

Introduction to the eCompendium

Note to Readers

The eCompendium in the currently revised webpage of the National Latino Behavioral Health Association (NLBHA) was last updated on December 2022.

Note to Program Developers Interested in Including Their Programs in the eCompendium

NLBHA has received various requests from program developers to include their programs as evidence based programs in this eCompendium. The eCompendium is not a registry that evaluates programs to determine if they are evidence based. Rather, the eCompendium lists programs from the six (6) registries described below that target alcohol or drug misuse, tobacco/nicotine use (including vaping), behavior or emotional functioning, suicide risk, or post-traumatic stress and are potentially applicable to Latino/Hispanic populations. Only programs that have been vetted as evidence based by these six (6) registries are included in the eCompendium. These registries are updated periodically in order to include new programs that have been vetted as evidence based by these registries and to re-evaluate programs previously vetted as evidence based, based on new studies of those programs, to determine if their evidentiary support ratings have changed. The updating process by these registries sometimes results in changes in the evidentiary support of programs that have been previously evaluated, such that some programs have been determined to change their levels of evidentiary support (reflected in the star rating used in the eCompendium) or have been determined to no longer be evidence based (in which case they are no longer included in the updated eCompendium). These registries also periodically make changes in the criteria they use to vet programs as evidence based and the methods and descriptors they use to show the effectiveness of the evidence-based programs. Updates of the eCompendium include these changes in the eCompendium description pages of the evidence-based programs. If program developers are interested in including their programs in the eCompendium, we request that they submit their programs and their evidentiary support to any of the six (6) registries described below. If any of these registries vet their programs as evidence based, NLBHA will include those programs in the eCompendium, if they target alcohol or drug misuse, tobacco/nicotine use (including vaping), behavior or emotional functioning, suicide risk, or post-traumatic stress and are potentially applicable to Latino/Hispanic populations.

Registries from which the evidence-based programs were selected for inclusion in the eCompendium

The evidence-based programs listed in the eCompendium were selected from 6 registries that had vetted the programs. Only programs that had targeted alcohol or drug misuse, tobacco/nicotine use (including vaping), behavior or emotional functioning, suicide risk, or post-traumatic stress and are potentially applicable to Latino/Hispanic populations are included in the eCompendium.

Only registries that use clearly stated criteria for determining evidence-based programs and criteria that are comparable to other registries in terms of the strength of evidentiary support were selected from which to list programs in the eCompendium. The criteria are described in the Guide.

Four (4) registries do not limit the setting (e.g., behavioral health clinics, community agencies, schools, medical centers) in which an EBP can be used:

Crime Solutions: Registry from the National Institute of Justice (<https://crimesolutions.ojp.gov>). This registry presents programs and practices that have undergone rigorous evaluations and meta-analyses. The site assesses the strength of the evidence about whether these programs achieve criminal justice, juvenile justice, and crime victim services outcomes in order to inform practitioners and policy makers about what works, what doesn't, and what's promising.

Blueprints: Registry from Blueprints for Healthy Youth Development (<https://www.blueprintsprograms.org>). The mission of Blueprints for Healthy Youth Development is to provide a comprehensive registry of scientifically proven and scalable interventions that prevent or reduce the likelihood of antisocial behavior and promote a healthy course of youth development and adult maturity. This organization also advocates for evidence-based interventions locally and nationally and produce publications on the importance of adopting high-scientific standards when evaluating what works in social and crime prevention interventions.

CEBC: Registry from the California Evidence-Based Clearinghouse for Child Welfare (<https://cebc4cw.org>). The mission of the California Evidence-Based Clearinghouse for Child Welfare (CEBC) is to advance the effective implementation of evidence-based practices for children and families involved with the child welfare system. The CEBC Program Registry provides information on both evidence-based and non-evidence-based child welfare related practices to statewide agencies, counties, public and private organizations, and individuals. This information is provided in simple straightforward formats reducing the user's need to conduct literature searches, review extensive literature, or understand and critique research methodology.

Social Programs: Registry of Social Programs That Work (<https://evidencebasedprograms.org>). This is a registry site administered by the Arnold Ventures' Evidence-Based Policy team. Arnold Ventures' core objective is to improve lives by investing in evidence-based solutions that maximize opportunity and minimize injustice. Arnold Ventures' Evidence-Based Policy team is comprised of the former leadership of the Coalition for Evidence-Based Policy, a nonprofit, nonpartisan organization that, from 2001 to 2015, played a key [role](#) in the launch of the evidence-based policy movement.

The following two (2) registries list evidence-based programs that are designed to be administered in school settings to promote positive outcomes and prevent behavior problems in students. These two registries are intended to provide information to district and school leaders to help them select and implement these programs in their districts and schools. Only programs that targeted emotional or behavioral functioning as relevant outcomes are included in this compendium.

CASEL: Registry of the Collaborative for Academic, Social, and Emotional Learning (CASEL) (<https://pg.casel.org/review-programs/>). This registry provides a systematic framework for evaluating the quality of social and emotional programs and applies this framework to identify and rate well-designed, evidence-based SEL programs with potential for broad dissemination to schools across the United States.

WWC: Registry of the What Works Clearinghouse (<https://ies.ed.gov/ncee/wwc>). This registry was created in 2002, as an initiative of the U.S. Department of Education's Institute of Education Sciences (IES), to be a central and trusted source of scientific evidence for what works in education. It is managed by a team of staff at IES and conducted under a set of contracts held by several leading firms with expertise in education, research methodology, and the dissemination of education research. Note: EBPs selected from this site are in the topic category of "Behavior" only. The NLBHA update continues to use the "Effectiveness Rating" category to arrive at the "Strength of Evidentiary Support" in the eCompendium, rather than the registry's "ESSA Evidentiary Tier" which has more stringent requirements for establishing "strong" (Tier 1) vs. "moderate evidence" (Tier 2). The reason for the continued use of the "Effectiveness Rating" category is that, currently, very few programs listed in this registry

meet the criteria for Tier 1 or Tier 2 and many of the programs listed in the registry do not have a tier rating assigned. A switch to the ESSA Evidentiary Tier system will be used in future updates when the registry is able to assign tier ratings to all of the programs in the relevant outcome domains. For EBPs from this registry, an **Improvement Index** is included along with the two-star system. The **Improvement Index**, which is an indicator of the effect of the intervention, can be interpreted as the expected change in percentile rank of an average comparison group of students, if those students had received the intervention.

Description in the eCompendium of evidentiary support of the programs listed from the four (4) registries above

A two-star system was developed to indicate which programs have “good” (★★) versus “adequate” (★) evidentiary support (see Guide for further information). Programs that are considered “promising” or “emerging” in the registries are not included in the eCompendium.

Three of these registries, **Crime Solutions**, **Blueprints**, and **Social Programs**, assign levels of evidentiary support, analogous to our two-star system, for programs in general. That is, these registries do not assign level of evidentiary support as pertains to specific problems or risk factors targeted by the program (e.g., depression, delinquency, or substance misuse). For programs from these three registries, the strength of evidentiary support (either ★ or ★★) is listed for the program. In the event that a program is listed in one registry as having “good” evidentiary support and in another as having “adequate” support, the name of the registry that met criteria for a two-star designation in our system and the one that met criteria for a one-star designation in our system are noted ; (e.g., ★★ - Crime Solutions ★ - Blueprints).

Assuming equal conceptual and practical fit of a program listed in **Crime Solutions**, **Blueprints**, or **Social Programs** to a particular community, preference should be given to a two-star (★★) program over a one-star (★) program because there is stronger evidence for the program’s overall effectiveness.

The **CEBC** registry now assigns levels of evidentiary support according to specific problems or risk factors targeted by the program (e.g., depression, delinquency, or substance misuse) based the results of the studies reviewed by the registry instead of assigning

one level of evidentiary support for the program in general. For example, a particular program listed in **CEBC** may have a two-star rating (★ ★) in Depression Treatment but a one-star rating (★) in Substance Abuse Prevention.

If the **CEBC** registry identifies the targeted behavioral area(s) for which the program was found to be effective, the Strength of Evidentiary Support rating (either ★ or ★ ★) for the particular behavioral area(s) will follow the name of the registry in the example:

CEBC



★ ★ - Depression Treatment

★ - Substance Abuse Prevention

Assuming equal conceptual and practical fit of a program to a particular community, preference should be given to a program with a two-star (★ ★) rating in the targeted problem or risk factor of interest, over a program with a one-star (★) rating in the targeted problem or risk factor of interest because there is stronger evidence of effectiveness for the targeted problem or risk factor of interest.

Description in the eCompendium of evidentiary support of the programs listed from the two (2) registries above



The **WWC** registry assigns levels of evidentiary support according to the behavioral area(s) targeted by the program; e.g., behavior problems, social emotional skills, or academic performance. The assigned levels of evidentiary support for each behavioral area(s) targeted by the program are based on the results of the studies reviewed by the registry. The **WWC** no longer assigns one level of evidentiary support for the program in general, as it did before. For example, a particular program listed in **WWC** may have a two-star rating (★ ★) in Behavior Problems but a one-star rating (★) in Academic Performance. In other words, if the registry, **WWC**, identifies the targeted behavioral area(s) for which the program was found to be effective, the Strength of Evidentiary Support rating (either ★ or ★ ★) for the particular behavioral area(s) will follow the name of the registry (e.g., **WWC** - ★ ★ Reduced Problem Behaviors ; ★ - Increased Positive Social Behavior.

If the **WWC** registry identifies the targeted behavioral area(s) for which the program was found to be effective, the Strength of Evidentiary Support rating (either  or ) for the particular behavioral area(s) will follow the name of the registry in the example:

WWC

 - Reduced Problem Behaviors


 - Increased Positive Social Behavior


The **WWC** registry also provides various metrics pertaining to the magnitude of the difference between those who received the program and those who did not receive the program as pertains to the program's targeted behavioral areas, in addition to providing the level of evidentiary support for each targeted behavioral area. The eCompendium provides an additional metric from the **WWC** that provides the user with an indication of the magnitude of difference for each of the program's targeted behavioral areas designated as either  or  in our system: the **Improvement Index**. The **Improvement Index** indicates the **magnitude of difference** between those students who were recipients of the program and those who were not (i.e., the control or comparison group) in the studies that were reviewed and on which the effectiveness rating (i.e., Strength of Evidentiary Support) is based.

Assuming equal conceptual and practical fit of the area of interest of a program to a particular community and an equal strength of evidentiary support, preference should be given to the program with the greater Improvement Index for the particular targeted area of interest because this program is likely to have a larger positive effect than a program with a lesser Improvement Index.

The listing in the program will appear like this:

WWC

 - Depression Improvement Index = 22

 - Behavior Improvement Index = 8

(Improvement Index: The expected change in percentile rank for an average comparison group student if the student had received the intervention. It is measured as the percentile difference between the intervention group mean and the comparison group mean using the comparison group distribution.)

The other registry, **CASEL**, provides only one level of programs that show an acceptable level of evidentiary support, SElect (**SEL**). The criteria used to designate programs as SElect (**SEL**) are analogous to the criteria of the other registries' lower tier of evidentiary support—what we consider a one-star (★) rating in the eCompendium. In order, to describe programs from **CASEL** as either one-star (★) or two-star (★★) in our eCompendium, we constructed a set of criteria (described below) that was considerably more stringent than the minimal threshold used in **CASEL** to designate a program as SElect (**SEL**) and that is analogous to the criteria used by the other registries to designate programs as their top tier programs (i.e., highest level of evidentiary support). **CASEL** uses a unitary assessment of evidentiary support for a program, in general. However, it identifies the targeted behavioral area(s) for which the program was shown to have significant evaluation outcomes according to the studies reviewed. Because **CASEL**, unlike the other registries, does not use a two-tier system of evidentiary support and we developed a method to arrive at a two-tiered level of evidentiary support for each SElect (**SEL**) program, as a whole, listed in **CASEL**, there is not sufficient information in **CASEL** to determine the level of evidentiary support as pertains to the individual targeted behavioral area(s) of the program. Although **CASEL** lists the targeted behavioral area(s) for which the program was shown to have significant evaluation outcomes, we do not have sufficient information from that provided in the registry to develop a two-tiered system as pertains to specific targeted behavioral area(s). Consequently, in the eCompendium, we first indicate if a SElect (**SEL**) program from **CASEL** is either one-star (★) or two-star (★★), according to our system. Below the star rating, we list the targeted behavioral area(s) for which the program was shown to have significant evaluation outcomes with a check (✓) mark (e.g., ★ - **CASEL**, ✓ - Improved academic performance, ✓ - Reduced problem behaviors). Those targeted behavioral area(s) that were not shown to have significant evaluation outcomes are not included in the list.

The listing in the program page will look like this:

CASEL - ★★

Significant evaluation outcomes in:



✓ - Reduced problem behaviors



✓ - Improved social behaviors

Assuming equal conceptual and practical fit of a program to a particular community, preference should be given to a program with a two-star (★★) rating as pertains to the targeted problem or risk factor of interest, over a program with a one-star (★) rating as pertains to the targeted problem or risk factor of interest because there is stronger evidence of effectiveness for the targeted problem or risk factor of interest.



The following tables describe the criteria from each of the six (6) registries to designate evidence-based programs as having either “good” (★★) or “adequate” (★) evidentiary support. The first table describes the registries that list programs that can be implemented in a variety of settings. The second table describes the registries that list programs that are implemented on a school or school-district-wide level.

Comparison of the Criteria Used by Different Registries to Establish the eCompendium Rating for Programs with Either Two-Star (★★) or One-Star (★) Evidentiary Support

Our Star Rating	California Evidence-based Clearinghouse	Blueprints for Healthy Youth Development	Social Programs that Work	Crime Solutions (National Institute of Justice)
 Good Evidentiary Support	Rating of 1—Well Supported: <ul style="list-style-type: none"> At least 2 rigorous RCTs with non-overlapping analytic samples, carried out in the usual care or practice settings, which have shown the program to be superior to an appropriate comparison program on outcomes specified in the criteria for that particular topic area. In at least one of these RCTs, the program has been shown to have a sustained effect of at least one year beyond the end of the treatment, when compared to a control group. 	Model Plus Programs: <ul style="list-style-type: none"> Intervention specificity: The intervention description clearly identifies the intended outcome(s), whether specific risk and/or protective factors are targeted to produce this change, the population for which the intervention is intended, and how the components of the intervention work to produce change. Evaluation quality: The evaluation trials produce valid and reliable findings. This requires a minimum of (a) one high-quality RCT or (b) two high-quality quasi-experimental evaluations. 	Top Tier: Programs shown in well-constructed RCTs, carried out in typical community settings, to produce sizable, sustainable effects on important outcomes. Includes requirement for replication—specifically, the demonstration of such effects in two or more RCTs conducted in different implementation sites, or, alternatively, in one large multi-site RCT. Such evidence provides confidence that the program would produce important effects if implemented faithfully in settings and	 A multiple-studies icon is used to depict programs that have been evaluated with more than one sample. The icon depicts programs that have more than one study in the evidence base that demonstrates effects in a consistent direction. Thus, there is greater evidence supporting the rating because with each replication it becomes less likely the results were due to something other than the program. At least one of the studies is very rigorous and well-designed and finds significant, positive effects on justice-related

		<ul style="list-style-type: none"> • Intervention impact: The preponderance of evidence from the high-quality evaluations indicates a significant positive change in intended outcomes that can be attributed to the intervention and there is no evidence of harmful effects. • Dissemination readiness: The intervention is currently available for dissemination and has the necessary organizational capability, manuals, training, technical assistance and other support required for implementation with fidelity in communities and public services systems. • Independent Replication: In at least one high-quality study demonstrating desired outcomes, authorship, data collection, and analysis has been conducted by a researcher who is neither a current or past member of the program developer’s research team and who has no financial interest in the program. 	populations similar to those in the original studies.	outcomes. Additional studies are well-designed but slightly less rigorous, or there may be limitations in their designs. These additional studies find significant, positive effects on justice-related outcomes. None of the studies have shown significant, harmful effects on justice-related outcomes.
 <p>Adequate Evidentiary Support</p>	<p>Rating of 2--Supported:</p> <ul style="list-style-type: none"> • At least one rigorous RCT in usual care or practice setting has found the program to be superior to an appropriate comparison program outcomes specified in the criteria for that particular topic area. • In that RCT, the program has shown to have a sustained effect of at least six months beyond the end of the treatment, when compared to a control group. 	<p>Model Program: Same criteria as above except for:</p> <ul style="list-style-type: none"> • Replication: A minimum of (a) two high-quality RCTs or (b) one high-quality RCT plus one high-quality quasi-experimental evaluation. No independent replication. 	<p>Near Top Tier: Programs shown to meet almost all elements of the Top Tier standard, and which only need one additional step to qualify. This category primarily includes programs that meet all elements of the Top Tier standard in a single study site, but need a replication RCT to confirm the initial findings and establish that they generalize to other sites. This is best viewed as tentative evidence that the program would</p>	 <p>A single-study icon is used to identify programs that have been evaluated with one very rigorous and well-designed study that</p> <ul style="list-style-type: none"> • has been evaluated with a single sample and • found significant, positive effects on justice-related outcomes. <p>The study based on a single sample may have produced multiple publications; however, it received a</p>

			produce important effects if implemented faithfully in settings and populations similar to those in the original study.	single study icon because it was a single study sample.
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Our Star Rating	CASEL Program Guide: Effective Social and Emotional Learning Programs ¹	What Works Clearinghouse (U.S. Department of Education Institute of Education Sciences)
 Good Evidentiary Support	<ul style="list-style-type: none"> (1) Two or more RCTs with sample sizes of at least 100 conducted in separate school districts, or (2) One RCT and at least one large quasi-experimental evaluation with sample sizes of 350 or more in multiple school districts. <p>In addition, meets all criteria for adequate evidentiary support.</p>	<p>++ Positive effects: Strong evidence of a positive effect with no overriding contrary evidence</p> <ul style="list-style-type: none"> Two or more studies show statistically significant positive effects, at least one of which <i>Meet WWC Group Design Standards Without Reservations</i>². No studies show statistically significant or substantively important negative effects. Strong evidence of positive effect on behavior, as noted in the Improvement Index, which is the expected change in percentile rank for an average comparison group student if the student had received the intervention. It is measured as the percentile difference between the intervention group mean and the comparison group mean using the comparison group distribution.
 Adequate Evidentiary Support	<ul style="list-style-type: none"> Well-designed, classroom-based programs that systematically promote students' social and emotional competence, provide opportunities for practice, and offer multiyear programming. Deliver high-quality training and other implementation supports, including initial training and ongoing support to ensure sound implementation. The program is implemented at the universal level, during the regular school day, with students who fall within the PreK-12 grade range. Evaluation of the program uses a pre-post randomized control trial (RCT) or pre-post quasi-experimental (QE) design that includes a comparison group. The evaluation of the program reports statistically significant main effects between the intervention and comparison group using appropriate analytic methods, while adjusting for differences in the outcome variable at pre-test. A minimum final analytic sample size of 	<p>+ Potentially Positive Effects: Evidence of a positive effect with no overriding contrary evidence</p> <ul style="list-style-type: none"> At least two studies in an intervention report are rated <i>Meets WWC Standards Without Reservations</i> or <i>Meets WWC Standards With Reservations</i>. The mean effect from fixed-effects meta-analysis of these studies is statistically significant and positive. Fifty percent or less of the fixed-effects meta-analysis weight comes from studies that are rated <i>Meets WWC Standards Without Reservations</i>; or when (a) one study is rated <i>Meets WWC Standards Without Reservations</i> or <i>Meets WWC Reservations With Reservations</i> and (b) the study has a statistically significant and positive effect.

	<p>100 is used, and appropriate methods for handling sample attrition are employed.</p> <ul style="list-style-type: none"> The evaluation of the program shows positive effects in behavioral student outcomes, institutional outcomes, improved academic performance with other social and emotional outcomes, improved positive social behavior, reduced conduct problems, or reduced emotional distress. 	
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Footnotes

1. The CASEL Program Guide describes programs that meet a minimum criteria for inclusion as evidence-based educational programs. It does not dichotomize the programs like the other registries included in this compendium as pertains to good versus adequate evidentiary support. In order to group the programs in this guide into our two-star classification (i.e., good versus adequate evidentiary support), we developed criteria analogous to those used by the other registries to give the program either a two or one star rating. The CASEL Program Guide provides sufficient information to make such a dichotomy possible. Programs designated as Complementary Programs in the CASEL Program Guide are not included in this Compendium.

2. To meet WWC Group Design Standards without Reservations, the study must use a random assignment process and the combination of overall and differential attrition must be low. The following class of studies met WWC Group Design Standards with Reservations: (a) Studies that used a random assignment process, had a high combination of overall and differential attrition, and established equivalence at baseline for the groups in the analytic sample; (b) studies that did not use random assignment, had a low combination of overall and differential attrition, and established at baseline for the groups in the analytic sample. For more information on the determination of “high” and “low” attrition levels, see “What Works Clearinghouse: Procedures Handbook, Version 4.1” (<https://ies.ed.gov/ncee/wwc/Docs/referenceresources/WWC-Procedures-Handbook-v4-1-508.pdf>) and Standards Handbook, Version 4.1” (<https://ies.ed.gov/ncee/wwc/Docs/referenceresources/WWC-Standards-Handbook-v4-1-508.pdf>).

Categories and descriptions used in the eCompendium

The eCompendium uses one categorization system to describe programs in the four registries that can be implemented through a variety of settings. This is described in the first table below. The second table below describes a second categorization system for the registries that list programs that are implemented at a school-wide or district-wide level. These tables present the categories and their descriptions used in the eCompendium for these two sets of registries from which programs were selected for inclusion in the eCompendium.

Categories and Descriptions Used for the Four Registries that List Programs that Can Be Implemented in a Variety of Settings

Category	Description
Focus Population and Brief Description of the Program	Families, parents, children, adolescents, or adults including brief description of the subpopulation (disadvantaged, divorced parents, etc.)
Target Problems or Risk Factors	Delinquency, alcohol and other drug problems, conduct or behavior problems, general risk, etc.
Level of Intervention	<p>Universal (An intervention that focuses on the general public or a wide population that was not identified based on risk),</p> <p>Selective (An intervention that focuses on individuals or sub-groups whose risk of developing mental health disorders and/or substance use disorders are significantly higher due to biological, psychological, and/or social risk factors., or</p>

	Indicated (An intervention that focuses on higher risk individuals identified as having signs and/or symptoms or behavior foreshadowing a mental, emotional, and/or substance use disorder)
Setting in Which Program Can Be Delivered	Behavioral health organization or agency, school, home, community, court, etc.
Latinos in Participant Samples	Latino Program Participants in the Studies Reviewed by the Registry Yes, No, or No Information. If Yes: Minimal ($\leq 15\%$), Moderate (16% to 30%), Substantial (31% to 55%), Primary (56% to 99%), Exclusively (100%), or # Unknown
Type of Program	Generic, Culturally Informed/Responsive, Culturally Adapted, or Culture Specific
Strength of Evidentiary Support	2-Star (★★) for either the program or target problems/risk factors (good evidentiary support) 1-Star (★) for either the program or target problems/risk factors (adequate evidentiary support)
Cost of the Program	Yes or No (If Yes, URL in which registry the cost information can be found)
Availability of the program in Spanish and/or Portuguese	Yes or No (If Yes, which language and name of the registry that provides this information)
Registry & Program Description	Link to the registry site that describes the program and its evidentiary support

Contact Information	Program website and contact information for the program developer or the person who can provide information on the use of and training on the program

Categories and Descriptions Used for the Two Registries that Only List School-Based Programs

Category	Description
Grade Range Covered by the Program	Indicates the grade ranges for which the program is intended
Grade Range Examined in the Studies Used to Establish Program Effectiveness	Indicates the grade range of the samples in the studies reviewed by the registry to establish the strength of evidentiary support for the program
Brief Description of Program	Provides a nutshell description of the focus of the program
Targeted Behavioral Area of Effect of Prevention/Intervention	Reduced conduct or behavior problems, improved social-emotional skills/functioning, reduced emotional distress, etc.
Geographic Location of Participant Samples	Geographic areas in which the studies reviewed by the registry were conducted to assess the program's effectiveness, either in broad terms, e.g., "Midwest" or "Northeast," or by state

Population Density of Participant Samples	Density areas in which the studies reviewed by the registry were conducted to assess the program's effectiveness: urban, suburban, or rural
Latinos in the School Populations	The overall percentage of Latinos in the samples of the studies reviewed by the registry Yes or No (if Yes, actual percentage of Latinos)
Delivery Method	School, Whole Classroom, Small Group, Individual
Strength of Evidentiary Support	<p>2-Star (★★) for either the program or the targeted behavioral area of effect of prevention/intervention (good evidentiary support)</p> <p>1-Star (★) for either the program or the targeted behavioral area of effect of prevention/intervention (adequate evidentiary support)</p>
Cost of the Program	Yes or No (If Yes, URL in which registry the cost information can be found)
Available in Spanish	Yes or No
Registry and Program Description	Link to the registry site that describes the program
Contact Information	Program website and contact information for the program developer or the person who can provide information on the use of and training on the program

Process for Updating eCompendium

The National Latino Behavioral Health Association requires a periodic quality evaluation including reviewing and updating the eCompendium to ensure accuracy for the content of each evidence-based program (EBP) listed. All categories and descriptions for each EBP, including strength of evidentiary support are reviewed and updated. In addition, the two-star system used in the eCompendium to establish equivalency of evidence ratings used by each of the six registries are reviewed and revised because registries are also periodically revising their criteria for the strength of evidentiary support of the EBP they are listing as more studies are being conducted on prevention and intervention programs.

1st Version of the eCompendium: August 2021

2nd Version of the eCompendium: December 2022