Nov 7th, 11:00 AM

You Want Us to Do What? How to Conduct Community-engaged Research Studies from the Perspective of the Community Organizations: Evidence from the Kidsteps II Study

Carole C. Upshur  
*University of Massachusetts Medical School*

*Et al.*

Let us know how access to this document benefits you.  
Follow this and additional works at:  
[https://escholarship.umassmed.edu/chr_symposium](https://escholarship.umassmed.edu/chr_symposium)

Part of the [Civic and Community Engagement Commons](https://escholarship.umassmed.edu/chr_symposium), [Community-Based Research Commons](https://escholarship.umassmed.edu/chr_symposium), [Community Health and Preventive Medicine Commons](https://escholarship.umassmed.edu/chr_symposium), and the [Translational Medical Research Commons](https://escholarship.umassmed.edu/chr_symposium)

**Repository Citation**  

**Creative Commons License**  
This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License. This material is brought to you by eScholarship@UMMS. It has been accepted for inclusion in Community Engagement and Research Symposia by an authorized administrator of eScholarship@UMMS. For more information, please contact Lisa.Palmer@umassmed.edu.
You want us to do what? How to conduct community-engaged research studies from the perspective of the community organizations:

Evidence from the Kidsteps II Study

US Department of Education: Institute of Education Sciences #R305A130336
University of Massachusetts
Center for Clinical Translational Science
Community Engagement Conference
November 7, 2014
Carole Upshur, EdD, Professor, Dept. of Family Medicine and Community Health

Melodie Wenz-Gross, PhD, Research Assistant Professor, Dept. of Family Medicine and Community Health

Pamela Courtney, Center Coordinator with the Worcester Child Development Head Start Program.

Sheila Diggins, Program Supervisor at Worcester Comprehensive Child Care Service, Worcester

Kim Harned, Assistant Preschool Coordinator at Rainbow Child Development Center, Worcester

Andi MacMillan, Education Specialist for MOC Child Care & Head Start in Gardner

Linda Mayuski, Preschool Coordinator at Rainbow Child Development Center in Worcester

Melissa Nikander, Director of the Guild of St. Agnes Child Care Program, Devens

Christina Nylen Queeney, Director of the Guild of St. Agnes, Gardner
Centers for Disease Control and Prevention and the Agency for Toxic Substances & Disease Registry (ATSDR), community-engaged research "...is a powerful vehicle for bringing about environmental and behavioral changes that will improve the health of the community and its members. It often involves partnerships and coalitions that help mobilize resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programs, and practices."
Different types of community-based research

Community engaged
- Community has input on topic, design
- Researcher strives to make design & measurement organizationally and culturally matched
- Consult about recruitment
- Share results for feedback
- Publish in peer reviewed journals & disseminate in community

Community participatory (CBPR)
- Community sets agenda
- Fully participates in design and measurement
- Recruits participants, collects data
- Work together on analysis/interpretation
- Community members give presentations & contribute to peer-reviewed publications
In 2000-2001 community child care programs came together due to high rates of preschoolers being expelled from child care due to behavioral issues.

Volunteers from this coalition wrote a Health Foundation pilot grant and asked Dept. of Family Medicine for help; Carole Upshur wrote the evaluation.

Pilot was funded and subsequent longer term study with Carole Upshur and Melodie Wenz-Gross running evaluation.

Pilot work included ongoing collaboration with coalition now called Together for Kids.

Teacher training and some funds for parent activities were given to child care programs.

Pilot resulted in:

* significant drop in children expelled,
* significant improvement in children’s behavior and skills and
* model for state wide early childhood mental health consultation

(See Upshur, Wenz-Gross, & Reed, 2009)
Primary intervention curriculum—Second Step—called Kidsteps

- Funded by NIMH R34 (1R34MH08588) 2009-2011
- Implemented various incentives to sites to facilitate collaboration (funds for site coordinators and teacher overtime, staff CUEs, provision of curriculum materials to both intervention and control classrooms, training of control classrooms at end of study) See Wenz-Gross & Upshur 2012 for implementation paper

- On going reporting and advocacy work with Together for Kids Coalition

- Successful pilot resulted in Together for Kids Coalition support for larger trial and request for 3rd submission of grant
1. To evaluate the effectiveness of the new Second Step Early Learning (SSEL) curriculum for improving social skills, emotional regulation, executive functioning skills and school readiness at the end of preschool at larger scale

2. To evaluate its impact on kindergarten outcomes

3. To evaluate the feasibility of implementing the curriculum across a large number of Head Start and Community Preschool classrooms
Who is participating?

- 64 Head Start and community preschool classrooms in Central Massachusetts drawn from:
  - MOC Child Care and Head Start
  - Worcester Public Schools Head Start
  - Guild of St. Agnes Preschool
  - Rainbow Child Development Center
  - YWCA of Central Massachusetts Child Care
  - Worcester Comprehensive Education and Care

- Approximately 450 children per year enrolled with approximately 600 children followed into kindergarten
Research Design

* Four-year study
* Two cohorts of classrooms (randomly assigned)
* Each cohort participates in implementation for 2 years
* Classrooms within each cohort randomly assigned to either receive SSEL curriculum or continue with current preschool curriculum (random assignment conducted after baseline assessments)
* All children assessed by teachers and parents
* All participating 4-year-olds individually assessed by research staff and followed into kindergarten
* Some classrooms assessed for changes in classroom climate
Teacher Rated Social Skills and Emotional Regulation

Parent Rated Social Skills and Emotional Regulation

Researcher assessed executive functioning skills (memory, attention, control), emotion knowledge, social problem solving, language and math skills

Kindergarten screening, kindergarten teacher ratings of social skills and academic readiness, SPED services, promotion to 1st grade

Curriculum implementation and satisfaction

Classroom climate (on a sub-set of classrooms)
Organization Liaison Role

- Link to research staff around budget, implementation
- Supervise & support site administrators for enrolling families and teachers
- Periodically meet to discuss and problem solve issues with research staff
Site Administrator Role

- Participate in CITI training for protection of Human Subjects and training in how to consent families
- Explain and consent families for participation in the project at the time of enrollment into preschool (August to October each year only)
- Collect demographic information on those who consent and distribute behavioral measures to participating parents
- Help coordinate ECERS and CLASS classroom observations by researchers
- Help coordinate/support getting teacher ratings completed on participating children
- Help coordinate 4-year-old child assessments
- Help coordinate teacher training (intervention only)
Teacher Responsibilities

- All teachers in all participating classrooms:
  - Provide basic demographic data (years of experience, education, etc.) if willing (teacher signs consent); with site administrators, provide basic description of classroom (age of children, total number, male/female etc.)
  - Provide ratings of social skills and emotion regulation on all participating children who have parent consent
  - Allow classroom observations and individual child assessments by research team
  - Provide a weekly lesson plan once each month

- Intervention classrooms only:
  - Participate in SSEL training and consultation-5-7 evening trainings plus monthly classroom observation visits
  - Deliver curriculum activities on a daily basis
  - Fill out implementation checklists and feedback questionnaires
What Centers Get

* All SSEL Curriculum materials, training and support-comparison classrooms will receive kits at end of 2nd year-$400 per kit plus ~$100 per set of reading books to accompany curriculum

* Support for Organizational Liaison salary and Site Administrator salaries--%5 FTE for one administrator and 2.5% FTE for 1-2 building supervisor staff per year

* All teachers receive $50.00 gift card twice a year for completing child social skills and emotion regulation checklists once each fall and spring

* Intervention teachers receive salary support (2 hours either regular or overtime pay) for after hours training; dinner served for trainings

* Intervention teachers & site coordinators receive state validated Quality Rating system CEU credits for evening training series and consenting staff receive a CEU certificate from UMMS for CITI training hours

* Parents receive $15.00 gift card for returning questionnaires twice a year
Collaborative work

* On going coordination with site liaisons and teachers
* Constant adjustment for schedules, activities
* Regular feedback and collaborative brainstorming on enrollment
  Regular feedback on findings—twice a year meeting with center liaison and center staff
* Feedback sessions to intervention teachers and eventually to comparison classrooms
* Will provide kits and initial training to all comparison classrooms
Enrollment/consents: 461 families in Year 1 (86% of all enrolled children)

81% of 16 intervention classrooms completed all weekly curriculum lessons while 3/16 completed 96% of weeks

Observation ratings of lessons averaged 3.46 on scale of 1-5 with 3 being moderately successful implementation

82% of teachers attended all or almost all evening trainings

79% said Second Step was “a lot of help” while 21% said it was “some help” in developing children’s socio-emotional skills and developing positive behavior

74% said they would definitely continue to use the curriculum even if they were not part of the study
How does this feel from the other side?

1. Why organization agreed to participate in the study?
2. What is most challenging about participating in this research?
3. What of the various resources provided are most helpful? Not as helpful?
4. What have been the benefits so far? Of the curriculum intervention? Of research participation?
5. How does this study compare to other research you may have been asked to participate in?
6. Would you do it again?
7. What words of wisdom do you have for other researchers who may want to recruit samples from community organizations and/or involve them in intervention studies?
AUDIENCE QUESTIONS & DISCUSSION
References