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Engaging Families in State Initiatives: A Case Study of Lessons Learned

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Introduction

In the wake of the COVID-19 pandemic, many states and communities developed new programs, strategies, policies, or initiatives to strengthen child care and early education (CCEE) systems and support families with young children. The purpose of this case study brief is to spotlight three state initiatives that sought to engage families and integrate their perspectives into their CCEE efforts while answering the following research questions:

1. What are examples of innovative family-centered strategies states used to support families with young children during the COVID-19 pandemic and beyond?
2. What facilitated implementation of the strategies? What new structures, roles, or processes were created? What will persist after pandemic recovery?
3. What barriers or challenges emerged, and how did states address those barriers?
4. How did families experience the strategies? What lessons can be drawn from their experiences?
5. In what ways did states' strategies advance equity?
6. What are some recommendations for states to consider as they continue to develop and implement strategies to support families with young children?

Glossary

Family engagement involves families playing a key role in decision making that affects children and families. This involvement can take place at the individual service level, when service providers and families partner in making decisions related to an individual child's strengths and needs. It can also take place at the system level, when families are engaged by state and local leaders as equal partners in planning, implementing, and/or evaluating services, programs, and policies that affect children and families.[1]

Child care and early education (CCEE) refers to caregiving and educational services for children from birth to age 13. CCEE includes center- and home-based settings for infants, toddlers, preschool- and school-aged children. CCEE refers to services for a larger age group than early care and education.

This brief draws on interviews with 1) staff implementing initiatives in three states and 2) parents and caregivers that participated in these initiatives in various ways. In this brief, we provide a description of these initiatives and a summary of key themes that have implications for improving the CCEE system and efforts to engage families in future state initiatives. We want to note that this brief is not an evaluation of these state initiatives' success or impact; rather, it provides illustrative examples of how states are engaging families in their work and lessons learned that can inform other states interested in similar efforts.

Designing and implementing programs that center families' expressed needs and experiences is essential to keeping families engaged in their child's care and education. Family engagement benefits children, parents and caregivers, and the communities in which they live. Research shows that family engagement at the individual service level (e.g., in their children's CCEE programs) contributes to many positive outcomes for children and families, including increased school readiness for children and positive influences on socio-emotional and academic growth.[2,3] Parents and caregivers also benefit from participating in family engagement activities at the system level (e.g., leadership boards, advisory committees, or task forces), reporting personal growth, including increased self-confidence, new connections, and new knowledge and skills.[4,5] Community leaders also benefit from families' involvement, obtaining a deeper understanding of their residents' needs.[6,7]

Because of the rapidly changing circumstances for families' health, employment, and child care arrangements, the COVID-19 pandemic highlighted the importance of intentionally integrating families' needs, priorities, and experiences into the design and provision of services and supports for families with young children. State leaders and staff implementing programs and services are eager to learn

about strategies other states are using to engage families and integrate their perspectives into the design and implementation of programs and services.[a] There are many different strategies for family engagement,ranging from one-time or short-term efforts (e.g., a feedback session) to more intensive, long-term engagement (e.g., participation in an ongoing advisory board). Family engagement strategies can vary based on states' needs and capacities, as well as families' interests, preferences, and availability. The approaches used may vary in their effectiveness depending on how state leaders anticipate the supports families need to engage in meaningful ways. This case study brief highlights how three states engaged families in their initiatives, parents' and caregivers' experiences, and implications for the field moving forward.

Structure of this brief

We begin this brief by providing a summary of our methods and then a summary of the three state initiatives, including states' strategies for integrating families' perspectives into their work. Next, we present a summary of our findings from across the three initiatives, including implementation successes and challenges, strategies to advance equity, and parents' and caregivers' experiences participating in these initiatives. We conclude the brief with key takeaways and considerations.

Methodology

As a first step in answering our research questions, we conducted a structured search for select state initiatives launched in the wake of the COVID-19 pandemic to support families with young children. In our search, we considered initiatives launched by state agencies and nonprofit organizations both at statewide and local levels. The criteria for initial selection included a broad focus on CCEE and/or supports and services for families with young children and the use of family engagement as a strategy for developing and informing the initiative. After identifying six state initiatives for potential inclusion in the case study, we conducted brief screening interviews with staff implementing each initiative to learn more about their work. After conducting these interviews, we developed a final set of selection criteria to determine which initiatives to include in the case study. The criteria are as follows:

- **Focus on young children and their families:** Initiatives include family-centered strategies to support young children and their families.
- **Focus on equity:** Initiatives are working to advance equitable outcomes in their state (e.g., identifying and addressing long-existing inequities, providing culturally responsive supports and services, ensuring engagement of families that reflect the full racial and ethnic diversity of their state).
- **Sustainability:** Initiatives have plans for longer-term sustainability and no plans for ending implementation.
- **Family voice:** Initiatives engage(d) families to get their input on designing and/or improving programs and services and were able to connect us with some of the parents and caregivers who participated in their work.

Using these criteria, we identified three initiatives to include in this case study: 1) Missouri's Office of Childhood, 2) Nevada's Child Advocacy Ambassador Program, and 3) Strong Start Washington's Universal Developmental Screening System.

[a] The Child Care Development Block Grant requires states to collect and disseminate consumer and provider education on best practices for meaningful family engagement, so states are often interested in resources related to family engagement. In response to states' interest, federal technical assistance (TA) centers have developed multiple resources to support family engagement work. For example, the PDG B-5 TA Center published a brief titled "How State Leaders Can Promote Meaningful Family Engagement at the State and Program Level" and compiled a list of resources to support grantees' work to maximize parental choice and knowledge. The Early Childhood TA Center (ECTA) similarly compiled a list of national resources on family engagement which includes federal guidance, tools, and resources from other national centers and associations.

After identifying the three state initiatives, we conducted three 60-minute interviews with eight total staff members from state and nonprofit agencies involved with implementing the initiatives (we refer to them as "staff implementing these initiatives" throughout the brief). We then conducted nine 60-75-minute interviews—three for each state initiative—with parents and caregivers who participated in the initiatives. With interviewees' permission, we recorded and transcribed each interview and developed a set of codes to analyze the interviews. We applied these codes using Dedoose, a secure qualitative analysis software, and then reviewed the codes and excerpts to identify themes. See Appendix A for more information on the study methods.

Limitations of the case study methods

Working within the scope, timeframe, and resources of this study, we intentionally limited the number of parents and caregivers we contacted and the number of interviews we conducted. We were connected to parents and caregivers through the staff we interviewed at the state level. As such, participants' responses and experiences may not be fully representative of all parents and caregivers who participated in these initiatives. Furthermore, since the case study only highlights three family-centered initiatives, our lessons learned may not reflect the experiences of other initiatives implementing similar strategies. Even within the limited scope of this analysis, this case study provides initial insights into both the types of design and implementation decisions that states make and the experiences parents and caregivers have when they participate in similar initiatives.

Summary of State Initiatives

This section provides a summary of the three state initiatives, including a high-level overview and information on each initiative's efforts to engage families. Please see Appendix B for more detailed information about each of the state initiatives.

Table 1. Summary of State Initiatives

State Initiative	Initiative Overview	Family Engagement Efforts
Missouri Office of Childhood	The Governor of Missouri created the Office of Childhood in 2021 to consolidate nearly all publicly-funded services and programs related to child care, home visiting, early learning, and early intervention. The purpose of the new office is to better coordinate early childhood services, reduce duplication of efforts by different offices supporting young children, increase the use of data to inform programs and decision-making, streamline information on early childhood programs and services for both families and providers, and incorporate families' feedback and interests throughout the process.	To conduct family engagement across the state, the Office of Childhood created regional Parent Advisory Councils (PACs) for families to provide input and feedback on community needs and priorities related to early childhood and school readiness, ways to elevate the importance of early childhood in their communities, and ways to be more consistent and efficient across the Office of Childhood's efforts. Through the PAC, parents and caregivers also take part in training to host Parent Cafés[b,8] and participate in advocacy work, and share resources among members. PAC members meet regularly and determine the meeting time, format, and agenda. In addition to the regional PACs, the Office of Childhood convenes a statewide PAC that meets to discuss the progress of the Office of Childhood's strategic plan.

[b] The Parent Café model is a method of facilitating meaningful, collaborative conversations among parents and caregivers to strengthen relationships and build parent leadership. Led by parent leaders, cafés bring community members together for structured conversations that address protective factors for parents.

State Initiative	Initiative Overview	Family Engagement Efforts
Nevada Strong Start for Children Child Advocacy Ambassador Program	Nevada's Child Advocacy Ambassador Program ("the ambassador program") was created by The Children's Advocacy Alliance (CAA) to shift power dynamics to ensure the voices and perspectives of parents and caregivers are directly informing policy decisions in the state of Nevada. The ambassador program aims to provide policy makers and state leaders opportunities to engage parents and caregivers in policy discussions and decision-making. Another goal of the program is to facilitate connections between participants while also connecting them with organizations and advocacy groups that align with their advocacy interests and goals.	The ambassador program convenes cohorts of 20-25 parents and caregivers. Cohorts meet monthly over a ten-month period and receive training and information on how to effectively advocate for policy change in Nevada. Participants receive training on Nevada's legislative session and schedule, how to track a bill, how to contact legislators, and other advocacy skills. During cohort meetings, participants also have opportunities to reflect on their communities and lived experiences and brainstorm topics of interest and policy changes they would like to see happen in Nevada.
Washington's Universal Developmental Screening System (Strong Start)	Strong Start Washington's Universal Developmental Screening System ("the system") is an online portal run by Washington's Department of Health (DOH) for parents, caregivers, and service providers to document data and information on children's developmental screenings. The purpose of this system is to promote universal developmental screening, decrease stigma around developmental screening, streamline and organize all of the existing data from developmental screenings with children from birth to 5 years, and reduce duplication in screening efforts. The system is also designed to support the state in identifying gaps and inequities in screening access and referrals to needed services. Additionally, the system informs the development of specific strategies to increase access to screenings and connection to services among communities with lower rates of screening and connection to services. The system was first piloted in four regions and launched statewide in fall 2023.	The state has partnered with family advocacy groups in Washington throughout the planning and early implementation stages to hear their perspectives on the need for the system, feedback on the system, and strategies to support statewide implementation of the system. Additionally, the state received feedback on possible improvements to the system through one-on-one meetings with parents and caregivers and listening sessions with parent and community groups.

Findings

During our analysis of interviews with staff implementing these initiatives and with parents and caregivers, we identified key themes across initiatives to answer our research questions. In this section, we present these high-level themes and specific examples for each theme.

Implementation successes, facilitators, and challenges

Implementation successes and facilitators

Through interviews with staff implementing these initiatives, we heard three common themes as they described their implementation successes: 1) successfully recruiting parents and caregivers that represent the diversity of their state to participate in their efforts; 2) having content and programming driven by parents and caregivers; and 3) providing parents and caregivers with training and resources to ensure they can meaningfully connect with policymakers at state and local levels.

Recruitment efforts

Staff implementing each of these initiatives emphasized the importance of intentional recruitment efforts in advancing equity through their initiative. They shared how when recruiting families to participate in their initiatives, they intentionally recruited parents and caregivers that reflected the diverse perspectives of families in their states, including parents and caregivers with different racial and ethnic backgrounds, with different income levels, and from different geographic regions across their states. Washington, for example, piloted their universal developmental screener and got feedback from parents and caregivers from four different regions that reflected the racial, ethnic, linguistic, and income level diversity of the state. Missouri sought to recruit parents and caregivers who have accessed state services or supports, families who have a member with a disability, and families who speak a language other than English to serve on PACs to represent local community needs and prioritize perspectives that have been historically marginalized. Staff from both Nevada and Washington referenced partnering with Tribal liaisons to engage Tribal communities in meaningful and effective ways (e.g., ensuring that Tribal communities had access to information about state initiatives and partnering with Tribal community partners to recruit parents and caregivers).

Initiatives driven by families' needs and lived experiences

Staff implementing each of the initiatives also described efforts to ensure their initiatives were driven by parents' and caregivers' needs and lived experiences. Staff from Washington shared that the need to develop a universal developmental screening system came in part from feedback they heard from family advocacy groups across the state. They also contracted a Tribal consulting firm to complete focus groups, listening sessions, and key informant interviews to inform outreach and communication plans for engaging Tribal communities with the new system. Staff implementing the initiatives in Missouri and Nevada described how the content and topics of their groups, meetings, and trainings were driven by parents and caregivers, who were able to identify specific topics or advocacy areas that they wanted to learn more about and advocate for.

Providing families with needed supports

Staff implementing the initiatives described ways they provide parents and caregivers with the supports needed to ensure they can meaningfully participate in these initiatives and connect with policymakers. Nevada's ambassador program sought to equip parents and caregivers with training and resources to ensure they could fully and meaningfully participate in advocacy work. For example, they provided trainings and tools to help parents and caregivers better understand the legislative process, develop public-speaking and communication skills, and effectively communicate their stories to policymakers at state and local levels. Like Nevada's ambassador program, one of Missouri's regional PACs specifically focused on advocacy by providing trainings and tools to similarly clarify the

legislative process for parents and caregivers and ensure that they were supported in communicating their stories to policymakers. Both parents and caregivers in Nevada and members of Missouri's PACs met with legislators during meetings and events, which allowed parents and caregivers the opportunity to share their stories, express their needs, and build connections with policymakers.

Commitment to furthering equity

When examining how state leaders perceived implementation successes, we found that one of the key facilitators across the three state initiatives was a commitment to furthering equity through their work. States made intentional efforts to identify and recruit parents and caregivers from historically marginalized and underrepresented populations and engage them in their efforts. Staff from all states spoke about the importance of honoring the lived experiences and expertise of parents and caregivers and the importance of having their voices involved and heard when setting state-wide initiatives and policy agendas.

Implementation challenges

Through interviews with staff implementing these initiatives, we heard three common themes as they described their implementation challenges: 1) recruitment challenges, 2) challenges related to COVID-19, and 3) challenges tracking the impact of their efforts to engage parents and caregivers in their work.

Recruitment challenges

While initiatives put great emphasis on recruitment of parents and caregivers who reflect the diverse perspectives and experiences of families across their states, staff implementing these initiatives also described challenges engaging and reaching families to participate in their initiatives. Staff shared that state agencies do not always have direct connections with families and noted that, in comparison with direct service providers, their relationships with families are less established. Because of this, they said it can be challenging to "get the word out" and engage families. To address this challenge, states worked with community leaders, grassroots organizations, family councils, Tribal organizations, and other community-based organizations that work directly with families to recruit and engage parents and caregivers in their initiatives.

> "It's hard at the state level to have great, strong engagement with family members because …their resource is the providers that are coming to their home or that are [working] in the centers [their children attend]. So we've flipped that on its head and we're working more from the bottom-up."
>
> **– Staff implementing one state initiative**

Challenges related to the COVID-19 pandemic

Across the three initiatives, staff described common implementation challenges. Staff most frequently described challenges related to implementing initiatives during the COVID-19 pandemic. For example, staff described challenges engaging and connecting with families during the pandemic due to not being able to meet in person. We also heard about staffing challenges related to the pandemic, including agencies being short-staffed due to turnover, illness, and caretaking responsibilities. Additionally, staff implementing one of the initiatives talked about the challenge of spending COVID-19 relief funding within a limited timeframe after experiencing pandemic-related implementation delays. States responded to pandemic-related challenges by engaging families virtually, onboarding additional temporary staff, and extending implementation timelines when necessary.

Tracking family engagement efforts

During interviews, we also heard about states' challenges tracking both their efforts to engage parents and caregivers and the outcomes of that engagement. Staff shared that they do not have formal processes for tracking when and how they are engaging parents and caregivers or the impact of these efforts. As a result, it is difficult to systematically share and communicate the positive outcomes of family engagement efforts, and some staff identified this as an area for growth in the future.

How staff and parents and caregivers put equity into practice through these initiatives

Both staff and parents and caregivers talked about the importance of their efforts to honor and value the expertise of parents and caregivers from historically marginalized groups in these initiatives and prioritizing their perspectives in decision-making. Specifically, parents and caregivers talked about prioritizing Black and Hispanic/Latinx parents and caregivers, parents and caregivers from Tribal communities, parents and caregivers who speak a primary language other than English, parents and caregivers experiencing poverty, and parents and caregivers of children with medically complex needs or children with disabilities. Staff described their efforts to engage communities of color, families experiencing poverty, immigrant communities, and families who speak a primary language other than English in developing the content of their work and expanding their opportunities to participate in decision-making at the state level.

Parents' and caregivers' experiences

Parents' and caregivers' participation

Parents and caregivers participated in these initiatives in a variety of ways, including:

- Serving on advisory groups, councils, or committees
- Attending meetings and providing input on meeting topics and agendas
- Sharing feedback on programming, priorities, and data systems to inform or improve implementation of these initiatives
- Participating in advocacy efforts, including meeting with state legislators and submitting public comment
- User-testing a system to provide feedback on user interface, language, and accessibility
- Participating in trainings to develop specific skills related to advocacy, communication, and facilitation

Across the three initiatives, the ways parents and caregivers participated illustrate a continuum of approaches based on states' needs and capacities as well as families' preferences and availability. Parents' and caregivers' participation ranged from one-time meetings to provide in-depth feedback to more frequent, ongoing participation in advisory councils that informed state agencies' efforts and year-long training programs to advocate for policy change. The different ways that parents and caregivers participated in the three initiatives in this case study, highlight that states can think about a range of ways to engage parents and caregivers in their work. When states have a range of options available, parents and caregivers can make decisions about whether and how to participate based on what opportunities are available to them and whether the opportunities align with their needs, schedules, and interests. The following text box provides examples of frameworks that two states have used to describe the continuum of strategies and opportunities to engage families. These frameworks help contextualize the findings.

Frameworks to Describe Family Engagement Strategies

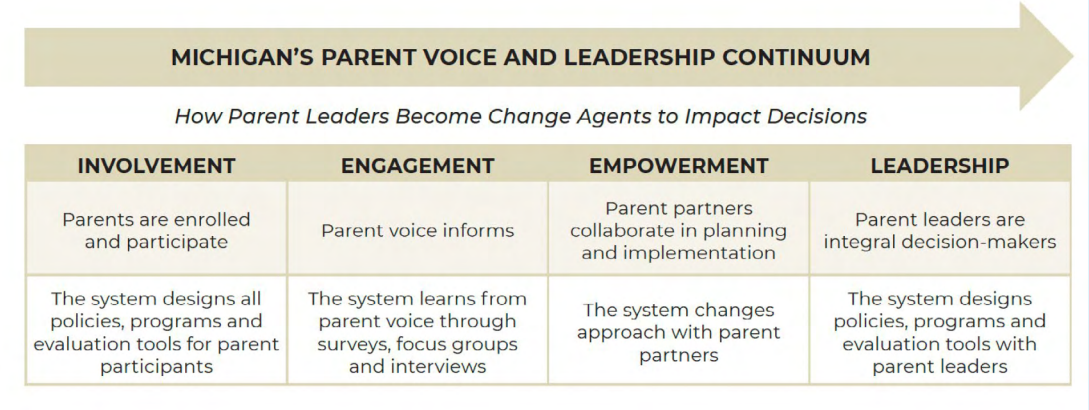
To describe the wide range of ways to engage parents and caregivers and encourage more opportunities for families to provide feedback and contribute to decision-making, some states have developed frameworks and continuums that depict and define different levels of family engagement and leadership. For example, the state of North Carolina developed a Family Engagement Continuum as part of their North Carolina Early Childhood Family Engagement and Leadership Framework.[9] This framework depicts how parents' and caregivers' participation can range from being a recipient who receives information about and participates in programs and services to a change agent who "Influences decisions and takes part in implementing actions, collecting and analyzing data, and strategic planning" (see Figure 1). As another example, Michigan developed Michigan's Parent Voice and Leadership Continuum (referenced in Stepping up and Speaking Out: The Evolution of Parent Leadership in Michigan)[10] that includes four levels. These levels range from involvement, where "the system designs all policies, programs and evaluation tools for parent participants" to leadership, where "the system designs policies, programs and evaluation tools with parent leaders" (see Figure 2).

Figure 1. North Carolina's Family Engagement Continuum



Source: Division of Child Development and Early Education (2020). *North Carolina Early Childhood Family Engagement and Leadership Framework*. North Carolina Department of Health and Human Services. https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/F/FEandL_Framework.pdf

Figure 2. Michigan's Parent Voice and Leadership Continuum



Source: Stark, D. R. (2020). *Stepping up and speaking out: The evolution of parent leadership in Michigan. Early Childhood Investment Corporation & Michigan Home Visiting Initiative*. https://www.ecic4kids.org/stepping-up/files/eng_ECIC_Stepping_Up_Digital_10-28-20_web.pdf

Positive aspects of participation and recommendations for improvement

During our interviews with parents and caregivers, we asked what they liked about the ways they participated in these initiatives. Parents and caregivers frequently talked about how they found it meaningful to participate in these initiatives because they were able to help other families with young children across their state. They also reported appreciating frequent and ongoing communication from the staff facilitating these initiatives and enjoying opportunities to participate in trainings to learn new skills related to advocacy and communication. Lastly, parents and caregivers talked about how they enjoyed making new connections through their participation. For example, they talked about meeting other parents and caregivers with similar interests; learning about local programs and resources they could share with others; and forming connections with policymakers, local leaders, and advocacy groups working on topics related to their interests.

Parents and caregivers talked about a few aspects of their participation in these initiatives that they would like to see improved. Some parents and caregivers expressed a need for more frequent communication with staff implementing these programs to keep everyone up to date on progress and next steps for the initiatives and parents' and caregivers' involvement. Relatedly, some parents and caregivers said they would have liked more updates and information from staff on whether and how the feedback and ideas they had shared to inform the initiatives were being used, including the rationale behind what feedback was or was not used. Some also noted that they would have liked more opportunities to provide feedback to inform the initiatives and wanted more information on how they could continue to be involved with the initiatives in the future.

Facilitators and barriers to participation

During interviews, we asked parents and caregivers to reflect on what facilitated their participation in these initiatives and any barriers to their participation. All of the parents and caregivers we interviewed mentioned their personal connection to these topics as a key facilitator of their participation. Specifically, they shared how they were motivated to participate in these initiatives because they were passionate about the topic(s) and excited about the opportunities to get more involved. Nearly all parents and caregivers described how helpful and essential it was to receive a stipend or financial incentive to compensate them for their time and participation. They also frequently mentioned that holding meetings virtually and during the evening, and sending out meeting notes afterwards, helped ensure they could participate, noting a lack of virtual meetings or access to meeting recordings as barriers to participation. Parents and caregivers talked about how life events like family members' illnesses and scheduling conflicts sometimes posed barriers to their participation in the initiatives. They shared that to address this barrier, staff implementing these initiatives created a culture where parents and caregivers knew they could prioritize their caregiving responsibilities, which helped participants feel like they never had to choose between being a caregiver to their young child(ren) and participating in the initiative. For example, parents and caregivers described how feeling comfortable bringing their child(ren) to meetings and stepping away from a virtual meeting to help their child made participation easier and more accessible.

Perceptions of impact

When we asked parents and caregivers about their perceptions of the impact of these initiatives, we heard about two types: the impacts of participating in the initiatives on the parents and caregivers themselves and the overall impacts of the initiatives at the community or state levels. When reflecting on how these initiatives affected them and their families, some parents and caregivers talked about new skills they learned through their participation, including creating an "elevator pitch" and developing their public speaking skills. Some also learned about new resources, like parenting groups and programs and services in their communities and made connections with other parents and caregivers with similar interests. Lastly, some parents and caregivers reported that participating in these initiatives made them feel valued and heard and inspired them to get more involved in their communities.

Parents and caregivers also described some of the ways they have seen these initiatives make community or state-level impacts. They talked about how their participation provided opportunities for state-level initiatives to be informed by the perspectives of parents and caregivers with young children. They also noted how some of the initiatives provided opportunities for parents and caregivers to connect with policymakers and other state leaders, to discuss topics they are interested in and passionate about related to young children, and to share their stories. Some parents and caregivers shared how they hoped these connections would influence policy development and policy changes informed by their experiences and perspectives in the future. Lastly, in a few cases, parents and caregivers mentioned how these initiatives had contributed to specific policy changes that they had advocated for and supported in their states. For example, parents and caregivers in Nevada mentioned advocating for Senate Bill 232, which requires Nevada state Medicaid to cover postpartum care services for 12 months following the end of pregnancy, which the state passed and signed into law in July 2023.[11]

Key Takeaways and Implications

Key takeaways from staff implementing these initiatives include:

- Staff shared common implementation successes. These included successfully recruiting parents and caregivers who represent the diversity of their state to participate in their efforts, having content and programming driven by parents and caregivers, and offering training and resources to ensure parents and caregivers can meaningfully connect with policymakers at state and local levels.
- Staff also shared common implementation challenges, including recruitment challenges, implementation of these initiatives during the COVID-19 pandemic, and challenges tracking and communicating the impact of their efforts to engage parents and caregivers in their work.

Key takeaways from parents' and caregivers' participation in these initiatives include:

- Parents' and caregivers' participation in the initiatives ranged from providing one-time, in-depth feedback on a specific topic to participating in cohorts and advisory councils to engage in advocacy efforts and share ongoing feedback to inform statewide efforts. Participation varied based on the initiative, states' capacities, and parents' and caregivers' preferences and availability.
- Parents and caregivers valued the training they received through the initiatives and the new connections they made with policymakers and other parents and caregivers.
- Parents and caregivers noted the importance of regular, ongoing communication from staff implementing the initiatives to get updates on whether and how staff were using parents' and caregivers' ideas and feedback to inform the initiatives.
- Stipends or financial compensation for parents' and caregivers' time and effort was essential to facilitate their participation. Parents and caregivers highlighted scheduling conflicts and other life events (e.g., family members' illnesses) as barriers to their participation, but noted how meetings and events held virtually in the evening and the flexibility of staff to accommodate their busy lives and schedules helped address these barriers.

Considerations for family engagement

Looking across the key findings, we present some considerations for state leaders and communities as they work to engage parents and caregivers in different initiatives and aspects of their work.

1. **Consider a range of strategies for engaging parents and caregivers in initiatives.** When designing efforts and strategies to engage parents and caregivers, states should consider parents' and caregivers' specific needs, their capacity to engage parents and caregivers, and

parents' and caregivers' preferences, capacity, and availability. Family engagement strategies exist on a continuum, which allows states to offer a variety of opportunities for parent and caregiver engagement. In our interviews with parents and caregivers we learned that offering a range of options and formats for participation over the course of an initiative's implementation allows parents and caregivers to decide whether and how to participate based on whether the opportunities align with their needs, schedules, and interests. Their participation also provides opportunities to create, improve, and make decisions about the programs and services designed to support them. For example, during planning stages, states can provide opportunities for parents and caregivers to contribute to decision-making around the design of programs and services and specific features to include. Then, during early implementation, states can provide opportunities for parents and caregivers to give feedback on their experiences to inform course corrections and continuous quality improvement.

2. **Financially compensate parents and caregivers for their time and effort.** We heard in our interviews that this is a key facilitator for parents' and caregivers' participation and is essential to recognize their time and expertise. Parents and caregivers may have different needs and preferences related to compensation and payment (e.g., gift card, direct deposit, paper checks, mileage reimbursement, child care costs, etc.), so it is important to get feedback on the best format for compensation to ensure it is meeting families' needs.

3. **Prioritize ongoing communication and feedback loops with parents and caregivers.** When engaging parents and caregivers in initiatives, advisory groups, or other efforts, it is important to communicate regularly about any updates and progress. In our interviews, parents and caregivers highlighted the importance of ongoing communication to stay updated and engaged. As part of this communication, our findings suggest it is important to consider establishing feedback loops so parents and caregivers receive updates on whether and how their feedback is being used to inform or improve statewide efforts. While not all feedback shared will be used or incorporated, parents and caregivers may value hearing the reasoning behind these decisions whenever possible. These feedback loops may support parents and caregivers in feeling their participation is valued and their feedback is heard and respected. Relatedly, to support these feedback loops, it may be useful to have a plan in place to get systematic and ongoing feedback to hear parents' and caregivers' perspectives on what is working well with their overall participation and what can be improved.

4. **Consider incorporating opportunities for parents and caregivers to build their skillsets and develop their networks into family engagement efforts.** In our interviews, parents and caregivers reported that they valued and appreciated opportunities to participate in trainings, learn new skills, and connect with policymakers and other parents and caregivers. It is important for states to provide parents and caregivers with the skills training, content knowledge, and resources they need to meaningfully participate in different family engagement activities and strategies. Furthermore, states should consider ways to engage parents and caregivers in activities that allow them to develop new skills of interest to them (e.g., facilitation skills, advocacy skills, etc.) and build their personal and professional networks. This helps ensure family engagement activities are mutually beneficial and that parents and caregivers have developed new skills and connections that will support them beyond their participation in a particular family engagement activity.

5. **Ask parents and caregivers about the best format, days, and times for meetings and other family engagement activities.** In our interviews with parents and caregivers we learned that decisions about these logistics—virtual or in-person meetings, days of the week, time of day, whether children can attend, etc.—impact which parents and caregivers will and will not be able to participate. These decisions should be driven by parents' and caregivers' schedules and preferences and should be revisited regularly to see if adjustments need to be made (e.g., moving a meeting to a different time).

6. **Prioritize creating welcoming environments when designing opportunities for parents and caregivers to engage with your work.** While interviewing parents and caregivers, we heard about the importance of creating spaces and meetings that are non-judgmental, child-friendly, flexible, and accessible. These environments may facilitate parents' and caregivers' participation and help them feel comfortable sharing their feedback and experiences.

7. **Explore opportunities to continue learning from the growing set of best practices for family engagement and leadership.** Many states, communities, and organizations have developed guidance and best practices for meaningful and effective family engagement and leadership. These documents can serve as helpful tools with detailed information on strategies for other states to consider. Example resources for states include:

    - North Carolina Early Childhood Family Engagement and Leadership Framework
        - Family Engagement and Leadership Action Guide and Toolkit
    - Stepping up and Speaking Out: The Evolution of Parent Leadership in Michigan
    - Parent Engagement and Leadership Assessment Guide and Toolkit: Comprehensive Report
    - Strengthening Families: Self-Assessment for Center-Based Early Care and Education Programs

Conclusion

The purpose of this case study brief is to spotlight three state initiatives that sought to integrate families' perspectives into their efforts to strengthen the CCEE system and support families with young children in the wake of the COVID-19 pandemic. To learn more about how these initiatives were implemented and how they engaged families in their work, we interviewed staff implementing each initiative. We also interviewed parents and caregivers who participated in these initiatives to learn about their experiences. This brief presents findings and implications that can be included in a growing set of resources available to state and local leaders about the importance of engaging families in meaningful ways. Our hope is that this brief can serve as a resource to other states and communities as they engage families in their work and seek to document their progress and impact.



Appendix A: Detailed Methodology

Searching for state initiatives

In 2021, the Child Trends team conducted a search to find examples of how states and localities responded to the COVID-19 pandemic in innovative ways to support young children, their families, and the child care and early education (CCEE) system overall. We searched for examples of initiatives focused on the following topics:

- Strategies to strengthen CCEE programs
- Strategies to support home-based child care providers
- Strategies to support the CCEE workforce
- Strategies to support families with young children

The search process included searching local and national databases, organizing examples from colleagues, and conducting targeted internet searches, described below. We defined innovation as unique approaches that used community engagement, data collection, cross-sector collaboration, and technology to address the pandemic and the CCEE needs of families.

The first step in the process was to gather examples based on Child Trends' current and past work with states and local communities. For each idea that met the criteria, we conducted an online search to gather more specific information. Next, we looked at databases and resources focused on early care and education (ECE), COVID-19 policy considerations, funding sources, and COVID-19 Responses. The databases and resources we used included:

- The Hunt Institute
- The State of Preschool 2020
- Early Success
- Start Early
- Alliance for Early Success
- Council of Chief State School Officers- Early Childhood Education
- Child Care & Early Education Research Connections: COVID 19 reports and Childcare Resource
- Urban Institute Policy Center

After compiling the examples shared by Child Trends colleagues and the databases/resources into an Excel file, we began targeted Google searches for additional examples. For these targeted searches, we prioritized states for which we did not already have examples from our colleagues and national resources and databases. In the targeted searches, we aimed to identify statewide or local policies, local government responses (including collaborations between the department of health and the department of families and children or its equivalent), as well as local non-profit or foundation responses. Our search terms included: state names, early care and education, early childhood COVID-19 responses, community COVID-19 responses, nonprofit COVID-19 responses, early childhood COVID-19 legislation, and early childhood COVID-19 policies.

After compiling these examples, the team reviewed and removed examples where there was limited information available, or where the only information available was the amount of federal funding states intended to spend on CCEE. Next, we conducted three meetings with seven experts representing national organizations to learn about additional state initiatives to consider for the case study. We added these examples to the excel file and submitted it to OPRE for review. This search yielded approximately 127 initiatives. After OPRE reviewed the Excel file, we met to discuss the next steps for the case study. During this meeting, we decided collaboratively to focus the case study on strategies to support families with young children.

Interview methods

After narrowing the focus of the case study to highlight initiatives to support families with young children (approximately 64 initiatives), Child Trends defined a set of criteria to further narrow the scope:

- Represent geographic diversity
- Are ongoing, currently being implemented (or in active planning stage with planned implementation in 2023) and were not one-time events or short-term programming that has ended; for example, we eliminated innovative legislation that had not been passed and/or had one-time sources of relief payments
- Represent a range of topics including: 1) mental and physical health supports, 2) social and emotional development, 3) developmental screening, 4) affordability, 5) family engagement and family voice, and 6) finding care
- Focus on CCEE and/or initiatives that specifically targeted families with children birth through age five
- Represent innovative strategies that were different than what many or most states were doing
- Focus on examples that centered equity by tailoring to specific populations of interest, or initiatives that focused on underserved populations

Using the criteria, the team decided to focus on initiatives that highlighted family voice, narrowing the list to 13 examples. After review and approval from OPRE, Child Trends contacted staff from nine of the 13 initiatives to request a screener interview. Child Trends conducted six 20-30-minute screener interviews to learn more about each initiative and determine whether it would be a good fit for this case study.[c] We offered all interview participants a $25 electronic gift card to thank them for their time and participation. With the permission of the interviewee, our team recorded each interview and took notes to document each interviewee's responses. After completing the six screener interviews, our team reviewed the notes and used the following criteria to identify which states to conduct a full interview with and include in the case study:

- **Focus on young children and their families:** initiatives include family-centered strategies to support young children and their families
- **Focus on equity:** initiatives are working to advance equitable outcomes in their state (e.g., identifying and addressing long-existing inequities, providing culturally responsive supports and services, ensuring engagement of families that reflect the full racial and ethnic diversity of their state)
- **Sustainability:** initiatives have plans for longer-term sustainability and no plans for ending implementation
- **Family voice:** initiatives engage(d) families to get their input on designing and/or improving programs and services and were able to connect us with some of the parents and caregivers who participated in their work

Using these criteria, we identified three initiatives to include in this case study: 1) Missouri's launching of the Office of Childhood, 2) Nevada's Child Advocacy Ambassador Program, and 3) Strong Start Washington's Universal Developmental Screening System. Next, we conducted three 60-minute interviews with eight total staff members from state and nonprofit agencies involved with implementing the initiatives. During these interviews, we asked staff to share more details about the strategy/initiative including: why the state decided to invest in the strategy or system, who played a role in planning for and implementing the strategy, how they have incorporated feedback from families, implementation efforts of the initiative, how they addressed inequities through the work, and their goals for supporting families' unique needs. Then, we asked about the impact, successes,

[c] We did not get a response from two states, and a third state scheduled an interview but then was unable to attend or reschedule.

and challenges of the initiative. We recorded each interview (with interviewee permission) and took detailed notes to capture the comments and perspectives of each interview participant. As a thank you for their time and insights, we offered all interview participants a $50 electronic gift card.

As a next step, we worked with staff from the three initiatives to identify up to three parents and caregivers who participated in their initiatives and were interested in participating in an interview. We emailed these nine parents and caregivers to explain the purpose of the case study and request to interview them. All nine parents and caregivers (three from each state) agreed to participate in a 60-75-minute interview to share more about their experiences with these initiatives. With the interviewees' consent, we recorded and transcribed each interview. All parents and caregivers received a $50 electronic gift card to thank them for their time and participation.

To analyze these interviews, we developed an initial set of codes using a content analysis approach to answer the research questions and understand each state initiative and parents' and caregivers' experiences participating in the initiative. Next, using Dedoose, two team members independently coded one screener interview document and two other team members reviewed the codes applied to these interviews to check for accuracy and consistency across coders. Next, we met as a team to discuss questions that came up during the process of coding and reviewing the first screener interview and determine whether any new codes should be added to the coding scheme. The team continued coding the rest of the six screener interviews, three full interviews with staff implementing each initiative, and then the nine interviews with parents and caregivers. For each interview, one person on the team served as the primary coder and another person on the team reviewed the codes, leaving comments and suggested revisions as needed. Throughout the coding process, our team held weekly meetings to discuss questions and possible adjustments to the coding scheme. After the team coded and discussed each interview, we reviewed and analyzed the codes in Dedoose to identify key themes and findings to include in the case study.

Appendix B: Summary of State Initiatives

Missouri

Purpose and goals of the Office of Childhood

The Governor of Missouri created the Office of Childhood in 2021 via Executive Order to consolidate nearly all publicly-funded services and programs related to child care, home visiting, early learning, and early intervention. The purpose of the new office is to better coordinate early childhood services, reduce duplication of efforts by different offices supporting young children, increase the use of data to inform programs and decision-making, streamline information on early childhood programs and services for both families and providers, and incorporate families' feedback and interests throughout the process. The office consolidation and activities within the Office of Childhood are also designed to increase families' equitable access to programs and supports to meet their unique needs. The state plans to monitor this focus on equity by examining the demographic characteristics of families served by state programs to determine whether more outreach or improvements are needed to improve access for specific communities within the state. In their 2023 strategic plan, the Office of Childhood described how they plan to expand access to programs and services, improve the quality of early childhood programs and services, strengthen community leadership, and modernize systems to improve operations.[12]

Implementation and family engagement[d]

With the support of The Hunt Institute, Missouri engaged over 250 stakeholders, including CCEE providers, advocates, and community organizations, to plan for and inform the launch of the Office of Childhood. One of the key findings from this stakeholder engagement was the need to improve family engagement strategies across the state. To conduct family engagement across the state, the Office of Childhood created regional Parent Advisory Councils (PACs) for families to provide input and feedback on community needs and priorities related to early childhood and school readiness, ways to elevate the importance of early childhood in their community, and ways to be more consistent and efficient across the Office of Childhood's efforts. Regional PAC members consist of parents and caregivers that are representative of the community and experienced with the current issues that families face. PACs include representation from families with a child with a disability, families that speak a language other than English, and families with diverse racial and ethnic backgrounds. Through the PAC, parents and caregivers also partake in training and share resources among its members. Parents and caregivers involved in the PACs determine when to meet, the format of meetings, and topics to discuss to ensure their needs and preferences are prioritized.

In addition to the regional PACs, the Office of Childhood convenes a statewide PAC that meets to discuss the progress of the Office of Childhood's strategic plan. The state identified three parents and caregivers to join this council. The Office of Childhood also sends out monthly webinars and newsletters to over 10,000 stakeholders, including approximately 350 parents and caregivers to share information about resources, community events, and other family-focused activities happening across the state. Moving forward, the Office of Childhood will continue to be funded through general revenue funds and other dollars including the Child Care and Development Fund.

To inform this case study, we interviewed one parent who participated in the statewide PAC and two parents and caregivers who participated in regional PACs.

[d] For Missouri, we combined the implementation and family engagement topics because most of the time spent during our interviews with them focused on their family engagement efforts. Although the Office of Childhood has several goals and areas of work, we focused our interview specifically on their family engagement work and the family engagement components of their strategic plan.

Nevada

Purpose and goals of the Child Advocacy Ambassador Program

Nevada's Child Advocacy Ambassador Programe ("the ambassador program") was created by The Children's Advocacy Alliance (CAA) to shift power dynamics to ensure the voices and perspectives of parents and caregivers are directly informing policy decisions in the state of Nevada. CAA is a "community-based nonprofit organization that mobilizes people, resources, and reason to ensure every child has a chance to thrive and to make Nevada a better place to live and raise a family."[13] The ambassador program aims to provide policy makers and state leaders opportunities to engage parents and caregivers in policy discussions and decision-making. Another goal of the program is to facilitate connections between participants while also connecting them with organizations and advocacy groups that align with their advocacy interests and goals.

Implementation

Through the ambassador program, the CAA has convened three cohorts (including one in person and two virtual cohorts) of 20-25 parents and caregivers. CAA partnered with community organizations and leaders, including partners in Tribal communities, to recruit cohorts of parents and caregivers that reflect the diversity of Nevada. Participants in each cohort meet monthly over a ten-month period to receive training and information on how to effectively advocate for policy change in Nevada. For example, during meetings, participants receive training on Nevada's legislative session and schedule, how to track a bill, how to contact legislators, as well as other advocacy resources and toolkits. During cohort meetings, participants also have opportunities to reflect on their communities and lived experiences and brainstorm topics of interest and policy changes they would like to see happen in Nevada. Each cohort receives coaching on making connections between their own lived experiences and current legislation and shaping their advocacy messages in a way that will resonate with legislators. The CAA also provides social and emotional supports to the cohort as they navigate these topics, such as connecting them to support groups or referring them to other needed services. For some meetings, the CAA invites guest speakers to present on topics that are of interest to the cohort.

Cohort members have contributed to numerous policy changes that have positively impacted families in Nevada. For example, some program participants provided testimony at a legislative session and signed a letter of support advocating for Assembly Bill 113,[14] a bill that lobbied to establish a new Office of Early Learning Systems in Nevada. The goal of this new office was to facilitate cross-systems collaboration across various departments that support young children and their families, but the bill was not signed into law during the 2023 legislative session.[15] Cohort members also provided testimony and signed a letter of support for Assembly Bill 114,[16] advocating to change the makeup of the Early Childhood Advisory Committee to be more inclusive and representative of communities across Nevada. Assembly Bill 114, was signed into effect by the Governor on June 5, 2023.[17] Despite numerous successes, the ambassador program has also had some early challenges, including retention and engagement of cohort participants who have many constraints on their time and often have life circumstances that make participation challenging. To address this challenge, the CAA works with cohort members to identify dates and times for cohort meetings to make it easier for them to participate. The ambassador program is funded by a three-year grant from the J.B. and M.K. Pritzker Family Foundation which the CAA hopes to renew in the future to continue implementing this work.

Family engagement

The ambassador program is driven by the needs and goals of the cohort participants. At the start of each cohort, facilitators talk with participants about topics of interest and policies they are interested in supporting or advocating for, and then they design the cohort meetings to specifically address those interests. The program facilitators also work with the cohort to set group norms and establish

[e] This program was previously referred to as the Parent Ambassador Program, but CAA changed the program's name to be more inclusive of all caregivers.

a culture where participants feel comfortable participating and sharing their stories. The ambassador program has an explicit focus on storytelling. Facilitators support cohort participants in making connections between their personal stories and interests, the current legislature, and relevant policies. Through the ambassador program, participants are also empowered to tell their stories to legislators and speak out in their own communities.

To inform this case study, we interviewed three parents and caregivers who participated in a cohort of the ambassador program.

Washington

Purpose and goals of the Universal Developmental Screening System

Strong Start Washington's Universal Developmental Screening System ("the system") is an online portal run by Washington's Department of Health (DOH) for parents, caregivers, and service providers to document data and information on children's developmental screenings. The purpose of this system is to promote universal developmental screening, decrease stigma around developmental screening, streamline and organize all of the existing data from developmental screenings with children birth to 5 years, and reduce duplication in screening efforts. The system is also designed to focus on equity by supporting the state in continuing to identify gaps and inequities in screening access and referrals to needed services. Additionally, the system informs the development of specific strategies to increase access to screenings and connection to services among communities with lower rates of screening and connection to services. The idea for creating this system was generated in part from families expressing a need for better access to developmental screening across the state. The state also had access to state Medicaid claims data and national data that pointed to inequities in screening rates and connection to early intervention services. As a result, the state wanted to develop a system to universally track screening and connection to services to better identify and understand these inequities.

Implementation

Numerous agencies, including the DOH; Help Me Grow; and the Department of Children, Youth, and Families (DCYF); had been discussing the need for a developmental screening system and attempting to plan for it for close to a decade. The state received funding in 2019 to develop and launch the system, but implementation progress was affected by staffing challenges due to the onset of the COVID-19 pandemic. Despite these challenges, DOH was motivated to continue moving forward with this system during the pandemic, as they saw the ways that the pandemic was affecting children's developmental outcomes and exacerbating long existing inequities in screening and connection to services. The state launched a "minimally viable version," or Version 1 of this system in 2021, which they piloted in four regions that represent the racial, ethnic, language, and income diversity of the state. The purpose of these pilots was to test the system and get feedback from families in communities where the state has seen inequities in access to screening and connection to services to address developmental delays. The DOH launched a statewide rollout of the system in fall 2023. While federal funding for this work ended in September 2021, the Washington state legislature approved ongoing funding in 2021 for the continued development and maintenance of this system.

Family engagement

The state has partnered closely with family advocacy groups in Washington throughout the planning and early implementation stages to hear their perspectives on the need for the system, feedback on the system itself, and to get input on how best to roll out the system statewide. Additionally, the state is getting ongoing input from families to inform the development and improvement of the system. For example, the program lead has had many one-on-one meetings with parents and caregivers to get their feedback on the system, including recommendations for how the system could be improved to better meet families' needs. The DOH is also holding listening sessions with parents and caregivers

who have been using the system in the pilot regions to hear their feedback and identify possible improvements to inform the statewide rollout. They also hired a Tribal consulting firm to conduct focus groups and listening sessions in Tribal communities to hear their feedback on the system and are trying to plan a pilot of the system with a Tribal health partner. The DOH has used feedback from families to inform numerous improvements to the system, including translating the system into Spanish, improving the accessibility of some of the language used throughout the system, and adding language to the system to address parents' and caregivers' concerns about data privacy and security.

To inform this case study, we interviewed three parents and caregivers who provided feedback on the Universal Developmental Screening System either before or during the pilot phase to learn about their experiences.

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Engaging Families in State Initiatives: A Case Study of Lessons Learned

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