**EXECUTIVE SUMMARY**

Creative approaches to obesity prevention have begun in Head Start with a program enhancement called "I Am Moving I Am Learning" (IM/IL), which is intended to (1) increase the quantity of time children spend in moderate to vigorous physical activity (MVPA) during their daily routine; (2) improve the quality of structured movement activities that are facilitated by teachers and adults; and (3) promote healthy food choices for children each day. In the spring of 2006, Head Start Region III provided 53 Head Start programs with a 2½-day IM/IL training-of-trainers (TOT) event for up to five staff members per program. The trainers and Region III staff encouraged participants to tailor the IM/IL enhancements to their own programs. The Office of Planning, Research, and Evaluation (OPRE) under the Administration for Children and Families (ACF) contracted with Mathematica Policy Research, Inc. (MPR) to conduct an implementation evaluation of the IM/IL enhancements in Region III. The purpose of this study is to examine the extent to which grantees who participated in the spring 2006 regional TOT event are implementing IM/IL enhancements. In spring 2007, MPR conducted a survey of the 53 Head Start programs that had participated in the TOT event.

The key findings from the survey include:

- One year after the TOT event, the participating programs gave the training a positive overall rating. Respondents rated the event highly on its organization and the information that was presented. However, 40 percent of directors wanted more time to plan their own implementation during the TOT event.

- Ninety-six percent of programs tried to implement IM/IL in the year following the training event. Over 60 percent of programs provided pre-service and in-service training on IM/IL. The total number of training hours in each program was a median of 6 hours per program (range 1 to 24 hours).

- Programs implemented more enhancements related to MVPA and structured movement than enhancements related to nutrition.

- As part of IM/IL, two-thirds of programs offered activities to alter the eating and physical activity behaviors of parents, and half did so with their staff. Half the programs reported having identified at least one community organization as a partner. Forty-four percent of programs were doing all three.

- Almost half of the programs perceived that they were successful in implementing IM/IL. Enthusiasm of staff and the quality of the TOT event were the two most commonly reported factors contributing to the success of implementation. Compared to programs that did not perceive themselves as implementers, high implementing programs were more likely to leave the TOT with a written plan for their IM/IL implementation. However, among all programs with a written plan following the TOT, roughly the same percentage of high implementing and other programs had a plan one year later. High implementing programs provided twice as many hours of training to staff relative to other programs.

- It is not clear that the current program-level implementation efforts can be sustained. One year after the training event, only half of the programs reported
having a written plan for IM/IL implementation. Many programs have enthusiastic staff and a capable leader directing the IM/IL efforts, but many reported that program managers did not have enough time to devote to IM/IL.