

Smart Start Collaboration Network Analysis Report

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Smart Start Collaboration Network Analysis Report © June 2000 FPG Child Development Center FPG UNC-CH Smart Start Evaluation Team

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Smart Start Collaboration Network Analysis Report

EXECUTIVE SUMMARY

This report provides new information on the collaboration occurring among local agencies that are attempting to meet the needs of children under the age of six. A previous report, relying on findings from an analysis of qualitative and quantitative data, focused on how well local collaborative systems are working and whether Smart Start is improving the quality and extent of interagency collaboration at the local level. This report extends those findings using the techniques of network analysis. It presents a new methodology, provides preliminary evidence for how Smart Start may be influencing services for children, and points out some challenges that Smart Start must overcome in building effective collaborative systems.

Computer generated graphic maps are produced that illustrate the number and complexity of relationships between agencies working together to support children. Comparisons are drawn between the interagency networks in a small rural county with a new Partnership, a second small rural county with a Partnership that has been operating for several years, and a large urban county with a Partnership also operating for several years.

The following findings are suggested in the report:

- In the rural community with a new Partnership for Children:
 - the map of the agency network indicates that there is not strong interagency coordination occurring in the county,
 - the collaboration that does occur appears to happen primarily among the large public agencies,
 - the Partnership operates at the periphery of the agency network.
- In the rural community with a more mature Partnership for Children:
 - the map of the agency network demonstrates that there is strong interagency coordination occurring in the county,
 - a broad array of agencies collaborate with each other in the network,
 - the Partnership has strong connections to the full range of services in the county.

- In the urban community with a more mature Partnership for Children:
 - the network of agencies is very complex, with some agencies strongly linked and some agencies only weakly linked to others,
 - there is a high level of specialization in the types of services offered by the agencies that work together,
 - the Partnership has strong connections with only a limited range of services in the county.

The following recommendations for strengthening collaboration are provided in this report:

- Each community must examine its own pattern of existing and potential interagency relationships and purposively build new connections where gaps exist.
- New Partnerships should focus on building connections to key existing networks in order to take advantage of available systems of support.
- Collaborative efforts can be designed to include a broad mix of services by understanding the collaborative interagency linkages that already exist.
- Collaborative efforts may be strengthened by sponsoring meetings that familiarize
 agency staffs with available services, and through the development of a directory of
 services for children and families.
- Partnerships in larger, urban counties should focus on building "microcollaborations" between groups of agencies that are targeting similar child needs or populations.

Smart Start Collaboration Network Analysis Report

Introduction

This report provides new information on the collaboration occurring among agencies attempting to work together to better meet the needs of children and families under North Carolina's Smart Start program. A previous report, which includes findings from an analysis of qualitative and quantitative data, focused on how well local collaborative systems are working and whether Smart Start is improving the quality and extent of interagency collaboration at the local level. This report extends those findings using the techniques of network analysis. It presents a new methodology for modeling changes in collaboration and provides preliminary evidence for how Smart Start may be influencing services for children. It also points out some of the challenges that Smart Start must overcome in building an effective collaborative system.

Smart Start Collaboration

Smart Start is a comprehensive system of services designed and implemented to help all North Carolina children arrive at school "healthy and ready to succeed". It accomplishes this objective by establishing local Partnerships for Children that work together, with financial resources from the state, to identify local needs and augment services targeted to young children and their families. In large part, Smart Start is a strategy for improving the quality and quantity of services available to young children. Potential improvements include: increased availability of child care center spaces for the children of working parents; strengthened child care teacher training and better child care facilities; development of family resource centers that meet the needs of parents and children; increased access to health resources and other locally determined support services for families with children.

The heart of this system lies in the collaborative links made by agencies, parents, churches, businesses and other organizations who must work together in local partnerships to identify needs and allocate resources. To a large extent, Smart Start depends on effective collaboration in order to assure that children are able to get the resources they need to be prepared for school and for healthy development. The effectiveness of collaboration among members of local Partnerships

for Children and related agencies is a key ingredient to Smart Start success. Each Partnership identifies and sets priorities for local initiatives, monitors and evaluates services for children, and seeks to strengthen the capacity of the local service network to meet the needs of young children and their families.

While there has not been a great deal of research into interagency collaboration, most studies have found that it has promising results. When agencies collaborate they can expect to see an increase in the numbers of new clients identified (Garrett et al, 1998), referrals (Garrett et al, 1998; Ridgely et al, 1998), funding (Garrett et al, 1998; Katz et al, 1990), networking (Garrett et al, 1998), and family participation in services (Clausen et al, 1998). Service systems may experience an increase in resource exchange (Rivard et al, 1999), interagency communication (Pandiani and Maynard, 1993), service coordination (Garrett et al, 1998; Pandiani and Maynard, 1993), joint assessment of clients (Ridgely et al, 1998), and jointly sponsored training (Ridgely et al, 1998). Most importantly, clients served by agencies that collaborate experience fewer delays between referral and intake (Borgeson and Cusick, 1994), increased access to services (McGee, 1996), improvement in developmental outcomes (Garrett et al, 1998), improvement in mental health outcomes (Rogers et al, 1989), and an increase in the attainment of individual goals (Malloy et al, 1998).

The major challenge to building effective collaboration between human service agencies is that they tend to function very independently. Each agency operates within its own unique program guidelines and the narrow constraints of local, state and federal funding. Thus, while agencies often desire to work together to achieve common ends, most find it difficult to do so. This emphasis on independence has led to service fragmentation and confusion on the part of parents and agency staff. Parents are faced with an array of diverse and separate public and private organizations with different policies, procedures and requirements. Staff who need to make referrals to other agencies in order to meet the needs of young children often don't know what other services are available. Smart Start attempts to overcome local service fragmentation by providing unique resources to promote collaboration between agencies and community partners. In so doing, Smart Start hopes to foster agency interaction, community problem solving, the

development of interagency projects, and the common monitoring of local goals for young children and their families.

Previous Collaboration Research

Because of the importance of building effective collaborative systems, several studies have been conducted by the University of North Carolina at Chapel Hill on the role and scope of local interagency collaboration. Data from the first collaboration study were described in an earlier report, Smart Start and Local Inter-Organizational Collaboration (Orthner, Cole & Ehrlich, 1998). Additional analyses of the same data are described in this report. The first collaboration study included data from 269 telephone interviews completed in 1997 and 1998 with representatives from key organizations providing services to young children within the service networks of 10 local Partnerships for Children. Representatives rated the quality and quantity of their collaboration with other agencies and the overall effectiveness of the local service system in meeting the needs of children and families. The findings in the earlier report indicate that:

- Smart Start appears to improve local inter-agency collaboration among organizations that serve young children and their families.
- There remain substantial variations across Partnerships in levels of interorganizational collaboration.
- The local Partnership board and planning process appears to encourage inter-agency collaborations.
- There is a potential link between Smart Start collaboration and local human service system coordination and integration.

SMART START NETWORK ANALYSES: BASIC DEFINITIONS AND METHODS

Collaboration can be defined as at least two organizations working together to achieve a common goal. A group of organizations that are collaborating with one another can be considered a collaborative network. Because collaboration describes the relationships between organizations, a study of organizational collaboration must include both an analysis of the relationships between organizations and an analysis of the collaborative network itself (i.e., who is working with whom). In this study, we employ both statistical and graphical methods to describe and understand Smart Start collaborative networks and the relationships that bind them together.

The organizations we studied provide either direct or indirect services to young children within the communities of 10 local Partnerships for Children. We selected the 10 Partnerships for inclusion in the study because they represent a cross-section of regions of the state, urban and rural characteristics, and Partnership maturity (i.e., the number of years the Partnership had been operating). Some of these Partnerships were in more urban communities while others were more rural; some were newly established Partnerships while others had been established for several years.

Organizations within the local human service system of each of the 10 Partnerships provided us with data through a "snowball" sampling procedure. A first wave of interviews was conducted with key informants from organizations that either had a representative on the board of the local Partnership or had a contract for services with the local Partnership. With the exceptions indicated below, a key informant was the individual identified by the Executive Director of the Partnership as the person in the organization most knowledgeable about the organization's full range of services for children.

Our operational definition of the Smart Start collaborative relationship relies on the key informant to decide what it means to "work together" with another organization. During an initial interview, the key informant was asked to identify all the other local service organizations with which his or her organization worked in serving children under age six and their families. Organizations cited at least twice that had not already been interviewed were surveyed during a second wave of interviews. Therefore, for the purpose of our study, membership in a Smart Start collaborative network was defined to be those organizations that had been cited by other agencies at least twice.

The above process allowed us to identify the best possible key informants and estimate the number of organizations that were significant actors in the local collaborative networks of the 10 Partnerships. In the first round of data collection, completed during the period May, 1997 through May, 1998, over 90% of the organizations cited at least agreed to be interviewed. It was not possible, however, to complete interviews with all key informants. In a few cases a key

informant refused to participate. In other cases an organization became inactive during the course of the study or was temporarily without a representative capable of serving as a key informant.

The specific measure we are using to assess working relationships within Smart Start collaborative networks is the organizational dyad. We have defined this dyad as a pair of organizations in which one of the organizations has been cited by the key informant of the other. For example, if in a particular network the Department of Social Services is cited by the Department of Public Health and the Housing Authority, then we assume that two dyads exist – a Public Health/DSS dyad and a Housing Authority/DSS dyad. If, in turn, the key informant for the Department of Social Services cites both the Department of Public Health and the Housing Authority we assume that two additional dyads existed – a DSS/Public Health dyad and a DSS/Housing Authority dyad. Each dyad represents a "working" relationship between two organizations. When organizations mention each other, the mutual dyads represent a bidirectional "working" relationship.

CONTRASTING COLLABORATIVE NETWORKS

The findings presented in this report provide illustrative data on the interagency collaborative systems in three North Carolina counties with Partnerships for Children. The three partnerships were selected because they represent different points in the collaborative network maturation process and one of the other major challenges to the success of an initiative like Smart Start – the size and complexity of the local agency environment. Because the data were collected at a single point in time, we are cautious in making statements about all Partnerships based on the findings from these three Partnerships. When longitudinal data are available in the Summer of 2000, we will be better able to examine trends in each of the ten Partnership networks over time, and test hypotheses regarding the relationship between Partnership maturity and complexity with Partnership effectiveness in reducing local service system fragmentation.

The potential capability of Smart Start to strengthen interagency collaboration can be seen when comparing the interagency collaborative networks graphed in Figures 1 and 2. Lines between organizations indicate dyads - a single arrowhead indicates a simple (one-way) dyad, while a double arrowhead indicates a complimentary dyad (a two-way relationship). The blue rectangles

represent organizations that either had a representative on a Partnership board or had a contract for services with a Partnership. The red rectangles represent organizations that had no such relationship. Green ellipses represent Partnerships. As Partnerships were not surveyed in the same manner as other organizations there are no arrows pointing from the Partnerships to the organizations with whom they collaborate. However, the number of arrows directed at a Partnership is a strong indicator of the extent to which other organizations have come to think of that Partnership as an important collaborator. A key to the identity of the organizations referenced in the Figures is found at the end of this report.

The data on dyadic relationships represented in Figure 1 come from the network of services for children in a small rural county in its first year of building a Smart Start Partnership. The connections between agencies on the map in Figure 1 are the result of a computer program that uses data from the interviews to put agencies that are working together in closer proximity and those that are more independent on the outside of the diagram. As can be seen by reviewing the map in Figure 1, the agencies collaborating with one another are few in number. In addition, the linkages between them are sparse and mostly one-way, perhaps indicating an immature system of support for children. This pattern of collaboration is what one might expect in a county with a newly created Partnership that has not yet had the time to strengthen and broaden the system of support for young children and their families.

A closer examination of Figure 1 reveals that in '97-'98 this collaborative network was a fairly loose assemblage of traditional human service organizations operating with the Department of Social Services at its center of influence. The new Partnership for Children is on the periphery of the network, suggesting that it has yet to establish itself as an important actor in the network. The majority of the strong (two-way) collaborative relationships that exist are within a cluster of five well-established, and largely public, community organizations – the Departments of Social Services, Public Health and Mental Health, the local school system and Head Start.

In contrast to the network described in Figure 1, the network of agencies in Figure 2 come from a county with four years of collaboration experience under Smart Start. An examination of this map reveals a fairly well connected network, including organizations that have no formal

relationship with Smart Start. Not only are there more connections between organizations, many of the connections represent two-way interactions, indicating that there is more interdependence.

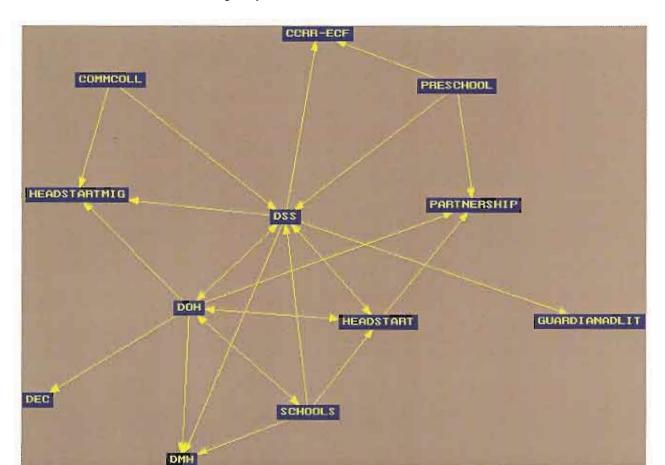
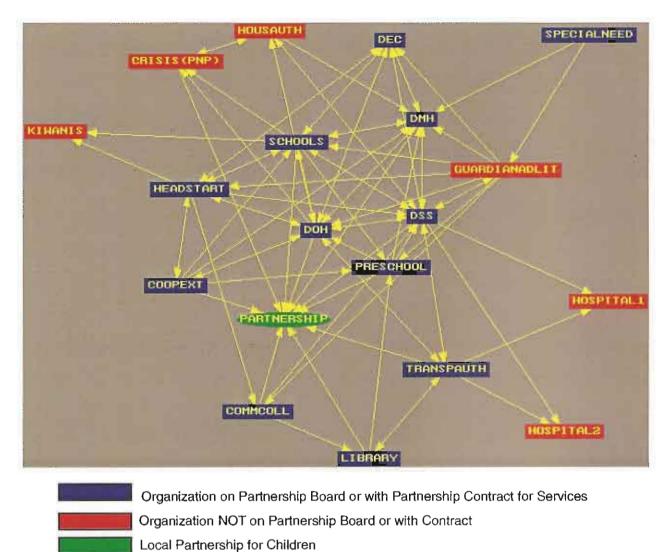


Figure 1: Small Rural Partnership Agency Collaborative Network - First Year

While there is a central cluster of organizations similar to those in Figure 1, consisting of the Departments of Social Services, Public Health and Mental Health, the school system and Head Start, the Partnership for Children in Figure 2 appears to be well integrated into the network. There are also many more organizations cited by other agencies in this network, indicating a much more complex system of support for young children and their families. It appears that this system of support may be more capable of responding to the needs of children in the community, using a mix of public and private services working together to solve problems that arise. Again, it is important to keep in mind that it will take longitudinal data to better understand Smart Start's role in altering the collaborations among service organizations. But it is

this kind of more complex, cooperative system of services that Smart Start Partnerships are designed to promote in order to build and sustain a support system for children.





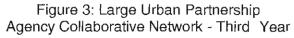
The contrast between the collaborative service networks in these two rural communities illustrated by Figures 1 and 2 indicate the potential importance of Smart Start Partnerships for addressing the needs of children. It is difficult to build a truly effective system of services for children when agencies operate as independently as they appear to do in the county represented in Figure 1. The interagency relationships represented in Figure 2 should be more capable of

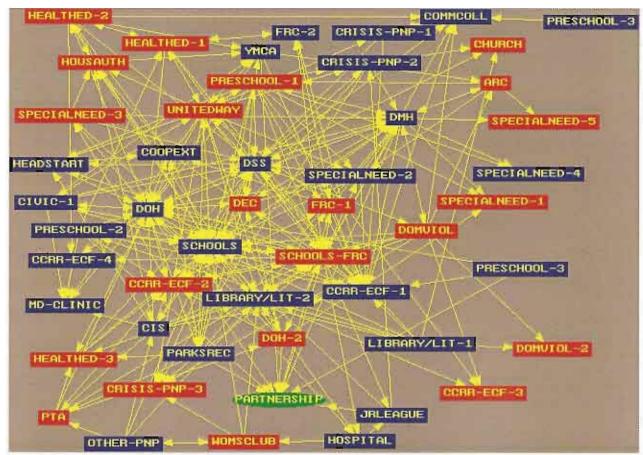
facilitating an improvement in the quantity and quality of services for children. The fact that the Partnership for Children has become a central player in this service network suggests that it is playing a part in promoting healthy service coordination, and is viewed as an active partner by other agencies in the service delivery system.

MANAGING COMPLEXITY IN COLLABORATIVE NETWORKS

While smaller counties with a limited number of agencies can and should build highly interactive collaborative systems, this may be more difficult in larger counties with an already complex system of services. Figure 3 illustrates the complexity of services in a large, urban county in North Carolina. It provides a graphic depiction of the dyadic relationships between the agencies surveyed in that county. These data indicate a highly differentiated and complex system of interactions between a multitude of service providers. Again, most of the same public agencies noted in Figures 1 and 2 are also central in the service delivery system of this large urban county. However, the range of services included in this network is broad. More agencies are working together to provide services to children with special needs, and a more significant role is being played by providers of children's health services.

In this more complex service delivery system, the Partnership for Children has been in existence for three years, has multiple connections with other agencies, but is still somewhat marginal in its overall influence. Only a small proportion of agencies actually interact with the Partnership for Children, leaving much of the service network minimally touched by the coordination and collaboration function of the Partnership. Even though the Partnership in this county receives substantially more funding than is true for the smaller rural partnerships previously examined, its ability to directly influence the full range of services in the community is more limited. The Partnership in this county must rely on its ability to encourage a broad range of services for children through its key member agencies and contractors. Its ability to influence local programs, services and policies for young children is therefore much less direct.





Organization on Partnership Board or with Partnership Contract for Services

Local Partnership for Children

Organization NOT on Partnership Board or with Contract

The challenge for Partnerships for Children in larger urban counties, such as the one reviewed in Figure 3, is to stimulate and build a coordinated system of support services among many independent organizations. On the one hand, the amount of interagency interaction that is occurring is already quite large. On the other hand, there are a large number of service organizations, their interconnections are very complex, and the totality is probably quite confusing both to parents and providers who need to coordinate or access services. This "system" of

services is potentially overwhelming and likely leads to frustration on the part of those who have to operate within it.

One strategy for overcoming the challenge of helping to coordinate such a complex system is to focus attention on the "core" agencies in the system. When the agency dyads in the network depicted in Figure 3 are examined for those agencies that are cited by at least six other agencies in the network, the core set of organizations represented in Figure 4 emerge. These core organizations include several that are members of the Partnership Board, as well as several others who are not, including the United Way, the Housing Authority, a family resource center established by the schools, and a developmental evaluation clinic. If the Partnership in this county were to build collaborative relationships with and between the core organizations, it could improve its ability to implement innovative strategies that will require the involvement of those organizations. Subsequently, the core organizations, as key connectors to services, could collaborate with other agencies in an effort to improve the quality and quantity of services for children and their families.

A related strategy that can be very useful, given the complexity of the network map described in Figure 3, is to focus attention on "micro-collaborations" around the needs of specific groups of children or specific groups of agencies. It seems clear from the map that promoting collaboration in such an environment, with its multiple actors and multiple relationships, will be quite difficult. In fact, achieving collaboration in such an environment will probably require multiple collaborative initiatives focussing on small clusters of organizations with common target populations, target problems, or organizational issues. Instead of attempting to organize the full range of services toward a coherent community-based strategy, micro-collaborations can be built to support needs in specific areas. For example, this urban county has a number of services that focus on the health needs of children. By examining the interactions around health concerns, a network of health related agencies could be organized. This "micro-network" could then identify the health needs of children and develop a coordinated system of support to meet these needs. Given the centrality of the Departments of Health and Mental Health among the core agencies (Figure 4), they could serve as the monitors of this "micro-network" development on behalf of

the Partnership. Similar micro-collaborations could be built around developmental disabilities, childcare quality and access, after school care, parent education and other subsystem service needs.

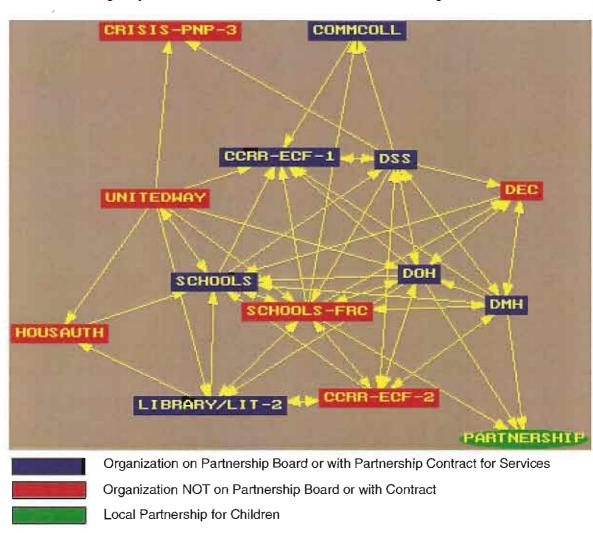


Figure 4: Large Urban Partnership
Agency Collaborative Network - Third Year - Core Agencies

Thus, Partnerships for Children in larger, complex, service-rich communities may need to consider a quite different developmental approach to collaboration than Partnerships in smaller counties with a more limited number of agencies and services. While smaller county Partnerships appear to benefit from bringing to the table representatives from the full range of services available in their communities, this strategy will not be possible in large, urban counties. And

while building strategic plans for community wide implementation may be possible in smaller counties, doing so in a large county may lead to such difficulties as larger organizations passively ignoring Partnership plans and priorities. Larger systems may benefit from a "divide and conquer" strategy, with the Partnership developing subgroups that focus on specific areas of need and building community priorities around a compilation of subgroup plans and priorities.

CONCLUSION

It is apparent from these analyses that building community collaborations to better meet the needs of children is not a "cookie-cutter" process. Each community must examine its pattern of local interagency relationships, build on its strengths and develop strategies to overcome barriers to productive collaboration. Network analysis, used as we have suggested in this report, may be helpful to Smart Start Partnerships as they look at how their local networks are working and what is needed to foster improved interagency collaboration. In its early phases of development, state-level Smart Start leadership took a more active role in promoting interagency collaboration strategies. It may be time to reinvigorate this process. If the heart of Smart Start is the local process for reviewing needs and developing collaborative strategies to meet those needs, then attention to building effective collaborations should be give renewed attention.

There are several preliminary observations we can make from our analyses of organizational networks in these 10 communities with Partnerships for Children. First, newly established Partnerships in counties with fewer resources may have a more limited number of agencies with active referral and contact patterns. It is likely that people in these agencies know each other, often quite well, but joint planning and coordination of services may be less common. Communities with these conditions will need their Partnerships to play an active role in strategic planning for children's needs. They will also need to relay on their Partnerships to build stronger bridges between the public and private agencies that serve children. Meetings that familiarize agency staffs with services provided by all agencies, and the development of a detailed directory of services for children and parents, could help to strengthen the collaboration potential of the community.

The challenge for communities with established Partnerships and stronger interagency networks is maintaining their collaborative energy and moving to solve key issues for children in the community. Partnerships have to continue to press toward resolution of issues that have been given priority. The involvement of parents, the faith community and business leaders needs to be fostered. Our previous research indicates that these groups tend to become less involved over time and that large agencies may come to dominate the process. Considerable attention must be given to broader community and agency involvement and investment in solutions for children. The trail of previously strong, local interagency collaboration efforts is littered with groups that lost their collective vision or became institutionalized with a few active players. Smart Start is not yet in that situation, but the collaborative strength exhibited by the more mature, rural Partnership community in this study must continue to be supported or it will lose its capacity for stimulating and sustaining change.

Partnerships established in larger, urban areas have other challenges before them if they are to be effective in building support systems for children. The potentially overwhelming number of agencies and the complexity of agency interactions must be managed. Common agendas must remain a vital focus or agencies will become islands as their internal needs and processes dominate their attention. Given the large number of organizations and the potential number of dyadic interactions, one appropriate strategy is to focus on targeted, microcollaborations around specific issues. As suggested in this report, agencies with common interests in health, child care, developmental disabilities or parent education could be brought together in teams under the umbrella of the Partnership for Children. The Partnership and its board could provide oversight and strategic planning to these teams, and could facilitate fundraising from targeted local or regional sources that are more amenable to clearly directed initiatives with active collaborative entities behind them.

In conclusion, North Carolina's Smart Start initiative is a locally oriented strategy that relies on the active collaboration of multiple agencies to make a difference in the lives of children. The amount of actual interaction between agencies at the local level varies considerably from county to county, and the leadership of local Partnerships for Children will need to account for

the patterns of existing interagency interaction. Indeed, in order to improve opportunities for children to become "healthy and ready to succeed," the Smart Start mandate, Partnerships must first review their strategies to engender local interagency collaboration in the light of existing interagency interaction. Subsequently, they must monitor the effectiveness of these strategies if they are to sustain the creative energy that is required to continue the innovations they have initiated. Network analysis is an approach that offers significant potential for evaluating the effectiveness of local collaboration. The report that follows this report will offer additional suggestions based on an examination of the changes in local collaborative networks that have occurred as Partnerships have matured.

APPENDIX: KEY TO AGENCY ABBREVIATIONS IN NETWORK MAPS

Abbreviation Agency Name, Title or Category

ARC Association of Retarded Citizens

DSS **Department of Social Services**

DOH Department of Public Health

DOH-(#) Sub-unit of the Department of Public Health

DMH Department of Mental Health

DEH **Developmental Evaluation Clinic**

CHURCH Church or Religious Organization

CIVIC-(#) Civic or Volunteer Organization

COMCOLL Community College

Cooperative Extension Agency COOPEX

CCRR-ECF-(#) Child Care Resource and Referral or Early Childhood Organization

CRISIS-PNP-(#) Private Non-profit Crisis Agency

DOMVIOL-(#) **Domestic Violence Agency**

FRC-(#) **Family Resource Center**

GUARDIANADLIT Office of the Guardian Ad Litem

HEADSTAR Head Start Agency

HEADSTARTMIG Head Start Migrant Agency HEALTHED-(#) Health Education Agency HOSPITAL-(#) Public or Private Hospital

HOUSAUTH Housing Authority

JRLEAGUE Junior Women's League

KIWANIS Kiwanis Club LIBRARY **Public Library**

LIBRARY/LIT-(#) Private Library or Literacy Organization

MD-CLINIC Private Doctor's Office or Clinic

OTHER-PNP Other Private Non-profit Agency or Organization

PARKSREC Parks and Recreation Agency

PARTNERSHIP Smart Start Partnership

PRESCHOOL-(#) Preschool (Day Care) Facility

PTA Parent-Teacher's Association

SCHOOLS Public School System

SCHOOLS-FRC School-sponsored Family Resource Center

SPECIALNEED-(#) Therapy or Special Needs Organization

Women's Club

TRANSPAUTH Transportation Authority

UNITEDWAY **United Way Agency WOMSCLUB**

YMCA Young Men's Christian Association

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REPORTS AND PUBLICATIONS FROM THE UNC SMART START EVALUATION TEAM

Frank Porter Graham Child Development Center at University of North Carolina – Chapel Hill

Child Care Quality

Center-based Child Care in the Pioneer Smart Start Partnerships of North Carolina (May 1996)

This brief report summarizes the key findings from the 1994-95 data on child care quality.

Effects of Smart Start on Young Children with Disabilities and their Families (December 1996)

This report summarizes a study of the impact of Smart Start on children with disabilities.

The Effects of Smart Start on the Quality of Child Care (April 1997)

This report presents the results of a 2-year study of the quality of child care in the 12 pioneer partnerships.

Child Care in the Pioneer Partnerships 1994 and 1996 (December 1997)

This report presents more detailed information about child care centers that were included in *The Effects of Smart Start on the Quality of Child Care (April 1997)*.

Effect of a Smart Start Playground Improvement Grant on Child Care Playground Hazards (August

This report presents results from a comparison of the playground safety of child care playgrounds in a county that used Smart Start funds for playground improvement compared to a non-Smart Start county. *Effects of a Community Initiative on the Quality of Child Care (1999)*. Bryant, D., & Maxwell, K. <u>Early Childhood Research Quarterl</u>, 14, 449-464. Article published in a peer-reviewed journal. Based on *The Effects of Smart Start on the Quality of Child Care (April 1997)*.

Quality of Early Childhood Programs in Inclusive and Noninclusive Settings (1999). Buysse, V., Wesley, P. W., Bryant, D., & Gardner, D. Exceptional Children, 65, 301-314. Article published in a peer review journal. Based on Effects of Smart Start on Young Children with Disabilities and their Families (December 1996).

Kindergartners' Skills

Kindergartners' Skills in Smart Start Counties in 1995: A Baseline From Which to Measure Change (July 1997)

This report presents baseline findings of kindergartners' skills in the 43 Smart Start counties.

The Effects of Smart Start Child Care on Kindergarten Entry Skills (June 1998)

This report presents results from a pilot study of kindergartners in one county who attended Smart Startfunded child care centers compared to a random group of kindergartners who attended a broad range of child care or no child care.

A Six-County Study of the Effects of Smart Start Child Care on Kindergarten Entry Skills (September 1999)

This report presents results from kindergartners in six county who attended Smart Start-funded child care centers compared to a random group of kindergartners who attended a broad range of child care.

Collaboration

Bringing the Community into the Process: Issues and Promising Practices for Involving Parents and Business in Local Smart Start Partnerships (April 1997)

This report describes findings from interviews and case studies about the involvement of parents and business leaders in the Smart Start decision-making process.

Smart Start and Local Inter-Organizational Collaboration (August 1998)

This report presents data about the effectiveness of the Smart Start initiative on improving collaborative relationships. Qualitative and quantitative data were obtained from 269 respondents in 10 local Partnerships.

UNDERSTANDING THE SMART START PROCESS

Emerging Themes and Lessons Learned: The First Year of Smart Start (August 1994)

This report describes the first-year planning process of the pioneer partnerships and makes some recommendations for improving the process.

Keeping the Vision in Front of You: Results from Smart Start Key Participant Interviews (May 1995)

This report documents the process as pioneer partnerships completed their planning year and moved into implementation.

Reinventing Government? Perspectives on the Smart Start Implementation Process (November 1995)

This report documents pioneer partnership members' perspectives on 2 major process goals of Smart Start: non-bureaucratic decision making and broad-based participation.

Annual Reports

Smart Start Evaluation Plan (September 1994)

This report describes our comprehensive evaluation plan at the onset of the evaluation, designed to capture the breadth of programs implemented across the Smart Start partnerships and the extent of possible changes that might result from Smart Start efforts.

North Carolina's Smart Start Initiative: 1994-95 Annual Evaluation Report (June 1995)
This report summarizes the evaluation findings to date from both quantitative and qualitative data sources.

North Carolina's Smart Start Initiative: 1996-97 Annual Evaluation Report (April 1997)
This report summarizes evaluation findings related to each of the four major Smart Start goals.
North Carolina's Smart Start Initiative: 1998 Annual Evaluation Report (January 1999)
This report summarizes evaluation findings related to each of the four major Smart Start goals.

Other

Families & the North Carolina Smart Start Initiative (December 1997)

This report presents findings from family interviews of families who participated in Smart Start in the pioneer counties. The interviews included questions about child care, health services, family activities with children, and community services and involvement.

Smart Start Client Information System Feasibility Study (September 1998)

This report presents findings from a study of the feasibility of creating a system to count uniquely all children and families served by Smart Start.

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