RESEARCH AND PRACTICE PARTNERSHIP: BUILDING AWARENESS AND INCREASING SOCIAL-EMOTIONAL CAPACITY IN THE EARLY YEARS

TRAINING REPORT2021





KEY POINTS



EDUCATOR TRAINING

- 7 educators participated from Dixie Bloor, PLASP, and EveryMind.
- 100% of educators reported being very satisfied across all self-paced sessions.



very satisfied (100%) somewhat satisfied (0%) neutral (0%) somewhat dissatisfied (0%)

- very dissatisfied (0%)
- 85% of educators reported being very satisfied and 15% reported being somewhat satisfied across all live group sessions.



CAREGIVER TRAINING

- 5 caregivers of children ages 3-8 years participated.
- 100% of caregivers reported being very satisfied across all self-paced sessions.



- very satisfied (100%)

somewhat dissatisfied (0%)

- very dissatisfied (0%)
- 64% of caregivers reported being very satisfied and 36% reported being somewhat satisfied across all live group sessions.



INTRODUCTION

Children's well-being and positive development are of utmost importance to the future of our society. Already existing concerns related to child well-being have been exacerbated by the COVID-19 pandemic, with many reports indicating declines in child emotional and behavioural well-being since the start of the pandemic.

Research and Practice Partnership: Building Awareness and Increasing Social-Emotional Capacity in the Early Years (RAISE) is a research-practice project funded by the SSHRC Partnership Development Grant focused on the promotion of socialemotional development and emotional and behavioural wellbeing in young children and families in Canada.

RAISE AIM

RAISE aims to support existing strengths and address challenges by gaining a better understanding of the current strengths and needs of children living in Peel, and by applying this knowledge to provide support to children and families through a socialemotional training initiative.

The current report provides a brief evaluation of an initial implementation of our online training initiative on 7 educators and 5 caregivers (N = 12) living or working in the Peel Region, Ontario, Canada.



Social Sciences and Humanities Research Council of Canada



RAISE is a multidisciplinary collaboration between the Centre for Child Development, Mental Health, and Policy (CCDMP) at the University of Toronto Mississauga and our Early Years and Child Care sector partners in the Peel Region.

The RAISE Project's Training Advisory Committee and subcommittee working groups played an essential role in the development, implementation, and evaluation of our objectives. The Advisory Committee is co-chaired by the CCDMP and Early Years and Child Care Services, Region of Peel.

Our community partners are the Region of Peel, Child Development Resource Connection Peel, Dixie Bloor Neighbourhood Centre, EveryMind Mental Health Services, and PLASP Child Care Services.











OUR TRAINING

Our training was developed based on 20+ years of research spanning over 200 publications in the areas of child social-emotional development and adversity from Dr. Tina Malti and the CCDMP. The social-emotional training framework takes a developmental-clinical and strengths-based approach to address needs by building upon competencies. Three core components of social-emotional development — the 3 E's — are emphasized:



Three online modules were delivered weekly, over the course of 3 weeks



Each module included a self-paced video session and a virtual live group session.

Participants were invited back for 2 follow-up sessions to share feedback and evaluate successes and barriers to continuing to implement the content and strategies learned in the training:

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Follow-up session 1: One week after the final module, in June 2021
Follow-up session 2: Two months after the training, in August 2021
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METHOD

Twelve educators (n = 7) and caregivers (n = 5) participated. Eligible educators worked with or supervised those working with children (ages 3–8) and families at one of our community partner organizations. Eligible caregivers were parents of children ages 3–8 living in Peel. Participants were recruited through our community partner organizations via flyers, social media posts, and word-of-mouth during virtual programming. All participating educators and caregivers identified as female.

The training was delivered entirely online in May 2021 using a combination of asynchronous video sessions and synchronous live group sessions that were facilitated by three members of the CCDMP team, which included a clinical psychologist, a developmental psychologist, and a community engagement expert.



The core knowledge-based training content was delivered during the self-paced sessions using audio-narrated videos. The live group sessions included 3 components: a group discussion of the self-paced session content, a group activity to provide opportunity for participants to practice applying the training concepts and strategies, and a mindfulness component. The training was delivered using the Learning Management System ADOBE Captivate Prime.



EDUCATOR DEMOGRAPHICS





CAREGIVER DEMOGRAPHICS



IMPACTS OF COVID-19

Participants reported on impacts of COVID-19 across various levels of their lives, including changes in self-care (i.e., the actions or efforts one takes to support their own well-being, such as exercise, hobbies, or time for relaxation) and access to social supports (i.e., access to extended family and nonfamily social supports). Responses on reports of changes in the areas of self-care and access to social supports are reported below to provide a glimpse of the severity of changes participants reported experiencing due to the pandemic.



EDUCATOR COVID-19 IMPACT



CAREGIVER COVID-19 IMPACT

Educators and caregivers also reported on any changes (negative and positive) they have noticed in child behaviour or development since the start of COVID-19. Example responses are provided below

"Children have lost chances for in-person playing and learning in a group with other children." "My daughter...enjoys being outdoors and playing with friends rather than staying at home. Staying isolated and at home has affected her emotional behaviourshe gets cranky and cries over every little thing."

"[She's] becoming independent like doing online classes on her own, eating, changing clothes, helping adults with household chores, can feel others' emotions."

"When supported by a nurturing adult children show resiliency, adaptability to change and openness to learning."

TRAINING EVALUATION RESULTS

TRAINING ATTENDANCE

 6 of 7 educators completed 100% of the self-paced sessions, 1 educator completed 67% of the self-paced sessions



• 6 of 7 educators attended all 3 live group sessions, 1 educator attended 2 of the 3 live group sessions



 4 of 5 caregivers completed 100% of the self-paced sessions, 1 caregiver completed 17% of the self-paced sessions



• 4 of 5 caregivers attended all 3 live group sessions, 1 caregiver attended 1 of the 3 live group sessions



Educators and caregivers reported on several fidelity indicators, including:

- 1) Transferability of the training
- 2) Overall satisfaction with the training
- 3) Learning throughout the training

1. Transferability of Training

Across all three self-paced sessions, **100%** of respondents reported that they would use the strategies **to a large extent:**



"I always feel bad if I get upset at my kids and feel like a bad mom. I love the strategies suggested here." "Great setting the stage for gradual walk through social emotional capacities from developmental and learning perspective." "This was an excellent module for childcare centre staff, that can be shared with parents and supported within the classroom team."

"Very interactive... (great to) learn strategies from fellow mothers."

2. Overall Satisfaction with the Training







3. Learning throughout the Training

"Great platform to learn

new strategies from

fellow mothers and instructors."

a. Participants reported on the extent to which they felt they learned something new:



TO WHAT EXTENT DO YOU FEEL YOU LEARNED SOMETHING NEW? (EDUCATORS)

TO WHAT EXTENT DO YOU FEEL YOU LEARNED SOMETHING NEW? (CAREGIVERS)



Note. M1 = Module 1; M2 = Module 2; M3 = Module 3; SP = self-paced session; LG = live group session.

b. Starting from Module 2, participants also completed several learning-based items to further assess changes in understanding of key training content:



Note. The shaded yellow lines reflect individual data from participants who completed the pre-survey, post-survey 1 (after the self-paced session), and post-survey 2 (after the live group session). The thick green line reflects the average trajectory of change across individuals.

NEXT STEPS

Updates to be made based on feedback from surveys and virtual feedback session

SELF-PACED SESSION ADJUSTMENTS

- Text and language-based adjustments to be made to the self-paced sessions to incorporate various educator and caregiver feedback (i.e., removal of mention of "good child" to focus instead on "good" decisions, simplify some of the language in caregiver module 3).
- Short videos using animation will be incorporated throughout the self-paced sessions to support those who are visual learners (without increasing the length of the self-paced sessions).
- Based on positive feedback on the use of reflection questions, more reflection questions will be incorporated throughout the self-paced sessions.

LIVE GROUP SESSION ADJUSTMENTS

- Given participant feedback about limited time, the length of the live group sessions will be increased from 45 minutes to 1 hour to allow for more time for breakout room discussions and larger group discussions.
- Group session capacity will remain small where possible (~6-8 participants per session).
- Adjustments to the structure of the live group session were made after Module 1 (i.e., moving mindfulness from the beginning to the end) and were well received by participants. This update will carry through to the pilot.

ADDITIONAL RESOURCES

• In addition to the existing key points handouts, educators suggested developing a 1-page "cheat sheet" of key messages that participants can reference during the live group sessions (we also plan to provide our live group discussion questions in advance on the key points handouts).

EVALUATION-BASED UPDATES

- The surveys will be re-organized to include one longer pre-survey at the beginning of the training instead of separate pre-surveys prior to each module.
- Pre-post learning-based items will be expanded to span all 3 modules, and additional follow-up surveys will be completed 1 week and 2 months after the training to provide a more robust evaluation of the training.

PARTICIPANT ENGAGEMENT

• To maximize attendance and participation throughout the training, in addition to weekly email reminders, we will use more personalized email check-ins to engage with participants throughout the week.

MID TERM NEXT STEPS

Further updates to be made based on caregiver and educator feedback:

- Developing an opportunity for a chat group between participants (e.g., Facebook or WhatsApp group; our short-term solution for this is to include a discussion board on the Learning Management System).
- Developing videos or visuals that explain concepts and provide examples that parents could watch along with their child(ren).
- Creating more opportunities for continued learning beyond the training.

Our training initiative will continue to be implemented in Fall 2021 with our pilot training for caregivers and educators in the Peel region.





Thank you to our partners and funders.

Please reach out with any questions or inquiries:

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PLASP









