

# Early Childhood Health Equity Landscape Project



## ADDRESSING EARLY CHILDHOOD HEALTH EQUITY IN COMMUNITIES AND STATES

Overview and Key Findings from the ECHE Landscape Project

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## INTRODUCTION

Across the United States, local communities and regions have recognized the urgent need to support the health and developmental well-being of young children and their families by coordinating activities aimed at improving children's health and well-being.

Early childhood health equity (ECHE) initiatives respond not only to the evidence documenting the resources and positive experiences young children need to promote their healthy development, but also to community data that expose the disparities in access to resources that result from systemic racism and other barriers to well-being. ECHE initiatives operate at the intersection of services and policies to support health, strong families, and access to high-quality early care and education. These unique early childhood system-building efforts typically include collaborations across sectors and funding streams to meet the needs of children and families in the context of their communities.

Although rich and meaningful work is being implemented to support ECHE initiatives through national networks that offer technical assistance, opportunities for peer engagement, and capacity building, few efforts to date have completed a comprehensive analysis of features and assessed impact across the wide range of ECHE initiatives in the United States. The Early Childhood Health Equity Landscape Project (ECHE Landscape Project) addresses a critical need in the field by looking across established and emerging initiatives to create a portrait of their features and to document their initial impact and ongoing needs. The project is a first step in what we intend to be a coordinated effort of analysis and distillation of these diverse ECHE initiatives' role in supporting the developmental needs of children and their families.

This brief synthesizes the recent work of the ECHE Landscape Project and highlights the themes and findings that emerged across the project activities. The brief shares an overview of findings from our survey of ECHE initiatives and describes key themes from our analysis of issues that are critical for ECHE initiatives, including cross-sector relationships, operationalization of health equity, adaptation of initiatives to the COVID-19 pandemic, data and measurement, sustainability, and connections between local and state ECHE initiatives. Bolded statements throughout this brief alert the reader to key themes and strategies.

## Early Childhood Health Equity Landscape Project

**Early Childhood Health Equity (ECHE)** work seeks to strengthen early childhood systems to support healthy child development and reduce health inequities and disparities that can have a lifelong impact.

In an effort to understand how ECHE work is carried out at the local, state, and national levels, the **ECHE Landscape Project**, a joint venture of the National Institute for Children's Health Quality (NICHQ) and Child Trends and funded by the Robert Wood Johnson Foundation, gathered and analyzed information on cross-sector initiatives promoting early childhood health equity through the **ECHE Landscape Survey**.

To provide context to the ECHE Survey, the ECHE Landscape Project team has also held conversations with ECHE initiatives to inform a series of spotlight briefs on the topics of health equity, measuring and reporting progress and impact, sustainability, cross-sector partnerships, and state-local collaborations. The information from the landscape survey and series of spotlight briefs is intended to support innovation across sectors to advance health equity for young children.



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## THE LANDSCAPE OF INITIATIVES

Early childhood health equity efforts exist at the national, state, and local levels. Additionally, networks exist to unite efforts across the country and improve service provision. The ECHE Landscape Project aimed to elevate the work of local and regional ECHE initiatives, as this work represents community-level innovations that can inform broader policy and practice. The ECHE Landscape Project also identified and described the work of initiatives that target and address early childhood health equity using a cross-sector approach. The purpose of sharing this information is to build awareness of these initiatives across the field, to advance practices that actively build health equity into the early childhood landscape, and to support improvements in the health and development of young children and their families.

Early childhood health equity initiatives:

- > Focus on issues related to health and development
- > Engage multiple sectors and early childhood contexts to address their issue of focus
- > Address inequities that systematically affect health and development outcomes

In March 2020, initiatives that met these criteria were sent personalized invitations to the ECHE Landscape Survey, which was developed by the project team to gather more details about each initiative. Most questions allowed respondents to select all answers that applied to their initiative from a series of options. Questions asked about financial support, health and population focus, and sector representation throughout the initiative.

### Funding

An initiative's funding sources provide important insights into their operations and sustainability. Sixty percent of initiative representatives indicated that the initiative received grant funding from foundations. The next most common funding sources were state (32%) and federal (33%) public funding, with local public funding (27%) and other sources (20%) following. Four percent of initiatives indicated that they did not have funding. **The predominance of grant funding as a key source for initiatives indicates that early childhood health equity is a priority for philanthropy but also poses challenges for sustainability if priorities shift.**

### Focal Area

A main goal of the ECHE Landscape Project was to learn more about the health and development focus of ECHE initiatives. Respondents were asked to choose all that applied from a list of health- and early childhood-related focal areas. The majority of respondents (84%) indicated that social and emotional development was a main focus of their initiative. Additionally, mental health (69%), school readiness (67%), healthy relationships and attachment (65%), and trauma and toxic stress (66%) were frequently selected, with nutrition (48%), pediatrics (51%), and pregnancy/postnatal health (52%) represented in approximately half of the initiatives. Twenty percent of initiatives also selected an "other" option, writing in responses such as physical development and environmental health.

Additionally, to determine how an initiative's health equity focus was guided by specific social determinants of health (SDOH), the survey asked initiatives to select all options that applied from an SDOH list compiled from guidance developed by the World Health Organization and The Kaiser Family Foundation.<sup>1,2</sup> This list represented conditions in the environments where individuals live, work, and learn that affect outcomes related to quality of life and health. Results illustrate that initiatives focus on the intersection and interconnection of children's developmental outcomes and SDOH. In one third of initiatives, respondents selected all five SDOH options: economic stability, education, health and health care, neighborhood and built environment, and social and community context. **Addressing children's developmental needs in the context of social determinants of health increases the complexity but also the potential impact of ECHE initiatives.**

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### Types of Partners

Initiatives partnered with a wide variety of organizations across sectors to achieve their goals. The most commonly represented sectors fell into the categories of social and community supports and early childhood, with health services and systems being the next most common. Within social and community supports, service sectors providing parenting and family support, public health, and food and nutrition programs were most often represented within initiatives (Table 1). Initiatives were most commonly led by nonprofit organizations, public and government leadership, and health care organizations. Of the eight choices listed, respondents chose an average of five, indicating that leadership was shared between a variety of organizations. Half of all respondents indicated that their initiative was affiliated with a state agency or initiative. **The partnerships in ECHE initiatives hold promise for ensuring that cross-sector services can be leveraged to support children and families.**

**Table 1.** Sectors represented among ECHE initiatives

Service Sector Domain	Percentage
Social and Community Supports	85%
Early Childhood	83%
Health Services and Systems	76%
Disability	70%
Education	63%
Legal	50%

*Respondents were asked to select all that apply. Source: Authors' analysis of ECHE Landscape Survey Data*

### Levels: National Networks, State or Regional/Local Initiatives

The locations and overall distribution of supports influence families' access to services across contexts (e.g., early care and education programs and home) and can provide insight into the priorities of a community. The ECHE Landscape Project team made extensive efforts to find and contact initiatives in every state; survey respondents represented initiatives in 40 states, Washington, DC, and one U.S. territory, with 55 percent located in the eastern United States. Initiatives were located in a mix of urban and rural areas. Forty percent operated at the local level, with state-level initiatives representing just under one third (31%) of respondents. Eighteen percent of respondents indicated that their initiative operated at multiple sites, which could mean local sites within different states or regional operations, and 10 percent indicated "other" or "unsure" for their location. **The diverse landscape of ECHE initiatives indicates the potential to ensure coverage across geographies but also the need for intentional coordination to effectively serve children and families.**



## DOCUMENTING THE WORK OF EARLY CHILDHOOD HEALTH EQUITY INITIATIVES

The premise of cross-sector initiatives reflects two realities: that the issues these initiatives are designed to address are multifaceted and thus require a multifaceted approach, and that cross-sector partnerships to address the same issue reduce duplication and competition among efforts.<sup>3</sup> Broadly, cross-sector initiatives have been shown to benefit young children and families by improving outcomes such as rates of developmental screening, identification of children with special health care needs,<sup>4</sup> and early literacy outcomes.<sup>5</sup> Research studying the impact of cross-sector initiatives on systems change has been fragmented and often difficult to assess given varying definitions and understanding of what constitutes systems change.<sup>6</sup>

These types of initiatives require high-quality partnerships, investment in cross-sector collaboration, and policies and practices that support collaboration.<sup>7</sup> For example, research suggests that cross-sector partnerships require commitment and meaningful engagement of stakeholders, intentionality in choosing partner sectors, and involvement of partners as leaders within collaboratives.<sup>8</sup> This type of internal functioning has also been linked to the perceived effectiveness of collaborations.<sup>9</sup>

Cross-sector partnerships rely on several factors to be developed, effective, and sustainable. One way to describe these factors, developed by the Center for Sharing Public Health Services and PHNCI,<sup>10</sup> illustrates how factors can be both external and internal to the initiative itself:

- > **Community and environmental factors**, including national legislation and initiatives, local and state-level policies, and community needs
- > **Organization factors**, including capacity for cross-sector collaboration and organizational norms around partnering and managing competing priorities
- > **Collaboration factors**, including broad participation, shared vision and goals, effective communication strategies, funding, strong leadership, governance, and monitoring and evaluation

The landscape survey findings highlighted the need to facilitate deeper conversations with initiative representatives to understand the complexities of how local initiatives operate. The ECHE Landscape Project team selected initiatives across the country to participate in virtual conversations to further explore the features of their collaboration and their strategies to address operations and sustainability. A total of 24 virtual conversations were held during spring and summer 2020 with ECHE initiatives from 19 states and Washington, DC, state agency partners, and multi-state networks. The general structure and format of the virtual conversations were intended to maximize information exchange and idea generation across participants and ultimately inform the summary briefs described later. Conversations focused on key themes emerging from the landscape analysis, with a set of guiding questions used to support facilitation.

In light of the literature and the focus on collaboration factors, the ECHE Landscape Project team selected five key topics for the virtual conversations.

**Connecting local ECHE initiatives and state infrastructure.** About half of the initiatives surveyed indicated that they have some level of connection with their state agencies. Yet little work on cross-sector initiatives has explored how state and local levels can effectively work together to ensure a two-way dialogue that improves the design and implementation of policy. Questions posed in these conversations focused on strategies used to build relationships between state and local agencies and to participate in capacity-building activities.

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**Financing and sustaining ECHE initiatives.** The majority of initiatives surveyed indicated one funding source, the most common of which was philanthropy. Thus, it is critical to understand how initiatives are thinking about their financial future—particularly in terms of sustainability of funding for initiative infrastructure. In these conversations, we explored the strategies that promote stability, along with creative solutions used by initiatives to support initiative financing.

**Data and measurement of progress and impact.** Nearly all surveyed initiatives indicated that they used data to monitor their efforts and engage in quality improvement. However, data and measurement remain key challenge areas for many initiatives, given potential issues around deciding which data to collect, building trust with stakeholders regarding how data will be used and communicated, and accessing and coordinating data that may be housed in different agencies. In these conversations, we explored the use of data for both improvement and accountability.

**Connecting across sectors during COVID-19.** The survey results demonstrated that initiatives are inclusive in their representation of many service and community sectors. At the same time, the list of sectors engaged in this work is long, raising questions of how the initiatives systematize and prioritize their work in a way that facilitates effective partnerships but does not overburden organizations. The onset of COVID-19 has made cross-sector partnerships even more valuable. The conversations focused on understanding how established structures and processes in the initiative are creating or inhibiting their flexibility and capacity to be responsive to the families and children they serve.

**Embedding equity in early childhood initiatives.** All surveyed initiatives had some focus on health equity, which is also indicated by the fact that the most commonly selected populations of interest are traditionally underserved and underrepresented communities. At the same time, the initiatives have a broad focus area but do not regularly include representation from some of the most important sectoral drivers of inequity, such as transportation, housing, and K-12 education. Thus, we used our virtual conversation to discuss how initiatives are embedding equity in their work and to gather examples of how equity shows up in initiatives' selection of goals, activities, implementation of services, collection of data, and reporting on progress.

## STATE-LOCAL COLLABORATION AND SUPPORT FOR ECHE INITIATIVES

Local-level initiatives collaborate with state partners to form connections between families, programs, early childhood sectors, and early childhood governance structures. These collaborations can positively impact initiative work and improve outcomes for children and families. The ECHE Landscape Project team spoke with local leaders and state partners from four initiatives to elevate voices from the ECHE field and tell the stories of how state-local collaborations support work at the intersection of early childhood and health equity. We identified five key themes from these conversations that highlight how state-local collaborations can be supported, along with ways in which state-local collaborations support local ECHE initiative work.

“All of the work that we’ve done around adverse childhood experiences ... literally we could not have done it. We couldn’t have done it without [the state’s] financial support, we couldn’t have done it without their emotional support, and their exposure and their trainings. I think that’s been a real win.”

– Carol Marlar,  
Executive Director North Texas Area United Way

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Figure 1. State supports for local initiative work



The participating snapshot initiatives were:

- All Our Kids Early Childhood Networks
- The Early Childhood Coalition of Greater Wichita County
- Early Childhood Comprehensive Systems New Jersey
- South Dakota Statewide Family Engagement Center

### Key Themes

- 1. State-local collaborations are structured in multiple ways.** The snapshot partnerships differed in how they were established and maintained, and on factors such as sources of funding, scope of the partnership, and supports offered by the state.
- 2. Communication and relationship building is critical for establishing and maintaining state-local collaborations.** The initiatives highlighted the importance of communication with state partners, state policymakers, other ECHE initiatives, and cross-sector partners.
- 3. State-local collaborations support initiative impact at the local level through a variety of activities.** For a list of supports, please see Figure 1.
- 4. State-local collaborations allow the state to be responsive to local needs.** Local initiatives engage with community members and assess community needs to inform approaches to work.
- 5. State-local collaborations support the sustainability of ECHE work through systems-building and continuity of vision and staffing, and by allowing for multiple sources of funding.** The initiatives discussed embedding best practices at the state or local levels, ensuring that the work does not hinge on the presence of a single person, and actively seeking multiple funding streams.

“We need to continue funding the communities that we have because we have learned a lot from these communities. There have been a lot of other initiatives that have come [about] because of what the AOK Networks have done. Our experience has helped build other things.”

— Ana Maria Accove, State Administrator for the All Our Kids Early Childhood Networks, Illinois Department of Human Services



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# SUSTAINING CROSS-SECTOR ECHE INITIATIVES

“I think the easier things to sustain were enhancements to strategies or programs that were already occurring, like strengthening the referral process for home visiting, [support for building a] coordinated referral line ... That’s sustained to this day ... some of the strategies that built the capacity of those systems partners to serve more families and be more efficient.”

— Brandy Fox,  
The Pennsylvania Key

Cross-sector initiatives face a challenge in securing resources for sustaining initiative work. For example, grants that fund the formation of community coalitions are typically only for a dedicated period; when the grant ends, initiatives must look for additional resources and sources of funding to ensure that initiative activities can continue. In this brief, we define sustainability as the identification of private or public funding that can be tapped to support the future work of the collaborative body on an ongoing basis. The ECHE Landscape Project team spoke with representatives from five initiatives to tell the story of ECHE initiatives’ approaches to sustainability, highlight funding mechanisms, and outline challenges. From these conversations, we identified five strategies addressing ECHE initiative sustainability. Please note that these findings should be viewed as hypothesis-generating for future research and do not represent findings based on evaluation.

The participating snapshot initiatives were:

- > **Monroe Smart Start**
- > **Pennsylvania Project LAUNCH**
- > **R.O.C.K. Mat-Su**
- > **Sussex County Health Coalition**
- > **TEAM UP for Children**

### Key Strategies

#### 1. Governance structure of the collaborative:

Three initiatives were embedded in funding agencies. This makes ongoing funding more readily available, increases interest among other funders, and allows key lessons and practices to be shared with other funding priorities.

**2. Proactive and intentional engagement of funders:** Initiatives that are not embedded in funding agencies can proactively arrange for philanthropy representatives to attend and participate in local initiative and community meetings to identify common interests and guide future work.

**3. Enhancement of what exists, rather than building anew:** The initiatives discussed the challenge of maintaining staff positions and the benefit of building initiative work into existing state or local roles. Examples of practices and resources include enhancing systems for referrals between agencies, or enhancing the capacity of staff to work more efficiently and collaboratively, by supporting trainings and taking time for agencies and partner groups to develop common language and goals that can be used to guide work over the longer term.

**4. Incorporation of long-term financing into all elements of the initiative:** One initiative included billing and reimbursement experts as part of their work to optimize the billing practices of community mental health clinicians and workers. This raised the question of how the inclusion of financing experts could support initiative sustainability more broadly.

**5. The role of data:** The initiatives underscored the importance of using data to quantify their impact on the community and to increase funding and resources in support of continued initiative work.

“First of all, awareness is key. How do you get nonprofits who normally wouldn’t be in front of funders, in front of them? We started a meet the funders series. We brought funders down and did intimate discussions. Many of our non-profits were scared; they don’t know how to navigate that. How do we create opportunity for their leadership to have access? To be aware of who is funding and what they’re funding? [We] create an opportunity for access and then shepherd some of those relationships.”

— Peggy Geisler, Sussex County Health Coalition



## DATA AND MEASUREMENT OF PROGRESS AND IMPACT

Data collection, analysis, and reporting are essential activities of ECHE initiatives. However, initiatives face challenges accessing and coordinating data that may be housed in multiple agencies, creating reliable metrics to track their progress, communicating their impact, and building trust with stakeholders (who may come from organizations or communities that have historically been mistreated by evaluators) regarding how data will be used and communicated. The ECHE Landscape Project team talked with representatives from initiatives and to staff from national networks of initiatives that provide capacity-building supports related to data.

The participating snapshot initiatives were:

- > **Early Care and Learning Partnership**
- > **Early Childhood Alliance Onondaga**
- > **Oakland Starting Smart and Strong**
- > **PAACT: Promise All Atlanta Children Thrive**
- > **The Early Childhood Partnership of Adams County**

The participating national networks of initiatives were:

- > **All Children Thrive (ACT), Transforming Early Childhood Community Systems (TECCS)**
- > **Early Childhood Comprehensive Systems Collaborative Improvement and Innovation Network (ECCS CoIIN)**
- > **The Early Childhood Learning and Innovation Network for Communities (EC-LINC)**
- > **StriveTogether**
- > **Vital Village Networks of Opportunity for Child Wellbeing (NOW)**

### Key Findings

- 1. Engaging and empowering community members** enhances the richness of data and helps ensure that co-design, data collection, analysis, and reporting reflect the priorities of and will benefit the community. Initiative representatives we spoke with highlighted the importance of forming authentic relationships with community members early and cultivating those relationships to allow them to grow throughout the life of the initiative and beyond. Some initiatives formed these relationships by identifying and engaging local champions in the community, who then helped strengthen bonds and build trust between the community and the initiative staff and partners.
- 2. Developing data use agreements** with aligned organizations creates goals for shared measurement and data collection. Through formal data agreements, initiatives can understand the larger environment in which they operate and gain a greater understanding of their contribution to the early childhood system.
- 3. Involving data experts** in the work facilitates high-quality data and analysis. Experts can ensure that the right questions are being asked, help analyze the data, and—along with community members and partners—provide input on how data are presented.
- 4. Rethinking strategies for data disaggregation** is critical for identifying areas of strength and challenge in communities. Disaggregating data allows initiatives and their constituents to examine inequities that could be hidden by studying only population-level data.

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**Underlying the challenge of demonstrating impact at the systems level is a call for funders to recognize the time and resources required to make and measure lasting change.** The interviews identified several ways that funders can better support initiatives' use of data for improvement. The following issues should be considered when planning funding opportunities for ECHE initiatives:

- > Ensuring sufficient resources for data-related activities
- > Providing time at the start of the project period to plan for data collection and to build partnerships
- > Allowing for flexibility in measurement
- > Being clear and consistent around measurement expectations



## CROSS-SECTOR SUPPORT FOR HEALTH EQUITY IN EARLY CHILDHOOD DURING THE COVID-19 PANDEMIC

The global emergence of COVID-19 was an unprecedented health crisis that intensified existing inequities in health and well-being within the United States—particularly in realms that affect children and families. In the context of such extreme pressures on early childhood well-being, the ECHE Landscape Project team examined ways in which local initiatives have coordinated programming to improve children's well-being and address systematic inequities in health. Specifically, we investigated the ways that relationships across sectors—or groups of organizations that address a specific need (e.g., early care and education) or provide a specific kind of service (e.g., home visiting)—supported operations during the COVID-19 pandemic. Early childhood initiatives were chosen based on their goals for improving health equity, defined by the Robert Wood Johnson Foundation as universal “fair and just opportunity[ies] to be as healthy as possible ...” through “removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs and fair pay, quality education and housing, safe environments, and healthcare.”<sup>11</sup>

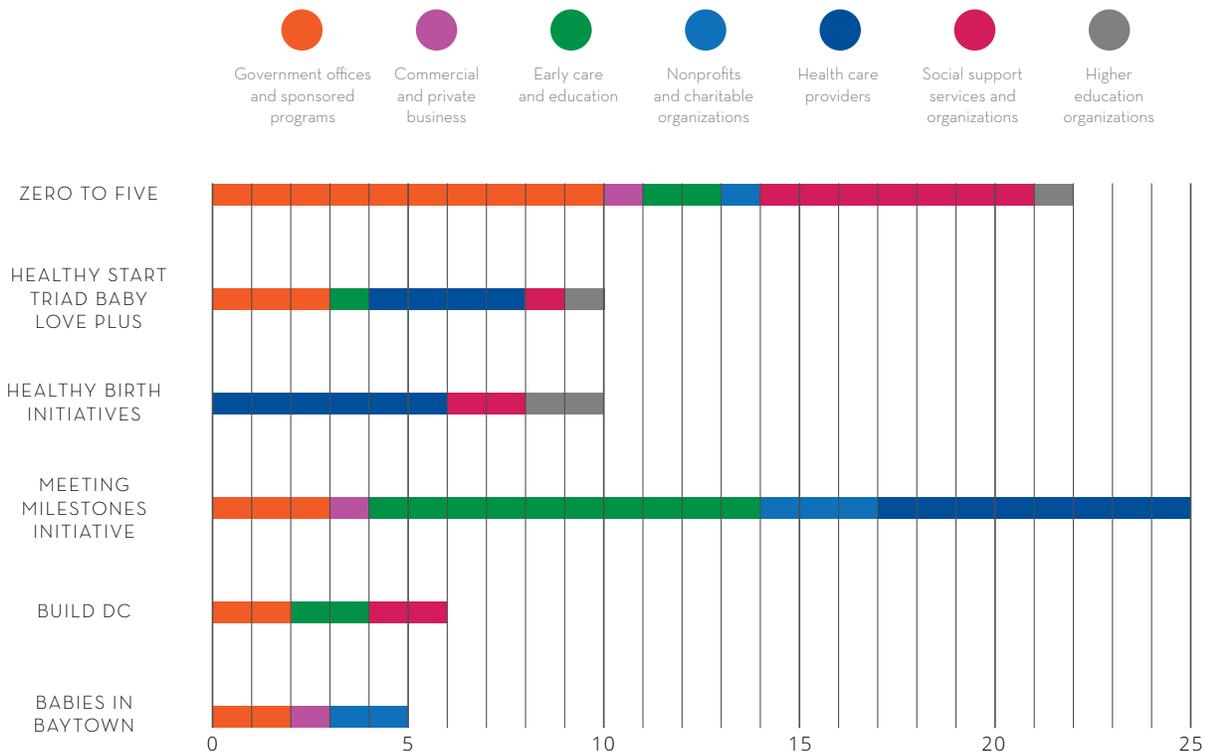
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The participating snapshot initiatives were:

- > **Babies in Baytown**
- > **BUILD DC: Creating the District’s early childhood system approach to child health, development, education, and well-being**
- > **Meeting Milestones Initiative**
- > **Zero to Five Montana**
- > **Healthy Birth Initiatives**
- > **Healthy Start Triad Baby Love Plus**



### Key Themes

- > **Cross-sector collaborations allow the unique strengths and resources of each sector to fill gaps in communities’ access to necessities.** Initiatives leveraged collaborative relationships for agile service provision that included combining efforts and flexibly using funds to meet families’ needs.
- > **Initiatives’ challenges in addressing systemic inequities are not new but have intensified in the context of an immediate health crisis.** COVID-19-related precautions worsened long-standing barriers to critical services faced by marginalized families and children. Families of color have increased risk of contracting the virus due to discrimination, lack of health care access and utilization, and inequalities in housing, occupation status, educational opportunities, income, and wealth.<sup>12</sup>
- > **Innovative solutions to service provision and outreach support a climate of openness to change and flexible collaboration.** In an environment where collaboration and rapid response were necessary for survival, initiatives were given the opportunity to try new solutions, assess their reach, and address their methods from a flexible and open mindset.

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## EMBEDDING EQUITY IN EARLY CHILDHOOD INITIATIVES

A healthy environment in early childhood is critical to health equity, with the first few years of a child’s life influencing outcomes for subsequent years.<sup>13</sup> Environmental and contextual factors, such as living conditions, air quality, healthy food options, and access to high-quality early care and education can impact outcomes for children and families either positively or negatively.<sup>14</sup> Structural racism—or the racism embedded within social and economic ideologies, structures, and processes—perpetuates inequities and benefits White children and families at the detriment of children and families of color.<sup>15</sup> Moreover, how the different facets of structural racism interact, and whether families and communities are experiencing challenges related to more than one facet, can have an impact on the health and well-being of the whole family and community.

The participating snapshot initiatives were:

- > **Ready for School, Ready for Life**
- > **Austin/Travis Success by 6 Coalition**
- > **Neighborhood Villages**
- > **First 1,000 Days Sarasota County**
- > **Solano HEALS**
- > **B'More for Healthy Babies**
- > **Northeast Florida Healthy Start Coalition**
- > **Rural Opportunity Institute**

“When we think about equity, we think about eliminating disparities. Access. Each person has what they need to be successful. Breaking down barriers ...”

— Michelle Chapin,  
Ready for School, Ready for Life

“By recruiting within the community, we ensure that cultural competency is baked into all of our programs.”

— Lauren Kennedy,  
Neighborhood Villages

### Key Themes

- > Embedding health equity into an initiative’s work required community buy-in and stakeholder engagement.
- > Although some initiative staff were representative of the communities they served, there was still a lack of racial diversity among management and leadership positions within initiatives.
- > Initiatives had supports in place that helped them maintain their focus on health equity.
- > Initiatives faced a range of barriers to ensuring that their work is equitable and that they are able to reach their communities and families.
- > The onset of the COVID-19 pandemic and the killing of George Floyd created both rifts and a sense of togetherness among communities.

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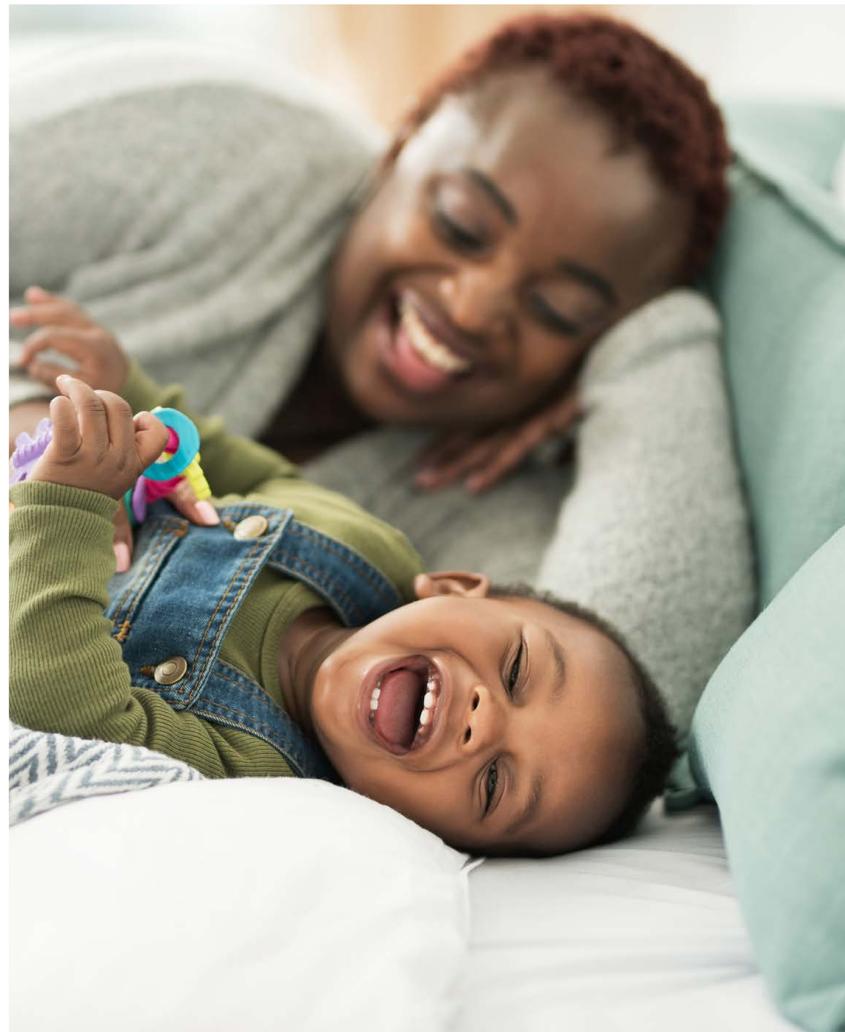
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## CONCLUSION

Our in-depth examination of ECHE initiatives provides an initial portrait of features, activities, lessons learned, and areas for continued support across these diverse, cross-sector collaborations. While there is more to learn from the experiences of these initiatives and their successes and challenges in building systems to support children and families, the findings point to bright spots across the nation and a strong foundation for continued investment in and expansion of ECHE efforts.

- ▶ Initiatives use approaches to engage partners, families, and other key stakeholders that focus on equity and power sharing. Equity is named as both a goal and a process for doing the work. Data and measurement strategies are not imposed on communities but developed in collaboration to capture strengths and address areas of need.
- ▶ The activities that contribute to system-building are not flying under the radar. They are being addressed intentionally and are being named and documented as part of the work to analyze initiatives' impact.
- ▶ The collaborative partnerships in ECHE initiatives were able to work swiftly and efficiently to address the urgent community needs that emerged in response to the COVID-19 pandemic. Partners used creative and flexible approaches that built on the strengths of their roles.
- ▶ States and communities are identifying strategies to work together successfully and to bridge across levels of services, policies, and data.
- ▶ Funders are engaged in conversations with initiatives to understand the challenges of documenting impact and setting realistic timelines for engaging in cross-sector work. There is a shared level of thoughtfulness and reflection in the field about the power of collaborative initiatives that focus on early childhood health equity, and how these initiatives connect to the broader community context for families and children.



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