



Great Strides Begin With Small Steps

Evaluating the Steps Pilot

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In 2020, Michigan was one of 20 states selected by the U.S. Department of Health and Human Services to receive a Preschool Development Grant Birth through Five (PDG B-5) renewal grant. Managed by the Office of Great Start at the Michigan Department of Education (MDE), the focus of Michigan's PDG B-5 is to:

- Prepare low-income and disadvantaged children to enter kindergarten and to improve transitions into school.
- Encourage partnerships between the various providers of services before kindergarten and improve coordination and quality.
- Maximize parental choice in the mixed delivery system of early childhood care and education program providers.¹

Supported by PDG B-5 funds, and as part of the state's overall goal to make Michigan the best state in which to raise a family, the state launched the Steps pilot in July 2020. Steps is a new initiative designed to teach families about early childhood development and provide resources about the different early childhood services available to families. This brief presents findings from the pilot evaluation.

About Steps



Great strides begin with small steps.

Steps is a communications initiative that encourages families with infants and toddlers (birth through age 3) to prioritize their child's learning and development

through age-appropriate everyday interactions and materials. Its purpose is to enhance families' knowledge of early childhood development and give them tools to help their children succeed. The initiative starts by educating key influencers in families' lives (referred to as "Trusted Advisors") such as pediatricians, Great Start to Quality Resource Centers,² and childcare providers about how to talk to parents about the importance of early learning. Influencers then share their knowledge and resources with families. The Steps initiative uses a "train-the-trainer" model, which includes the following phases:

1. MDE trains site leaders, giving them the information and tools to train Trusted Advisors in their communities.
2. Site leaders train the Trusted Advisors in the Steps initiative.
3. Trusted Advisors deliver Steps resources directly to families.

¹ See https://www.michigan.gov/mde/0,4615,7-140-80635_86000-497719--,00.html for more details.

² Great Start to Quality Resource Centers are located across 11 Michigan regions and provide childcare information and resources to families, providers, and programs. For more information, visit <https://www.greatstarttoquality.org/support-networks>

The Steps Pilot

MDE selected six sites with strong leadership as well as a mix of urbanicity and languages in use to participate in the Steps pilot. The Steps initiative pilot combines training with the distribution of Steps materials.

Training. In summer 2020, MDE conducted virtual training sessions for pilot site leaders. These sessions gave sites an overview of Steps and prepared them to train members of their communities in using Steps materials with families.

Materials: Steps materials include three toolkits: one for trainers, one for community partners working with families (Trusted Advisors), and one for families. The trainer toolkit includes a resource sheet, training guide, and tracking sheet to document that Trusted Advisors have completed the training. The Trusted Advisors toolkit includes an overview of Steps materials and how to use them with families as well as sample content about early childhood development to share with families. Trusted Advisors are encouraged to use Steps-branded content for social media, email flyers, and blogs. The family toolkit includes communication materials on how to support healthy child development.

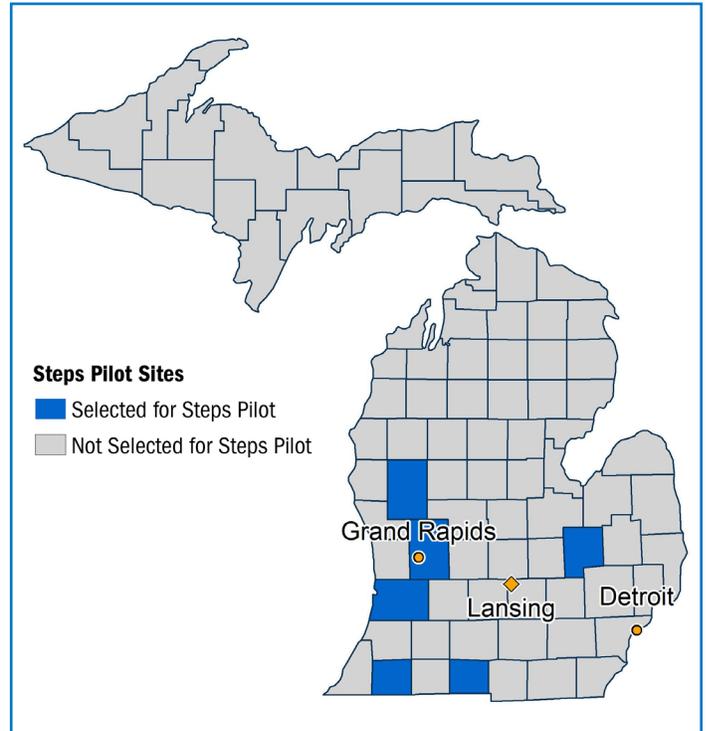
As part of the overall evaluation of Michigan’s PDG B-5 renewal grant, MDE contracted with the American Institutes for Research (AIR) to evaluate the Steps pilot to understand the successes and challenges of the new initiative.

RESEARCH QUESTIONS

The evaluation answered two research questions:

1. To what extent was the Steps initiative implemented as intended, and what were the barriers to and facilitators of implementation?
2. To what extent were intended beneficiaries satisfied with the materials and trainings provided in Steps?

The Steps pilot included training for six sites across the state: Allegan, Kent, Cass, Genesee, Newaygo, and Branch counties. To answer these research questions, AIR collected multiple sources of data.



DATA COLLECTION

1. **Satisfaction Surveys After the Online Training.** The online survey documented participant feedback after the training and the successes and challenges of the training.³
2. **Implementation Follow-Up Survey.** AIR conducted a follow-up survey with the same participants in October 2020 (75% response rate) to learn about Steps implementation at each pilot site.
3. **Monthly Meeting Notes.** AIR collected notes from MDE’s monthly check-in meetings with pilot sites and from MDE’s technical assistance and feedback-gathering meetings with individual sites from December 2020 to March 2021. The monthly check-in meetings were optional for sites, following an “office hours” format. Meeting notes were the primary data source for learning the barriers to and facilitators of implementation.

³ Response rates were high for the July training (75%) and low for the August training (50%).



In general, the Steps initiative was not fully implemented in 2020.

Although each pilot site attended the train-the-trainer sessions in July and August 2020, by October 2020, none of the pilot sites had completed the Steps training for Trusted Advisors.

Steps trainings were challenging, and participants did not feel prepared to train Trusted Advisors after the first session.

In summer 2020, MDE conducted virtual train-the-trainer sessions with Great Start Collaborative Directors, Coordinators, and Parent Liaisons from the six Steps pilot sites, providing an overview of the Steps materials. The training for the Steps pilot was the first one MDE had conducted, and it faced initial challenges. Two-thirds of participants (67%) reported that they did not feel ready to train others to present the Steps materials to families, and most participants (84%) reported not having enough information to train others. Open-ended responses demonstrated that these results may have been partly due to not receiving the Steps materials before the training.

In addition, survey participants reported that the materials were useful but that the training did not demonstrate how to integrate Steps into their communities. MDE received this feedback regarding the initial training sessions and it plans to revise the training and materials going forward.

Steps Pilot sites needed more support on how to integrate Steps into the county, particularly amid similar initiatives such as Talking is Teaching.

In addition to their trainings, MDE invited site leaders to meet monthly with the Family Engagement Specialist. These optional meetings gave sites an opportunity to meet regularly with MDE to discuss Steps implementation, receive support and guidance during the pilot, and share experiences that could inform future statewide implementation. Typically, leaders from only two sites attended these meetings, while others attended less frequently. At these meetings, sites reported wanting to learn more about the following aspects of Steps:

- Concrete strategies for using the Steps materials
- Examples of how to integrate Steps into current practice, particularly amid similar initiatives such as Talking is Teaching or the MDE-funded Trusted Advisor grants
- How to access sufficient Steps materials, and estimating the appropriate quantity needed to serve families in their counties

“Although I am motivated to share Steps with our community, I feel like the training did not prepare me to train others. We were not given the training materials to review or refer to. We did not receive directions (how & when to complete) on the reporting forms or what they look like.”

–Steps Pilot Training Participant

“It would be helpful to have the facilitator role play an example of a discussion we would have with a Trusted Advisor.”

–Steps Pilot Training Participant





Steps Pilot sites distributed Steps materials primarily through existing activities and outreach to families. Some materials, such as milestone checklists, were a good addition to pilot communities, whereas others duplicated materials already in use.

Because Steps is a communications initiative, materials are central to its implementation. The evaluation sought to learn pilot sites' thoughts about and experiences with Steps materials to better understand implementation of the Steps pilot initiative.

On the follow-up feedback survey administered in October 2020, participants reported mixed reflections about the Steps materials. For example, three-quarters of participants (75%) reported that the Steps materials would help families and that the materials were well aligned with the needs of Trusted Advisors, but only about half agreed that Steps materials would be easy to share with families (58%) and that the materials would help Trusted Advisors in their work with families (50%). In addition, open-ended responses on the feedback survey indicated that distribution of the Steps materials from MDE to the pilot sites had been delayed. The slow distribution of materials and sites' uncertainty about the materials' usefulness for Trusted Advisors might explain the generally low implementation among pilot sites and could inform future guidance for implementing the Steps initiative.

During check-in meetings, sites also reported that some materials, such as the [milestone checklists](#), had been helpful and different from materials already in use. Sites had found ways to use these checklists in their work, and one site described them as a "huge win." The milestone checklists outline the developmental milestones of social/emotional, language/communication, cognitive, and movement/physical development of young children at different ages between 2 months and 3 years. These documents help parents know what developmental milestones to look for in their young children and where to get information and support if their child is not meeting expected milestones. Some sites also noted that the Steps social media content calendar was still another piece of helpful material that could fit into their work. This calendar provides ready-to-post ideas for social media alongside the calendar dates. One site reported having used this calendar to post tips to families on Facebook.

Sites reported using materials that replicated existing materials less often or not at all. Most commonly, sites reported that Talking is Teaching overlaps with Steps. Both Steps and Talking is Teaching use early childhood development guidance from the Centers for Disease Control and Prevention, so the content in the informational materials for families largely overlaps. As a result, the Steps materials were less useful for sites that also used Talking is Teaching.

Implementation was challenging for pilot sites, but some sites found ways to deliver Steps materials to families and share the initiative with community partners. Steps' similarity to existing initiatives and inadequate preparation were barriers to implementation.

Facilitators of Implementation

Some pilot sites implemented the Steps initiative by distributing and explaining Steps materials to families and engaging community partners on how to use Steps information with families. Sites with greater success adopted one or both of the following strategies:

- **Leverage Existing Events or Processes.** Activities that sites were already implementing offered a way to distribute Steps materials to families.
- **Establish New Partnerships.** Materials provided a way to "open the door" by offering potential partners items to distribute to the families they serve.

The following support systems provided by MDE facilitated implementation:

- **Opportunities for Collaboration.** The pilot sites learned from and asked each other questions during monthly check-ins. These meetings gave sites an opportunity to hear what others were doing with Steps materials.
- **Brainstorming Ideas Together.** Hearing from others often sparked ideas. During monthly check-in meetings, there were several instances in which a conversation led to the development of ideas for how Steps could work statewide, what gaps it might fill, and how it might work with existing systems and initiatives.
- **Meeting With State Administrators.** Sites had an opportunity to connect one-on-one with MDE’s Family Engagement Specialist. Her expertise and the conversations in these meetings enabled pilot sites to visualize Steps in their communities in creative ways.

Barriers to Implementation

Sites faced challenges when trying to integrate Steps into their communities without duplicating information and confusing families. Some perceived the Steps initiative as additional work rather than helpful guidance. These barriers, along with the challenges associated with the initial training, made it difficult to implement the initiative as intended.

The following barriers contributed to limited adoption of the Steps initiative among pilot sites:

- **Similarity to Existing Initiatives and Materials.** Based on feedback during check-in meetings and open-ended responses to the feedback survey, the primary barrier is Steps’ similarity to existing initiatives. Sites reported concern that a new brand and initiative could be confusing for families, and that initiatives with established recognition could be undermined. Additionally, sites reported that it was important to avoid duplicating work and information from other materials. Among the pilot sites, this barrier seemed especially challenging in urban sites that had established programs with brand recognition among families. Sites facing this challenge noted that Steps did not fit as cleanly into the mix because of the duplicative information.
- **Training Did Not Fully Prepare Site Leaders.** Most survey respondents reported that they did not feel prepared to train Trusted Advisors in their communities—a key component of implementing Steps—about Steps.

“[I would like] support around how to implement on local levels where similar efforts exist. We love the materials but struggling on how do we integrate with what we already have.”

“We got feedback from families and partners that the materials were good but concerned about confusing families by adding what may feel like an additional program (brand) on top of what we already have.”

“No additional supports [necessary], but an understanding of how this information ties into other initiatives already going on in counties. Wondering if Steps will cause confusion for families in counties that already have early learning/literacy initiatives such as Talking is Teaching or Help Me Grow.”

“Steps appears to be similar to other initiatives that are already going on (i.e., Talking is Teaching) which already stress the importance of early education and interaction with children to build brain development.”

–Steps Pilot Training Participants

Were intended beneficiaries satisfied with the materials and trainings provided in Steps?

The second research question focuses on satisfaction with the Steps materials and trainings. Because of the barriers in the Steps pilot, sites did not fully implement the Steps initiative as intended by training Trusted Advisors to engage families with Steps resources. Consequently, the evaluation team cannot currently address the second research question.



RECOMMENDATIONS

The similarity of Steps to existing materials was often discussed during meetings with MDE; therefore, many of the suggestions from sites and MDE's Family Engagement Specialist addressed this challenge.

- **Supplement the Initial Training With Examples and Materials.** Feedback from the training feedback survey indicated the need for a more thorough initial training. Suggestions for improving the training included (a) sharing the Steps training materials ahead of time, (b) adding content that includes concrete examples and ideas for integrating Steps with other local initiatives, and (c) adding a follow-up training to model how trainers could share information with Trusted Advisors and families.
- **Include Consistent Branding Across Materials.** During meetings with MDE, sites discussed the need for cohesive branding across efforts with similar goals, such as Steps and Talking is Teaching, to better integrate the initiatives. Sites noted that, on one hand, MDE branding can be off-putting for families who have had negative experiences with government agencies. On the other hand, cobranding could signal to families that there is statewide cohesion to ensure that families receive the information and resources they need.
- **Use a Clear and Creative Marketing Strategy.** During check-in meetings, sites mentioned that it was unlikely that families would save and use paper handouts. Sites reported that other materials—such as bookmarks, magnets, calendars, and placemats—would be more likely to gain traction with families. Sites reported that they felt uncertain about using the materials, so developing guidance about integrating the materials into what they are already doing would be helpful.
- **Clearly Integrate or Clearly Delineate Steps From Talking is Teaching.** Talking is Teaching most often came up as similar to Steps. One site suggested using Steps to emphasize physical development in early childhood, while Talking is Teaching could focus on early literacy. For example, Talking is Teaching might have a poster reading, “Let’s Talk About Dancing” while Steps would include materials saying, “Let’s Dance!” The two initiatives could play off one another without repeating information.
- **Begin by Integrating Steps in Regions Outside City Centers.** Discussions during meetings revealed that the challenge of overlapping initiatives might be more significant in highly urban areas, where established programs were more likely to have established brand recognition. Based on conversations between site leaders and MDE, there are gaps in information and resources among families farther away from city centers, where transportation and access to established initiatives are more limited. Steps could fill these gaps by focusing on families and Trusted Advisors in these regions.
- **Facilitate a “One-Stop Shop” for Information and Resources.** A couple sites in the Steps pilot mentioned the need for a central location to store information about birthing, early childhood development, programs, and other services. This need was especially present in rural areas, where families tend to have less access to resources and must travel to reach services.



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