



EARLY CHILDHOOD TASK FORCE

CURRENT STATUS OF ARIZONA'S EARLY CHILDHOOD SYSTEM AND FUTURE OPPORTUNITIES

Summary of System Partner and Stakeholder Perspectives

BACKGROUND

In October 2016, First Things First (FTF) partnered with Advocacy & Communication Solutions, LLC (ACS) to conduct and analyze research as part of its strategic planning process to set its statewide program and policy direction for the next five years. The information gathered in this process will inform the Early Childhood Task Force's strategic planning recommendations. This report includes information from the following sources:

1. Online survey to Regional Partnership Council members (conducted September 29 - October 16, 2016);
2. Key stakeholder interviews (conducted October 18 - November 1, 2016); and
3. Regional Council chair and vice-chair leadership forum (held October 5, 2016)

This report includes information on the following:

1. Methodology and outreach participants
2. Major themes
3. Early childhood system assessment
 - a. Strengths of the early childhood system
 - b. Gaps in the early childhood system
 - c. Differences in tribal regions
4. Effectiveness of First Things First
5. Critical areas to be addressed by First Things First
6. Opportunities to leverage partners

In 2010-2011, First Things First convened the first Early Childhood Task Force to design a comprehensive model system ideally embraced by Arizona's early childhood partners, including families; early educators; health providers; state agencies; tribes; advocacy and service delivery organizations; philanthropic, faith-based and business representatives; and other stakeholders. Through that process, the 2010 Task Force identified 20 roles¹ critical to advancing the early childhood system in Arizona. Recognizing FTF as a critical partner in building and sustaining the early childhood system, the Task Force went a step further and recommended nine priority roles for FTF to provide leadership, serve as a convener, and provide funding to advance the system. These early childhood system roles provided the basis for several questions that asked respondents about the status of the current early childhood system and the effectiveness of FTF in carrying out the nine priority roles.

METHODOLOGY AND OUTREACH PARTICIPATION

All participants were asked the following questions:

1. What are the early childhood system strengths?
2. What are the early childhood system gaps?
3. How effective has FTF been in their role in the early childhood system?
4. What critical early childhood issues should FTF address in the next five years?
5. Where are opportunities to leverage resources or partners?

¹ See appendix for 20 roles and definitions.

The answers to these questions are, in part, a reflection of how informed respondents are about the early childhood system and FTF. Many responses are based on what they know and perceive about their own region. For example, newer regional council members and some interview respondents were less familiar with FTF's statewide activities and its statewide influence on the early childhood system. In addition, where there were notable differences, the analysis compares urban and rural regions and highlights tribal region differences.

Regional Council Survey:

In total, 87 regional council members from across Arizona responded to the survey. The majority of respondents have been regional council members for five or more years (37.9%) and two-thirds of respondents have been a member for at least two years. Seventeen percent of responses were from the tribal regions and 54 percent were from rural regions. There was solid representation across the regional partnership councils, with at least one member responding from 27 of the 28 regional councils.

Key stakeholder interviews:

Advocacy & Communication Solutions, LLC (ACS) conducted 13 interviews with key stakeholders across Arizona. The stakeholders represented tribal communities and the health, K-12 education, philanthropic, child advocacy, nonprofit, child care, health and human services, higher education and child welfare sectors.

Regional Council chair and vice-chair leadership forum:

FTF convened the regional council chairs and vice chairs and structured four focused discussions with the regional council leadership organized by urban, rural and tribal regions. Twenty-four of the twenty-eight regional councils participated in the leadership forum.

MAJOR THEMES

The analysis shows several major topics and themes that appeared across all three outreach methods. Responses from the regional council member survey, chair and vice-chair leadership forum and stakeholder interviews were generally aligned with each other. The themes identified can be divided into the categories of early learning, health and wellness, family support and infrastructure. They relate to areas of strength for the system and for FTF specifically, gaps that persist in the system and areas of opportunity for FTF to prioritize its work. It is clear from the feedback that while there are areas where the early childhood system has moved forward to support Arizona's young children, the strengths are often also discussed as the system's gaps and where the opportunities exist for the next five years.

EARLY LEARNING:

1. **Access to affordable high-quality early care and education** – There is widespread sentiment that FTF should continue to focus on increasing access to affordable, high-quality early care and education. This was recognized as an area of strength for FTF and a critical need for young children that needs to be addressed in the next five years. There are a considerable number of early childhood programs not engaged in quality improvement, particularly in unregulated settings such as Family, Friend and Neighbor Care. There are also long wait lists to be part of Quality First, Arizona’s quality improvement and rating system.
2. **Reaching children where they are** – The perception among many respondents is that most children in Arizona are in Family, Friend, and Neighbor Care and as such those settings and the children in them do not have access to resources that support quality improvement.
3. **Support for early childhood professionals** – There is recognition that qualified professionals are the foundation of a high-quality early care and education system and yet there continue to be issues around recruitment and retention of teachers, particularly in rural and tribal areas. There is a need for increased wages and to provide ongoing training and education for early care and education providers. Respondents who work in the professional development field or related fields believe that FTF’s work in this area is very effective.

HEALTH AND WELLNESS:

4. **Health care** – There are gaps, particularly in tribal regions, in health care access and nutrition, and there is a general perception that FTF must take a more significant role in advancing issues of health care access and nutrition. The exception is in oral health care and social and emotional development, where participants report they believe there has been dedicated and effective efforts.

FAMILY SUPPORT:

5. **Support for families** – There is widespread recognition that providing parents and caregivers with the tools to better understand how to navigate the early childhood and related systems, access services, and overcome barriers (transportation) is critical. This was particularly recognized as a necessary area in tribal and rural regions of the state.

INFRASTRUCTURE:

6. **Funding** – In the next five years, most respondents believe that FTF should continue to secure additional funds for the early childhood system by leveraging existing partnerships and linkages, seeking strategies to diversify funding streams, finding opportunities to establish and support public private partnerships, and engaging in efforts that encourage sustainable funding sources.
7. **Partnerships** – FTF is perceived to be effective at convening key stakeholders, and there is more opportunity to do so in the next five years. At a local level, partnerships are perceived as key to advance the early childhood system.

8. **Communication, coordination, and alignment** – FTF’s structure allows it to be a leader and a convener at the state level and in local regions. Respondents suggest FTF take an even stronger role to continue to improve communication, coordination, and alignment among state agencies, local government and community organizations.
9. **Increasing parent and caregiver awareness of the importance of early childhood** – With widespread recognition that families need information on how to access services, focused efforts should be made to expand outreach and awareness to parents about both the importance of the early years and services available.
10. **Building public awareness of First Things First and support for early childhood** – A majority of respondents identified the importance of continuing to build public awareness and support for early childhood. Increasing awareness and engagement of policymakers and community leaders was viewed as critical in order to see positive gains for young children. In addition, there continue to be opportunities to engage and provide information about FTF, as it was identified that FTF and its purpose is not well known and understood across various sectors.
11. **Engage the community** – Several respondents suggested FTF should engage those who receive services supported by FTF dollars to better understand their priorities and level of satisfaction with said services.
12. **Focus on unmet needs** – There is a sentiment among a good portion of respondents that FTF has a role in identifying how well high-quality early childhood services are reaching the most vulnerable children and families.
13. **Continue focusing on Tribal engagement** – Stakeholders that represented tribal perspectives are generally satisfied with the inclusion of tribal communities, but note that especially for tribes that have not chosen to have their own regional council, it is important for FTF to secure their feedback in the same manner. It was also noted that there needs to be a continued focus on enhancing communication, and improving coordination.
14. **Data and outcomes** – Data and outcomes related to FTF as an organization and programs supported by FTF dollars (and deployed at the local level) must be more widely and more regularly shared with the general public, policymakers, community leaders, parents and families.
15. **Prioritization** – There is acknowledgement that FTF is being asked to do more with less, and respondents suggested FTF prioritize and focus efforts to make the most of those limited resources.

EARLY CHILDHOOD SYSTEM ASSESSMENT

The survey provided the opportunity for regional council members to rank the advancements made by the early childhood system related to the 20 system roles identified by the 2010 Arizona Early Childhood Task Force. These answers, along with qualitative information gathered through the interviews and chair and vice chair leadership forum summarize the top strengths and gaps in the early childhood system. Respondents often discuss system strengths as gaps and/or areas where opportunity for improvement exist, indicating that moderate advancements have been made, but more work needs to be done in these areas.

The chart below shows the 20 roles, ordered by the highest percentage of respondents who believed that moderate or significant advancement was made in the past five years. The roles at the bottom of the list are those where a greater percentage of respondents believe slight or no advancement was made. The nine priority areas of FTF are noted in red. Note that some respondents did not answer every question because they did not know how to answer or felt they did not have enough information to answer the question. For seven of the 20 roles, between 15 and 32 percent of respondents were unable to answer the question. All of these, except for one (Nutrition and Physical Activity), were non-priority roles for FTF.

The information below indicates that advancements in the system were made in building a high quality early care and education system; early screening and intervention; and in building public awareness and support. Fewer advancements were made in areas to develop, recruit, and retain early childhood professionals, including health service providers; funding; and quality of family, friend, and neighbor care.

Advancements in the Early Childhood System

Early Childhood System Role	Percent who rated the role moderate to significant advancement (all survey respondents)	Percent who rated the role moderate to significant advancement (tribal survey respondents)
Early Care and Education System Development and Implementation	87%	80%
Professional Development System	82%	75%
Building Public Awareness and Support	81%	58%
Early Screening and Intervention	79%	69%
Quality Early Care and Education Standards, Curriculum, and Assessment	78%	73%
Quality, Access, and Affordability of Regulated Early Care and Education Settings	78%	64%
Information and Education for Families	76%	54%
Specialized Training for Family Support Providers	76%	70%
Early Childhood System Leadership	76%	46%
Early Childhood System Evaluation	75%	58%
Supports and Services for Families	75%	62%
Access to Quality Health Care Coverage and Services	72%	50%
Coordinated Use of Early Childhood System Data	67%	55%

Medical and Dental Homes	67%	55%
Nutrition and Physical Activity	63%	80%
Specialized Training for Health Services Providers	59%	38%
Supply of Health Care Services	58%	50%
Recruitment and Retention of Professionals in the Early Childhood System	58%	50%
Quality of Family, Friend, and Neighbor Early Care and Education Settings	58%	55%
Early Childhood System Funding	56%	45%

REGIONAL DIFFERENCES

Survey respondents from tribal regions reported advancements related to the 20 early childhood system components in the table above. Tribal regional council members reported less advancement across all 20 early childhood system areas as compared to the overall survey results except for Nutrition and Physical Activity. Respondents from tribal regions reported concerns and challenges around health care, recruitment and retention of early childhood professionals and early childhood system funding.

The chart below compares advancements in the early childhood system between urban and rural regions, showing the percentage of respondents choosing moderate or significant advancement. This shows fewer advancements in rural areas related to health care (access, supply of health services, medical and dental homes, and early screening and intervention), but greater advancements in system funding, nutrition and physical activity, and roles related to family support (supports and services for families and specialized training for family support providers), and recruitment and retention of professionals in the early childhood system.

Advancements in the early childhood system (urban vs. rural regions)		
20 System Roles	Urban	Rural
Early Care and Education System Development and Implementation	92%	83%
Professional Development System	86%	77%
Early Screening and Intervention	83%	76%
Quality Early Care and Education Standards, Curriculum, and Assessment	82%	75%
Building Public Awareness and Support	79%	83%
Early Childhood System Evaluation	79%	73%
Early Childhood System Leadership	78%	74%
Access to Quality Health Care Coverage and Services	77%	68%
Quality, Access, and Affordability of Regulated Early Care and Education Settings	76%	79%
Information and Education for Families	76%	77%
Supports and Services for Families	73%	77%
Medical and Dental Homes	72%	62%

Specialized Training for Family Support Providers	71%	80%
Supply of Health Care Services	65%	53%
Coordinated Use of Early Childhood System Data	64%	70%
Specialized Training for Health Services Providers	57%	61%
Quality of Family, Friend, and Neighbor Early Care and Education Settings	55%	61%
Nutrition and Physical Activity	52%	74%
Recruitment and Retention of Professionals in the Early Childhood System	50%	66%
Early Childhood System Funding	46%	66%

STRENGTHS OF THE EARLY CHILDHOOD SYSTEM

Respondents report the following early childhood system strengths, which often accelerate the local region:

1. **Funding** – A dedicated funding stream for early childhood accelerates the system at a local level.
2. **Partnerships** – Partnerships and collaboration at a regional level are strong.
3. **Leadership and convening** – FTF’s role around convening, funding, and connecting resources accelerates the early childhood system.
4. **Strategies** – Strategies such as home visiting, oral health, developmental and sensory screenings and interventions, and Quality First that are implemented locally help support young children.
5. **Professional development** – The emphasis on development of the workforce is seen as a strength of the system, and there is recognition that there is more to do in this area.
6. **Awareness about early childhood** – There is increased general awareness among system stakeholders about early childhood.
7. **Structure** – The locally driven, flexible structure of FTF and Regional Councils helps drive work that matters to the regions.
8. **Increasing quality** – The emphasis on increasing quality in early care and education settings, especially through new standards and curriculum, is a strength of the early childhood system.

Funding

“Having FTF and a dedicated funding stream has been a driver for the early childhood system.”

Professional Development

“The groundwork FTF laid through its professional development workgroup moved the issue forward through inclusive conversations. They were very successful in convening, providing leadership, and funding. But there is a lot of work to do to make sure the framework is implemented, especially in communities most marginalized.”

“Developing the early childhood workforce through credentials and degrees is a complex process. FTF has facilitated this process by convening and funding the effort to build on and support regionally based efforts.”

GAPS IN THE EARLY CHILDHOOD SYSTEM

Respondents report the following gaps in the early childhood system that often hinder local regions:

1. **Reaching children where they are** – There is a concern that quality early childhood services do not reach children in Family, Friend, and Neighbor care, where most of the children are served. In addition, many early care and education providers do not have access to Quality First and thus children not having access to quality early care and education.
2. **Funding/Sustainability**—Additional funding from a variety of sources is needed to expand programs that are working and ensure the early childhood system remains sustainable. It was recognized that with declining revenue, FTF must do more with less, and therefore FTF should prioritize their investments.

Funding
“Funding is the primary obstacle. The needs of our children simply outweigh the services available.”

“There is overwhelming need in the region and a lack of funding and awareness from people who are not already involved in the early childhood system.”
3. **Services and supports for parents and families** – parents need additional services and supports, an issue of particular concern for rural and tribal regions.
4. **Policymaker Engagement** – There needs to be a continued emphasis on building positive relationships with policymakers to increase their awareness about the importance of early childhood and the public policies that support school readiness for young children.

Unmet needs
“Families in the lowest socio-economic groups, including families on Indian reservations have increased needs for quality early childhood health and education.”

“Need more services, more funding, there are still so many gaps and not enough services for those who need them.”
5. **Awareness of the value of early childhood and services** – There is more work to do to increase awareness among the general public and parents to understand the value of early childhood and where/how to access early childhood services.
6. **Emphasize unmet needs** – Respondents believe FTF should focus on the greatest unmet need and find children where they are. Respondents were concerned that children in underserved areas and those living in poverty were not receiving the services they need.

Coordination and alignment
“Agencies (State and local) that provide services need to have a clear and coordinated focus on early childhood. Many people/agencies are dedicated to the mission of positive child development from birth, but there is often overlap, little coordination, and a variety of ways to administer services that are often ineffective.”

“We need to continue to bring all players into a collaborative mind set. Silos need to be eliminated in order to meet the needs of the children of Arizona.”

7. **Coordination and alignment** – Enhanced coordination statewide, among state agencies and partners, and at the local level is necessary to make improvements for Arizona’s young children. Coordination in tribal regions was often identified as a concern.
8. **Share data and information** - Data that shows return on investment, outcomes and successes of programs should be more widely shared.

FIRST THINGS FIRST EFFECTIVENESS

When asked how effective FTF has been in advancing the nine priority roles² outlined by the 2010 Arizona Early Childhood Task Force, survey respondents believe FTF is strong leader in the early childhood system, and an active partner at the local level to increase quality, access, and affordability of regulated early care and education settings, and ensure the standards and curriculum are in place. As the chart below indicates, 80 percent or more of all regional council members believe FTF has been moderate to very effective in seven of the nine priority roles.

First Things First Effectiveness			
Role	Overall	Urban	Rural
Quality, Access, and Affordability of Regulated Early Care and Education Settings	91%	100%	83%
Early Childhood System Leadership	89%	94%	84%
Quality Early Care and Education Standards, Curriculum, and Assessment	88%	100%	76%
Supports and Services for Families	88%	88%	87%
Professional Development System	85%	91%	79%
Building Public Awareness and Support	84%	83%	85%
Access to Quality Health Care Coverage and Services	81%	82%	80%
Early Childhood System Funding	72%	68%	77%
Nutrition and Physical Activity	68%	60%	75%

² See appendix for nine priority roles and definitions (highlighted in red).

CRITICAL AREAS TO BE ADDRESSED BY FTF

All respondents emphasized the need for increased access to affordable high quality early care and education, access to health care and nutrition, and additional supports and education for early childhood professionals. They also highlighted the need to support parents to be better teachers for their children through parenting classes and supports and services.

Survey respondents ranked the top five system areas they believed FTF should play a role in during the next five years and the percentage of respondents who chose each role are displayed in the chart below, with the current FTF priority roles marked in red text.

Roles for First Things First		
20 System Roles	Response Percent (All survey respondents)	Response Percent (Tribal respondents)
Quality, Access, and Affordability of Regulated Early Care and Education Settings	47.1%	40%
Early Screening and Intervention	44.8%	40%
Early Care and Education System Development and Implementation	41.4%	40%
Recruitment and Retention of Professionals in the Early Childhood System	40.2%	53.3%
Information and Education for Families	37.9%	26.7%
Early Childhood System Funding	36.8%	26.7%
Supports and Services for Families	32.2%	33.3%
Building Public Awareness and Support	31.0%	13.3%
Quality of Family, Friend, and Neighbor Care and Education Settings	24.1%	26.7%
Nutrition and Physical Activity	24.1%	26.7%
Access to Quality Health Care Coverage and Services	24.1%	33.3%
Quality Early Care and Education Standards, Curriculum, and Assessment	18.4%	13.3%
Supply of Health Care Services	16.1%	13.3%
Professional Development System	16.1%	13.3%
Coordinated Use of Early Childhood Systems Data	13.8%	13.3%
Early Childhood System Leadership	12.6%	13.3%
Medical and Dental Homes	10.3%	20%
Specialized Training for Family Support Providers	8.0%	6.7%
Early Childhood System Evaluation	8.0%	20%
Specialized Training for Health Services Providers	3.4%	13.3%

REGIONAL DIFFERENCES

The chart above (showing Tribal region responses) and the chart below (comparing urban and rural regions) indicate similar regional differences. Respondents from Tribal and rural regions, which are often hindered by geography, reflected on the difficulty of recruiting and retaining a qualified workforce, and the importance and the difficulty families have in accessing additional supports and services and health care services.

Recruitment and Retention

“Recruitment and staffing will always be an issue in remote areas. In Tribal communities, we are starting to grow our own educators by thinking about career pathways early.”

Roles for First Things First		
20 System Roles	Urban	Rural
Quality, Access, and Affordability of Regulated Early Care and Education Settings	50.0%	44.7%
Information and Education for Families	47.5%	29.8%
Early Care and Education System Development and Implementation	40.0%	42.6%
Early Screening and Intervention	37.5%	51.1%
Building Public Awareness and Support	37.5%	25.5%
Supports and Services for Families	35.0%	29.8%
Early Childhood System Funding	35.0%	38.3%
Recruitment and Retention of Professionals in the Early Childhood System	30.0%	48.9%
Quality of Family, Friend, and Neighbor Care and Education Settings	27.5%	21.3%
Access to Quality Health Care Coverage and Services	25.0%	23.4%
Quality Early Care and Education Standards, Curriculum, and Assessment	20.0%	17.0%
Nutrition and Physical Activity	20.0%	27.7%
Early Childhood System Leadership	20.0%	6.4%
Coordinated Use of Early Childhood Systems Data	17.5%	10.6%
Supply of Health Care Services	15.0%	17.0%
Professional Development System	15.0%	17.0%
Early Childhood System Evaluation	7.5%	8.5%
Medical and Dental Homes	5.0%	14.9%
Specialized Training for Family Support Providers	5.0%	10.6%
Specialized Training for Health Services Providers	2.5%	4.3%

OPPORTUNITIES TO LEVERAGE PARTNERS

There were numerous suggestions about partners that FTF should leverage to accomplish its goals; but it was noted that a more specific “ask” should be made of these partners. It was suggested that FTF leverage these partners in a few ways: improving alignment or coordination, using them as potential champions, or leveraging them as a vehicle to market and communicate to parents/families, and the general public. Suggested partners include the following:

- Service groups (Lions Club, Rotary, Kiwanis)
- Municipal leaders
- Business including business leaders, chambers of commerce and business coalitions
- Education including school boards, administrators and foundations
- Community colleges
- Faith based organizations
- Law enforcement
- Child welfare
- Literacy organizations
- County health directors departments
- Parent organizations (i.e. Mommy lobby, Parent Advisory Council)
- Region specific collaborative efforts (i.e. Maricopa Preventative Health Collaborative, Launch Flagstaff)

SUMMARY

The information included in this report underscores the complexity of an early childhood system and the importance of considering the whole system when looking to change outcomes for Arizona’s youngest children. Specific opportunities were identified in each of FTF’s goal areas (early learning, family support, and health and community awareness and coordination). In addition, while thinking about opportunities and FTF’s future role, respondents identified cross cutting areas to address, including improved coordination and alignment, access to services and reaching children most in need, showing the impact of the system on children and families, and sustainability. Furthermore, with many of the strengths also identified as gaps and/or opportunities for improvement, the Early Childhood Task Force is poised to recommend a set of priorities that will significantly impact Arizona’s youngest children.

APPENDIX

Twenty Roles:

Twenty roles identified by the Arizona Early Childhood Task Force are as follows (Nine priority roles are noted in **RED**).

1. **Early Care and Education System Development and Implementation** – Convene partners and provide leadership in the development and implementation of a comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the educational system.
2. **Quality, Access, and Affordability of Regulated Early Care and Education Settings** – Convene partners, provide leadership, and provide funding for increased availability of and access to high-quality, regulated, culturally responsive and affordable early care and education programs.
3. **Quality Early Care and Education Standards, Curriculum, and Assessment** – Convene partners, provide leadership, and provide funding for the development and implementation of quality standards for early childhood care and education programs and related curricula and assessments.
4. **Professional Development System** – Convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality and articulation.
5. **Recruitment and Retention of Professionals in the Early Childhood System** – Convene partners, provide leadership, and provide funding for the recruitment, adequate compensation, and retention of high-quality, culturally diverse early childhood providers.
6. **Quality of Family, Friend, and Neighbor Early Care and Education Settings** – Convene partners, provide leadership, and provide funding to improve the quality of culturally responsive early care and education provided by family, friends and neighbors.
7. **Access to Quality Health Care Coverage and Services** – Collaborate with partners to increase access to high-quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.
8. **Supply of Health Care Services** – Collaborate with partners to assess and expand the supply of high-quality, affordable, comprehensive health care services.
9. **Medical and Dental Homes** – Collaborate with partners to increase access to medical and dental homes for young children and their families.
10. **Nutrition and Physical Activity** – Collaborate with partners to support improved nutrition and increased age/developmentally appropriate physical activity levels among young children.
11. **Specialized Training for Health Services Providers** – Collaborate with partners to provide funding and implement strategies for increasing the number of health services providers who have had specialized training in working with young children and their families.

12. **Early Screening and Intervention** – Collaborate with partners to increase awareness of and access to a continuum of information, support, and services for families and their children who have or are at risk of having developmental, physical and/or mental health issues.
13. **Information and Education for Families** – Convene partners, provide leadership, and provide funding for the development and coordinated dissemination of high-quality, diverse, and relevant information and education on the importance of the early years, child development, health, early education, and related resources for families, providers, partners and the public.
14. **Supports and Services for Families** – Convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high-quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.
15. **Specialized Training for Family Support Providers** – Collaborate with partners to provide funding and implement strategies for increasing the number of family support providers who have knowledge and skills required to work with young children and their families.
16. **Building Public Awareness and Support** – Convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers and the public.
17. **Coordinated Use of Early Childhood System Data** – Convene and collaborate with partners to identify data needs and resources; define and carry out roles related to collecting, analyzing, and reporting data; and utilize data to design, develop, plan and evaluate the early childhood system.
18. **Early Childhood System Evaluation** – Provide leadership in the evaluation of the early childhood system and collaborate with partners to utilize the results to foster continuous improvement of the system.
19. **Early Childhood System Funding** – Secure, coordinate, and advocate for resources required to develop and sustain the early childhood system.
20. **Early Childhood System Leadership** – Convene partners, provide leadership, and provide funding for the conceptualization and implementation of a high-quality, child and family centered, coordinated, integrated, and comprehensive early childhood system that includes clearly defined roles and responsibilities.