



Recommendations for Improved Alignment **among early childhood programs at the state and local level**

With support from the MCHB, the Association of Maternal & Child Health Programs (AMCHP) sought to develop a roadmap of actionable strategies and recommendations to increase collaboration among Title V, MIECHV, and ECCS within states and jurisdictions to create meaningful change and accomplish shared early childhood goals. Creating a roadmap required several activities. AMCHP staff conducted an environmental scan of the current state of partnering, collaboration, coordination, shared activities, synergies, and shared vision among the three programs; outside expert MCH consultants performed a qualitative analysis of the scan data to reveal themes and recommendations; and finally, AMCHP staff initiated a pilot of a collaboration framework that states and jurisdictions can use to develop a joint Title V/MIECHV/ECCS action plan.

Methods

The qualitative analysis that informed this roadmap involved three sequential stages:

- (1) Gathering data using an environmental scan of state/jurisdictional MCH Services Block Grant documents by accessing the Title V Information System (TVIS) and conducting key informant interviews and focus groups
- (2) Coding the environmental scan documents using a qualitative data analysis software
- (3) Analyzing qualitative data from the coding process into key themes and recommendations to improve early childhood collaboration.



Environmental Scan

AMCHP staff conducted an environmental scan, beginning with searches of all 59 fiscal year 2019 Title V Block Grant applications using TVIS, MIECHV plans and reports, and ECCS performance narratives (for states with ECCS grants). AMCHP staff also conducted key informant interviews and three focus groups of Title V, MIECHV, and ECCS program staff and relevant program-specific experts to identify: factors that facilitate or inhibit collaboration between these three programs; opportunities for improved collaboration among early childhood investments; characteristics of ideal partnerships with early childhood agencies or organizations to achieve target early childhood outcomes; and support needs to engage effectively with early childhood and public health stakeholders to advance early childhood priorities. These interviews and focus groups were recorded and then transcribed.



Coding the Qualitative Data

Based on the environmental scan, a subset of 18 states was identified based on their current early childhood programming. The qualitative analysis was conducted for 12 states that have current Title V, MIECHV, and ECCS grants and six states that did not have a current ECCS grant but have ongoing early childhood systems building efforts. To conduct the qualitative analysis, Title V Block Grant applications, MIECHV plans and reports, and ECCS performance narratives (for states with ECCS grants) from the environmental scan were reviewed. AMCHP partnered with external MCH consultants from the Center for the Study of Social Policy and Johnson Group Consulting, Inc. to conduct an expert qualitative analysis of the data.³ The external qualitative analysis experts used MaxQDA qualitative data analysis software to code data from the environmental scan based off a codebook that AMCHP staff designed. The codebook was updated and adapted as the external MCH consultants identified common themes and missing topics.^{4,5} Two members of the consultant team independently coded the data to ensure quality, reliability, and validity of the coding process. This qualitative data analysis process consisted of a series of iterative steps, which included reading, coding, displaying, reducing, and interpreting.^{6,7,8}



Analyzing and Interpreting Coded Data

The qualitative analysis team used a two-stage analysis approach to interpret the results of the coded data and translate the findings into high-level themes and recommendations for action. In the first stage, two MCH professionals highly experienced in MCH programs' context and frameworks discussed, described, and identified the key themes that emerged directly from the output of coded documents. They then added additional comments to the coded documents to underscore themes and illustrative examples. In the second stage, with the support of the qualitative research software, these same professionals used coded results on specific topics to identify patterns, trends, and frequencies of occurrences (e.g., for many, some, or only a few states), to then draw conclusions about the most common findings and lessons learned.

Note that the qualitative analysis had several limitations. Due to the highly structured nature of the data collected for the analysis, some elements of a state's early childhood work were not included in the analysis. Therefore, the results cannot be used to compare states that have ECCS grants to states that do not. In addition, this study had a small sample size and limited representation in focus groups and interviews; thus, results from that aspect of the qualitative analysis may not be generalizable to other states and jurisdictions.



Common themes and key findings

The qualitative analysis revealed the following themes and key findings:

Importance of a Shared Vision

States that have well-articulated early childhood visions indicated that Title V, MIECHV, and ECCS investments are more integrated and innovative than states that do not have well-articulated visions for their early childhood programs. Without a shared statewide early childhood vision, states' early childhood program investments are more likely to be siloed and function as individual programs. A shared vision was often created by leadership groups that report to the Governor's office (like the Department of Early Childhood) or a cross-agency, state-level leadership body (such as an early childhood coordinating council).

Impact of State Structure and Governance

The structure of state governance and individual leadership has a major impact on early childhood systems building.

- Collaboration is higher in states where ECCS and MIECHV are located within Title V programs or where Title V, MIECHV, and ECCS are all located in the same division, department, or building. When early childhood programs are more siloed across different agencies, there is less alignment and collaboration.
- Early childhood systems building is most supported when an MCH agency leads the programs and initiatives. Doing so allows for shared investments and greater coordination.
- States that have made early childhood a long-standing priority are experiencing steady early childhood systems building. These states are positioned to grow with new initiatives. MCH programs that have long-standing partnerships in state government have greater influence and opportunity to advance early childhood systems building. Collaboration is weaker in states that have not had a long-standing agenda or that experience comparatively greater turnover in leadership.
- Strong leadership and experience with systems building are crucial elements for advancing early childhood program collaboration. Strong leaders demonstrate the ability to clearly articulate a vision for early childhood systems building; are experienced in building and developing partnerships and collaborations across agencies and departments; and have experience in clinical, field, and state MCH and public health settings.
- States that have intentionally coordinated or merged early childhood advisory councils and committees experience greater collaboration, alignment, and shared resources among Title V, MIECHV, and ECCS programs.

*MCH programs that have **long-standing partnerships** in state government have greater influence and opportunity to advance early childhood systems building.*

Alignment of funding opportunities

States that leverage grants and funding beyond Title V, MIECHV, and ECCS have a more coordinated early childhood system focus. Opportunities to partner with philanthropic groups or organizations that focus on early childhood systems building can enhance efforts. Untapped opportunities exist to partner with Medicaid on early childhood and on transforming systems of care for young children.

Targeted topic and practice initiatives drive collaborations

States use technical assistance and training on relevant early childhood topics (such as breastfeeding, developmental screening, maternal depression screening, and equity) to drive collaborations among Title V, MIECHV, and ECCS programs. Cross-system trainings are typically driven by specific program funding, with some driven by collaborations with external partners, such as [Help Me Grow](#).

Aligned data, indicators, and metrics drive change

A collaborative data agenda or shared measures drives collaboration and partnership between Title V, MIECHV, and ECCS for decision-making, programs, and policy. For example, a history of data integration within Title V often led to expansion of data integration with MIECHV and ECCS. Some early childhood data efforts focus on a shared goal or measure; others focus on integrated data approaches and data systems. ECCS provides an opportunity to align and integrate data processes because of the program's emphasis on creating linked and coordinated data systems to promote developmental health in early childhood.

Strong leaders demonstrate the ability to clearly articulate a vision for early childhood systems building; are experienced in building and developing partnerships and collaborations across agencies and departments; and have experience in clinical, field, and state MCH and public health settings.

Systems-level initiatives drive alignment

Systems-level initiatives can help drive early childhood systems building and the collaboration between Title V, MIECHV, and ECCS programs. Two significant system drivers for early childhood systems building are Help Me Grow and centralized intake and referral initiatives.

Partnerships for purpose

Partnerships were widely noted as essential for systems building, but were used to varying degrees. **Appendix A** depicts the types of partnerships reported among the states included in this analysis. Of the three key early childhood programs, Title V showed the greatest opportunity to engage cross-sector partners for specific initiatives, especially as it relates to activities supporting National Performance Measure 6 on improving the rates of developmental screening for children 9 to 35 months of age. Several potential partnerships were reportedly underused, including Medicaid, the pediatric medical home, and engagement of the broader child health sector.

Parent leadership and engagement

Early childhood systems building efforts aim to assess and improve family engagement in systems-level initiatives to ensure that the voices of individuals, families, and communities are included when policies and practices governing these services are created. Title V, MIECHV, and ECCS each have requirements for family engagement and ensuring parents and caregivers have a voice at advisory and community leadership boards. However, family engagement strategies vary widely across programs, and the impact of family participation can be difficult to measure and is rarely formally documented.

Needed action for health equity

Equity, or health equity, was frequently noted as a priority for early childhood efforts. Many states have broadened equity and social justice agendas across Title V, MIECHV, and ECCS. However, few states reported taking programmatic or systems-level action to address equity.

Community-informed systems building

Input, feedback, and alignment between state and local leadership is important for early childhood systems building; however, the extent to which states are informed by communities varied. Some early childhood state programs are informed by community councils or collaboratives; others created local structures and state support for community collaboratives. Community leaders often know their community needs better than the state leadership. Trusted communication is key but it can be challenging to balance different agendas and the state and local relationships.

Siloed funding and reporting results in less systems development

Some states noted successful efforts to combine, or braid, different sources of funding to sustain early childhood systems building; however, many faced barriers. Barriers include varied grant/funding reporting structures, different requirements for data and performance reporting, and silos in funded activities.

“MCH programs, through the influence of CSHCN and the emerging equity movement, have been strong champions for parent leadership, engagement, and family voice in all MCH programs, initiatives, and activities.”³



Recommendations

Results of the qualitative analysis included the following recommendations for early childhood systems leaders to improve collaboration between Title V, MIECHV, and ECCS programs:



Establish a shared state/jurisdiction vision of early childhood.

State- and jurisdiction-level early childhood program leaders should collaborate to develop (and maintain) a shared statewide vision for early childhood. The collaboration should include representation from, at a minimum, MCH, education, childcare/early care and education, child welfare programs; and family leaders and family/community supports. Collaborations need to define each program's (or individual's) role in advancing the shared vision.



Promote state/jurisdiction agency structure, leadership, and governance that supports early childhood systems building.

Early childhood systems building programs and initiatives, including Title V, MIECHV, ECCS, and related early childhood efforts, should ideally be placed in the same department, division, or agency to advance collaboration and coordination. For states where Title V, MIECHV, and ECCS sit in the same agency, exercising "intentionality" is important when forming teams and proper mechanisms must be in place to ensure regular collaboration (e.g., regular meetings and joint trainings). Strong leadership is also key to promoting a coordinated early childhood system. Program leadership should promote the state vision for early childhood systems building and support collaboration and partnership building across agencies and departments. Finally, it is important to align or merge early childhood advisory panels or councils to ensure a unified vision and systems building efforts.



Map and align current and future funding opportunities.

Leaders of early childhood programs should examine which programs and initiatives support their early childhood vision, describe how each program supports the vision, and identify new funding and partnership opportunities.



Enhance partnerships with and optimize the role of Medicaid.

Leaders of early childhood systems building programs and initiatives should define what Medicaid's role is in financing services for young children and transforming systems of care for early childhood services in their states. MCH, ECCS programs, and Medicaid programs should identify opportunities to partner together.



“Perhaps most important among these findings are the critical roles of vision, leadership, and the position of programs within state administrative structures.”³

★ **Use partnerships to support systems building.**

Early childhood programs should be intentional with their partnerships by assessing the purposes and expected outcomes.

★ **Use systems-level initiatives to enhance alignment and collaboration.**

Systems-level initiatives or drivers of change, such as integrated data systems, Help Me Grow, and centralized intake and referral systems, can help advance early childhood systems building.

★ **Align measures and data systems to promote shared accountability.**

Early childhood programs should have collaborative data agendas, integrated data systems, and/or shared performance measures to better understand the needs of young children and families and promote shared accountability for early childhood systems building.

★ **Invest in family leaders and family engagement at all levels.**

Early childhood systems building programs and initiatives should support the development of local and state family leadership and networks. It is helpful to select a model or framework for family engagement as well as a measure or strategy for assessing family engagement at all levels of early childhood systems building.

★ Strengthen state-local coordination.

Early childhood systems building programs and initiatives should encourage bidirectional communication and feedback between local and state-level stakeholders to foster collaboration in early childhood systems building.

★ Commit to advancing health equity and take action.

Early childhood systems building programs and initiatives should operate with a health equity lens. The roots of health inequity are complex and multifaceted; however, systemic racism plays a significant role as a core root cause for unequal access to care. Strategies for early childhood systems building programs and initiatives to advance health equity and racial equity include:

- Increasing equal access to services and decreasing unequal treatment
- Building and maintaining a diverse MCH workforce
- Using policies, programs, and funding to promote innovative and evidence-based strategies for increasing equity. Early childhood systems building programs and initiatives should examine existing policies and structures to identify privileged as well as oppressed populations and then propose changes to make policies and structures more equitable.
- Ensuring that data collection includes measures and disaggregated data to monitor the impact on health disparities and inequity
- Listening to, engaging, and partnering with parents and caregivers that are most impacted by health inequity

★ A suggested framework for carrying out these recommendations is presented in the next section. Throughout each step of the framework, there are call out boxes with considerations as to which recommendations are relevant at that point.

