/WR829.html

WR-830

What is the Cost of Married Women's Paid Work?. Seonglim Lee, Jinkook Lee, Yunhee Chang. 2011

This study uses the 2003-2004 Consumer Expenditure Survey to assess costs incurred by dual-income, married-couple households. It finds that, compared to one-earner households with equal income and similar demographics, dual-earner households pay significantly more in tax, social security and private pension contributions but, except for families with pre-school children, do not have more work-related expenditures. The

findings indicate a convergence of consumption patterns between one-earner and two-earner households. They also indicate that dual-earner households save more for retirement through pension plans.

http://www.rand.org/pubs/working_papers/WR830.html

WR-831

A Contribution to Health Capital Theory. Titus Galama. 2011

This paper presents a theory of the demand for health, health investment and longevity, building on the human capital framework for health and addressing limitations of existing models. It predicts a negative correlation between health investment and health, that the health of wealthy and educated individuals declines more slowly and that they live longer, that current health status is a function of the initial level of health and the histories of prior health investments made, that health investment rapidly increases near the end of life and that length of life is finite as a result of limited life-time resources (the budget constraint). It derives a structural relation between health and health investment (e.g., medical care) that is suitable for empirical testing.

http://www.rand.org/pubs/working_papers/WR831.html

WR-832

Learning versus Stealing: How Important are Market-Share Reallocations to India's Productivity Growth. Ann E. Harrison, Leslie A. Martin, Shanthi Nataraj. 2011

The new trade theory emphasizes the role of market-share reallocations across firms ("stealing") in driving productivity growth, while the older literature focused on average productivity improvements ("learning"). The authors use comprehensive, firm-level data from India's organized manufacturing sector to show that market-share reallocations did play an important role in aggregate productivity gains immediately following the start of India's trade reforms in 1991. However, aggregate productivity gains during the overall 20-year period from 1985 to 2004 were driven largely by improvements in average productivity. By exploiting the variation in reforms across industries, they document that the average productivity increases can be attributed to India's trade liberalization and FDI reforms. Finally, they construct a panel dataset that allows them to track firms during this time period; their results suggest that while within-firm productivity improvements were important, much of the increase in average productivity also occurred because of firm entry and exit.

http://www.rand.org/pubs/working_papers/WR832.html

WR-833

Family Labor Participation and Child Care Decisions: The Role of Grannies. Gema Zamarro. 2011

One of the most significant long term trends in the labor market in most OECD countries has been the increase in the proportion of working mothers. However, not all countries show the same pattern. Countries in Southern Europe (Italy, Greece and Spain) show an average participation rate of about 45% whereas the participation rates in Northern countries (Denmark, Sweden) are around 75%. The characteristics of child care systems also differ significantly across OECD countries. This along with the characteristics of the labor market may have led families to get the necessary social services in an alternative way, i.e. through grandmothers. This paper analyzes how and to what extent child care is provided by grandmothers and how this task is combined with paid work in 10 European countries. Moreover, it studies whether the child care provided by grandmothers is encouraging the labor participation of their sons and, especially, their daughters. For this aim, it uses a sample drawn from the Survey of Health, Aging and Retirement in Europe (SHARE) which provides detailed information about grandmothers (the units of observation) as well as their offspring with children. The econometric model considered takes into account the simultaneity of labor market decisions and care-giving activities,

while controlling for unobserved heterogeneity in care-giving decisions. Here it exploits the fact that, information about multiple offsprings with children is usually available for each grandmother. It finds a negative and very significant effect of participating in the labor market on the probability of taking care of the grandchildren on a regular basis. It also finds evidence that, for some countries, the child care provided by grandmothers has a positive effect on the labor participation of their daughters.

http://www.rand.org/pubs/working_papers/WR833.html

WR-834

Employment Status, Quality of Matching, and Retirement in Korea: Evidence from Korean Longitudinal Study of Aging. Chulhee Lee, Jinkook Lee. 2011

This paper explores how and why the probability of retirement differs between self-employed and wage-and-salary workers. It finds self-employed workers are less likely to retire than wage-and-salary ones, and that differences in retirement incomes, health, productivity, job characteristics, and compulsory retirement practices do not explain the disparity. This study suggests that the difference between self-employed and wage-and-salary workers in the quality of matching between the job and the worker (i.e., required and desired amount of work efforts) explains the later retirement of the self-employed. It notes the implications of these findings for labor-force participation at older ages and how policies might boost employment of the elderly.

http://www.rand.org/pubs/working_papers/WR834.html

WR-836-RS

Project Retrosight: Understanding the returns from cardiovascular and stroke research: Case Studies. Alexandra Pollitt, Steven Wooding, Stephen Hanney, Martin Buxton, Jonathan Grant. 2011

This project explores the impacts arising from cardiovascular and stroke research funded 15–20 years ago and attempts to draw out aspects of the research, researcher or environment that are associated with high or low impact. The project is a case study-based review of 29 cardiovascular and stroke research grants, funded in Australia, Canada and UK between 1989 and 1993. The case studies focused on the individual grants but considered the development of the investigators and ideas involved in the research projects from initiation to the present day. Grants were selected through a stratified random selection approach that aimed to include both high- and low-impact grants. The key messages are as follows: 1) The cases reveal that a large and diverse range of impacts arose from the 29 grants studied. 2) There are variations between the impacts derived from basic biomedical and clinical research. 3) There is no correlation between knowledge production and wider impacts 4) The majority of economic impacts identified come from a minority of projects. 5) This report identified factors that appear to be associated with high and low impact. This report presents the full set of case studies.

http://www.rand.org/pubs/working_papers/WR836.html

WR-837

The Exporter Productivity Premium along the Productivity Distribution: Evidence from Unconditional Quantile Regression with Firm Fixed Effects. David Powell, Joachim Wagner. 2011

One of the stylized facts from the literature on international activities of heterogeneous firms is the existence of a positive exporter productivity premium - on average, exporting firms are more productive than firms that sell on the national market only. In this paper, the authors look at the productivity distribution of both exporting and non-exporting firms in German manufacturing industries. They recognize that it is potentially important to condition on firm fixed effects for estimation of this exporter premium. They apply a new unconditional quantile estimation technique for panel data to condition on firm fixed effects while estimating the exporter premium throughout the entire productivity distribution. They find that the premium is positive for all productivity levels, but highest at the

lowest quantiles. These results support theoretical models which suggest that there is a division in productivity between exporters and non-exporters. Mean regression is incapable of detecting this dimension of firm heterogeneity.

http://www.rand.org/pubs/working_papers/WR837.html

WR-839

Household Portfolio Choices, Health Status and Health Care Systems: A Cross-Country Analysis Based on SHARE. Vincenzo Atella, Marianna Brunetti, Nicole Maestas. 2011

Health risk is increasingly viewed as an important form of background risk that affects household portfolio decisions. However, its role might be mediated by the presence of a protective full-coverage National Health System that could reduce households' probability of incurring current and future out-of-pocket medical expenditures. In this paper, the authors first sketch a theoretical framework in which household portfolio decisions are a function of both individual and systemic characteristics. Then, they test its main implications based on SHARE data, studying the influence of current health status and future health risk on the decision to hold risky assets, across 10 European countries with different health care systems, each offering a different degree of protection against out-of-pocket medical expenditures. They find robust empirical confirmation of their model implications, since perceived health condition matters more than objective health condition and, consistent with the theoretical underpinnings of background risk, health risk affects portfolio choices only in countries with less protective healthcare systems. Furthermore, portfolio decisions consistent with background risk models are observed only with respect to middle-aged and highly-educated investors.

http://www.rand.org/pubs/working_papers/WR839.html

WR-840

Anchoring Vignettes and Response Consistency. Arie Kapteyn, James P. Smith, Arthur van Soest, Hana Vonkova. 2011

The use of anchoring vignettes to correct for differential item functioning rests upon two identifying assumptions: vignette equivalence and response consistency. To test the second assumption the authors conduct an experiment in which respondents in an Internet panel are asked to both describe their health in a number of domains and rate their health in these domains. In a subsequent interview respondents are shown vignettes that are in fact descriptions of their own health. Under response consistency and some auxiliary assumptions with regard to the validity of the experiment, there should be no systematic differences between the evaluation of these vignettes in the second interview and the self-evaluations in the first interview. They analyze data for five health domains: sleep, mobility, concentration, breathing and affect. Although descriptively the vignettes and the self-evaluations are similar for a number of domains, their nonparametric analysis suggests that response consistency is satisfied for the domain of sleep, while it indicates rejection of either the auxiliary assumptions or response consistency for the other domains of health. Parametric analysis suggests that the auxiliary assumptions may be most problematic. The analysis points at the need for a systematic experimental approach to the design of anchoring vignettes before using them in practice.

http://www.rand.org/pubs/working_papers/WR840.html

WR-842

Chipping Away at the Glass Ceiling: Gender Spillovers in Corporate Leadership. David A. Matsa, Amalia R. Miller. 2011

This paper examines the role of women helping women in corporate America. Using a merged panel of directors and executives for large U.S. corporations between 1997 and 2009, the authors find a positive association between the female share of the board of directors in the previous year and the female share among current top executives. The relationship's timing suggests that causality runs from boards to managers and not the

reverse. This pattern of women helping women at the highest levels of firm leadership highlights the continued importance of a demand-side "glass ceiling" in explaining the slow progress of women in business.

http://www.rand.org/pubs/working_papers/WR842.html

WR-843

Is A Dream Deferred a Dream Denied? College Enrollment and Labor Market Search. Francisco Perez-Arce. 2011

A public college in Mexico City randomly assigns applicants into a group that can immediately enroll and a group that can only do so after one year. The author shows that the standard model of educational decisions predicts no (or minimal) effect of deferral on educational attainment. He surveyed the applicants to this college for the 2007/2008 academic year. Using data from that survey, he finds that, one and a half years after the first group enrolled, individuals in that group were 19 percentage points more likely to be enrolled than those that had to wait. This implies that offering more slots in a public college increases educational attainment. He finds that one additional slot increases the attainment of at least 0.3 individuals of the applicant pool and that offering them to individuals of poorer backgrounds has an even larger effect. To account for these results, he extends the standard model by placing the education decision in a model of labor market search. This suggests the importance of variability in opportunity costs for explaining who enrolls in college at any given moment. He derives testable implications of the model and show that they are verified empirically. He estimates the parameters of the model and show that the model can explain the observed patterns under reasonable assumptions. He also discusses alternative explanations of the impact of deferral and show they are inconsistent with observed patterns. The conclusion is twofold. First, public supply of college slots can impact the attainment of the target population. Second, within-individual variation in opportunity costs is an important element in determining educational attainment. This latter point can have implications for how systems of higher education systems should be designed.

http://www.rand.org/pubs/working_papers/WR843.html

WR-844

The Effect of Education on Time Preferences. Francisco Perez-Arce. 2011

The author examines whether education increases patience. Admission decisions in a public college in Mexico are determined through a lottery. He finds that applicants who were successful in the draw were more likely to study in the following years. He surveyed the applicants to this college almost two years after the admission decision was made and measured their time preferences with a series of hypothetical inter-temporal choice questions. He finds that individuals who were successful in the admission lottery were, on average, more patient. He argues that this evidence points towards a causal effect of education on time preferences.

http://www.rand.org/pubs/working_papers/WR844.html

WR-845

The Impact of Cutting Education Expenditures: The Case of Mexico in the 1980s. Francisco Perez-Arce. 2011

This paper studies the impact of expenditures on the returns to schooling within a context of dramatic reductions in public spending. The author matches data on expenditures and pupil-teacher ratios from Mexico in the 1980s with individual earnings in 2007/2008 and find that the returns to education among individuals that went to poorly funded schools are lower than among those that went to better funded ones. He determines that within-state changes in educational expenditures and pupil-teacher ratios predict changes in the returns to education.

http://www.rand.org/pubs/working_papers/WR845.html

WR-848-AHRQ

Improving Customer Service and Access in a Surgical Practice: A Case Study of a Successful Quality Improvement Intervention. Denise D. Quigley, Shelley H. Wiseman, Donna O. Farley. 2011

This report describes the efforts of one surgical specialty medical practice to improve customer service and access for its patients. It specializes in liver disease and transplant surgery but, as a result of a merger with another specialty practice, it offers other types of surgery and care as well. Many of the patients who come to the specialty practice are quite ill and require extra patience and extra attention to ensure that their needs are met. Complaints from patients to their doctors indicated that the specialty practice had problems with customer service and "access;" that is, the ease with which patients can contact the practice, gain entry, and use the practice's services. The problems were confirmed by observations of patient-staff interactions, by performance data available from the medical center's systems, and by data from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey. The information presented in this report is based on interviews conducted with staff and management in the specialty practice and in various departments within the hospital and medical center. The first section offers brief background information and a short description of each of the steps in the six-step quality improvement process. The second section offers more detail about the organization and the six steps, and a big-picture look at lessons learned. An appendix lists training courses that were developed for staff and management.

http://www.rand.org/pubs/working_papers/WR848.html

WR-849

Demographic Trends, Policy Influences, and Economic Effects in China and India Through 2025. Julie DaVanzo, Harun Dogo, Clifford A. Grammich. 2011

This paper compares the recent and likely future demographic situations in China and India and their implications. This is a background paper for the chapter, "Population Trends in China and India: Demographic Dividend or Demographic Drag?. in the RAND report, China And India, 2025: A Comparative Assessment, MG-1009-OSD, by Charles Wolf, Jr., Siddhartha Dalal, Julie DaVanzo, Eric V. Larson, Alisher R. Akhmedjonov, Harun Dogo, Meilinda Huang, and Silvia Montoya, and contains some of material referenced therein. The RAND report was done under the sponsorship of the Office of Net Assessment with the objective of understanding how China and India will compare to one another in 2020-2025 with regards to demographics, economic growth, science and technology and military spending.

http://www.rand.org/pubs/working_papers/WR849.html

WR-850

Trends in the Employment of Married Mothers of Preschool-Aged Children in Taiwan. Yu-Han Jao, Jui-Chung Allen Li. 2011

Using data from eleven waves of Women's Marriage, Fertility, and Employment Survey, the authors examine trends in labor force participation among married mothers of preschool-aged children in Taiwan. The estimates indicate an upward period trend and an unexpected downward cohort trend. The results show that (1) changes in the population composition of women's education and (2) changes in behavior for women of different levels of education, both associated with educational expansion, as well as (3) changes in economic opportunities in the labor market help explain the trends. However, changes in gendered family norms, as indicated by husband's education, and changes in family composition factors, are largely independent of the trends. They also find that the unexpected cohort trend may be due to sample selection—women in recent birth cohorts who chose to marry and have children tend to be less committed to employment than their counterparts in earlier birth cohorts on whom the cultural constraints imposed greater pressure for them to stay home. They conclude that two major social changes—educational expansion, and

industrial and economic developments—are associated with the increase in employment among married mothers of preschool-aged children in Taiwan from 1983 to 2006.

http://www.rand.org/pubs/working_papers/WR850.html

WR-852

Income and Poverty among Older Koreans: Relative Contributions of and Relationship between Public and Family Transfers. Jinkook Lee, Drystan Phillips. 2011

The authors examined the economic wellbeing of the Korean elderly and their reliance on public and private transfers. Under-developed public transfer programs are at the center of heated political debates, and better understanding of economic wellbeing and the relation between public and private transfers will provide further insights in evaluating policy reform proposals under consideration. Using data from the 2006 and 2008 Korean Longitudinal Study of Aging, they found that the elderly poverty rate between 2006 and 2008 decreased significantly but was still significantly higher than other OECD countries. This poverty reduction did not benefit individuals who were older, less educated, living alone, living in rural areas, or in poor health. They found that low income elderly who co-reside depend almost completely on the income of their children or other household members. Public transfers account for no more than a third of income for low-income elderly, while private transfers accounted for half. Their analysis suggests that crowding-out is not a real concern in increasing welfare transfers for the low-income elderly.

http://www.rand.org/pubs/working_papers/WR852.html

WR-853

Does Disability Insurance Receipt Discourage Work? Using Examiner Assignment to Estimate Causal Effects of SSDI Receipt. Nicole Maestas, Kathleen J. Mullen, Alexander Strand. 2011

The authors present the first estimates of the causal effects of Social Security Disability Insurance (SSDI) receipt on labor supply that are generalizable to the entire population of program entrants in the present day system. They take advantage of a unique workload management database to match SSDI applicants to disability examiners, and use natural variation in examiners' allowance rates to estimate the labor supply effects of SSDI. Because applicants are randomly assigned to examiners (conditional on observable characteristics), examiner specific allowance rates can be used to instrument for the allowance decision in a labor supply equation contrasting denied vs. allowed applicants. They find that the labor force participation rate of the marginal entrant would be on average 21 percentage points greater in the absence of SSDI benefit receipt. His or her likelihood of engaging in substantial gainful activity as defined by the SSDI program would be on average 13 percentage points higher, and he or she would earn $1,600 to $2,600 more per year on average in the absence of SSDI benefit receipt. The marginal entrant is likely to have a mental impairment, be young, and have low pre-onset earnings. Importantly, the disincentive effect varies across individuals with impairments of different degrees of unobservable severity, ranging from a low of 10 percentage points for those with more severe impairments to a high of 60 percentage points for entrants with relatively less severe impairments.

http://www.rand.org/pubs/working_papers/WR853.html

WR-853-1

Does Disability Insurance Receipt Discourage Work? Using Examiner Assignment to Estimate Causal Effects of SSDI Receipt. Nicole Maestas, Kathleen J. Mullen, Alexander Strand. 2011

The authors present the first estimates of the causal effects of Social Security Disability Insurance receipt on labor supply estimated using the entire population of program applicants. They exploit administrative data to match applications to disability examiners, and use natural variation in examiners' allowance rates as an instrument for the allowance decision in a labor supply equation

contrasting denied vs. allowed applicants. Importantly, they find that the disincentive effect is heterogeneous, ranging from a 10 percentage point reduction in labor force participation for those with more severe impairments to a 60 percentage point reduction for entrants with relatively less severe impairments.

http://www.rand.org/pubs/working_papers/WR853-1.html

WR-853-2

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http://www.rand.org/pubs/working_papers/WR853-2.html

WR-854

Framing Effects and Expected Social Security Claiming Behavior. Jeffrey R. Brown, Arie Kapteyn, Olivia S. Mitchell. 2011

Eligible participants in the U.S. Social Security system may claim benefits anytime from age 62-70, with benefit levels actuarially adjusted based on the claiming age. This paper shows that individual intentions with regard to Social Security claiming ages are sensitive to how the early versus late claiming decision is framed. Using an experimental design, the authors find that the use of a “break-even analysis” has the very strong effect of encouraging individuals to claim early. They also show that individuals are more likely to report they will delay claiming when later claiming is framed as a gain, and when the information provides an anchoring point at older, rather than younger, ages. Moreover, females, individuals with credit card debt, and workers with lower expected benefits are more strongly influenced by framing. They conclude that some individuals may not make fully rational optimizing choices when it comes to choosing a claiming date.

http://www.rand.org/pubs/working_papers/WR854.html

WR-855-RC

Assessing the Security Benefits of a Trusted Traveler Program in the Presence of Attempted Attacker Exploitation and Compromise. Brian A. Jackson, Edward W. Chan, Tom LaTourrette. 2011

Current aviation security procedures screen all passengers uniformly. Varying the amount of screening individuals receive based on an assessment of their relative risk has the potential to reduce the security burdens on some travelers, while improving security overall. This paper examines the security costs and benefits of a trusted traveler program, in which individuals who have been identified as posting less risk than others are allowed to pass through security with reduced security screening. This allows security resources to be shifted from travelers who have been identified as low risk, to the remaining unknown-risk population. However, fears that terrorists may exploit trusted traveler programs have dissuaded adoption of such programs. This analysis estimates the security performance of a trusted traveler program in the presence of attacker attempts to compromise it. It finds that, although these attempts would reduce the maximum potential security benefits of a program, they would not eliminate those benefits in all circumstances.

http://www.rand.org/pubs/working_papers/WR855.html

WR-856-1-DEIES

Inverse Probability Weighting with Error Prone

Covariates. Daniel F. McCaffrey, J. R. Lockwood, Claude Messan Setodji. 2011

Inverse probability weighted estimates are widely used in applications where data are missing due to nonresponse or censoring and in the estimation of causal effects from observational studies. The current estimators rely on ignorability assumptions for response indicators or treatment assignment, and outcomes, conditional on observed covariates which are assumed to be measured without error. However, measurement error is common in variables collected for many applications. For example, in studies of educational interventions, student achievement as measured by standardized tests is almost always used as the key covariate for removing hidden biases but standardized test scores often have substantial measurement errors for many students. The authors provide several expressions for a weighting function that can yield a consistent estimator for population means using incomplete data and covariates measured with error.

http://www.rand.org/pubs/working_papers/WR856-1.html

WR-856-DEIES

Inverse Probability Weighting with Error Prone Covariates. Daniel F. McCaffrey, J. R. Lockwood, Claude Messan Setodji. 2011

Inverse probability weighted estimates are widely used in applications where data are missing due to nonresponse or censoring and in the estimation of causal effects from observational studies. The current estimators rely on ignorability assumptions for response indicators or treatment assignment, and outcomes, conditional on observed covariates which are assumed to be measured without error. However, measurement error is common in variables collected for many applications. For example, in studies of educational interventions, student achievement as measured by standardized tests is almost always used as the key covariate for removing hidden biases but standardized test scores often have substantial measurement errors for many students. The authors provide several expressions for a weighting function that can yield a consistent estimator for population means using incomplete data and covariates measured with error.

http://www.rand.org/pubs/working_papers/WR856.html

WR-857-IES

The Academic Effects of Summer Instruction and Retention in New York City. Louis T. Mariano, Paco Martorell. 2011

This paper examines the impacts of summer instruction and test-based grade retention under New York City's 5th grade promotion policy. The autors use a fuzzy regression discontinuity research design that involves comparing students with test scores that barely miss and barely make the treatment-assignment cutoffs. They find modest positive effects of summer instruction on 6th grade English Language Arts (ELA) achievement for students assigned to summer instruction because of poor ELA performance, but find little evidence of positive effects of summer instruction on math outcomes. The estimated effects of grade retention are substantial and positive through 7th grade on both math and ELA outcomes, suggesting that the additional year of instruction in 5th grade leads to improvements in subsequent grade achievement.

http://www.rand.org/pubs/working_papers/WR857.html

WR-858

Are Americans Really Less Happy With Their Incomes?. Arie Kapteyn, James P. Smith, Arthur van Soest. 2011

Recent economic research on international comparisons of subjective well-being suffers from several important biases due to the potential incomparability of response scales within and across countries. In this paper the authors concentrate on self-reported satisfaction with income in two countries: The Netherlands and the U.S. The comparability problem is addressed by using anchoring vignettes. They find that in the raw data, Americans appear decidedly less satisfied with their income than the Dutch. It turns out how-

ever that after response scale adjustment based on vignettes the distribution of satisfaction in the two countries is essentially identical. In addition, they find that the within-country cross-sectional effect of income on satisfaction- a key parameter in the recent debate in the economic literature- is significantly under-estimated especially in the US- when differences in response scales are not taken into account.

http://www.rand.org/pubs/working_papers/WR858.html

WR-859

Stereotypes and Madrassas: Experimental Evidence from Pakistan. Adeline Delavande, Basit Zafar. 2011

Madrassas (Islamic religious seminaries) have been alleged to be responsible for fostering Islamic extremism and violence, and for indoctrinating their students in narrow worldviews. However, very little is known about the behavior of Madrassa students, and how other groups in their communities interact with them. To investigate this, the authors use unique experimental and survey data that they collected in Madrassas and other educational institutions in Pakistan. They randomly match male students from institutions of three distinct religious tendencies and socioeconomic background—Madrassas, Islamic Universities, and Liberal Universities—and observe their actions in several experiments of economic decision-making. First, they find a high level of trust among all groups, with students enrolled at Madrassas being the most trusting and exhibiting the highest level of unconditional other-regarding behavior. Second, within each group, they fail to find evidence of in-group bias or systematic out-group bias either in trust or tastes. These findings cast doubt on the general perception that Madrassas teach hatred and narrow worldviews. Third, they find that students of Liberal Universities underestimate the trustworthiness of Madrassa students, suggesting that an important segment of the society has mistaken stereotypes about students in religious seminaries.

http://www.rand.org/pubs/working_papers/WR859.html

WR-860

Childhood Health and Differences in Late-Life Health Outcomes between England and the United States. James Banks, Zoe Oldfield, James P. Smith. 2011

In this paper the authors examine the link between retrospectively reported measures of childhood health and the prevalence of various major and minor diseases at older ages. Their analysis is based on comparable retrospective questionnaires placed in the Health and Retirement Study and the English Longitudinal Study of Ageing - nationally representative surveys of the age 50 plus population in America and England respectively. They show that the origins of poorer adult health among older Americans compared to the English trace right back into the childhood years – the American middle and old-age population report higher rates of specific childhood health conditions than their English counterparts. The transmission into poor health in mid life and older ages of these higher rates of childhood illnesses also appears to be higher in America compared to England. Both factors contribute to higher rates of adult illness in the United States compared to England although even in combination they do not explain the full extent of the country difference in late-life health outcomes.

http://www.rand.org/pubs/working_papers/WR860.html

WR-863

Exporting Poor Health: The Irish in England. Liam Delaney, Alan Fernihough, James P. Smith. 2011

The Irish-born population in England is in worse health than both the native population and the Irish population in Ireland, a reversal of the commonly observed healthy migrant effect. Recent birth-cohorts living in England and born in Ireland, however, are healthier than the English population. The substantial Irish health penalty arises principally for cohorts born between 1920 and 1960. This paper attempts to understand the

processes that generated this migrant health pattern. The results suggest a strong role for early childhood conditions and economic selection in driving the dynamics of health differences between the Irish-born migrants and White English populations.

http://www.rand.org/pubs/working_papers/WR863.html

WR-864

The Effect of Education on Health: Cross-Country Evidence. Raquel Fonseca, Yuhui Zheng. 2011

This paper sheds light on the causal relationship between education and health outcomes. It combines three surveys (SHARE, HRS and ELSA) that include nationally representative samples of people aged 50 and over from thirteen OECD countries. It uses variation in the timing of educational reforms across these countries as an instrument for education. Using IV-Probit models, it finds causal evidence that more years of education lead to a lower probability of reporting poor health and lower prevalence for diabetes and hypertension. These effects are larger than those from the Probit, that do not control for the endogeneity of education. The relationship between education and cancer is positive in both Probit and IV-Probit models. The causal impacts of education on other chronic conditions as well as functional status are not established using IV-Probit models.

http://www.rand.org/pubs/working_papers/WR864.html

WR-866

Living Arrangements of the Elderly in China: Evidence from CHARLS. Xiaoyan Lei, John Strauss, Meng Tian, Yaohui Zhao. 2011

Recent increases in Chinese elderly living alone or only with a spouse has raised concerns about elderly support, especially when public support is inadequate. However, using rich information from the China Health and Retirement Longitudinal Study, this paper finds that the increasing trend in living alone is accompanied with a rise in living close to each other. This type of living arrangement solves the conflicts between privacy/independence and family support. This is confirmed in further investigation: children living close by visit their parents more frequently. It also finds that children who live far away provide a larger amount of net transfers to their parents, a result consistent with responsibility sharing among siblings. Having more children is associated with living with a child or having a child nearby, while investing more in a child's schooling is associated with greater net transfers to parents.

http://www.rand.org/pubs/working_papers/WR866.html

WR-867-EDU

The Academic Impact of Enrollment in International Baccalaureate Diploma Programs: A Case Study of Chicago Public Schools. Anna Rosefsky Saavedra. 2011

This study examines whether students' enrollment in the Chicago Public Schools (CPS) International Baccalaureate (IB) Diploma Program improves their ACT scores, probability of high school graduation and probability of college enrollment. Using data on the IB enrollment status of 20,422 students attending thirteen CPS high schools from 2002-2008, it estimates that IB enrollment increases students' ACT scores by as much as 0.5 standard deviations and their probability of high school graduation and college enrollment by as much as 17 and 22 percentage points respectively. All of the estimates are highly robust to selection bias. All estimates are greater for boys than for girls. It also calculates that the IB Diploma Program is a cost-effective way to increase high-school graduation rates.

http://www.rand.org/pubs/working_papers/WR867.html

WR-868-AIHS

Time Lags: A Feasibility Study. Flavia Tsang, Jonathan Grant, Steven Wooding. 2011

This paper explores the feasibility of using data from Alberta Innovate Health Solutions to study time lags between research expenditure and the eventual health benefits. It was found that existing

data do not form a sufficient empirical basis.

http://www.rand.org/pubs/working_papers/WR868.html

WR-869

Why Do Some Irish Drink So Much? Family, Historical and Regional Effects on Students' Alcohol Consumption and Subjective Normative Thresholds. Liam Delaney, Arie Kapteyn, James P. Smith. 2011

This paper studies determinants of drinking behavior and formation of subjective thresholds of acceptable drinking behavior using a sample of students in a major Irish University. It finds evidence of strong associations between amounts of alcohol students consume and drinking of their fathers and older siblings. In contrast, it finds little evidence of impacts of other non-drinking aspects of family background on students' drinking. Parental and older sibling drinking appears to affect subjective attitudes of students towards what constitutes problem drinking behavior. It investigated historical origins of drinking behavior including the role of the Church, English cultural influences, the importance of the brewery and distilling industry, and the influence of weather. It finds relatively strong influences of the Catholic Church and English colonial settlement patterns on Irish drinking patterns but little influence of Irish weather. Historical licensing restrictions on the number of pubs and off-license establishments also appear to matter.

http://www.rand.org/pubs/working_papers/WR869.html

WR-870-NIJ

How Much Difference Does the Lawyer Make? The Effect of Defense Counsel on Murder Case Outcomes. James M. Anderson, Paul Heaton. 2011

One in five indigent murder defendants in Philadelphia are randomly assigned representation by public defenders while the remainder receive court-appointed private attorneys. The authors exploit this random assignment to measure how defense counsel affect murder case outcomes. Compared to appointed counsel, public defenders in Philadelphia reduce their clients' murder conviction rate by 19% and lower the probability that their clients receive a life sentence by 62%. Public defenders reduce overall expected time served in prison by 24%. They find no difference in the overall number of charges of which defendants are found guilty. When they apply methods used in past studies of the effect of counsel that did not use random assignment, they obtain far more modest estimated impacts, which suggests defendant sorting is an important confounder affecting past research. To understand possible explanations for the disparity in outcomes, they interviewed judges, public defenders, and attorneys who took appointments. Interviewees identified a variety of institutional factors in Philadelphia that decreased the likelihood that appointed counsel would prepare cases as well as the public defenders. The vast difference in outcomes for defendants assigned different counsel types raises important questions about the adequacy and fairness of the criminal justice system.

http://www.rand.org/pubs/working_papers/WR870.html

WR-872

Economic Preparation for Retirement. Michael D. Hurd, Susann Rohwedder. 2011

The authors define and estimate measures of economic preparation for retirement based on a complete inventory of economic resources while taking into account the risk of living to advanced old age and the risk of high out-of-pocket spending for health care services. They ask whether, in a sample of 66–69 year-olds, observed economic resources could support with high probability a life-cycle consumption path anchored at the initial level of consumption until the end of life. They account for taxes, widowing, differential mortality and out-of-pocket health spending risk. They find that 71% of persons in their target age group are adequately prepared according to our definitions, but there is substantial variation by observable characteristics: 80% of married persons are adequately prepared compared with just 55% of single

persons. They estimate that a reduction in Social Security benefits of 30 percent would reduce the fraction adequately prepared by 7.8 percentage points among married persons and by as much as 10.7 percentage points among single persons.

http://www.rand.org/pubs/working_papers/WR872.html

WR-873

What's My Account Really Worth? The Effect of Lifetime Income Disclosure on Retirement Savings. Gopi Shah Goda, Colleen Flaherty Manchester, Aaron Sojourner. 2011

Optimal retirement saving behavior in a defined contribution plan landscape requires an understanding of the mapping between current contributions and income in retirement. This paper uses a large-scale field experiment to measure the effect of interventions designed to inform subjects about this mapping on saving behavior. Using administrative data prior to and following the interventions, it measures the effect of the interventions on rates of participation and the level of contributions in available tax-deferred retirement saving accounts. Information regarding the mapping along with enrollment information increased the propensity to change participation status by 29 percent relative to a control group. In addition, information regarding the full mapping increased annual contributions by approximately $150 (or 0.25 percent of salary) relative to a group that was given a partial mapping, an increase of 8 percent. It finds that this low-intensity treatment induced a meaningful response, which suggests that a similarly-designed widespread policy initiative may lead to improved saving behavior.

http://www.rand.org/pubs/working_papers/WR873.html

WR-873-1

What's My Account Really Worth? The Effect of Lifetime Income Disclosure on Retirement Savings. Gopi Shah Goda, Colleen Flaherty Manchester, Aaron Sojourner. 2011

Optimal retirement saving behavior requires an understanding of the mapping between current contributions and income in retirement. This study uses a large-scale field experiment to measure how a direct-mail intervention designed to inform subjects about this mapping affects saving behavior. Using administrative data prior to and following the intervention, the authors measure its effect on rates of participation and the level of contributions in tax-deferred retirement saving accounts. Income projections along with enrollment information increased the propensity to change participation status by 29 percent and to increase their annual contributions by about $68 relative to the control group. Additional elements of the study allows them to explore which features of the intervention generated this effect. They find that this low-cost treatment induced a meaningful response, which suggests that a similarly-designed widespread policy initiative may lead to modestly higher rates of saving for retirement.

http://www.rand.org/pubs/working_papers/WR873-1.html

WR-875

The Recent Evolution of Retirement Patterns in Canada. Pierre Lefebvre, Philip Merrigan, Pierre-Carl Michaud. 2011

Using data from three waves of the General Social Survey on retirement and older workers (1994, 2002 and 2007), the authors document the evolution of retirement patterns over the last three decades. They combined the analysis of retirement ages of actual retirees with data on expected retirement ages of current workers to create a longer perspective on changes in retirement behaviour in Canada. They also investigate trends in work after retirement. Their findings are in line with findings from other countries. There is an upward trend in retirement ages which likely started around year 2000 for cohorts born after 1945. This trend contrasts with the slow decline in retirement ages observed prior to the end of the millennium. While the downward trend was likely due to factors such as the offering of early retirement programs in private firms, the upward trend is likely to be caused by a wider variety of sources, including better health, less pervasive defined benefit pen-

sions and in general less generous pensions.

http://www.rand.org/pubs/working_papers/WR875.html

WR-876

Earthquakes, Hurricanes, and Terrorism: Do Natural Disasters Incite Terror?. Claude Berrebi, Jordan Ostwald. 2011

A novel and important issue in contemporary security policy is the impact of natural disasters on terrorism. Natural disasters can strain a society and its government, creating vulnerabilities which terrorist groups might exploit. Using a structured methodology and detailed data on terrorism, disasters, and other relevant controls for 167 countries between 1970 and 2007, the authors find a strong positive impact of disaster-related deaths on subsequent terrorism deaths and incidence. They find that, on average, an increase in deaths from natural disasters of 25,000 leads to an increase in the following year of approximately 33 percent in the number of deaths from terrorism, an increase of approximately 22 percent in the number of terrorist attacks, and an increase of approximately 16 percent in the number wounded in terrorist attacks, holding all other factors constant. Furthermore, the effects differ by disaster types and country characteristics. Results were consistently significant and robust across a multitude of disaster and terrorism measures for a diverse set of model specifications. The results have strong implications for both disaster and terrorism mitigation policy.

http://www.rand.org/pubs/working_papers/WR876.html

WR-878-OSD

Structuring Analysis to Support Future Decisions about Nuclear Forces and Postures. Paul K. Davis. 2011

This paper looks freshly at how to evaluate future nuclear forces and postures. A fresh look is needed for the New Start era because the role of nuclear weapons in security continues to change—but in ways that are not well understood and have not been much discussed analytically. After reviewing past and present criteria for nuclear assessments, and contrasting enduring stances on such matters by policymakers, the author recommends evaluating options for ability to achieve generalized versions of five top-level objectives: strategic stability; crisis stability; ability for the United States to act, defeat, and defend; nonproliferation and other policy goals; and risk control.

http://www.rand.org/pubs/working_papers/WR878.html

WR-879

Intergenerational Correlations of Health Among Older Adults: Empirical Evidence from Indonesia. Younoh Kim, Bondan Sikoki, John Strauss, Firman Witoelar. 2011

It is widely believed that family background has a significant influence on children's life. The vast majority of the existent literature has focused on the relationship between parents' education and income and the education and income of their children. Surprisingly, however, much less work has been done on the intergenerational transmission, or correlations of health. The main objective of this paper is to examine the correlations of health across generations using the Indonesia Family Life Survey (IFLS). The authors take advantage of the richness of IFLS and examine several health measures of respondents, including self-reports and biomarkers. As measures of health of both parents, IFLS has information on whether they are dead at the time of the last wave in 2007, their general health status and whether they have difficulties with any ADLs at the time of the survey or just before death. The findings suggest strong intergenerational correlations between the measures of parental health, schooling, and the health of their adult children. They also examine how these intergenerational correlations might change for respondents born in the more developed parts of Indonesia compared to the less developed areas. Interestingly, these health associations are much lower for respondents who were born in Java or Bali. These are areas of Indonesia that have experienced the most rapid economic growth over the past 40 years. This suggests that being born and

growing up in developed areas, which may have better health infrastructure, substitutes for the influence of parental health.

http://www.rand.org/pubs/working_papers/WR879.html

WR-880

International Comparisons in Health Economics: Evidence from Aging Studies. James Banks, James P. Smith. 2011

The authors provide an overview of the growing literature that uses micro-level data from multiple countries to investigate health outcomes, and their link to socioeconomic factors, at older ages. Since the data are at a comparatively young stage, much of the analysis is at an early stage and limited to a handful of countries, with analysis for the US and England being the most common. What is immediately apparent as they get better measures is that health differences between countries amongst those at older ages are real and large. Countries are ranked differently according to whether one considers life-expectancy, prevalence or incidence of one condition or another. And the magnitude of international disparities may vary according to whether measures utilize doctor diagnosed conditions or biomarker-based indicators of disease and poor health. But one key finding emerges – the US ranks poorly on all indicators with the exception of self-reported subjective health status.

http://www.rand.org/pubs/working_papers/WR880.html

WR-881

Gender Differences in Cognition among Older Adults in China. Xiaoyan Lei, Yuqing Hu, John J. McArdle, James P. Smith, Yaohui Zhao. 2011

In this paper, the authors model gender differences in cognitive ability in China using a new sample of middle-aged and older Chinese respondents. Modeled after the American Health and Retirement Survey (HRS), the CHARLS Pilot survey respondents are 45 years and older in two quite distinct provinces—Zhejiang a high growth industrialized province on the East Coast, and Gansu, a largely agricultural and poor Province in the West. Their measures of cognition in CHARLS relies on two measures that proxy for different dimensions of adult cognition—episodic memory and intact mental status. They relate both these childhood health measures to adult health and SES outcomes during the adult years. They find large cognitive differences to the detriment of women that were mitigated by large gender differences in education among these generations of Chinese people. These gender differences in cognition are especially concentrated within poorer communities in China with gender difference being more sensitive to community level attributes than to family level attributes, with economic resources. In traditional poor Chinese communities, there are strong economic incentives to favor boys at the expense of girls not only in their education outcomes, but in their nutrition and eventually their adult height. These gender cognitive differences have been steadily decreasing across birth cohorts as the economy of China grew rapidly. Among younger cohorts of young adults in China, there is no longer any gender disparity in cognitive ability.

http://www.rand.org/pubs/working_papers/WR881.html

WR-884

Factors that Influence Successful Start-Up of Home Visiting Sites: Lessons Learned from Replicating the First Born® Program. M. Rebecca Kilburn, Jill S. Cannon. 2011

Growth in federal, state and private funding is fueling the initiation of home visiting programs around the country. As communities expand home visiting programs, they need information about how they can successfully start up new sites. This paper proposes measures of successful home visiting program implementation and identifies factors that promote successful implementation or serve as barriers to program initiation. It focuses on lessons learned from the replication of the First Born® Program in six counties in New Mexico. Specifically, it examines how well sites met staffing, family referral and enrollment, program fidel-

ity, and financing goals in the first year of providing services. Data come from semi-structured interviews with senior program staff and program documentation. The findings are likely to be valuable to a wide spectrum of communities starting or expanding home visiting services, as well as to public and private funders of programs.

http://www.rand.org/pubs/working_papers/WR884.html

WR-885

Information and Persuasion: Achieving Safe Water Behaviors in Kenya. Jill E. Luoto, David Levine, Jeff Albert. 2011

Convincing people to adopt preventive health behaviors consistently is difficult, yet many lives could be saved if we understood better how to do so. For example, low-cost point-of-use (POU) technologies such as chlorine and filters can substantially reduce diarrheal disease (Clasen et al. 2006). Nonetheless, they are not widely or consistently used anywhere in the developing world, even when widely available. The authors ran a randomized field study in Kenya in which households received free POU products to test the importance of informational and behavioral constraints on usage. Sharing information about local water quality increases water treatment by 7-10 percentage points (11-24%) above that achieved by providing free products. Persuasive social marketing messages that harness findings from behavioral economics increase water treatment by an additional 9-11 percentage points. These results suggest promising avenues for incremental improvements in encouraging water treatment (and possibly other preventive health) behaviors. However, repeated exposures may be necessary to sustain behavior change.

http://www.rand.org/pubs/working_papers/WR885.html

WR-886

The Impact of Natural Disasters on Child Health and Investments in Rural India. Ashlesha Datar, Jenny Liu, Sebastian Linnemayr, Chad Stecher. 2011

Natural disasters are becoming more frequent worldwide and there is growing concern that they may adversely affect short- and long-term health outcomes in developing countries. Prior research has primarily focused on the impact of single, large disaster events but very little is known about how small to moderate disasters, which are more typical, affect population health. This paper presents one of the first investigations of the impact of small and moderate disasters on childhood morbidity, physical growth, and immunizations by combining household data from three waves of the Indian National Family and Health Survey with an international database of natural disasters (EM-DAT). It finds that exposure to a natural disaster in the past month increases the likelihood of acute illnesses such as diarrhea, fever, and acute respiratory illness in children under 5 year by 9-18%. Exposure to a disaster in the past year reduces height-for-age and weight-for-age z-scores by 0.12-0.15 standard deviations, increases the likelihood of stunting and underweight by 7%, and reduces the likelihood of having full age-appropriate immunization coverage by nearly 18%. It also finds that disasters' effects vary significantly by gender, age, and socioeconomic characteristics. Most notably, the adverse effects on growth outcomes are much smaller among boys and infants.

http://www.rand.org/pubs/working_papers/WR886.html

WR-887

Multiple Imputation for Combined-Survey Estimation With Incomplete Regressors In One But Not Both Surveys. Michael S. Rendall, Bonnie Ghosh-Dastidar, Margaret M. Weden, Zafar Nazarov. 2011

Within-survey multiple imputation (MI) methods are adapted to pooled-survey regression estimation where one survey has a larger set of regressors but fewer observations than the other. This adaption is achieved through: (1) larger numbers of imputations to compensate for the higher fraction of missing values; (2) model-fit statistics to check the assumption that the two surveys sample from a common universe; and (3) specificy-

ing the analysis model completely from variables present in the survey with the larger set of regressors, thereby excluding variables never jointly observed. In contrast to the typical within-survey MI context, cross-survey missingness is monotonic and easily satisfies the Missing At Random (MAR) assumption needed for unbiased MI. Large efficiency gains in estimates of coefficients for variables in common between the surveys are demonstrated in an application to sociodemographic differences in the risk of experiencing a disabling occupational injury estimated from two nationally-representative panel surveys.

http://www.rand.org/pubs/working_papers/WR887.html

WR-887-1

Multiple Imputation for Combined-Survey Estimation With Incomplete Regressors In One But Not Both Surveys. Michael S. Rendall, Bonnie Ghosh-Dastidar, Margaret M. Weden, Zafar Nazarov. 2011

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http://www.rand.org/pubs/working_papers/WR887-1.html

WR-888

Markers and Drivers: Cardiovascular Health of Middle-Age and Older Indians. Jinkook Lee, P. Arokiasamy, Amitabh Chandra, Peifeng Hu, Jenny Liu, Kevin Carter Feeney. 2011

Using the 2010 pilot study of the Longitudinal Aging Study in India (LASI), the authors examine the socioeconomic and behavioral risk factors for poor cardiovascular health among middle-aged and older Indians, focusing on self-reported and directly measured hypertension. The LASI pilot survey (N=1,683) was fielded in four states: Karnataka, Kerala, Punjab, and Rajasthan. These four states were chosen to capture regional variations and socioeconomic and cultural differences. They find significant inter-state differences across multiple measures of cardiac health and risk factors for hypertension, including body mass index, waist-to-hip ratio, and health behaviors. In contrast to the findings from developed countries, they find education and other markers of higher socioeconomic status (SES) to be positively associated with hypertension. Among the hypertensive, however, they find that those at higher SES are less likely to be undiagnosed and more likely to be in better control of their blood pressure than respondents with low SES. They also find significant inter-state variations in hypertension prevalence, diagnosis, and management that remain even after accounting for socio economic differences, obesity, and health behaviors. They conclude by discussing these findings and their implications for public health and economic development in India and the developing country context more generally.

http://www.rand.org/pubs/working_papers/WR888.html

WR-889

Cognitive Health of Older Indians: Individual and Geographic Determinants of Female Disadvantage. Jinkook Lee, Regina A. Shih, Kevin Carter Feeney, Kenneth M. Langa. 2011

India is experiencing a rapid demographic and epidemiologic transition. Among a growing aging population, non-communicable diseases, includ-

ing dementia, are increasingly prevalent, but our understanding of cognitive health is quite limited. Recent studies suggest that women in developed countries perform as well or better than men on cognitive functioning tests, though research from developing countries shows the opposite. This gender disparity in developing settings may be attributable to that fact that women are traditionally not given equal access to education, health services, economic opportunity, and social engagement. Furthermore, in countries such as India, discrimination against women may play a role in the gender disparity. To address this issue, the authors examine cognitive function of older Indians, using cross-sectional data from the 2010 pilot round of the Longitudinal Aging Study in India, fielded across Punjab and Rajasthan in the north and Kerala and Karnataka in the south. They found gender disparities in cognitive function and suggest that female cognitive disadvantage could be explained by disparities in education, health and social engagement in southern India. However, female disadvantage persisted in northern states where discrimination against women has been notably acute even after controlling for education and other key risk factors of poor cognitive function.

http://www.rand.org/pubs/working_papers/WR889.html

WR-890

Differences by Mother's Education in the Effect of Childcare on Child Obesity. Zafar Nazarov, Michael S. Rendall. 2011

Previous studies have found that adverse effects of maternal employment on child obesity are limited to mothers with higher education and earnings. Explanations for this have centered on differences between the childhood nutritional and exercise environments provided by non-parental caregivers versus by the mothers. The present study explores this non-parental care mechanism in a quasi-structural model of employment effects on child obesity transmitted through cumulative months of non-parental childcare over the child's pre-school years. Consistent with previous work, it finds that children age 2-18 whose mothers have 16 years or more years of education have a 1.4-1.9% higher risk of obesity for each year of non-parental childcare. Additionally, however, it estimates that children whose mothers have less than 12 years of schooling have a 1.3-1.8 % lower risk of obesity for each year spent in a non-parental childcare setting. It interprets this new finding as due to positive selection into the workforce on ability in both home and market work.

http://www.rand.org/pubs/working_papers/WR890.html

WR-891

Trends and Educational Differentials in Marriage Formation Among Taiwanese Women. Yi-Chuan Chang, Jui-Chung Allen Li. 2011

Using data pooled from 15 waves of the Women's Marriage, Fertility, and Employment Survey, this paper documents trends and educational differentials in marriage formation among Taiwanese women born between 1910 and 1979. Estimates of hazard rates and cumulative probabilities of first marriage show that women born in more recent cohorts married later and less often than those born in earlier cohorts; likewise, more highly educated women tended to marry later and less often than their less educated counterparts. Educational differentials have increased across successive birth cohorts, such that one in four college-educated women born in the 1960s was never married by age 40.

http://www.rand.org/pubs/working_papers/WR891.html

WR-892-SSA

Encouraging New Hires to Save for Retirement. Robert Clark, Melinda Sandler Morrill, Jennifer Maki. 2011

This project examines the impact of employer-provided financial education for newly hired workers on contributions to voluntary retirement savings plans. Using administrative data from five large employers, the researchers assess the impact of information and delivery methods on the choice to participate in the plans and the deferral

amount selected. The researchers collected additional data from one employer-partner covering the two years before and after their automatic enrollment policy was implemented. Average participation rates increased sharply, while the same fraction of workers took advantage of the full employer match once eligible. The researchers also conducted a survey of newly hired workers. The survey measured employees' understanding of their company's voluntary retirement savings plan, their assessment of the employer-provided information, and their reasons for limited or non-participation. Nonparticipants demonstrated lower overall financial literacy relative to participants, and many respondents felt that the information provided by their employers was not sufficient. Finally, the largest employer-partner, BB&T, implemented a field experiment where an on-line mailing was sent to a random subset of non-participating newly hired workers. Younger workers receiving the flyer were significantly more likely to enroll in the 401(k) plan, while older workers actually had lower initiation rates relative to their control group. The research presented provides insights into the efficacy and importance of financial education provided by employers to newly hired workers and how it impacts their retirement saving decisions.

http://www.rand.org/pubs/working_papers/WR892.html

WR-893-SSA

The Geography of Financial Literacy. Christopher B. Bumcrot, Judy Lin, Annamaria Lusardi. 2011

This report explores how well equipped today's households are to make complex financial decisions in the face of often high-cost and high-risk financial instruments. Specifically it focuses on financial literacy. Most importantly, it describes the geography of financial literacy, i.e., how financial literacy is distributed across the fifty US states. It describes the correlation of financial literacy and some important aggregate variables, such as state-level poverty rates. Finally, it examines how much differences in financial literacy can be explained by states' demographic and economic characteristics. To assess financial literacy, five questions were added to the 2009 Financial Capability Study, covering fundamental concepts of economics and finance encountered in everyday life: simple calculations about interest rates and inflation, the workings of risk diversification, the relationship between bond prices and interest rates, and the relationship between interest payments and maturity in mortgages. An index of financial literacy was constructed based on the number of correct answers provided by each respondent to the five financial literacy questions. The financial literacy index reveals wide variation in financial literacy across states. Much of the variation is attributable to differences in the demographic make-up of the states; however, a handful of states have either higher or lower levels of financial literacy than is explained by demographics alone. Also, there is a significant correlation between the financial literacy of a state and that state's poverty level. The findings indicate directions for policy makers and practitioners interested in targeting areas where financial literacy is low.

http://www.rand.org/pubs/working_papers/WR893.html

WR-894-SSA

Financial Advisors' Role in Influencing Social Security Claiming. Mathew Greenwald, Andrew G. Biggs, Lisa Schneider. 2011

For millions of Americans, financial advisors are a trusted source of financial and retirement preparation information. This includes providing advice and information on Social Security benefits, a critical component of most Americans' retirement finances. To gain greater insight into what financial advisors say to their clients about Social Security, an online survey of over 400 professional financial advisors was conducted in the Spring of 2011. The results reveal that a majority of advisors believe that they are responsible for educating their clients on the role Social Security will play in their retirement income. Moreover, advisors have the ability to influence their clients' decisions about when to claim their Social Security retirement benefits. Three-quarters advise the majority of their clients

on when to claim. In addition, the study finds that the Social Security Administration (SSA) is the leading and preferred source of information and education for financial advisors and their clients. Over half of advisors say it is a major source of Social Security-related information, more than any other source. However, advisors are critical of the job SSA does in educating advisors and the public, and are interested in additional resources from the Agency. Financial advisors also indicate that the financial services companies they work with could improve their communication and education efforts as it relates to Social Security. The research findings uncover a need for improved methods of educating and disseminating information to financial advisors and the public on Social Security.

http://www.rand.org/pubs/working_papers/WR894.html

WR-895-SSA

Self Control and Liquidity: How to Design a Commitment Contract. John Beshears, James J. Choi, David Laibson, Brigitte C. Madrian. 2011

If individuals have self-control problems that lead them to spend money when they had previously planned to save it, they may take up financial commitment devices that restrict their future ability to access their funds. The authors experimentally investigate how the demand for commitment contracts is affected by contract design features. In their experiments, each subject is endowed with a sum of money and asked to divide that money between a liquid account, which permits unrestricted withdrawals at any time over the course of the months-long experiment, and one or more commitment accounts, which impose withdrawal penalties or restrictions. The design features of the liquid account are the same for all subjects, but the design features of the commitment account(s) are randomized across subjects. When the interest rates on the two types of accounts are the same, they find that allocations to a commitment account are higher when the account is less liquid. The commitment account that disallows early withdrawals altogether attracts the largest allocations. However, this relationship no longer holds when the commitment account interest rate is greater than the liquid account interest rate.

http://www.rand.org/pubs/working_papers/WR895.html

WR-896-SSA

Testing Educational Tools to Demonstrate Returns to Work for Children Aging Out of the SSI-Disabled Children Program. Richard V. Burkhauser, Mary C. Daly. 2011

A substantial fraction of children receiving Supplemental Security Income benefits for disability (SSI-child) transition directly onto the SSI-adult program at age 18 without attempting to enter the labor market. Once this transition is complete, very few attempt to work while receiving SSI-adult benefits. The MDRC SSA Youth Transition Demonstration (YTD) Project report (2008) identified lack of information about financial incentives/disincentives as a potential barrier to work for these youth. In the authors' Year 1 and Year 2 Financial Literacy Research Center projects they focused on this potential impediment. Their Year 1 analysis documented the financial value of working for young adults on SSI. With Year 2 funding they developed a financial calculator based on their analysis and tested whether it could be a tool for determining the value of work for young SSI recipients. Their results point to the potential for such financial education tools to help SSI youth and their families make more informed decisions about their financial future. They also underscore the need for additional development of these and other financial education tools for this vulnerable population.

http://www.rand.org/pubs/working_papers/WR896.html

WR-898-SSA

How to Improve Social Security Education: Retirement Plan Providers' Perspectives. Lisa Schneider, Mathew Greenwald. 2011

In-depth telephone interviews with defined contribution retirement plan providers, conducted

by Mathew Greenwald & Associates in Summer 2011, reveal that most providers are working to educate their plan participants about Social Security and its role in ensuring financial security in retirement. Through website content, mailed materials, one-on-one meetings, and seminars, plan participants receive basic information on how Social Security works and how their benefit amount can vary based on their age at claiming. Most retirement plan providers are not able to give specific, individual advice on when a participant should claim their Social Security retirement benefits, but they consistently supply information to help inform this decision. Respondents express concern that trying to explain the solvency of the Social Security system to participants can be a challenge, and most believe the Social Security Administration could improve its communications to be more user-friendly for consumers. The experts and retirement plan providers interviewed in this study indicate a significant desire for greater collaboration with the Social Security Administration to develop effective communications and deliver useful and credible information to retirement plan participants and Americans as a whole. Some have specific suggestions for how the Social Security Administration can work more closely with defined contribution plan providers to help educate plan participants about the Social Security system and how Social Security benefits may serve as a critical component of their retirement income.

http://www.rand.org/pubs/working_papers/WR898.html

WR-899

Learning your Child's Price: Evidence from Data on Projected Dowry in Rural India. A.V. Chari, Annemie Maertens. 2011

The authors combine novel data and methodology to shed light on the contribution to dowry of a composite characteristic that they refer to a child quality. Their findings can be summarized as follows: (1) Dowry values are not determined by household characteristics alone: child quality is a very significant determinant of dowry; (2) Quality is not a homogenous attribute for boys and girls: They distinguish them between "high-level" quality (which matters for boys) and "low-level" quality (which matters for girls); (3) High-level quality does not begin revealing itself until the child enters school, whereas low-level quality starts becoming apparent at an earlier stage; (4) An increase in quality in girls appears to increase their dowry values: they argue that this is consistent with the idea that girls marry up and that quality has a horizontal component; (5) For boys, quality gets partially absorbed into educational attainments, whereas for girls quality continues to matter because it does not get translated into educational investments.

http://www.rand.org/pubs/working_papers/WR899.html

WR-900

Gender, Social Norms and Voting: Female Turnout in Indian State Elections. A.V. Chari. 2011

This paper analyzes voter turnout data from Indian state legislative assembly elections to test whether voting behavior on the part of women is influenced by strategic complementarities. The associated social multiplier is identified by isolating the part of covariance between male and female turnout that is due to election-specific shocks. The results suggest that there may be a social multiplier in female turnout which is moderate to sizeable, and that the magnitude of the multiplier is negatively related to rates of female literacy.

http://www.rand.org/pubs/working_papers/WR900.html

WR-901

Firing Costs and Flexibility: Evidence from Firms' Employment Responses to Shocks in India. Achyuta Adhvaryu, A.V. Chari, Siddharth Sharma. 2011

A key prediction of models of dynamic labor demand is that restrictions on firing attenuate firms' employment responses to economic fluctuations. The authors provide the first direct empirical test of this prediction using data on industrial firms in India. They exploit the fact that fluctuation in rainfall within districts, through its effects on ag-

ricultural productivity, generates variation in local demand and local labor supply. Using a measure of labor regulation strictness, they compare factories' input and output responses to these shocks in pro-worker and pro-employer districts. Their results confirm the theory's predictions: industrial employment is more sensitive to shocks in areas where labor regulations are less restrictive. They verify that their results are robust to controlling for endogenous firm placement and vary across factory size in the pattern predicted by the institutional features of labor laws in India. However, their results also indicate that the inability to adjust employment does not significantly appear to affect firm profits, suggesting that firms may be adjusting along other (unobservable) margins.

http://www.rand.org/pubs/working_papers/WR901.html

WR-902

Why Farmers Sometimes Love Risks: Evidence from India. Annemie Maertens, David R. Just, A.V. Chari. 2011

Using a unique dataset collected among farmers in India's semi-arid tropics, this paper documents the surprising prevalence of risk-taking behavior in the face of high-stakes gambles. The evidence suggests that this apparently anomalous behavior is due to a combination of credit constraints and non-convexities in production. In particular, the high-stakes nature of the gambles creates the potential for a farmer to undertake a productive investment that would normally be unaffordable and thereby move to a permanently higher level of income. The degree to which farmers are willing to accept risk in return for this opportunity appears to relate in an intuitive way to their current agricultural production technology as well as the demographic composition of their household.

http://www.rand.org/pubs/working_papers/WR902.html

WR-903

Experimental Analysis of the Health and Well-being Effects of a Non-contributory Social Security Program. Emma Aguila, Arie Kapteyn, Rosalba Robles, Beverly A. Weidmer. 2011

Non-contributory social security programs have been implemented in at least 15 countries around the world. These are cash transfer programs aimed at poverty alleviation among the elderly population. Previous studies have found that these programs reduce poverty and inequality, while the health effects are less clear. This study designs and evaluates a new non-contributory social security program in the State of Yucatan, Mexico. This program is for individuals 70 years or over. Eligible individuals are assigned to treatment and control groups and a large array of background variables and outcome measures are collected at baseline and during the course of the experiment for individuals in both the treatment and control groups. In the current paper the authors provide evidence of the impact of the program based on information collected six months after the implementation of the program in two cities in Yucatan selected for the first phase of the program that has a quasi-experimental design. Even after this short period they find significant treatment effects on labor supply, food availability, medical consumption, and memory. Eligible individuals spend their pension on food, visits to the doctor, and medicines, while sharply reducing labor supply. They also find a decline in the consumption of alcoholic beverages.

http://www.rand.org/pubs/working_papers/WR903.html

WR-904

Age Differences in Daily Social Activities. Christopher Steven Marcum. 2011

The extent to which older and younger people do different activities when they are with others and when they are alone is examined in this paper. The author leverages interpersonal data in combination with information on activities from the American Time Use Survey to shed light on the long held finding that older people have less social contact than younger people. The results show that, net of intervening factors, age is associated with declines in time spent with others for virtually all types of time use. However, the variety of activities that older and younger people do

also differs. Using leisure activities to probe this finding uncovers that, when older people spend time with others it tends to be during activities that are sui generis social activities such as attending parties - but that this is not necessarily the case for younger people. The literature on time use and aging is discussed in light of these findings and a new hypothesis on agency in the life course is proposed.

http://www.rand.org/pubs/working_papers/WR904.html

WR-905-SSA

Optimal Financial Literacy and Saving for Retirement. Annamaria Lusardi, Pierre-Carl Michaud, Olivia S. Mitchell. 2011

Recent studies show that financial literacy is strongly positively related to household wealth, but there is also substantial cross-sectional variation in both financial literacy and wealth levels. To explore these patterns, the authors develop a calibrated stochastic life cycle model which features endogeneous financial literacy accumulation. Their model generates substantial wealth inequality, over and above what standard lifecycle models produce. This is due to the fact that higher earners typically have more hump-shaped labor income profiles and lower retirement benefits which, when interacted with the precautionary saving motive, boosts their need for private wealth accumulation and thus financial literacy. They show that the fraction of the population which is rationally "financially ignorant" depends on the level of labor income uncertainty as well as the generosity of the retirement system.

http://www.rand.org/pubs/working_papers/WR905.html