



# ***EatPlayGrow™*** ACS Training Evaluation **FULL REPORT**

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A Report Prepared for:  
The Children's Museum of Manhattan (CMOM)

Prepared by:  
***BLiP research***

October, 2016

# Introduction/Overview

# Evaluating the ACS/CMOM *EatPlayGrow*™ Pilot

- With a grant from New York Community Trust, New York City's Association for Children's Services (ACS) and the the Children's Museum of Manhattan (CMOM) have developed a new initiative to extend the outreach and impact of its highly successful *EatPlayGrow*™ (*EPG*) early childhood obesity prevention program.
  - One of the desired outcomes of this first year's pilot effort is the creation of a effective scalable model for providing like trainings in the future
- As part of this initiative, CMOM implemented the *EPG* curriculum with a pilot group of 152 Family Child Care (FCC) providers from ACS' network.
- In addition, a Family Festival at CMOM hosted 297 participants drawn from this network.
- In order to examine the program's efficacy, CMOM contracted *BLiP Research*—a New York City-based research and consulting firm specializing in children and families—to conduct an “experimental” protocol to examine how this training model impacts the behavior of participants subsequent to participation.

# BLiP Research

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- In the interest of meeting these evaluative needs CMOM has contracted *BLiP Research* to implement a research protocol.
  - **BLiP research** is a full-service research and consulting practice specializing in the fields of youth, family, media, education, and technology, and often operating at the intersection of two or more of these areas.
  - **BLiP** researchers investigate, assess and synthesize responses to a wide range of products, properties, messages, services, ideas, and experiences.
  - **BLiP research** works in the worlds of both applied and academic research, and pride ourselves on ability to move comfortably between and within the realms of social science and the free market.
- This report will delineate the findings from this research project, and make relevant suggestions for remediation in advance of a larger roll-out of the initiative.

# Objectives

- This research project will have a number of interrelated objectives. These will examine the program from the perspective of those who are receiving it (ACS FCC providers.)
- We will seek to answer the following

<b>COMPREHENSION</b>	<ul style="list-style-type: none"> <li>▪ What do participants understand to be the core content of the lessons?</li> <li>▪ What role do the various program aspects play in impacting comprehension?</li> <li>▪ What are the barriers to comprehension?</li> </ul>
<b>APPEAL</b>	<ul style="list-style-type: none"> <li>▪ Do participants find the trainings appealing?</li> <li>▪ Do they find the forms of communication clear, compelling, accessible, and appropriate?</li> <li>▪ What are their responses to the training's various constituent elements?</li> </ul>
<b>EFFICACY</b>	<ul style="list-style-type: none"> <li>▪ Do the trainings motivate and/or activate participants to utilize/share the curriculum?</li> <li>▪ Does participation influence or impact upon participants' perception of issues connected to early childhood obesity, and its prevention?</li> <li>▪ What are some noted limitations of the program in furthering visitors' understanding of issues related to early childhood obesity, and its prevention</li> </ul>
<b>BEHAVIOR</b>	<ul style="list-style-type: none"> <li>▪ What are the consequences of participation in the program?</li> <li>▪ How are these outcomes interpreted and used to shape future behaviors?</li> <li>▪ In what ways does participation manifest following exposure to the programs?</li> <li>▪ Do participants offer their knowledge to the children/family in their care?</li> </ul>

# Summary of the Research

A full report of the findings will be presented following the completion of all phases of the research

Phase	Methodology	Scope	Sample
1 <i>Exploratory</i>	- Review	<ul style="list-style-type: none"> <li>Examination of all materials</li> <li>.</li> </ul>	<ul style="list-style-type: none"> <li><b>BLiP</b> researchers</li> </ul>
2 <i>Qualitative Insight</i>	- Program Observation	<ul style="list-style-type: none"> <li>Observation of trainings</li> </ul>	<ul style="list-style-type: none"> <li>Attended 6 on-site trainings</li> <li>Attended 2 on-site workshops</li> <li>.</li> </ul>
3 <i>Quantitative Testing</i>	- Pre-Participation Surveys	<ul style="list-style-type: none"> <li>In Depth analysis of participant behavior prior to training.</li> <li>.</li> </ul>	<ul style="list-style-type: none"> <li>All training participants (n=141)</li> <li>.</li> </ul>
4 <i>Qualitative Reflection</i>	<ul style="list-style-type: none"> <li>- Community Event Observation</li> <li>- Onsite Survey</li> </ul>	<ul style="list-style-type: none"> <li>Observation of family event</li> </ul>	<ul style="list-style-type: none"> <li>1 Event</li> <li>All attendees (n=34)</li> </ul>
5 <i>Quantitative Reflection</i>	- Post-Participation Surveys	<ul style="list-style-type: none"> <li>In Depth analysis of participant behavior subsequent to training.</li> </ul>	<ul style="list-style-type: none"> <li>All training participants (n=95)</li> </ul>

# Quantitative “Experimental” Design

- The core of this research involved implementing an “experimental” quantitative protocol. This type of research has three steps:
  1. A group of participants is given a survey to self-report on a series of behaviors prior to participation. This provides a baseline measurement.
  2. These participants are exposed to the experimental intervention, in this case, the pilot *EPG* training.
  3. After a relevant interval to mediate for temporal bias (a tendency to change behavior immediately after an intervention), the same participants are given the same survey to self-report on their behaviors.
    - Impact of the intervention is measured via any differential between the pre- and post-participation surveys.
- This particular research protocol involved the following
  - Pre-participation surveys were distributed at six trainings, with a total of 141 participants
    - These trainings took place during regularly scheduled teacher trainings, allowing a seamless integration into ACS protocol [April 14, April 17, June 16 (two sessions), June 24 (two sessions)]
  - Post-participation surveys were distributed on two separate occasions, after an interval of three-to-five months with a total of 95 participants.\* [September 02, September 22]
- A separate survey was also given to a group of 34 families of children cared for by FCC providers, who attended the CMOM Family Festival, to measure the trainings’ permeating effect—whether and how it made its way from providers to children and families in their care.

\* A careful analysis was made of the 46 participants who did not participate in the follow-up survey, to ensure that they were statistically similar to those who did, guaranteeing the relevance of the findings

# Quantitative Pre/Post Participation Survey

- The survey was presented in English and Spanish by native speakers.

PLEASE PRINT CLEARLY      Name: \_\_\_\_\_  
 email: \_\_\_\_\_ @ \_\_\_\_\_ Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 ACS SURVEY

- How informed do you feel about ways you can help prevent early childhood obesity?  
☐ Not At All    ☐ Poorly    ☐ Moderately    ☐ Well    ☐ Extremely
- How prepared do you feel to share what you know about preventing early childhood obesity with the children and families you work with?  
☐ Not At All    ☐ Poorly    ☐ Moderately    ☐ Well    ☐ Extremely
- How well equipped do you feel to be able to find useful information online about how to encourage healthy habits for children and families?  
☐ Not At All    ☐ Poorly    ☐ Moderately    ☐ Well    ☐ Extremely

Thinking about the kids you care for and their families/caregivers, how often have you done each of the following during the past three months?

	Never	1x / month	2x / month	1x / week	2x / week	1x / day	2x / day
4. Serve a new healthy food							
5. Eat a new healthy food with the kids							
6. Talk about making healthy food choices							
7. Serve vegetables							
8. Serve fruits							
9. Serve juice							
10. Serve water							
11. Provide quiet time for rest or nap							
12. Discuss healthy sleep habits							
13. Discuss the importance of active play							
14. Provide time for active, physical play							
15. Introduce a new physical activity							
16. Provide food/activity to help build strong bones							
17. Adjust the portion size you serve							
18. Talk about appropriate portion size							
19. Sing a song about a healthy habit							
20. Play a game about a healthy habit							
21. Read a book about a healthy habit							
22. Research a healthy habit online							
23. Share info on a healthy habit with parents							
24. Create a game/song/story about a healthy habit							

25. Have you ever participated in a training program about healthy habits (before today)?  
☐ No    ☐ Yes

FOR OFFICIAL USE ONLY: Location: ☐☐ Number: ☐☐☐

USE LETRA LEGIBLE      Nombre: \_\_\_\_\_  
 Correo: \_\_\_\_\_ @ \_\_\_\_\_ Número tel.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 ENCUESTA ACS

- ¿Qué tan informado cree estar en la forma de poder ayudar a prevenir la obesidad en los niños?  
☐ No del todo    ☐ Muy poco    ☐ Moderadamente    ☐ Bien    ☐ Extremadamente
- ¿Qué tan preparado cree estar para compartir información que prevenga la obesidad infantil con los niños y las familias con quienes trabaja?  
☐ No del todo    ☐ Muy poco    ☐ Moderadamente    ☐ Bien    ☐ Extremadamente
- ¿Qué tan provisto se siente de poder encontrar información útil en internet para fomentar hábitos saludables en los niños y sus familias?  
☐ No del todo    ☐ Muy poco    ☐ Moderadamente    ☐ Bien    ☐ Extremadamente

Teniendo en mente a los niños a su cuidado y a sus familias y/o cuidadores, ¿qué tan seguido ha hecho cada uno de lo siguiente en los últimos tres meses?

	Nunca	1x mes	2x mes	1x semana	2x semana	1x día	2x día
4. Servir un nuevo alimento saludable							
5. Comer un alimento nuevo y sano con los niños							
6. Hablar acerca de elegir una comida saludable							
7. Servir verduras							
8. Servir frutas							
9. Servir jugo							
10. Servir agua							
11. Proveer de una hora de descanso o siesta							
12. Discutir hábitos sanos para la hora de dormir							
13. Discutir la importancia de jugar activamente							
14. Proveer tiempo para jugar activa y físicamente							
15. Introducir una nueva actividad física							
16. Proporcionar comida/actividad para ayudar a construir huesos fuertes							
17. Ajustar la porción de comida que se sirve							
18. Hablar de una adecuada proporción de comida							
19. Cantar una canción de un hábito saludable							
20. Jugar un juego acerca de un hábito saludable							
21. Leer un libro acerca de un hábito saludable							
22. Investigar un hábito saludable en internet							
23. Compartir información de un hábito saludable con los padres							
24. Crear un juego/canción/historia acerca de un hábito saludable							

25. ¿Ha participado alguna vez en un programa de entrenamiento acerca de hábitos de vida saludable previo al día de hoy?  
☐ No    ☐ Si

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# CMOM/ACS Family Day Surveys

## CMOM EatPlayGrow - Family Survey

1. How old are your children? (check all that apply)
 

<input type="checkbox"/> 1 year old or under	<input type="checkbox"/> 5 years old
<input type="checkbox"/> 2 years old	<input type="checkbox"/> 6 years old
<input type="checkbox"/> 3 years old	<input type="checkbox"/> 7 years old
<input type="checkbox"/> 4 years old	<input type="checkbox"/> 8 years or older
2. Have you or your child ever visited the Children's Museum of Manhattan (CMOM) before today?
  - ☐ Yes
  - ☐ No
3. Have you ever heard of the *Eat Play Grow* child and family health program before today?
  - ☐ Yes
  - ☐ No
4. If you had heard of the *Eat Play Grow* child and family health program before today, where did you first learn about it? (Check one.)
  - ☐ From a friend
  - ☐ From my child's day care/school
  - ☐ From my child
  - ☐ From another family member besides my child
  - ☐ From the *Eat Play Grow* website
  - ☐ Other: \_\_\_\_\_
5. If you had heard of the *Eat Play Grow* program before today, did you learn any new information about any of the following from that program? (Check as many as apply)
  - ☐ Helping me, my family, or my child make healthy food choices
  - ☐ Helping me, my family, or my child make healthy drink choices
  - ☐ Helping me, my family, or my child have healthy sleep habits
  - ☐ Helping me, my family, or my child understand the importance of active play
  - ☐ Singing a song, playing a game, doing an art project, or reading a book about healthy habits
6. If you had heard of the *Eat Play Grow* program before today, did you or your family, or your child change any of your behaviors about any of the following based on that program? (Check as many as apply)
  - ☐ What we eat
  - ☐ What we drink
  - ☐ How we sleep or prepare for sleep
  - ☐ The amount of time we spend playing actively
  - ☐ The kinds of songs, stories, games, or books about healthy habits that we use
7. If you or your family or your child has changed any of your behaviors about any of the above, how much would you say your behavior had changed? (Check one)
  - ☐ A little
  - ☐ Somewhat
  - ☐ Quite a bit
  - ☐ A lot

## CMOM EatPlayGrow – Family Post-Participation Survey

1. How old are your children? (check all that apply)
 

<input type="checkbox"/> 1 year old or under	<input type="checkbox"/> 5 years old
<input type="checkbox"/> 2 years old	<input type="checkbox"/> 6 years old
<input type="checkbox"/> 3 years old	<input type="checkbox"/> 7 years old
<input type="checkbox"/> 4 years old	<input type="checkbox"/> 8 years or older
2. How do you rate your overall experience at the *Eat Play Grow* training you attended today?
  - ☐ Poor
  - ☐ Fair
  - ☐ Good
  - ☐ Great
  - ☐ Excellent
3. Having participated in the *Eat Play Grow* program today, did you learn any new information there about any of the following? (Check as many as apply)
  - ☐ Helping me, my family, or my child make healthy food choices
  - ☐ Helping me, my family, or my child make healthy drink choices
  - ☐ Helping me, my family, or my child have healthy sleep habits
  - ☐ Helping me, my family, or my child understand the importance of active play
  - ☐ Singing a song, playing a game, doing an art project, or reading a book about healthy habits
4. Did you learn anything today that might change your behavior about any of the following based on that program? (Check as many as apply)
  - ☐ What we eat
  - ☐ What we drink
  - ☐ How we sleep or prepare for sleep
  - ☐ The amount of time we spend playing actively
  - ☐ The kinds of songs, games, art projects, or books about healthy habits that we use

# Findings

# Training Was Enjoyable, Impactful, Sharable

- The *EPG* training was incredibly well received, likely a strong contributing factor to its palatability, as well as its impact.
- While just three-hours long and administered just one time, the training had significant long-term impact on caregiver's knowledge and confidence, regarding information related to preventing early childhood obesity.
- Some of the greatest areas of impact came in caregivers' capacity to find and share information, behaviors which will yield the greatest impact to the communities they serve, especially were the program scaled up.
- The training also had significant effect on notable healthy lifestyle-related behaviors across the range of constituent stakeholders.
  - Caregivers
  - Families
  - Children

# Training Affected Key, Repeated, Scalable Behaviors

- The training had its greatest impact on behaviors that were already occurring most frequently, reinforcing the idea that it is easier to enhance behaviors that are already habituated (to “nudge”) than to introduce brand new behaviors.
  - It would be interesting to conduct research to investigate what further behaviors might be appropriate targets for this kind of suggestive change.
- Participants often noted small changes in behavior, but because the behaviors targeted here are consistent and constant and have high frequency (eating, sleeping, exercising) even small changes can compound to create significant impact.
  - This is particularly true as scale increases.

# Program Was Disseminated to Key Constituencies

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- The pilot training clearly found its way from caregivers to children to families, indicating its communicability.
  - A notable proportion of families of children who participated in the program were made aware of the existence of the *EPG* program.
- These families indicated an increased understanding of issues related to healthy living.
- Families also noted some key behavioral changes based on this program with a full third of families *indicating a large change in behavior* based on the program.
- These gains in the flow of information and action were based on a relatively small sample size, suggesting that a much larger effect could potentially be achieved were the training to be more widely disseminated.

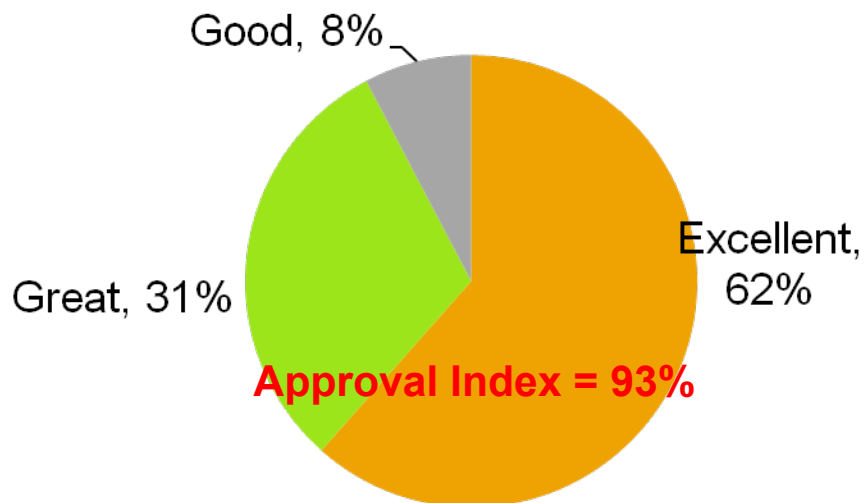
# Success Predictive of Future Scalability

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- The numerous, quantitatively-proven behavioral change indicated from this analysis of the *EPG* pilot training—which were derived from just one touch: a three-hour training—strongly suggest that a this program would lend itself well to a larger, scalable initiative.
- Furthermore, because the *EPG* training was integrated into regularly scheduled ACS FCC trainings, such a program could be readily embedded into the existing childcare professional development mandate of ACS.
- Moreover, the clear and effective chain of dissemination of information and action—from CMOM educator, to ACS FCC caregiver, to children and families served—reinforce the idea of a scalable program providing an exponentially scalable effect.

# EPG Training was Extremely Highly Rated

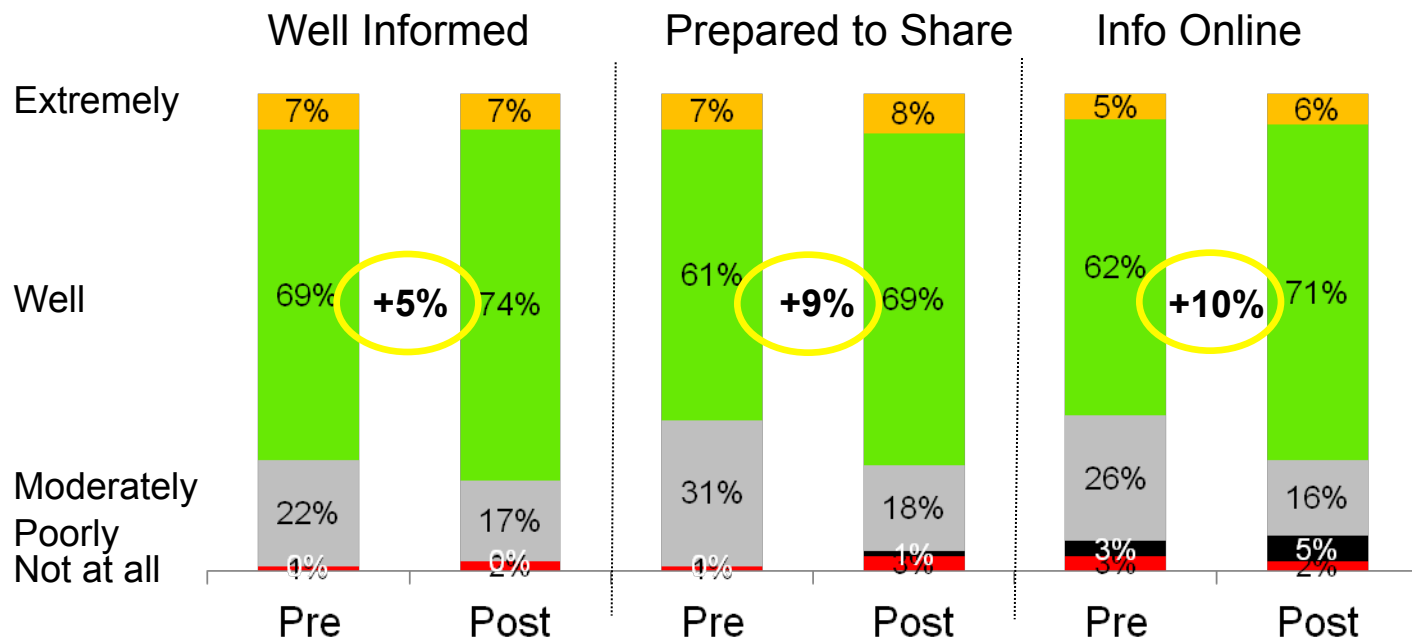
- The approval index—the percentage of participants who rated the program as excellent or great—was extraordinarily high..



Question: How do you rate your overall experience at the Eat Play Grow training you attended today?

# Notable Improvement on All Key Measures

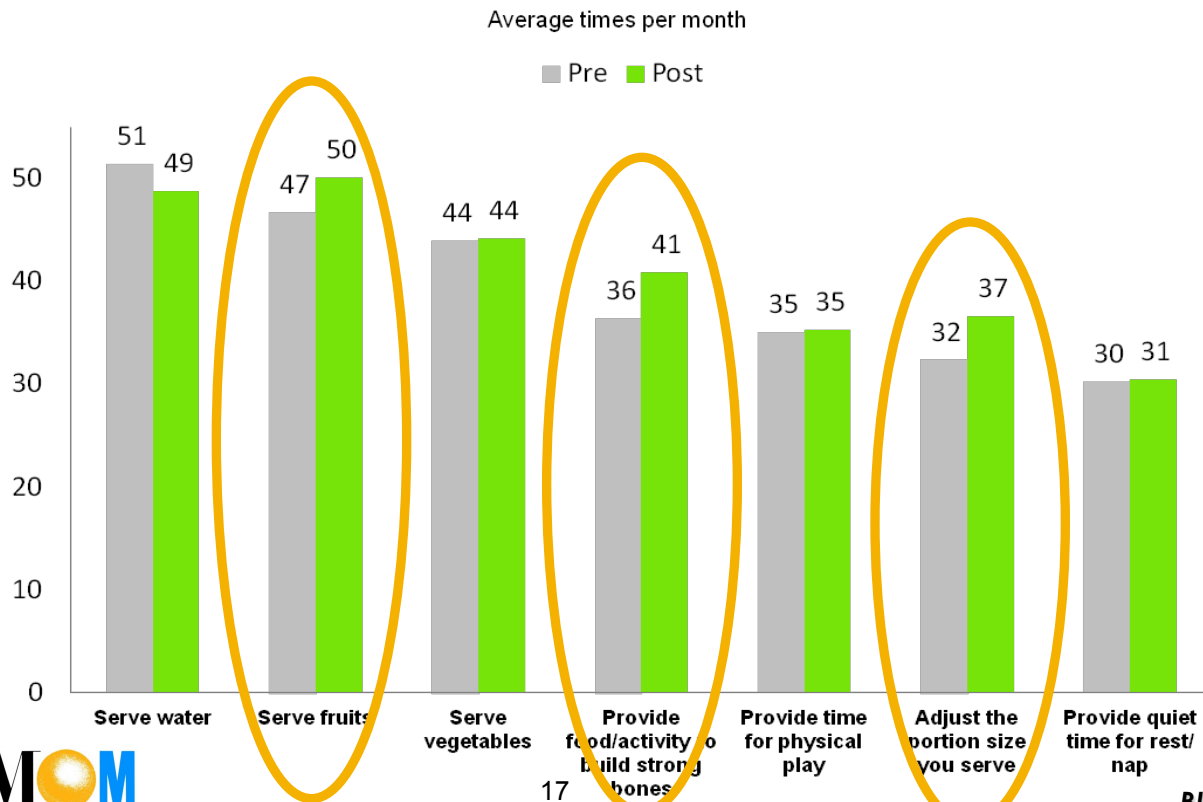
- Caregivers were asked, on pre- and post-participation questionnaires, how well informed, prepared to share, and capable of finding information online they felt about helping to prevent early childhood obesity. The *EPG* training had a significant impact on all three of these key measures.





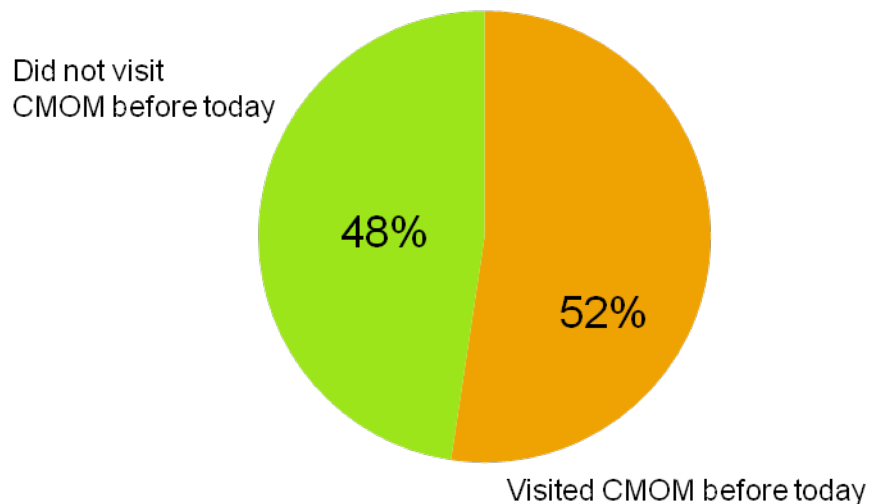
# Key Activities See Increase in Frequency

- A number of key behaviors addressed in the training saw an increase in frequency amongst caregivers, following their exposure.
  - Serving healthy fruits, providing food/activity to build strong bones, and, most notably, adjusting portion size.



## Half of *EPG* Family Festival Attendees New to CMOM

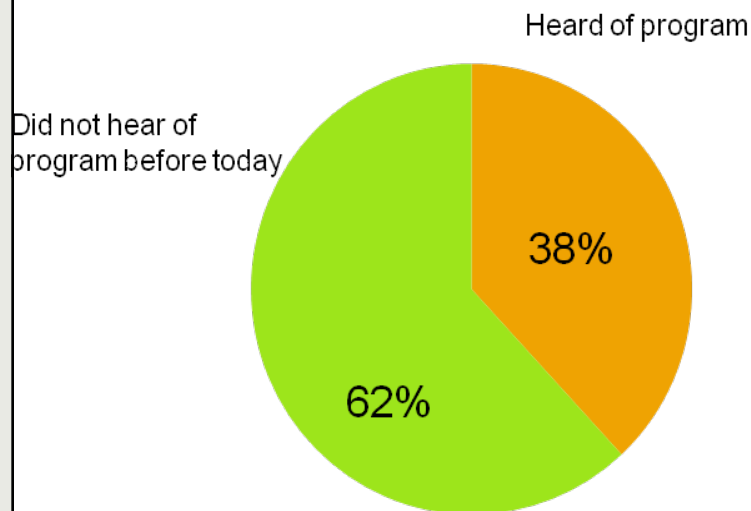
- Nearly half of the family attendees at the CMOM *EPG* activity day were new visitors to the museum.



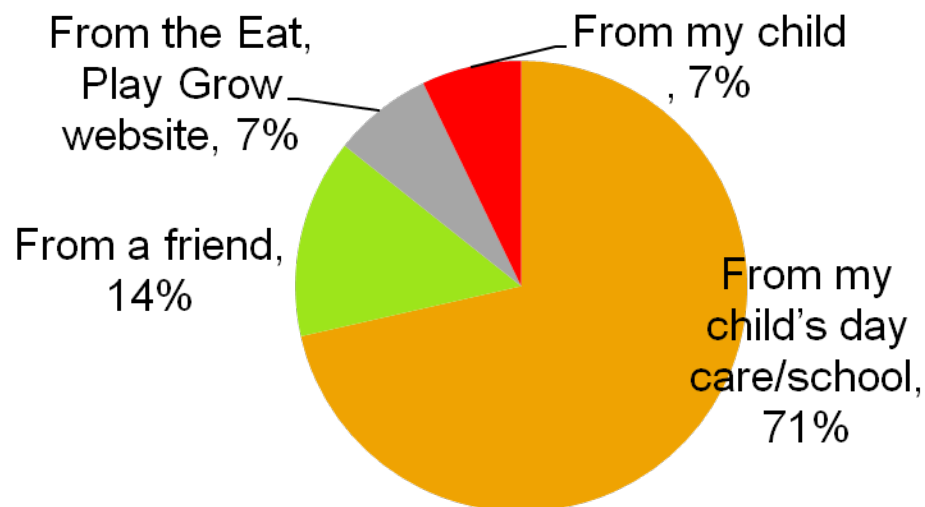
Question: Have you or your child ever visited the Children's Museum of Manhattan (CMOM) before today?

# Many Attendees Were Made Aware of *EPG*

- Nearly two-fifths of family attendees at the CMOM *EPG* program had been made aware of the program prior to attendance.
- Nearly four-fifths of these knowledgeable attendees had learned of the program directly from their child's care provider or from their child, demonstrating a clear flow of information subsequent to the training.



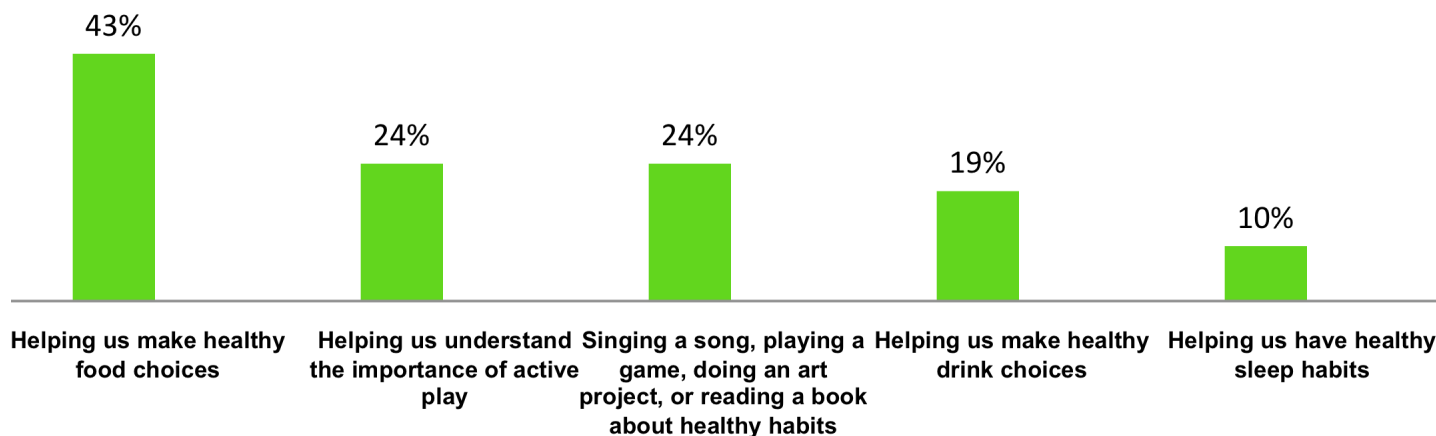
Question: Have you ever heard of the Eat Play Grow child and family health program before today?



Question: If you had heard of the Eat Play Grow child and family health program before today, where did you first learn about it?

# EPG Educated Families About Healthy Decisions

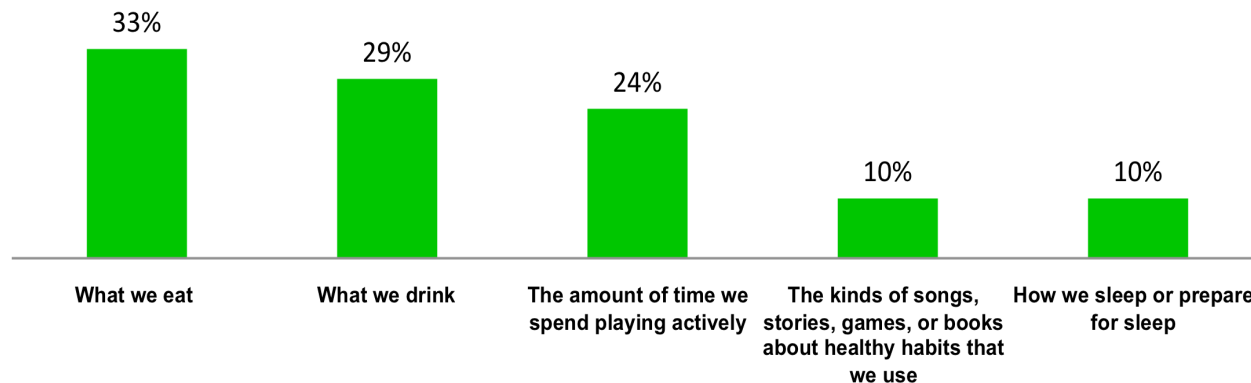
- Participants who were made familiar with the *EPG* program attested that helped them learn how to make healthier decisions.
  - Food choices, active play, and books/games/art/songs related to healthy behaviors were among the strongest points of influence.



Question : If you had heard of the Eat Play Grow program before today, did you learn any new information about any of the following from that program?

# EPG Changed Families Health Behavior

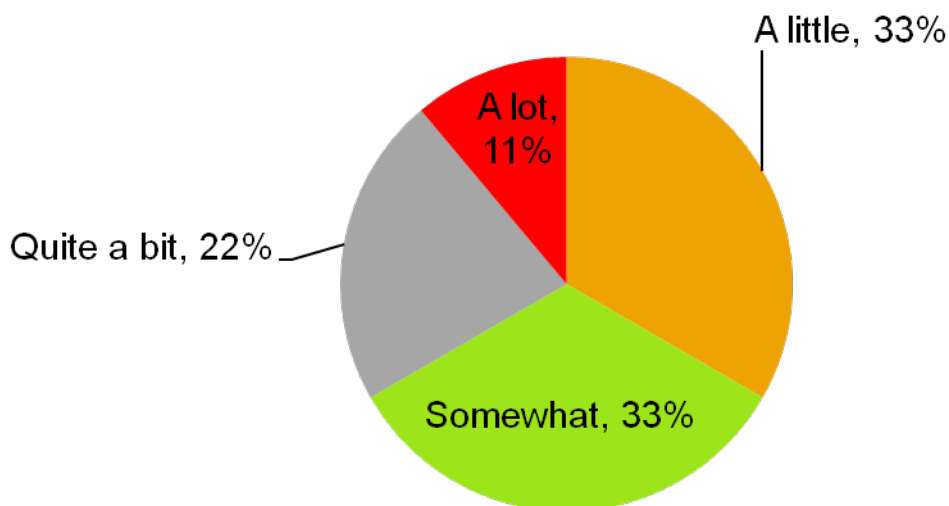
- Participants who were made familiar with the *EPG* program also attested that participation in the program affected their behavior around health.
  - Food and beverage choices, and active play were among the strongest points of influence.



Q : If you had heard of the Eat Play Grow program before today, did you or your family, or your child change any of your behaviors about any of the following based on that program?

# EPG Influenced Significant Change in Some Participants

- At least one-third of participants in the *EPG* program noted that the program affected their behavior around health in significant ways.
  - The other two-thirds felt smaller impact, but still felt impact.



Question : If you or your family or your child has changed any of your behaviors about any of the above, how much would you say your behavior had changed?

# Qualitative Observation Reinforced Positive Findings

- Observations, and the solicited and unsolicited responses of participants, reinforced the quantitative findings: the training was remarkably well received.

*"The information and activities that we've learned are priceless."*

*"Considering that there were two full sessions that lasted the entire day in both English and Spanish, we were so grateful that their energy and positivity never failed to amaze us."*

- The participants found the activities interactive, compelling, useful, and eye-opening.

*"I never knew there was that much sugar in the juices."*

- Participants were strongly motivated by the ability to personalize the activities, and to relate them to their own personal experiences and those of the children and families they serve.

*"We can do these sleep mobiles in whatever way we want. The kids will love that."*

*"I will never get a Dunkin' Donuts muffin again!"*

# Contact Us

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