

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. DO NOT EXCEED FIVE PAGES.

NAME: Brad B. Richardson

eRA COMMONS USER NAME (credential, e.g., agency login):brad-richardson@uiowa.edu

POSITION TITLE: Research Director

EDUCATION/TRAINING (*Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.*)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
Mt. Mercy & Coe Colleges, Cedar Rapids,	B.A.	08/1976	Sociology/Psychology
IA University of Nebraska, Omaha, NE	M.A.	12/1978	Sociology/Anthro/Social Work
University of Minnesota, Minneapolis, MN	Ph.D.	12/1984	Social Psychology, Research Methods & Statistics; Soc. of Law, Sociological Theory.

NOTE: The Biographical Sketch may not exceed five pages. Follow the formats and instructions below.

A. Personal Statement

My research program has been guided by a family centered approach and expertise in methodology, quantitative and qualitative analysis applied to a wide range of substantive areas in which I have conducted research and evaluation. The health-related research and evaluation studies have focused on community and behavioral health prevention and intervention in areas including long term care, behavioral health, cancer, diabetes, heart disease, substance use disorders, workforce training and supervision; quality assurance, outcome measurement, implementation science and continuous quality improvement strategies. Over the years I have conducted research and evaluation across the age continuum including early childhood education, child welfare, maternal child health, home visitation, family support services; workforce, occupations and organizations; education, juvenile justice and social and psychological impact of trauma and disasters. Many original research articles and presentations have focused on disparities and research and evaluation for vulnerable populations; these topics have been a consistent focus throughout much of my work. Another longstanding interest area is in the development of systems and instruments that facilitate best practices through a family centered approach utilizing reliable outcome measures tracking that can be used for case planning. This area of expertise involves the development of measures and systems to evaluate outcomes, report performance measures, and measure program results and improve programs. Examples include the Family Development Matrix Model Automated Assessment of Family Progress and Life Skills Progression.

I have extensive experience working with programs, states, tribes and federal agencies. I have served in leadership roles on research and evaluation projects in communities for over 30 years and have worked in most states and with many tribes during those years engaging stakeholders and participants in the research and evaluation including community based participatory research and utilization focused evaluation.

B. Positions and Honors**Positions and Employment**

2001-present **Research Director**, The University of Iowa School of Social Work: National Resource Center for Family Centered Practice; **Co-Director**, Consortium for Substance Abuse Research and Evaluation & **Director**, The Center for Public Health Evaluation and Research.

1993-2000 **Research Scientist**, Assoc. Res. Sci., Sr. Researcher, The University of Iowa School of Social Work: National Resource Center for Family Centered Practice

1991-1993 **Director of Research**, Institute for Social & Economic Development, Iowa City, IA
1988-1991 Proprietor, Human Relations Research, Atlanta, GA
1986-1989 **Director of Contract Research**, Yale University, Human Relations Area Files, New Haven, CT

Other Experiences and Professional Memberships

American Public Health Association, Cancer Forum (Chair Emeritus; Chair 2017-2019).
Iowa Mental Health Planning Council – Vice Chair (2022 – present) (Secretary 2015-2021; Chair of Public Safety & Corrections Committee (2013 – 2022); Nominations Committee Chair (2012-2021)
Coalition for Juvenile Justice (Wash. DC), Exec. Board, National DMC Coordinator representative (2009-2011) Member, Ethnic and Cultural Diversity Committee (2009 – present)
Evaluators Workgroup (Co-Chair 2009-11), National Child Welfare Resource Centers (2009 - 2014)
National Academies of Science (Wash. DC), Panel on Racial Disproportionality in Child Welfare and Juvenile Justice (2010)
Member, Iowa Child and Family Services Stakeholder Panel, School of Social Work Representative (2008 to 2011)
Reviewer, National Institute of Justice, Office of Justice Programs (2009 – present)
Reviewer, U.S. Dept. of Health and Human Services, Substance Abuse, Mental Health Services Administration Standing Committee (1999 – present)
Reviewer, Office of Community Services (2003 to present)
Reviewer, U.S. Dept. of Education, Office of Special Education and Rehabilitative Services, Rehabilitation Services Administration (1992 to present)
Reviewer, Head Start Bureau, ACYF (1996 to 2009)
Member, Child Welfare Work Group, Iowa Department of Human Services (1997-1999)
Reviewer, International Journal of Business and Marketing (1984 -1991)

Honors

2006 The University of Iowa Public Engagement and Community Outreach Award
2005 Recipient of the Iowa Federation for Children's Mental Health, "Clone Award"

C. Contributions to Science

Racial **disparities** in health, juvenile justice and child welfare are significant research issues that may inform policy and practice. These issues are long standing and at first glance may appear intractable, however, the research and evaluation undertaken has focused on the use of data and developing measures that inform not only the extent of the disparities, but specifically where disparities are located in systems to better target efforts to reduce those disparities. As principal investigator on numerous research projects my work has been referenced throughout the U.S. as well as in other countries by those seeking to reduce health disparities and disparities and disproportionality in juvenile justice and child welfare. Some of the most cited publications specifically related to this area of research include: *Comparative Analysis of Two Community-Based Efforts Designed to Impact Disproportionality and Evaluating Multi-systemic Efforts to Impact Disproportionality through Key Decision Points*, [in McRoy, R et al. The Practice of Social Work: Addressing Racial Disproportionality and Disparity of Outcomes in Child Welfare: Washington DC: Child Welfare League of America (2011, Richardson, B. and 2011, Derezotes, D. and Richardson, B., respectively)]; *Measuring Strategies to Reduce Disparities: Utilizing the Disproportionality Diagnostic Tool. Special Issue on Child Welfare and Juvenile Justice Disproportionality/Disparity* (in The Journal of Health & Human Services Administration published in Elizabethtown, PA by Southern Public Administration Education Foundation); Getting Beyond Failure: Promising Approaches for Reducing DMC (published in the Journal of Youth Violence and Juvenile Justice which can be found online at Sage pub. www.yvj.sagepub.com by Nellis, A. and Richardson, B., 2010) and Comparative Analysis of Two Community-Based Efforts Designed to Impact Disproportionality in Child Welfare, [Issue 2, 2008 Special Issue: Overrepresentation of Minority Youth in Care](#). (Washington D.C.: Child Welfare League of America by Richardson, B, 2008). These research articles describe data driven approaches to reducing disparities at community levels. Each offers a unique approach and measurement strategies that can be utilized to help reduce disparities in communities throughout the U.S. Getting Beyond Failure differs somewhat in that it provides communities and readers with a review of what has worked and ways to build on those successes. These contributions and others formed the basis for my testimony to the

National Academies of Science, Panel on Racial Disproportionality in child welfare and juvenile justice (2010) which resulted in the landmark document published by the National Academies of Science entitled [Reforming Juvenile Justice: A Developmental Approach](#) (2013). Most recently my work on disparities was presented at the conference on Transdisciplinary Collaborations: Evolving Dimensions of US and Global Health Equity Minority Health and Health Disparities Conference [formerly International Symposium on Minority Health and Health Disparities (ISMHHD) of the National Institute on Minority Health and Health Disparities (NIMHD)] in Washington DC where discussions focused on health and nutrition. My address to the conference involved how “Reducing Maternal and Early Childhood Health Disparities (could be achieved) Through Improved Access to Healthcare by Home Visitation.”

Richardson, B. and Hayashi, V. (2014, 2015) Iowa Project LAUNCH Evaluation Report. Washington, DC: Center for Mental Health Services (CMHS), Substance Abuse Mental Health Services Administration (SAMHSA).

Social network analysis has a long history in social science and in my career. I began using social network analysis (SNA) in evaluations of collaborative projects to measure strengths in community collaboration in addition to standard data collection techniques (e.g., surveys of stakeholders) in the mid-90s. The approach proved to have several advantages and has been adopted by many others since then. For single response sets (i.e., responses by all members of a network to one question), it is easy to see how members of the network are connected on relational content. At a higher level of abstraction is the concept of “multiplex analysis” which uses information from all network members on several relational contents (e.g., working together, sharing space, sharing funding). Multiplex analysis helps to uncover social structure based on the combined responses over several questions, not just one relation. While network analysis has become more popular in recent years, the standard use of multiplex relations and their analysis has yet to be realized in standard practice. I am continuing to develop this methodology as a formative and summative evaluation tool. Exemplary reports and articles utilizing this approach are posted on The University of Iowa School of Social Work, National Resource Center for Family Centered Practice website at <http://www.uiowa.edu/~nrcfcp/research/sna.shtml>. Significant research involving the approach developed is contained in the following publications, some of which have been cited not only in the U.S. but also internationally:

Richardson, Brad and Graf, Nancy (2004). Measuring Strengths in Community Collaboration. Prevention Report, Vol. XX, No. 1. Iowa City: IA. The University of Iowa School of Social Work, National Resource Center for Family Centered Practice.

Another significant contribution to science has been in the area of **developing valid and reliable instruments** that assist practitioners in measuring progress to show those with whom they are working the successes on which they can build while measuring outcomes for other interested stakeholders (e.g. management, funders). This work brings together two seemingly divergent areas of my work: my experience in reliability analysis and validating instruments and also my background in family strengthening, case management and in-home services where findings suggest interventions that explicitly focus on strengths tend to be most efficient and effective. Beginning ostensibly with Validation of the POSIT: Comparing Drug Using and Abstaining Youth (Hall, J.A., Richardson, B., Spears, J. & Rembert, J.K., 1998, [Journal of Child & Adolescent Substance Abuse](#), 8 (2), 29-61), the validation and reliability contribution to science continued through development of the Automated Assessment of Family Progress (Outcomes Consultation: Lessons from the field (PartII): The Automated Assessment Of Family Progress in [The Prevention Report](#) (1999 Vol. #1, Richardson, B. & Landsman, M.), Testing the Validity and Reliability of the California Matrix Model (1999, Endres, J., Richardson, B. & Sherman, J.) and The Monterey Life Skills Progression Reliability Assessment (Richardson, 2000). The Family Development Matrix and the Automated Assessment of Family Progress were later described in [Network Guide to Measuring Family Development Outcomes](#) published under sponsorship of the U.S. Department of Health and Human Services, Office of Community Services (Richardson, B., Theisen B., & Spears, J., 2004). The (formerly Monterey) Life Skills Progression or LSP as it is now known is used throughout the U.S. in nurse home visiting programs (e.g., the Maternal, Infant, Early Childhood Home Visitation Program of HRSA under the Affordable Care Act) and other programs serving at risk families using a public health approach (e.g., Project LAUNCH, Healthy Families America, Nurse Family Partnership).

Selected Recent Publications

Wollesen, L. & Richardson B. (forthcoming). *Life Skills Progression: An Outcome and Intervention Planning Instrument for Use with Families at Risk, 2nd Edition*. Baltimore, MD: Brookes Publishing.

Gross, G., Ling, R., Richardson & Quan, N. (under review). Maximizing Curriculum Delivery Effectiveness: Using a Results-based CQI Model with Instructors of a Risk Avoidance Curriculum. *Journal of Adolescent Health*

Gross, G, Ling, R, Richardson, B, Quan, N. (2022). In-Person or Virtual Training?: Comparing the Effectiveness of Instruction in Two Delivery Platforms. *American Journal of Distance Education*.

Navarro, I., Endres, J. Richardson, B. Ling, R., Arevalo, Z., McGrath, S. (forthcoming). Augmenting Parent Education Interventions with Strengths-based Case Management: First 5 San Bernardino's experience implementing Nurturing Parenting with the Family Development Matrix.

Richardson, B., Smith, R. (2017). Impact Analysis of Community Collaboration to Reduce Food Insecurity Among Seniors in Iowa. Iowa City, IA: The University of Iowa School of Social Work, National Resource Center for Family Centered Practice & IA Dept. of Public Health.

Richardson, B. & Smith, R. (2017) Assess Your Success: Critical Access Hospitals and Medicare Rural Hospital Flexibility Program 2016-2017. Iowa City, IA: The University of Iowa School of Social Work, National Resource Center for Family Centered Practice & IA Dept. of Public Health.

Richardson, B. et al. (2017) Report of Critical Access Hospitals (CAH) Community Needs Assessments. Iowa Dept. of Public Health.

Abbott, A., Miller, L. & Richardson, B. (2015). Iowa School Health Profiles: 2014 Report. Iowa City, IA: The University of Iowa School of Social Work, National Resource Center for Family Centered Practice.

M. Sami Khawaja, M. S., Christenson, J., Drakos, J., Eiden, A., Ditz, A., Richardson, B., Hayashi, V., Wells, T., Jackson, T. (2013). People Working Cooperatively Whole House Demonstration Project.. Portland OR: CadmusGroup.

Richardson, B. (2011). Comparative Analysis of Two Community-Based Efforts Designed to Impact Disproportionality. In McRoy, R et al. The Practice of Social Work: Addressing Racial Disproportionality and Disparity of Outcomes in Child Welfare. Washington DC: Child Welfare League of America.

Derezotes, D., Richardson, B. et al. (2011). Evaluating Multi-systemic Efforts to Impact Disproportionality through Key Decision Points. In McRoy, R et al. The Practice of Social Work: Addressing Racial Disproportionality and Disparity of Outcomes in Child Welfare. Washington DC: Child Welfare League of America.

Richardson, B. (2010). Measuring Strategies to Reduce Disparities: Utilizing the Disproportionality Diagnostic Tool. Special Issue on Child Welfare and Juvenile Justice Disproportionality/Disparity.

Elizabethtown, PA: Southern Public Administration Education Foundation, The Journal of Health & Human Services Administration.

Nellis, A. & Richardson, B. (2010). Getting Beyond the Failure: Promising Approaches for Reducing DMC. *Journal of Youth Violence and Juvenile Justice*. Sage pub. online at www.yvj.sagepub.com

Richardson, Brad. (2008). Comparative Analysis of Two Community-Based Efforts Designed to Impact Disproportionality. *Child Welfare Journal*, [Issue 2, 2008 Special Issue: Overrepresentation of Minority Youth in Care](#). Washington D.C.: Child Welfare League of America, *Child Welfare*.

Derezotes, D., Richardson, B., Bear King, C., Rembert, J. & Pratt, B. (2008). Evaluating Multi-systemic Efforts to Impact Disproportionality through Key Decision Points. *Child Welfare Journal*, [Issue 2, 2008 Special Issue: Overrepresentation of Minority Youth in Care](#) Washington D.C.: Child Welfare League of America, *Child Welfare*.

Richardson, B., Graf, N., Clegg, R., & Knutsen, J. (2006). Collaborating across systems to build effective schools. *The Prevention Report 2006 #1*.

Richardson, B., Graf, N., & Loring, B. (2006). The Impact of community collaboration to improve early learning. *The Prevention Report 2006 #1*.