

**PARTNER PLAN ACT
COMMUNITY COLLABORATION RESEARCH AND DATA ANALYSIS
REQUEST FOR SUPPORTS**

The Community Systems Statewide Support Team is partnering with [EduDream](#) to provide research and analysis support to early childhood community collaborations. EduDream is a Latina-founded, woman-owned, research consulting firm inspiring transformation within education by bringing community voice and rigorous research together. The research and analysis support may include conducting landscape analyses of early childhood services, collecting secondary data, conducting trend analysis, developing data insights, or qualitative research and analysis.

If your early childhood collaboration is interested in receiving research and analysis support, please complete this Request for Supports and submit it to Hannah Miro (hannah.miro@actforchildren.org) by COB, August 23rd, 2024. Once your collaboration has submitted this interest form, we will reach out to schedule a consultation call.

COLLABORATION NAME:	
COLLABORATION AREA OF SERVICE:	
Team Member #1: Primary Collaboration Lead/Convener/Coordinator/Staff	
Name:	Organizational Affiliation:
Collaboration Role(s):	Title:
Email address:	Organizational Mailing Address:
Phone:	
# of years with collaboration:	
Race:	
What sector or community system development effort does this team member represent?	
Team Member #2: Parent or Community Representative (Strongly Encouraged)	
Name:	Organizational Affiliation:
Collaboration Role(s):	Title:
Email address:	Organizational Mailing Address:
Phone:	
# of years with collaboration:	
Race:	
What sector or community system development effort does this team member represent?	
Team Member #3 Local Child Care Resource and Referral Agency Representative	
Name:	Organizational Affiliation:

Collaboration Role(s):	Title:
Email address:	Organizational Mailing Address:
Phone:	
# of years with collaboration:	
Race:	
What sector or community system development effort does this team member represent?	
Team Member #4	
Name:	Organizational Affiliation:
Collaboration Role(s):	Title:
Email address:	Organizational Mailing Address:
Phone:	
# of years with collaboration:	
Race:	
What sector or community system development effort does this team member represent?	

Note: Collaboration teams should consist of at least three members. At least one member should serve in a Project Manager capacity, please indicate which member will fill this role above.

Please select the general theme your collaboration might be interested in investigating below:

- ECEC Developmental Screening Research
- ECEC Parent Engagement Research
- ECEC Provider Engagement Research
- ECEC Slot-gap Research
- ECEC Workforce Research
- Other ECEC research area, please describe:

What are you seeking to better understand about the ECEC services in your community?

- Availability of high quality ECEC services
- Family access to high quality ECEC services
- ECEC Workforce
- ECEC Facilities
- ECEC Costs to Families

Please list question(s) your collaboration is interested in researching by participating in this opportunity.

You may want to consider sharing details about the topic that your collaboration would like to learn more about, what the collaboration would do with this information, any previous or current efforts this research and data analysis support could build upon or connect to.

What data and evidence do you have on the proposed research topic? Where are there gaps?

Please provide additional details on the data you or your collaboration have that can inform your research topic. Additionally, share any current or previous efforts this research and data analysis support could build upon or connect to.

How will the research findings be used? Who is the intended audience?

How will research and data support address equity in your early childhood collaboration, early childhood system, and/or community?

Please share about how the support will address racial equity specifically. How will the project involve parents, ECEC providers, and/or community?

Are you able to commit to up to one-hour meetings with the project consultants every other week and additional communication as needed? Yes No

Is your entire collaboration aware of and in agreement with requesting research support?

Yes No

Would you be willing to share about your experiences in a workshop for an upcoming Partner Plan Act Conference or training event? Yes No

Please provide a general overview of your collaboration.

You may want to consider: How long has the collaboration existed? What is the current mission, vision, and/or purpose statement? What is the collaboration's staffing and funding status? How often does your collaboration meet and is it on a regular basis? What is your collaboration's governance and

decision-making structure? How do you distribute leadership and tasks? (Tip: if your collaboration is listed in the [Illinois Early Childhood Collaboration Directory](#) and all the information is up to date, feel free to copy and paste from there.)

Does your collaboration serve one or more of the priority populations identified by the state of Illinois? If so, which population(s) and how does your work focus on them?

Priority populations: Children of teen parents; children experiencing homelessness; children in families in poverty or deep poverty; children/families with child welfare involvement; children with disabilities; children of migrant or seasonal workers; families with low caregiver education attainment; families that face barriers based on culture, language, and religion; children of a parent or legal guardian with a disability; children/families with refugee or asylee status; children in families that face barriers due to immigration status; children who are impacted by parental involvement in the criminal justice system.

Describe the community that your collaboration works with and supports.

You may want to consider: What community or geographic area(s) do you serve? What are the demographics of those area(s)? What are its strengths and assets? What are its challenges and needs?

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