



NURTURING THE SOCIAL AND EMOTIONAL WELL-BEING OF CHILDREN AGES BIRTH TO FIVE

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**Mind in the Making Learning Modules for  
Early Childhood Teachers in Massachusetts:**

**Pilot Evaluation Report**

**Executive Summary**

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## **Executive Summary**

### **Mind in the Making Learning Modules for Early Childhood Teachers in Massachusetts: Pilot Evaluation Report October 2008**

The compelling message from decades of social science research is that infants and very young children rely on all significant relationships to support their emotional well-being, intellectual curiosity, language development, and relationships with peers. The research expands what was once a narrow frame to embrace the influence of parents *and* early care and education providers. Nurturing give and take within these significant relationships can provide a foundation for children's success in school. On the other hand, a pattern of problematic exchanges may lead to difficulties in children's learning and self-regulation. Mind in the Making (MITM), developed by the Families and Work Institute, is a 12-part facilitated learning curriculum and pedagogical method that brings this research into the practice of teachers of children from birth to five in center and family child care settings.

In the spring of 2007, a MITM Train-the-Trainer seminar was offered in Massachusetts to 30 participants through a partnership among several agencies including United Way of Massachusetts Bay and Merrimack Valley (UWMB&MV), the Harvard Achievement Support Initiative (HASI), Together For Kids, and Connected Beginnings Training Institute, an initiative of UWMB&MV. In the winter of 2007, HASI began delivering the MITM Learning Modules to three cohorts of family child care providers. With the cooperation of HASI, Connected Beginnings Training Institute conducted a pilot evaluation of one cohort that received training from November 2007 to March 2008. This report describes that pilot evaluation.

#### ***Evaluation Approach and Design***

The long-term goal of developing an evaluation was to provide information to the MA Department of Early Education and Care and other key public and non-profit agencies potentially interested in bringing MITM to scale across the state of Massachusetts. The evaluation had several more specific purposes: (1) to examine providers' experiences with the MITM Learning Modules, (2) to assess how the MITM Learning Modules influence providers' perceived knowledge of and confidence in applying social, emotional, and intellectual principles of MITM in their work, and (3) to pilot measures for a larger scale evaluation. The evaluation had a pre-post without comparison group design. Therefore, any changes in participants' knowledge and confidence cannot be directly attributed to participation in MITM. However, the evaluation provides a first step toward understanding how MITM works for and is perceived by family child care providers.



## *Participants*

Twenty family child care providers and one family child care assistant from six Boston neighborhoods participated in the evaluation. All participants were female. They ranged in age from 23–68 years old, with a mean age of 47.9 years. The majority (57%) of participants identified as Black or African-American; about one-fourth identified as Hispanic. Participants were generally quite experienced in the early care and education field; over half had been in the field for more than 10 years. Four out of the 21 providers who participated in the evaluation had a college degree; 12 additional participants had taken a college course in the past or were doing so at the time of the training.

## *Procedures and Instruments*

After Modules 1 and 12, participants were asked to complete a set of surveys and respond to scenarios reflective of every day situations in child care. These surveys were designed to collect demographic information and measure participants' perceived knowledge of and confidence in applying social, emotional, and intellectual principles of MITM in their work. For piloting purposes, two other single module evaluation surveys were administered after Module 7, one to participants and one to facilitators. Finally, a semi-structured interview was piloted with three providers who volunteered to be interviewed.

## *Findings*

**Participants had very positive experiences with the MITM Learning Modules.** Twenty-one (100%) of the participants found most of the components of the training to be very useful, including interactive activities with the group and their learning partner. Twenty participants (95.2%) found the videos and written learning table activities to be very useful and 19 participants (90.5%) found the journal pages to be very useful. All of the participants were very satisfied with the organization and content of the training.

**Participants said they gained knowledge from participating in MITM, which they could apply to their work with children and families.** Most often cited were learning about the connection between social, emotional and intellectual learning, about how children develop and learn, and about the importance of making connections and communicating with parents and children. Interview responses also suggested that participants thought that the training impacted their relationships and interactions with children and families in positive ways.

**Participants' perceived knowledge of how children learn and develop increased.** A comparison of participants' responses before and after the training suggested increases in their perceived knowledge of social and emotional development in early childhood, intellectual development in early childhood, the role temperament plays



in behavior and learning, language development in early childhood, and the role of memory in learning.

**Participants’ perceived confidence in their skills and abilities in supporting children’s learning and development increased.** Some examples of areas where participants’ perceived confidence increased from before to after the training were: (1) being able to reconnect with children after a misunderstanding, (2) assessing all the ways that children learn, (3) documenting all the ways that children learn, and (4) helping children feel known and understood.

**Participants’ reported comfort with their relationships with children and families improved.** A comparison of participants’ responses before and after the training suggested that providers with less experience improved in their comfort more than providers with more experience. However, this finding is to be expected, as providers with more experience were more comfortable to begin with.

**Participants’ perceived knowledge of how to support children’s learning and development was enhanced.** Participants were presented with several scenarios of typical challenging situations in child care before and after the training. Their responses were more varied after the training. As compared to before the training, after the training participants discussed implementing more strategies that focused on making connections with children and on following the children’s own curiosity and interests.

**Instruments were easy to use, of reasonable length, and reliable.** The majority of participants found the survey measures to be “not very difficult” to complete. Most participants completed each survey in five minutes or less. The single module evaluation surveys administered after Module 7 took longer to complete, but were also rated as “not difficult at all” by the majority of participants. Surveys were also found to be reliable; survey items seemed to be measuring the same constructs for each of the knowledge and confidence subscales.

### ***Discussion and Recommendations***

Overall, the results of this pilot evaluation show that participants had positive experiences with the MITM Learning Modules, and that their perceived knowledge, confidence, and comfort with relationships with children and families generally increased. Participants also seemed to take away several important messages highlighted in the Learning Modules including the importance of making connections with children and families, following children’s interests, appreciating the uniqueness of each child, and understanding and supporting children’s development and learning experiences. These results are consistent with prior evaluation findings (e.g., Zajac, Farber, Shivers, & Barnard, 2006). While the results of this evaluation cannot be directly attributed to participation in the MITM Learning Modules, it seems clear that participants learned a great deal and thought that they would be likely to implement what they learned in their work with children and families.



### ***Implications for Future Implementation of MITM***

- The results of this pilot evaluation suggest that the MITM Learning Modules were well received by family child care providers, indicating that future implementations should continue to reach out to this group.
- Participants seemed to gain knowledge in various content areas related to how children learn and develop. These results might help inform MITM facilitators in choosing areas of emphasis.
- Sixteen participants had taken, or were currently taking, a college course, which suggests that providers are investing in college courses. This information might be useful for institutions that are considering offering a credit-bearing course for MITM.
- The results of the pilot evaluation suggest that participants were receptive to and understood the shift to focusing on their relationships with the children. On-going mentoring has been found to support the integration of this paradigm shift into practice.

### ***Future Directions for Evaluation***

- Efforts to revise survey measures should: (1) revisit the order and wording of questions, (2) assess the validity of the measures, (3) consider shortening the single module evaluation forms or administering them at pre-determined intervals, and (4) create a standardized scoring system for analyzing scenario survey data.
- Additional measures should be selected and/or developed for future evaluation efforts. These should include: (1) a survey measure of objective knowledge and (2) observational measures to assess changes in classroom practices and teacher-child interactions.
- Multiple informants and methods should be used in future evaluation efforts to gain a more complete picture of how MITM works and what its effects are for various stakeholders (e.g., supervisors, directors, parents.)
- A follow-up study might be helpful in assessing the longer-term impact of MITM on practice in early care and education settings.

In conclusion, while this pilot evaluation had several clear limitations (e.g., small sample, no comparison group, lack of objective or standardized measures), its results provide evidence in support of the effectiveness of MITM and the potential it shows for enhancing the professional development of early care and education providers. The evaluation also provides a promising next step toward informing future implementation and larger scale evaluation efforts of MITM.