State Snapshots: Equity in IECMHC Evaluations

An equity-informed evaluation provides an assessment of what works and what does not work to reduce inequity and disparities. Equity-informed evaluations provide evidence and information that is credible, reliable, and useful, enabling the timely incorporation of findings, recommendations, and lessons into the decision-making process at all levels of a system.

Equity-informed evaluations look explicitly at the equity dimensions of interventions, such as data disaggregation by race or other demographic variables where we see disparities. Going beyond conventional quantitative data, equity-informed evaluations include the following:

♦ The analysis of behavioral and attitudinal changes, complex social processes and attitudes, and collecting information on socially marginalized groups (EvalPartners, 2016)

♦ Community-based participatory research approaches in which the populations targeted for intervention are queried about their ideas and perceptions of what would be useful in eliminating inequities and disparities, which can shed light on important cultural and contextual facets of the work

Equity-informed evaluation in Infant Early Childhood Mental Health Consultation (IECMHC) is an emerging trend. As a field, we have yet to fully understand whether and to what extent IECMHC reduces disparities in discipline for young children of color. Equity-informed evaluations in IECMHC will allow us to gain deeper understanding of the mechanisms, predictors, and pathways to more equitable results in our IECMHC programs.

Equity-informed evaluations are also necessary to ensure accountability at the systems level. They can help establish specific, measureable outcomes for equity efforts, regularly assess progress, and make adjustments and corrections at a broader system, department, or agency level to ensure that the goals will be achieved.

Equity-informed IECMHC evaluation can also highlight intended and unintended results for marginalized groups and highlight gaps between and among groups. This type of evaluation involves a reflective, systematic, and objective process in the design, analysis, and interpretation of data collected via IECMHC evaluation, which then enables stakeholders to answer specific questions that elevate the charge of creating and implementing IECMHC systems that produce equitable results (EvalPartners, 2016).

It is important to highlight that while some new analytical tools are available (e.g., the Equity Impact Analysis), most of the equity-informed evaluation data collection and analysis techniques recommended and highlighted in this section of the Toolbox are based on approaches that are already familiar to many practitioners in development evaluation. The emphasis in equity-informed evaluation is on refining and refocusing existing techniques—and enhancing evaluators’ and IECMHC grantees’ capacities to use those techniques—rather than on starting with a completely new approach.
This portion of the Research and Evaluation section of the Toolbox highlights examples from different states that have addressed equity at different levels of their evaluation design. Just as in other content areas within the Toolbox, equity should not be an isolated focus, but rather integrated throughout the design, implementation, and dissemination of the program.

**Purposes of Equity-Informed Evaluations**

Equity-informed evaluation contributes to the effective design, planning, and implementation of IECMHC programs and systems and achieves a number of purposes:

♦ **Accountability.** Equity-informed evaluation ensures that reporting on the relevance, impact, effectiveness, efficiency, and sustainability of IECMHC programs is not only evidence-based, but also has an impact on reducing disparities and contributing to the sustainability of an equitable early childhood system.

♦ **Organizational learning and improvement.** Knowledge generated through equity-informed evaluation provides critical input into major decisions to help improve the quality of IECMHC programs and systems.

♦ **Evidence-based policy advocacy.** Knowledge generated through an equity-informed evaluation provides evidence to influence major policy decisions to ensure that existing and future policies will enhance equity and improve the well-being of marginalized families, children, and communities.

**Key Recommendations for Equity-Informed IECMHC Evaluations**

♦ In general, an equity-informed IECMHC evaluation integrates principles of equity at every level of evaluation planning, from generating research questions to monitoring disproportionality in expulsions, working with stakeholders to include their perspectives, managing data collection to ensure transparency, interpreting data, writing reports, and broadly disseminating the results.

♦ By focusing on documenting process as well as the local, tribal, and state context of the IECMHC program, an equity-informed IECMHC evaluation will often take into account the politics involved—organizational politics, government politics, and other things that are not always explained in a textbook or a toolbox.

**Louisiana**

Louisiana’s IECMHC system is coordinated by the Tulane Institute of Infant and Early Childhood Mental Health. The chair of this Institute, Dr. Charles Zeanah, placed equity as a priority by requiring that all staff affiliated with the Institute, including all evaluation team members, participate in an “undoing racism” seminar. A focus on racial equity permeates the culture of the Institute and is revisited on a yearly basis.

—Dr. Sherry Heller
• An equity-informed evaluation team should have a background in and previous training and reflection opportunities on “undoing racism”-type seminars and other equity-informed practices; there should be evidence of organizational and/or personal capacity for reflection on equity ideals. Refer to the Key Resources for Promoting Equity and Reducing Disparities for more information.

• An equity-informed evaluation upholds ideals about co-ownership of “the work.” For example, equity-informed evaluation uses transparent communication of evaluation objectives, design, and results with consultees (e.g., teachers, home visitors, families). Families and consultees can use assessment data to jointly decide on an action plan for IECMHC intervention.

Maryland

Maryland’s IECMHC program is funded by the Maryland State Department of Education. This state agency regularly tracks which communities and early care and education centers and childcare providers are accessing IECMHC services; findings are then disaggregated by race. When the patterns of IECMHC use are out of sync with historical racialized patterns of oppression and segregation, then the State Department advises the Maryland IECMHC grantees to reflect on what might be happening with recruitment and retention efforts in marginalized communities, and encourages them to work harder to ensure that those communities that are disproportionately impacted by suspension/expulsion rates are, in fact, the ones that are receiving IECMHC services.

—Sarah Nadiv

• An equity-informed evaluation explores themes from the perspective of families and community stakeholders. Possible themes to explore include how expulsion and disciplinary action in preschool impacts a child’s developing sense of self and families’ perceptions of their children (especially for African American boys); how expulsion, suspension, and frequent discipline in preschool impacts family outcomes (e.g., staying employed, parenting stress); and how mental health programs and services in preschool are perceived by cultural communities that traditionally have mistrust or distrust of the mental health field, and whether this perception influences the ways in which programs and communities access IECMHC services.
Connecticut

In Connecticut, the statewide IECMHC program known as the Early Childhood Consultation Partnership© (ECCP) has been collecting data for administrative and evaluation purposes for over 13 years (Fink & Wakai, 2003; Gilliam, 2005, 2007, 2014). The program’s ECCP Information System helps guide data collection, monitor quality assurance, and maintain continuous quality improvement efforts. ECCP uses a uniform framework to systematically collect and communicate about data. Data are collected by ECCP mental health consultants who are trained and supervised to maintain ongoing transparency during their data collection efforts. Mental health consultants use a uniform set of questionnaires and work with established methods where consultees self-identify their information. The consultants engage the consultees around why the data are being collected, how the data will be used, and what measures will be used to assure the confidentiality of this information. There is also a feedback loop where mental health consultants share the outcomes of data collection (especially assessment data) as a way for consultees and families to have joint ownership of the process and make important decisions together about how to move forward with IECMHC services.

—Elizabeth Bicio

♦ An equity-informed evaluation design involves the collection of demographic information that enables exploration of questions about the impact on outcomes that address equity-related themes, such as racial and/or gender disparities in discipline practices. Categories of background variables that tap into social marginalization dimensions include race, gender, socio-economic status, dual language learner status, and immigration status. Equity-informed evaluation considers collecting these variables not only for the children and families impacted by the IECMHC intervention, but with IECMHC consultees (e.g., teachers, center directors, home visitors) and mental health consultants as well. Just as important as collecting these data, equity-informed evaluation always disaggregates results by race and other meaningful variables in order to provide an analysis of the impact of outcomes related to equity themes.

♦ An equity-informed evaluation might collect information about mental health consultants (demographic information; previous exposure to specific cultural communities; experience and expertise in areas related to equity, diversity, cultural responsiveness, etc.). This level of data can inform ongoing workforce and training efforts, and can be used as predictors of effectiveness in an equity outcome-focused evaluation.

♦ An equity-informed evaluation team takes the initiative to discover whether tribal data collection agreements exist in their service area(s), and involves all IECMHC partners in following tribal data collection agreements.
Arkansas

Pursuant to federal policy recommendations issued in 2014 (U.S. Department of Health and Human Services, & U.S. Department of Education), in 2016 Arkansas started rolling out several no-expulsion policy initiatives that include (but are not limited to) the following:

- Embedding new non-suspension/expulsion policies in the participant agreement for childcare centers accepting childcare vouchers to align with Arkansas’s existing policy
- Adding content on expulsion/suspension prevention in the annual Child Care and Development Fund policy test that providers are required to take
- Requiring parent notification of non-expulsion policies
- Developing and disseminating tools for centers that wish to voluntarily adopt stronger non-suspension/expulsion policies, such as sample center-level policies and self-assessment tools

Alongside the implementation of these new non-expulsion policies, Arkansas will collect and track data on rates of expulsion and suspension in early childhood settings, and ensure that data are disaggregated by gender, race, ethnicity, and disability status, at a minimum, to track disparities and hold the system accountable for reducing disparities in early childhood expulsion/suspension rates.

—Dr. Nicola Connors-Burrow

♦ An equity-informed evaluation develops research questions and hypotheses that keep IECMHC systems accountable for equitable impacts, for example:

  o How is IECMHC impacting the gender and race disparities in disciplinary outcomes (including expulsion) for young children?

  o What factors and variables serve as predictors of effective IECMHC amelioration of disparities: teacher-child ethnic match, teacher job stress, classroom profile of children, baseline program and classroom quality, organizational climate, or other factors?

  o What are the measureable mechanisms or pathways through which IECMHC is helping to reduce racial and gender disparities (e.g., reducing implicit bias, enhancing relationships with families, influencing teachers’ diversity orientation beliefs, shifting teachers’ internal representations about children of color)?

♦ An equity-informed evaluation often includes process and exploratory evaluation questions regarding an IECMHC grantee organization’s commitment to integrating equity throughout a program. Features of equity integration to track might include such dimensions as frequency and intensity of mental health consultants’, supervisors’, and senior leaderships’ training and professional development on issues related to equity; the extent to which the organization holds equity as central to its mission and operations; and ways in which
mental health consultants are experiencing, facilitating, or holding space for their consultees to explore issues related to culture and equity.

**Arizona**

The evaluation for Arizona’s IECMHC program, Smart Support, collected data at three different time-points (baseline, 6 months, and 12 months) to track change and improvement over the course of the Smart Support intervention. Child-level assessment data were based on teacher ratings of behavior, development, and relationships (including teachers’ ratings of expulsion risk). Evaluators disaggregated child-level outcomes by race and gender in order to explore the hypothesis that growth and improvement patterns were different for African American and Latino boys. This hypothesis was developed based on national studies of preschool expulsion showing that African American and Latino boys are being expelled and suspended at higher rates than other similarly aged children.

The Smart Support evaluation found that boys and African American and Latino children had significantly lower ratings in their baseline scores for six of the seven outcomes. These analyses showed that teacher ratings on African American and Latino preschoolers’ outcome assessments exhibited more growth over time (a 12-month period) when compared to the growth pattern of white students. Relatedly, children who were ethnically matched to their teachers had higher assessment scores at baseline than those children who were not ethnically matched with their teachers. However, teacher-child ethnic match did not predict the rate of change in teacher-reported assessment scores for African American and Latino children over the 12-month period. The evaluation also found that as teachers’ negative internal representations of IECMHC focus children became more positive over time, the risk of expulsion for those same children decreased over time.

—Dr. Eva Marie Shivers
References


