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# Partnership Networks and Family Engagement in the Early Years in Michigan

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## Introduction

The Michigan Department of Education (MDE) contracted with the American Institutes for Research (AIR) to conduct a two-phase family engagement study as part of an overall evaluation of the Preschool Development Grant (PDG) efforts. In Phase 1 of the study, conducted in the fall of 2021, AIR sought to understand Michigan's family engagement landscape. AIR held focus groups with Great Start Collaborative (GSC) directors and Great Start Parent Coalition (GSPC) liaisons, reviewed 32p funding applications submitted for fiscal year 2021, and examined data from a survey of GSC directors and GSPC liaisons in which they reported on their community partnerships. Phase 1 of this study found that family engagement looked quite different across communities, depending on local characteristics.<sup>1</sup> There was also variation in how much GSCs used community partnerships in their family engagement approach. This brief shares findings from Phase 2 of the study, where AIR sought to better understand (1) how these community partnerships form and function, and (2) their impact on family engagement as perceived by families in the community.

### RESEARCH QUESTIONS

1. What is guiding the work done in communities with strong early childhood partnership networks?
2. Who is involved in each network?
3. How is family voice embedded within networks?
4. How do early childhood partners work together to identify and address the most pressing needs of families in their community?
5. How do partners work together to connect families to programs and services?
6. What is the impact on families of living in a community with a strong early childhood partnership network relative to families in similar communities without a strong network?

<sup>1</sup> Chernoff, J. J., Burr, L., Riser, D., Sorenson, I., D'Souza, I., & Tucker-Bradway, N. (2022). *The landscape of family engagement in Michigan*. <https://www.michigan.gov>.

Phase 2 of this study examined whether the community partnerships reported in Phase 1 of the study were in fact part of a partnership network. The members of an early childhood partnership network would presumably work together to improve detection and referral processes that are used collectively across the mixed delivery system. This information could then be communicated to families. Thus, in theory, a successful early childhood partnership network would allow the local early childhood mixed delivery systems to achieve the “No Wrong Door” paradigm: no matter where a family entered the system, they would be referred to the supports and services they sought. Moreover, since family engagement means doing *with*—not *for*—families,<sup>2</sup> it is assumed that partnership networks involve families. Increased parent and caregiver participation in these networks is likely to result in families being more aware of what services and supports are available in their communities and where to go to connect with them.



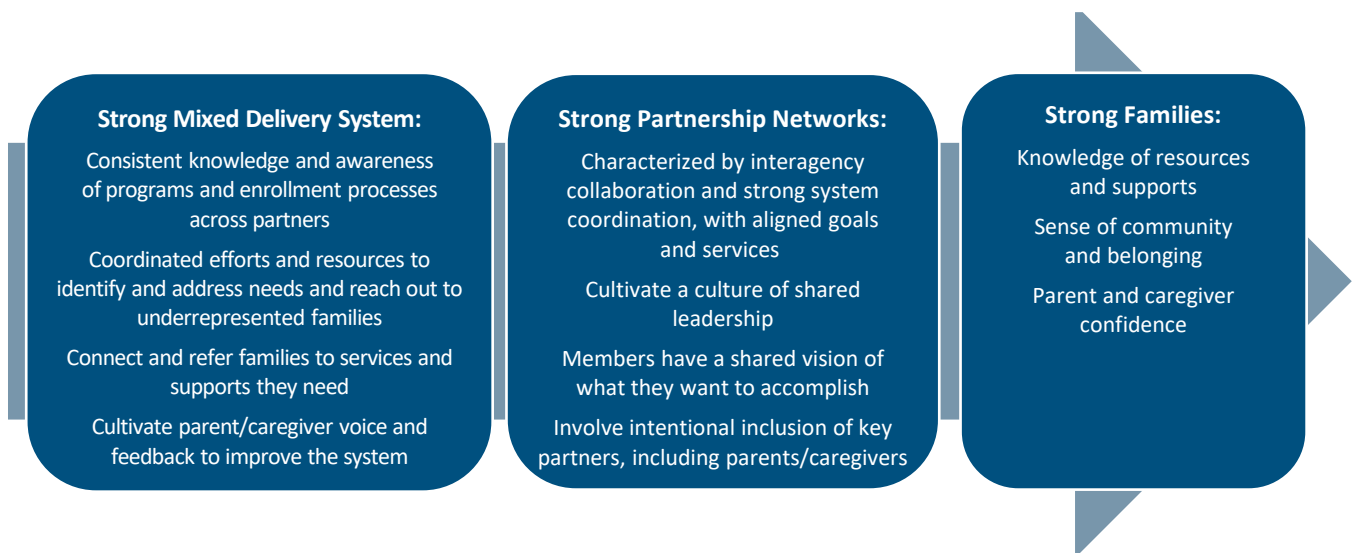
## DATA SOURCES FOR PHASE 2

**Case studies.** Up to five interviews and two focus groups were conducted with community leaders in each of four communities (Jackson, Kent, Traverse Bay, and Van Buren).

**Online family survey.** A flyer and social media post with QR codes to access the survey were provided to the Great Start Collaborative coordinators, parent liaisons, and libraries in each of the four case study communities and each of the 18 comparison communities (matched on demographics). All communication materials and the survey were available in both English and Spanish.

This brief first describes the early childhood partnership networks of four case study communities in Michigan. Next, each research question (RQ) is discussed, highlighting key findings related to early childhood partnership networks that emerged from these case studies and an online family survey. The brief ends with conclusions and policy implications.

### Exhibit 1. Model Illustrating How Partnership Networks Benefit Families



Note: Figure created by authors.

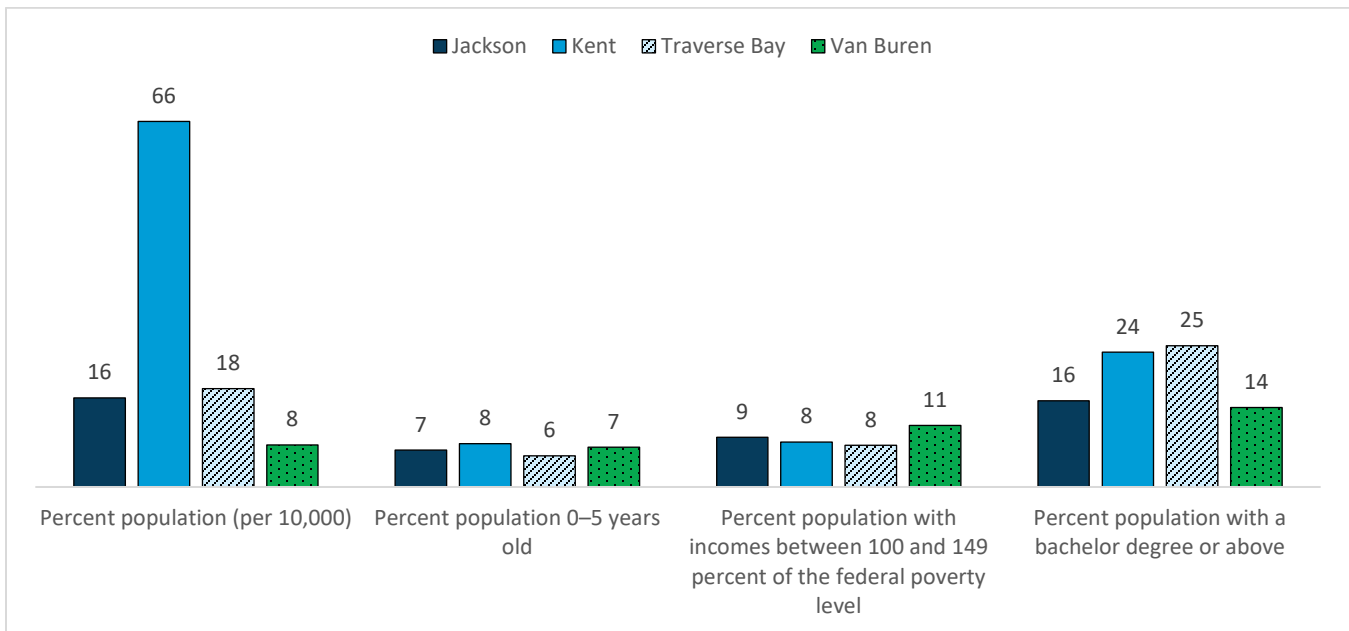
<sup>2</sup> State Family Engagement and Leadership Coalition. (2020, October). *North Carolina early childhood Family Engagement and Leadership Framework*. p. 5. Office of Child Care, Administration for Children and Families, U.S. Department of Health and Human Services. [https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/F/FEandL\\_Framework.pdf?ver=egFuOMmN3hZRA4E0cXLDAa%3d%3d](https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/F/FEandL_Framework.pdf?ver=egFuOMmN3hZRA4E0cXLDAa%3d%3d)

## Case Studies

Case studies were conducted in four Michigan communities—Jackson, Kent, Traverse Bay,<sup>3</sup> and Van Buren—to learn more about their early childhood partnership networks. These four communities were identified in collaboration with MDE. The communities were part of a larger group of communities identified as having many local partners according to their responses on the social networking survey fielded in Phase 1 of this study. Additionally, these four communities reported high enrollment in early childhood programs like the Great Start Readiness Program (GSRP). Most importantly, MDE indicated that these communities were doing work worth highlighting. See Exhibit 2 for details about each community.



**Exhibit 2. Select Characteristics of Case Study Communities**



Each of these case study communities formed its own partnership network, and that network’s function varied with the local landscape.

<sup>3</sup> Traverse Bay includes five smaller counties: Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau.

### Jackson: Jackson Collaborative Network (JCN)

- **Key Partnerships:** The [Jackson Collaborative Network \(JCN\)](#) consists of three former networks:
  - An education network, known as Cradle to Career (C2C)
  - A health outcomes network, known as the Health Improvement Organization
  - An economic stability network, known as the Financial Stability Network
- **Role of the GSC:** The Jackson GSC heads the early education part of the larger education network and collaborates with partners in the JCN, but also partners with those not part of the JCN to address issues and root causes.
- **Family Voice:** Jackson uses the work of [Trusted Advisors](#),\* service providers, and community assessments to incorporate family voice and ensure efforts address the needs of families.

\* Michigan's Trusted Advisor Program has been recognized throughout the nation for supporting and empowering parents as leaders by enabling Great Start Parent Coalitions to strengthen parent engagement through leadership development and training.



### Kent: Success Starts Early

- **Key Partnerships:** [Success Starts Early](#) consists of research-based school readiness practices that can be easily communicated, digitally modeled, and broadly disseminated to parents. These practices are used by all partners in all programing, resulting in uniform language and messaging.
- **Role of the GSC:** The GSC and community partners together host the Success Starts Early [website](#)—a one-stop shop for school readiness preparation. They also work together to use a systems approach for addressing needs and gaps identified by their community needs assessment.
- **Family Voice:** Kent has parents on their executive board and offers parental trainings on Adverse Child Experiences (ACEs) and Community Organizing and Family Issues (COFI).



### Traverse Bay: 5toOne

- **Key Partnerships:** The Traverse Bay community partners around [5toOne](#), using a web-based hub to direct families to the resources available in their communities that meet their needs. The 5toOne program has three main components:
  - Local Neighborhood Centers
  - A regional network connecting parents, early childhood professionals, service providers, and community stakeholders
  - A core support team of early childhood professionals and parent leaders
- **Role of the GSC:** The GSC, along with the United Way of Northwest Michigan and community partners, provides services tailored to the needs of families in northwest lower Michigan (Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau) and surrounding communities. They promote learning about community investments in early childhood, and work to educate parents and caregivers on the distinction between early childhood learning and daycare.
- **Family Voice:** Parents work with the community partners to identify where to put the 5toOne Neighborhood Centers and which services to bring in. Parents are also required to sit on all community boards and parents run the playgroups.



### Van Buren Network

- **Key Partnerships:** The network has intentionally broken down silos so that all community partners and local agencies work together for the well-being of children. Partners pool resources and share information, working together to identify and address the community's needs.
- **Role of the GSC:** The GSC director is credited with bringing partners together and ensuring that they discuss relevant community issues at regular meetings.
- **Family Voice:** Parents become involved in the Great Start Parent Coalition and then go on to work for the GSC or other partners. Efforts are being made to include Spanish-speaking parents in events.



## Findings

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### RQ1. What is guiding the work done in communities with strong early childhood partnership networks?

While the underlying motivation for all who work in early childhood is to improve outcomes for children, the case study networks all have a slightly different focus. In Kent, for example, the work and partnerships center around school readiness and



empowering parents to prepare their children for school success. The Kent network has intentionally worked to incorporate the Success Starts Early tenets in all of their programming so that families hear consistent messaging around helping prepare their child for school success. The Traverse Bay network strategically set up 5toOne Neighborhood Centers in local schools and businesses to bring services to families in the surrounding areas. Each 5toOne Neighborhood Center provides different services based on the needs of the nearby population and is hosted by different community partners. The Van Buren network works together to address all of the needs a family may have—not just those of children in the family under age 5. The Jackson network works together to identify and remove barriers for families.

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*“It is really the umbrella to everything else—it is like the root of the tree is Success Starts Early.”*  
– Focus group participant

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### RQ2. Who is involved in each network?

The Great Start Collaboratives (GSCs) are at the heart of these early childhood partnership networks. In all four of our case study communities, the early childhood partnership networks have at their center a GSC. In Van Buren, the GSC director brings together different working groups and intentionally connects people doing similar work. It is through the GSC in Van Buren that the network meetings are organized. In Jackson, the early childhood arm of the JCN (Jackson Collaborative Network) is led by the GSC. They lead collaborative work on the ground, increasing accessibility to playgroups and parent workshops. Importantly, the GSC’s partnership with Family Service and Children’s Aid (FSCA) allows the network to hold events on the bus line, increasing accessibility. The Jackson GSC also uses its Trusted Advisor Program<sup>4</sup> to gather information from families that is then shared with the larger collaborative. In

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<sup>4</sup> Michigan’s Trusted Advisor Program has been recognized throughout the nation for supporting and empowering parents as leaders by enabling Great Start Parent Coalitions to strengthen parent engagement through leadership development and training.

Traverse Bay, the GSC leads the 5toOne work, bringing together partners and parents to discuss community needs. As one focus group participant explained, the GSC is “the convening body that launches everything.” The Kent GSC also provides data collected by the parent representatives in the community, from feedback surveys, and from parent focus groups to the larger network to help determine where to invest. The Kent GSC brought partners together to create the Kent County Early Childhood Community Plan, which is used by the early childhood mixed delivery system.

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*“I think the Great Start [Collaborative] has broken down a ton of silos between resources and parents, and parents and communities. It is impressive to see the silos crumbling. And I mean they all have parenting in common, and it is like you are wrapping your arms around all the parents, and I think they feel it. You can see it when you work with them.”*

*– Focus group participant*

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**Partnership networks bring together different areas of the early childhood mixed delivery system so that each partner can contribute their expertise, instead of one organization trying to do it all.** Rather than trying to do everything for everyone, these networks divide up their work so that each organization’s strength is leveraged. Van Buren’s network intentionally brought diverse types of service providers together so that they could “work smarter, not harder,” a focus group participant explained. Being a small community increases this need to work together across areas of service. Traverse Bay found that the intermediate school district (ISD) in their area was very siloed, and that by working with the United Way of Northwest Michigan, they could more easily work in the community, strategically setting up 5toOne Neighborhood Centers and offering services to the families nearby. Jackson, however, found more collaboration within the ISD, allowing partners to collaborate with schools to bring services to students at school. For example, staffing district librarians within Jackson’s public schools allows the librarians to provide their expertise to the schools. Finally, partners in Kent use the Success Starts Early tenets to ensure consistent messaging across programs and services—but each partner on the Success Starts Early website provides a different service, ensuring that all aspects of development are addressed.

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*“Work smarter, not harder.”*

*– Focus group participant*

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### **RQ3. How is family voice embedded within networks?**

**Family voice is essential at all levels of the partnership network.** Strong parent engagement and leadership appears to develop through an active parent coalition or other form of tight-knit group of parent representatives or trusted advisors who talk to families and share what services and programs are available. Several networks noted that they had found that the best way to inform parents about programs and services is through other parents. The networks in these four case study communities

employ strategies such as parent cafes, parent coalitions, and social media to reach families and inform them about what programs and services are available. In addition, parents and caregivers can help the network ensure that their work meets the needs of the families in their community. In Van Buren, many parents served by the GSC went on to become active members of the GSC or GSPC, volunteering their time to sit on boards and help with disseminating information to families in the community. The network in Traverse Bay derives its strength from putting family voices at the forefront. The Traverse Bay GSC makes sure family voice is incorporated in all aspects of their work. In Jackson, Trusted Advisors serve on the Jackson GSC's Executive Committee to represent the interests of Jackson's families. The Kent network encourages parents to help plan events and sends parents to conferences; the Kent GSC pays for conference attendance. Recently, the consistency of family leadership within the Jackson GSC was affected by the loss of their long-term parent liaison. The position is now funded under the Jackson intermediate school district and has not yet been filled.

#### **RQ4. How do early childhood partners work together to identify and address the most pressing needs of families in their community?**

**The case study networks share data across partners to help them identify and prioritize issues, collaborate on action plans, and monitor progress.** However, this is done to varying degrees across communities. The results of Jackson's Collaborative Community Assessment are readily shared and serve as a call to action for community partners and other service providers to evaluate progress on current strategies and to update action plans to ensure alignment with new and emerging priorities. The Jackson GSC also uses evaluative data to monitor the progress of community agencies and organizations providing early childhood programming. Additionally, the Jackson GSC annually provides a publicly available snapshot of Trusted Advisor data. In Kent, community data are reviewed monthly to guide the agenda of the GSC's meetings and conduct breakout sessions to develop solutions. In Van Buren and Traverse Bay, data is shared less formally, at meetings and in conversations.

**The formality of data collection processes for community data, and the scope of the data collected, vary significantly across networks.** All of the case study networks collect ongoing narrative data directly from families or indirectly reported by other stakeholders to determine gaps related to their communities' social determinants of health. Also evident across the case study communities is that network partners collaborate around data collection out of necessity due to limited funding and their distinct expertise. Some networks have prioritized developing and implementing larger scale community assessments (e.g., Jackson and Kent). In Jackson, the network's assessment is a vital

As described by an interviewee, there are three distinct levels of collaboration:

1. *I will tell you what I am doing, you tell me what you are doing, and we might come to your thing, and you might come to our thing.*
2. *Programming is happening together; people might launch things together that we are both invested in and solve very tricky issues.*
3. *You have strength in this area, I have got a strength in this area, and you are going to do less of one thing, so I can do something else better.*



component of Jackson’s shared measurement system, which supports all community partners by providing a valuable snapshot of current community conditions. Kent has contracted with Michigan State University to survey parents in the past. Both Kent and Jackson also rely on Trusted Advisors’ work to gather information about their communities’ needs. Van Buren tends to identify needs and gaps through conversations with families and trusted advisors as well as through surveys of home visit recipients. Traverse Bay records data informally during meetings and “in a way that parents do not know that they are being surveyed or filling out evaluations. There is somebody always taking notes and writing down, capturing conversations, and taking the suggestions of what to do next.”

### **RQ5. How do partners work together to connect families to programs and services?**

**Partnership networks can more widely disseminate information and provide services and programs than organizations can when acting alone.** Cross-committee membership can strengthen a network’s understanding of the community’s needs and provide the coordination to expand screenings and referrals, target services and offerings, and co-sponsor and cross-promote events and programming. A good example of this phenomenon is the Traverse Bay 5toOne Neighborhood Centers. Another example from Traverse Bay is that the GSC is partnering with local health departments to distribute questionnaires to families. These questionnaires target social determinants of health, and then United Way of Northwest Michigan follows up with the families. The Traverse Bay GSC is also applying this strategy to child care. They plan to survey employers to determine if their employees need child care; if child care is needed, the GSC will help connect them with child care providers. Additionally, Jackson has used partnerships to provide mental health services to more children. This partnership between Family Services and Children’s Aid (FSCA) and the Jackson intermediate school district allows for on-site mental health services at schools, eliminating logistical work and transportation costs.

### **RQ6. What is the impact on families of living in a community with a strong early childhood partnership network relative to families in similar communities without a strong network?**

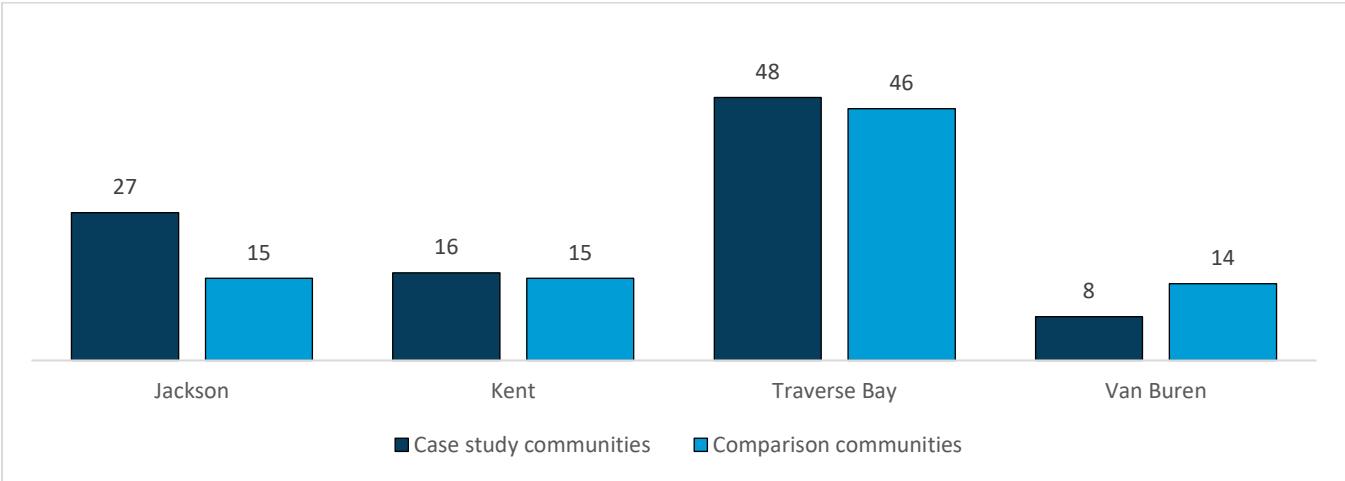
**An online survey was fielded to determine if communities with a well-developed partnership network would be better able to reach and engage families.** Families in the four case study communities and in 14 comparison communities<sup>5</sup> were invited to complete an online survey to assess whether living in a community with a well-developed partnership network, such as those found in the case study communities, has an impact on knowledge about and participation in services. Parents and caregivers of children under age 6 in these communities were asked to complete a brief online survey in English or Spanish. Respondents accessed the survey using a link found in a flyer or a social media post distributed by the GSC, the GSPC, or their local library. A total of 1,383 respondents from the four case study communities and fourteen comparison communities completed the survey: 462 from the four case study communities and 921 from the comparison communities. See Exhibit 3 below for more

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<sup>5</sup> The 14 comparison communities, identified through a statistical matching process called propensity score matching, have demographic characteristics similar to those of the case study communities, such as race/ethnicity, employment rate, population living in poverty, median income, and third-grade assessment proficiency, but were not identified as having a well-developed partnership network.

details regarding the number of case study respondents versus comparison community respondents that participated. It should be noted that when interpreting survey findings, given the low response rates, the respondents may not be representative of all the families with young children within these communities.

**Exhibit 3. Percentage of Respondents Across Communities, for Case Study Versus Comparison Communities**



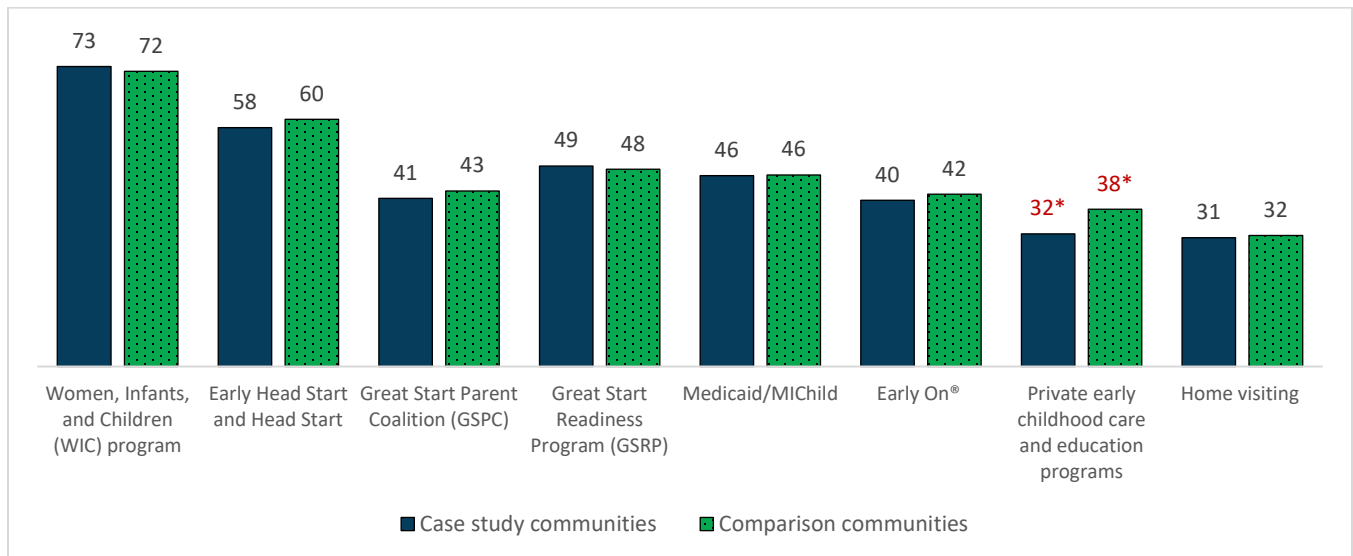
**The respondents from the case study and comparison communities share similar characteristics.** Most of the respondents reported being White (73% and 72%, respectively). About 13% of the respondents from each group reported being American Indian/Alaskan Native. About 8% of each group identified as Black. About 4% from each group identified as Asian or Native Hawaiian/Pacific Islander. About 93% of the respondents from each group reported that English was their home language. Slightly over 10% of the respondents from each group were Spanish speakers (12% for case study communities and 11% for comparison communities). There was a higher percentage of Arabic speakers among case study respondents (4%) than among comparison community respondents (2%).

**Survey respondents reported being satisfied with the available programs and resources within their community, although which programs or services they have heard of, whether they know where to get help in an emergency, and whom they go to for support vary.** Overall, respondents from both groups expressed satisfaction with the available programs and resources to support families with young children within their community. More than half of the respondents from each group reported being completely or very satisfied. Over one third of the respondents from each group reported that they were fairly satisfied with the available programs and resources. Less than 10% from each group reported being somewhat or very dissatisfied with the available programs and resources.

**Fewer survey respondents from case study communities than from comparison communities reported that they have heard of private early childhood care and education programs (Exhibit 4).** The survey asked respondents if they have heard of various programs and services offered by federal

and state agencies. Overall, respondents from both groups reported having similar levels of knowledge about these programs and services, although the respondents seemed more familiar with federal programs than those offered by the state. Private early childhood care and education programs and home visiting were among the least known programs.

**Exhibit 4. Percentage of Respondents Who Reported Having Heard of the Resources and Programs**



Note: \* indicates statistical significance ( $p < 0.05$ ).

**Survey respondents from the two groups reported similar levels of knowledge about the specific places or programs within a community that a family can go to for food, child care, housing, and financial help in an emergency.** Approximately 85% of respondents in both groups reported knowing where a family can go in an emergency to get food, while a little more than half of respondents reported knowing where a family can go in an emergency to get cash assistance. Although there were slightly higher percentages of case study respondents than comparison community respondents reporting that they knew where to go in an emergency to get child care, housing, and cash assistance, these differences were not statistically significant.

**Survey respondents were most likely to rely on family, friends, and health-care providers for parenting advice or to talk about a child’s development.** Nearly three fourths of the respondents from each group reported that they talked to their family about their child’s development or go to their family for parenting advice. Close to two thirds of the respondents from each group indicated that for parenting advice, they go to friends, followed by health-care providers (65% of case study respondents and 60% of comparison group respondents).

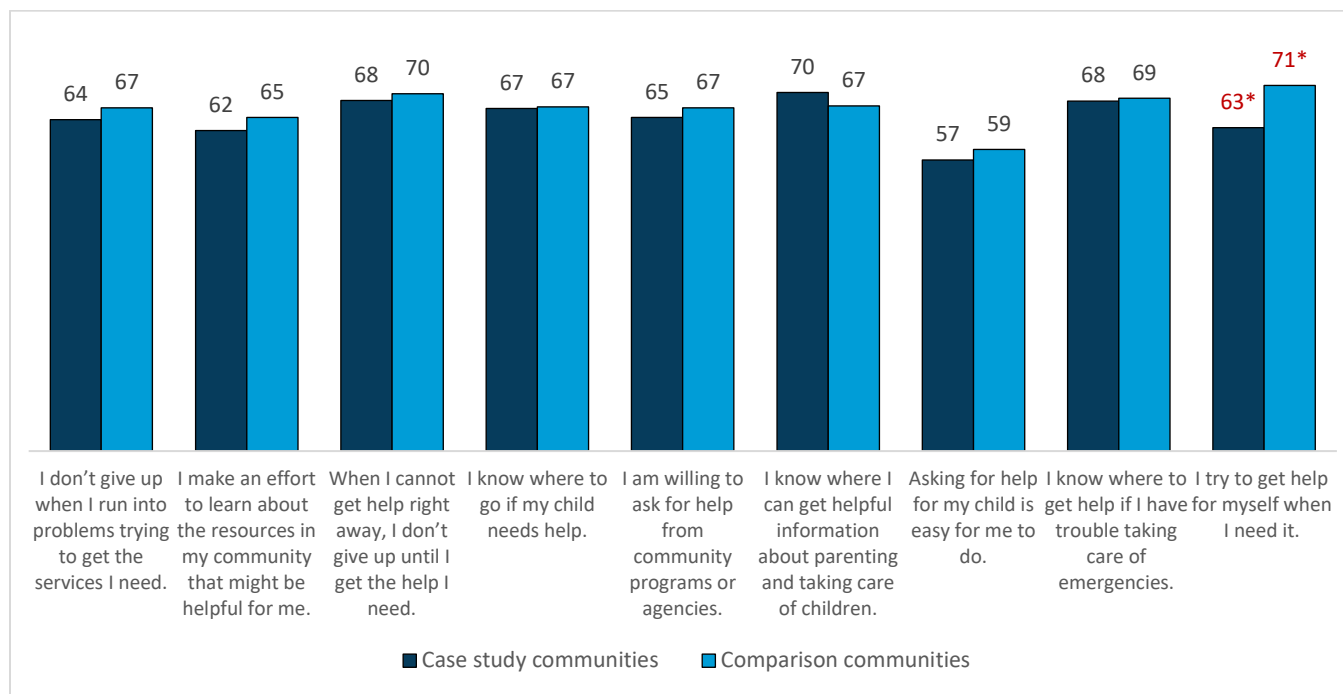
**Survey respondents reported being confident and resourceful in navigating the programs and services within their community under various circumstances. However, respondents from the case study communities felt less positively about their ability to get help for themselves when needed**

than respondents from the comparison communities (Exhibit 5). Overall, about two thirds or more of the respondents from both groups considered the following statements either “like” or “very much like” themselves or what they believe:

- I don’t give up when I run into problems trying to get the services I need.
- I make an effort to learn about the resources in my community that might be helpful for me.
- When I cannot get help right away, I don’t give up until I get the help I need.
- I know where to go if my child needs help.
- I am willing to ask for help from community programs or agencies.
- I know where I can get helpful information about parenting and taking care of children.
- I try to get help for myself when I need it.

There was an 8-percentage-point difference between respondents from the two groups in the statement, “I try to get help for myself when I need it.” Fewer respondents from the case study communities reported this statement to be like or very much like them or what they believe (63%) than respondents from the comparison communities (71%).

**Exhibit 5. Percentage of Respondents Reporting Each Statement Is Like or Very Much Like Them or What They Believe**



Note: \* indicates statistical significance ( $p < 0.05$ )

In conclusion, the survey did not reveal any significant differences between our case study communities, which have active partnership networks, and the comparison communities. However, it must be noted that the sample size of survey respondents is small. In both the case study and comparison communities,

few respondents took the time to complete the survey. Secondly, the survey links were sent out by GSCs, GSPCs, and libraries. Consequently, the recipients of these survey links were already in some way connected with the early childhood mixed delivery system in their community and would know more about the services available regardless of whether they come from a community with a strong network or not. Moreover, the survey did not collect information about respondents' eligibility for programs, nor information about the funding related to these programs in each locale.

## Conclusions

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In conclusion, the four case study communities, Jackson, Kent, Traverse Bay, and Van Buren, are all actively partnering to improve family engagement in their communities. They are pooling resources, overcoming barriers to facilitate communication between services, and helping one another advertise programs and services. In Kent, they are working to provide consistent messaging across their early childhood mixed delivery system. However, the survey did not reveal any advantage to living in these communities. It may be that this work at the systems level has not yet trickled down to the families, or it may be that our survey sample was not large enough or representative enough for an impact to be detected. Additionally, the way our case study communities were identified did not guarantee that their networks were more cohesive or effective than those in other communities.

It should be noted, though, that in each early childhood partnership network studied, the GSC was at the center. The GSC is working to bring in new partners and bridge service areas to support families more effectively. By “working smarter, not harder,” early childhood partnership networks can better leverage collective expertise to provide families the best services possible. Moreover, this approach fosters communication between key players, bringing Michigan closer to a “No Wrong Door” paradigm. This study suggests that improvements in a few areas can bring Michigan closer to this goal, making it the best place to raise a child.

## Policy Implications

**Partnership networks could improve the collection and use of data to identify need and monitor progress.** While anecdotal data are important and speak to how a family has been helped, they are just a snapshot, and may not reveal the full picture of the community. Moreover, it seems like our case study communities are serving families like themselves, and do not seem to be reaching all of the diverse families that live in these communities. Van Buren is just starting to reach out to partners that serve Spanish-speaking families, and some efforts have been made in our case study communities to serve families that identify as Native American, but more could be done. One focus group participant commented that the small Black community in their county is not well served, for example. A more comprehensive needs assessment, like the one the Jackson Collaborative Network conducts, could be used to understand how to serve diverse families and to monitor the success of programs designed to

do so. These data, when shared, can help a community evaluate their investments and pivot to programs that show more promise.

**It is essential to have families at the table.** Families are better positioned to identify the needs of the community than local leaders. When they are included in the partnership network, the supports and services provided more closely align with what families need. Parents and caregivers can also help spread the information that the network wishes to convey to promote child outcomes like school readiness. Kent and Van Buren have discovered how well parents can spread information to other parents. Parents as Trusted Advisors provide useful data to Jackson’s early childhood collaborative as well as help to keep the families of Jackson informed of programs and services. Many of the focus group participants mentioned keeping in mind what parents want or need when planning programs, but having parents there at the table, explaining what helps and what is a burden, will improve family engagement overall. Traverse Bay’s 5toOne Neighborhood Centers rely on parents to tell them what services are needed in each locality. This approach allows for better alignment between the families in the area and the services provided.

**Partnerships that include family leaders help ensure the equity of programs and services.** These networks consistently incorporate family outreach and voice to reflect the community's needs. For example, some Traverse Bay community members are unable to reside in Traverse Bay because of the rising cost of living but still work and have connections in Traverse Bay. To combat this issue and make sure these families that lack adequate transportation still had access to programming, the network partnered with the local public transportation system to create a video on how to use public transit, and even created their own routes tailored to getting children and families to and from their playgroup. To reduce barriers and ensure families feel welcome and cared for, Jackson has increased their offerings of Adverse Childhood Experiences (ACEs) training, and the JCN has rebuilt their framework around cultural competency. A good example of barrier reduction is to ensure no one is turned away due to costs. For example, the partnership between FSCA and the intermediate school district in Jackson to provide on-site mental health for children at schools eliminates logistical work and transportation costs. Similarly, the Kent network adopted the use of language interpreters to reach non-English-speaking families, and implements marketing targeted towards the specific groups that need services. Parent leaders are used to inform other parents of programs and services. Parent leaders are sent to conferences for free and have been trained in ACEs and COFI (Community Organizing and Family Issues).<sup>6</sup>

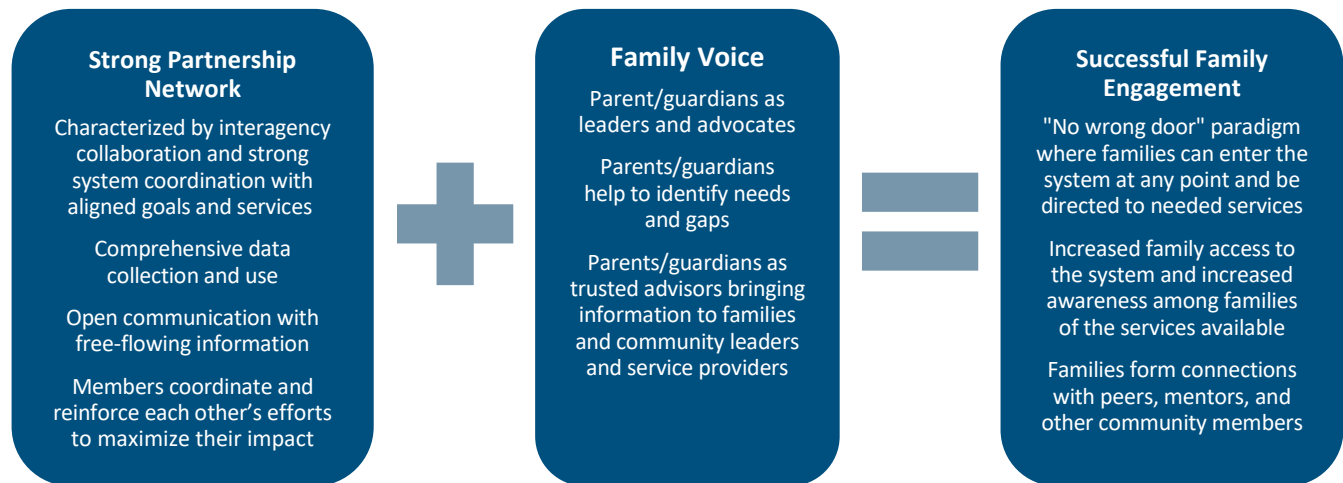
**Community networks could examine how these federal programs are reaching families to see if there are any approaches the state and local programs can adopt.** The survey suggested that the federal programs are better known than state and locally sponsored programs (Exhibit 4). The networks seem to need help informing families of the services and programs available to them. However, it should be noted that networks are limited by the resources available to them. Their impact is, in part, constrained by the resources they have. A centralized state-sponsored body could provide support to these local networks; the individual networks could appeal to this state body for specific

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<sup>6</sup> See [Community Organizing and Family issues \(COFI\)](#) for more information.

supports and funds. This state-sponsored body could also work to help communities build their partnership networks and share approaches that have worked in other localities. The inclusion of families at all levels of the system may help close the gap between the early childhood mixed delivery system and the community at large. These parent and caregiver leaders can give voice to the challenge families are facing in their everyday lives, helping the network to better align programs and services.

### Exhibit 6. New Model for Illustrating Effective Engagement



Note: Figure created by authors.

This brief started out with a linear model of how to improve family engagement. However, the results of this research suggest a different model—one in which family voice is a necessary component. In this new model, the network needs to be centered around shared goals, using data to identify needs and monitor progress, with open communication among the partners. Equally important is the role of family voice. Parents and caregivers need to have a seat at the table and serve as leaders and trusted advisors to their community, working with service providers and stakeholders to better serve families overall.

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