What is the community challenge?
For decades, it has been recognized that the gap in school achievement between socio-economically advantaged and disadvantaged children is apparent as early as school entry (Entwistle, Alexander, & Olsen, 1997; U.S. Department of Health & Human Services, 2000). Children from low income backgrounds tend to enter school with fewer literacy and social skills than their peers (Foster, Lambert, Abbott-Shim, McCarty, & Franze, 2005; Hair, Halle, Terry-Humen, Lavelle, & Calkins, 2006). Deficits in early school readiness increase risks for long-term academic and social problems which, in turn, may lead to lower rates of educational and occupational attainment, and higher rates of drug use, delinquency, and mental health difficulties (e.g., Fothergill et al., 2008; Shochet, Dadds, Ham, & Montague, 2006; Wiesner & Windle, 2004).

What is the promising solution?
The Kids in Transition to School (KITS) program represents a potential model for addressing these gaps in early school readiness. KITS is a relatively brief (12 to 16-week) program designed to help prepare high-risk children and their parents for entry into elementary school. It focuses on teaching 4-and 5-year old children prosocial and self-regulation skills that are critical for school readiness and positive school adjustment, and introduces early literacy, print, and numeracy concepts. Additionally, parents participate in workshops in which they learn skills for supporting learning at home, promoting positive child behaviors, teaching new skills, and becoming involved in their child’s school.

What was the purpose of evaluation?
As a SIF grantee, United Way of Lane County engaged an independent evaluator to evaluate KITS. The evaluation of the KITS program was conducted by the Center for Improvement of Child and Family Services at Portland State University began in July, 2016 and finished reporting in November, 2017. The evaluation had both impact and implementation components. The impact evaluation assessed the effects of KITS on both child and parent outcomes using two methodological designs: (1) a quasi-experimental design (QED) with a sample of approximately 650 children and their parents, and (2) a randomized control trial (RCT) with a subsample of approximately 130 of the QED participants who were randomly assigned into treatment and control groups. There was also an implementation evaluation focusing on recruitment and retention practices, attendance, participation in other school readiness programs, the experiences of Hispanic/Latinx parents and children in KITS, and the influence of KITS training on teacher practices.

What did the evaluation find?
The impact and implementation evaluations found:

- KITS led to significant changes in parents’ self-efficacy and confidence in supporting children’s readiness and success in school. The RCT produced a moderate level of evidence for these impacts.
• The evaluation also produced moderate evidence to support KITS’s ability to foster the key positive relationships between parents and kindergarten teachers and school staff.
• There is also preliminary evidence that KITS may lead to improvements in parenting skills, specifically parents’ abilities to set clear boundaries and more effectively support children’s self-regulation.
• This study did not detect any significant effects with regard to child outcomes, although larger samples may be needed.
• Interviews with staff and Latinx parents suggest key areas where the program could be improved to better engage and support Latinx parents and children.
• Implementation support in the form of staff to help with outreach and recruitment of families and ongoing training and coaching of KITS staff is critical to success.
• Kindergarten teachers who were trained to deliver the KITS curriculum reported that they gained important new knowledge and skills for better supporting positive child behavior, and that they subsequently used these in their regular classroom teaching.

Notes on the evaluation
Although the KITS evaluation did not uncover any significant effects on children, it is important to note that the measures included in this study, especially those related to more “academic” outcomes are not the primary focus of the KITS program. Further, for measures of child self-regulation and social skills, the study relied primarily on parent report measures – and not on what may be more directly influenced by KITS, namely, child behavior in the classroom setting. Given the emphasis of the model on helping children build the self-regulatory and social skills needed within the classroom environment, using measures based on teachers’ ratings of student behavior may yield more promising results. Further, it should be noted that the sample sizes for the only direct measure of self-regulation were small and therefore these analyses may have lacked power to detect statistical significance. For several key child outcomes, the pattern of results did, in fact, suggest that KITS children improved in these areas to a greater extent than did controls; however, the sample size may have been insufficient to detect these differences.

How is United Way of Lane County using the evaluation findings to improve?
KITS program developers made a number of key modifications during the 2017-18 implementation of KITS to better meet the needs of Hispanic/Latinx families. Interviews with staff and Latinx parents suggest the program could be improved by better engaging and supporting these parents and children. The evaluation also notes that further research on the KITS model would do well to focus on increasing the sample size within a rigorously designed (e.g., randomized) study, collecting measures of child behavior either through classroom observations or from teachers, and on identifying key characteristics of families or children who might be most likely to benefit from the program.

Evaluation At-a-Glance
Evaluation Designs: RCT, QED
Study Population: High-risk (in terms of school readiness) children and their parents preparing for entry into elementary school
Independent Evaluators: Beth L. Green et al.; Center for Improvement of Child and Family Services Portland State University
This Evaluation’s Level of Evidence*: Moderate

*SIF and AmeriCorps currently use different definitions of levels of evidence.

The content of this brief was drawn from the full evaluation report submitted to CNCS by the grantee/subgrantee. The section of the brief that discusses evaluation use includes contribution of the grantee/subgrantee. All original content from the report is attributable to its authors.

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