## Closing the Gap between Schools and Community: University/Community Collaboration Addresses Identified Barriers to Student Learning

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#### **ABSTRACT**

Two different community-engaged groups in Indianapolis, Indiana, recommended trauma-responsive school communities to address barriers to student learning. Before merging their work, both groups represented collaborations of university academics; K-12 educators; dental, mental, and basic health providers; service organizations; youth development specialists; and public school parents. The conclusions from the collective work were clear: address the social/ emotional and mental health, trauma and violence. chronic absenteeism, and social media distractions of students or fail to impact learning and youth development success. Central to the conclusions was the collaborative nature of the community-engaged studies, input from the field, survey respondent discussions, and analysis of the findings. A culminating report, Closing the Gap between School & Community Partnerships: An assessment of schools in Indianapolis, recommends adopting whole-child approaches, strength-based family engagement, community school models, and increased public school funding to address the barriers identified

from survey responses of 354 educators throughout the city of Indianapolis. This paper focuses on how the collaborative, community-engaged process led to the report findings, lessons learned, recommendations, and next steps.

#### INTRODUCTION

Two different groups studying how poor health outcomes and related factors can serve as a barrier to learning in Indianapolis recognized an opportunity to share data and collaboratively identify recommendations for action to close the gap between schools and community resources. A university-facilitated group studied health factors for five distinct school communities on the Indianapolis Near-Westside, while the other community organization-led group surveyed hundreds of educators throughout the city to see what their schools needed to help address barriers to learning. Both groups identified social, emotional, mental health, trauma, and related chronic absenteeism as root cause preventing optimal learning conditions for children and families of the Indiana state capital. Once the two groups merged, they shared findings, data, and discovery, setting out together to deepen their understanding of the information through collaborative analysis, community-based discussion, and targeted informant interviews. By sharing expertise, resources,

and community access, their collaborative study guided research-based recommendations for change.

The Marion County Commission on Youth, Inc. (MCCOY) brought survey responses from 354 educators throughout the city to the collaboration. At the same time, the Indiana University Purdue University Indianapolis (IUPUI) team from Family, School, and Neighborhood Engagement in the campus Office of Community Engagement provided research data analysis and recommendation considerations, experienced community discussion facilitation, and established deep school/community relationships. The collaboration between the two groups strengthened the work beyond the earlier separate endeavors.

In this article, we define the two partnerships, how their eventual collaboration strengthened the study, and share the results. We conclude with the recommendations for change.

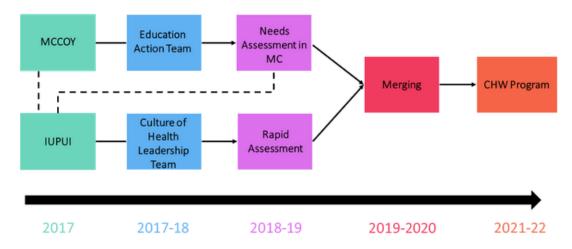
#### THE TWO PARTNERSHIPS

In August 2019, two partnerships that worked to understand and bring attention to the health needs of youth in Marion County began collaborating to summarize the results of their findings and jointly recommend solutions to the issues found in their respective assessments. The following sections describe the two partnerships – MCCOY's Education Action Team and the Culture of Health Leadership Team facilitated by IUPUI – and their work before joining forces. Figure 1 below shows the collaboration timeline and this article's organization.

#### MCCOY'S EDUCATION ACTION TEAM

MCCOY is Central Indiana's primary youth-focused intermediary organization, championing the positive development of youth through leadership on key issues and support for the youth worker community. Since 2009, MCCOY has convened the Early Intervention Planning Council (EIPC), a group of diverse stakeholders and community leaders appointed by the City-County Council, the Indianapolis Mayor's Office, and other relevant agencies. The overarching goal of the EIPC is to reduce the number of children entering the Marion County child welfare and juvenile legal systems by improving the coordination of and access to youth programs and resources. The Education Action Team is a subset of the EIPC formed in 2017 to support the education of school leadership and staff on prevention

Figure 1
Partnership Timeline



and early intervention protective factors, traumainformed care, and cultural competency. Individuals on the action team represent multiple local school districts (MSD Warren Township, MSD Lawrence Township, MSD Decatur Township, Indianapolis Public Schools, the Mayor's Office of Education Innovation), IUPUI, and multiple community organizations (the Marion County Public Health Department, Communities In Schools of Indiana, Peace Learning Center, and Jameson Camp among them). The team meets monthly to review progress and act on various projects to impact the education system and positive youth development. In 2019, after successfully facilitating poverty simulations for school and community partners, the team determined that an assessment of school needs would be necessary to identify the most appropriate steps to move forward.

### CULTURE OF HEALTH LEADERSHIP TEAM

As one of five communities across the country participating in a Culture of Health Project with the Coalition for Community Schools and the Robert Wood Johnson Foundation, IUPUI's Culture of Health Leadership Team was formed in 2017 by Family, School, and Neighborhood Engagement in the Office of Community Engagement at IUPUI. The Culture of Health project provided a framework to refocus attention on the health of youth, families, and neighbors of the Indianapolis Near-Westside school communities in a then-federally funded full-service community schools initiative through the Mary Rigg Neighborhood Center. It also studied how area partners and service providers deliver health promotion and disease prevention opportunities, particularly the university health-focused schools near the target neighborhoods.

The collective study began in March 2017 by forming a leadership team of invested health-related representatives from across the city, totaling about 50 individuals. Nearly half of them were from the health schools on IUPUI's campus, including the Indiana

University Schools of Medicine, Dentistry, Nursing, Social Work, Education, Health and Human Sciences, and Optometry. The leadership team also included representatives of IPS, Peace Learning Center, Eskenazi Health, Marion County Public Health Department, Shalom Health Services, IUPUI Center for Service and Learning, Office of Community Engagement, Mary Rigg Neighborhood Center, MCCOY, and area parents.

The leadership team focused on the communities of IPS participating in the Near-Westside Community Schools Initiative: Stephen Foster School 67, William Penn School 49, Matchbook Learning at Wendell Phillips School 63, Daniel Webster School 46, and George Washington High School. Early on, the team determined it should adopt the terms "wellness" and "wellbeing," a nuance that helped drive the quest to determine where efforts might best address the state of health in the area. The team met every other month to devise strategies to address an Action Plan collectively developed at a two-day retreat early on in Washington D.C., with representatives of the Coalition for Community Schools and Robert Wood Johnson Foundation to foster safe and supportive learning environments to strengthen social, physical, and emotional wellbeing for all school community members.

### HOW THE PARTNERSHIPS APPROACHED THEIR STUDIES

Before the merger, both groups collected data to inform their actions. Between 2017 and 2019, the Culture of Health Leadership Team held discussions with professional medical informants, including the Chief Medical Officer of Eskenazi Hospital, the county hospital on campus. In 2019, the leadership team also launched a Health Survey for Families. Meanwhile, MCCOY's Education Action Team launched an online survey of school personnel throughout the city. Following, we describe the methodology used by each partnership.

## THE CULTURE OF HEALTH LEADERSHIP TEAM HEALTH SURVEY FOR FAMILIES

Conversations about the Health Survey for Families started in 2018 when one of the group members reported the results of a survey with health input by families of Stephen Foster School 67. By January 2019, one of the leadership team members, an independent family engagement consultant, said she wanted to survey families again about health and solicited assistance in updating the questionnaire. The Culture of Health Leadership Team and Near-Westside Community Schools collectively developed the survey for families. The paper survey was administered to families at three of the five school sites: William Penn School 49, Daniel Webster School 46, and Matchbook Learning at Wendell Phillips School 63.

Parents completed 80 surveys, 30 at Matchbook Learning, 31 at William Penn, and 19 at Daniel Webster. The survey collected information about health and safety issues in the neighborhood, the use of medical care facilities in the neighborhood, transportation to medical care facilities, primary health and safety concerns about children, and community resources used in the previous month.

# MCCOY'S EDUCATION ACTION TEAM ONLINE SURVEY FOR SCHOOL PERSONNEL

The Education Action Team at MCCOY developed a strategy to identify the needs of school personnel to provide targeted programming and capacity building to meet youth needs. The assessment began with an online survey released in April 2019 targeting schools in Marion County and nearby suburbs to identify challenges and seek feedback about the resources and support schools need.

K-12 teachers, administrators, and support staff from MSD Decatur Township, MSD Warren Township, and

Indianapolis Public Schools participated in the survey. The surveyed population also included charter, private, and suburban schools. In total, 354 responses were collected and distributed as follows: Decatur (201), Warren (81), IPS (26), and the remaining (46) were from charter, private, and suburban schools.

The survey covered topics affecting students and their behaviors, practices, and programs in schools, barriers to learning, needed resources, and the value of school/community relationships in addressing the identified challenges. While the short-term intent of the survey was to identify collaborative actions the team could initially carry out to support school personnel through professional development opportunities, the results identified needed long-term systems changes that could improve student outcomes and support school personnel through the education process.

### RESULTS OBTAINED BY EACH PARTNERSHIP

## THE CULTURE OF HEALTH LEADERSHIP TEAM HEALTH SURVEY RESULTS

Participants in the Health Survey for Families were asked to select the option that concerned them the most about their children's health and safety. The three highest priorities were crime in the neighborhood, bullying, and the need for mental health counseling. Other essential concerns identified the need for healthier food access, the lack of activities for youth to do in the summer, and the need for a mentor or other positive adult in each child's life. Another question in the survey asked about the top three health and safety concerns that could be better in the neighborhood. Bullying was mentioned with significant frequency.

In addition to the survey results, multiple professional health informant presentations and interviews helped the Leadership Team determine that trauma-responsive school communities could best address the barriers to health and student learning. The team discussed the findings with representatives of each of the five school communities — just before merging the work with MCCOY because of similar assessment findings and to reach a greater geographic area.

Along the study journey, the team determined some key lessons:

- Public health is complex,
- · Cultural norms are difficult to change, and
- Trauma is a root cause of most of the health issues for youth and families of the Indianapolis Near-Westside.

Subsequent action focused on: 1) the development of trauma-responsive school communities and 2) onsite healthcare access for students in the one school without it, Daniel Webster School 46. Addressing the social/emotional needs of students and their families is an emerging interprofessional response to trauma that is exasperated by high rates of crime, drug abuse, and related negative family outcomes demonstrated by Adverse Childhood Experiences (ACEs) findings both here and throughout the country (Medina et al., 2020).

### MCCOY'S EDUCATION ACTION TEAM NEEDS ASSESSMENT RESULTS

MCCOY's survey respondents identified five key issues impacting student success: social-emotional health, chronic absenteeism, trauma and violence, social media and internet use, and mental health (Marion County Commission on Youth [MCCOY], 2021). While not the only challenges facing students, survey respondents identified these issues the most. In addition, statistical analysis found significant differences in responses depending on the roles of respondents within the schools (teachers, support staff, or administrators) and the types of schools respondents worked at (charter, Indianapolis Public Schools, private, suburban schools

outside Marion County, or townships) (MCCOY, 2021). Respondents were also asked to identify resulting behaviors from these issues (such as substance use, fighting, aggressive behavior, or absenteeism), finding significant differences based on the type of school (township, suburban, private, or charter). Survey respondents also listed the types of policies, practices, or programs they implement in their school to address these and other related issues and identified the additional resources needed for students, families, teachers, and administrators. When asked about the barrier to accessing these resources, the most frequent response was lack of funding or financial limitations (MCCOY, 2021).

#### THE COLLABORATION

Conversations about the two groups collaborating started in August 2019 after one of the Culture of Health Leadership Team members representing MCCOY presented the preliminary results of MCCOY's assessment survey. The survey conducted by MCCOY drew similar conclusions as the Health Survey for Families and the leadership team conversations and studies around the main issues affecting youth health, such as mental health, trauma, social/emotional learning, and chronic absenteeism. The Culture of Health Leadership Team merged with the Education Action Team in early 2020 to continue the study, based on the shared focus on social/emotional learning, mental health, chronic absenteeism, and creating trauma-responsive school communities. A strong collective of partners from different sectors formed as a result. Members of the Culture of Health Leadership Team collaborated with MCCOY's Education Action Team (with representatives of multiple school districts throughout the city, mental health providers, Communities In Schools of Indiana, and other vested partnering organizations) to take a broader perspective beyond the Near-Westside of Indianapolis and explore the more expansive approach to collectively address

the social and emotional needs of students and families throughout Marion County.

Once survey results were analyzed, the Education Action Team collaborated with IUPUI's Office of Community Engagement to plan three community conversations with MSD of Decatur Township, MSD of Warren Township, and Indianapolis Public Schools. Participants featured teachers, administrators, and support staff, including guidance counselors and social workers. The conversations aimed to identify ways of strengthening the connection between school and community resources, professional development, and programs that address barriers to student success. Data also identified what school personnel wished for students – or what they wanted to see as a future result of education.

Unfortunately, the community assessment process was interrupted by the onset of the public health emergency related to the COVID-19 pandemic in March 2020. However, in April 2020, the team conducted three virtual key informant interviews via Zoom to dive deeper into key findings.

Key informant interviews with a K-8 school principal, township administrator, and school-based mental health provider gave deeper perspectives into the experiences of the primary population of the assessment, especially as it relates to the community partnership that could facilitate systems-level solutions to address root causes of these issues. Findings that emerged from the key informant interviews suggested that programs and services implementing a case management model may struggle with the capacity to meet the needs of every student and family at the school while also operating under a completely different business model (such as Medicare reimbursement) than the school. Schools also struggle to engage families with external partners, highlighting the critical role trust and strengths-based practices play in supporting students and their families (MCCOY, 2021). Each interviewee was asked to share

the single most impactful action we could collectively take to support students, and each shared the same answer: family engagement and support. Ironically, the most basic way of supporting a family may be connecting families to the resources and services they need most. However, this seems to be where schools lack the greatest capacity due to structural barriers that make it difficult for schools to maintain effective partnerships with community programs and services.

When survey data was shared in November and December 2019 with community conversation participants of the three school districts, most said that the data reflected what they saw within their schools. In each conversation, participants shared they wanted more training and professional development to support students and address secondary trauma that teachers experience. Trauma-informed professional development and resources were emphasized, specifically regarding mental and social/emotional health. However, while popular, professional development may not be the most effective solution because of the complex and systemic nature of the challenges – something that participants recognized through community conversations. Participants acknowledged that schools attempted to address the symptoms of the issues rather than

A significant focus of the community conversations was trust as an integral part of engaging with students and their families. Research indicates that interactions promoting trust and self-regulation between students and teachers may mitigate the effects of poverty and other environmental influences (Adams & Forsyth, 2013).

implement systemic strategies to address root causes. In the community conversations to identify potential solutions, environmental and policy strategies were identified mainly for chronic absenteeism, trauma, and violence but less so for strictly mental and social/emotional health. A significant focus of the community conversations was trust as an integral part of engaging with students and their families. Research indicates that interactions promoting trust and self-regulation between students and teachers may mitigate the effects of poverty and other environmental influences (Adams & Forsyth, 2013). Students in high-trust learning environments perceive more control over their learning (Tschanned-Moran & Hoy, 2000).

Figure 2
Collective Final Report



Note: The culminating report by the collaborating group with the Marion County Commission on Youth link: https://mccoyouth.org/closingthegap/

A collective culminating report with MCCOY, *Closing* the Gap between School & Community Partnerships:

An assessment of schools in Indianapolis, outlined the assessment process, key findings, and recommendations to create stronger connections between schools and community resources that support student success.

#### AGENDA FOR CHANGE

Throughout the assessment, we contemplated how the challenges were interwoven and systemic. A thorough literature review of the five key issues identified – social and emotional health, chronic absenteeism, trauma and violence, social media and the internet, and mental health – highlights critical data, and research findings point to the complexity of each issue and the overlapping systems and risk factors that impact them (MCCOY, 2021). While many schools implement programs to impact critical youth development and education issues, the approaches can only be sustained if key personnel, resources, and funding are available. Skill-building programs must be components of multilevel approaches implemented at every level of the education process (Slade & Griffith, 2013).

Based on the findings, the assessment report structures recommendations around the socioecological framework to influence various levels of change within the educational system – from individual behavior and attitude changes to modifying the interactions between schools' staff, students, and families, and finally, changes to the social and physical environments and policies. The recommendations called for schools to adopt a whole child, strength-based approach and the community school model, supported by increased investment in public education.

The whole-child approach positively impacts students' individual experiences and development. The approach is integrated throughout various levels of the education system (curriculum and instruction, school climate and structures, professional development, and student learning) to "influence long-term success rather than short-term achievement" among students (Association



The Marion County Public Health Department Smilemobile Provides Dental Care for Students at Indianapolis Public School William Penn #49

for Supervision and Curriculum Development [ASCD], n.d.). Specifically, solutions and strategies are driven by indicators to track outcomes ensuring students are healthy, safe, engaged, supported, and academically challenged (ASCD, 2012).

Family engagement was emphasized throughout the community conversations and prioritized as a critical action amongst the key informants we interviewed for our assessment. Research links family engagement to better student behavior, higher academic achievement, and enhanced social skills (Centers for Disease Control and Prevention [CDC], 2018). However, trust is essential to effective family engagement, and our team identified strength-based approaches as effective strategies for improving trust between school personnel and families. Based on research from the Search Institute's framework for developing relationships, a strength-based approach to family engagement includes acknowledging family strengths and assets, respecting and learning from differences, and authentically sharing in decision-making (Early Childhood Learning and

Knowledge Center, 2022). Strength-based approaches improve the relationships between school personnel and families, which may positively impact engagement with community partners offering necessary resources and services.

The Community School Model applies the whole-child approach at a whole-school, whole-community level. Within this model, schools, families, and communities work together to support student academic success, positive youth development, strengthen families, and improve communities (Lubell, 2011). Community services and resources are coordinated, integrated, and delivered through the facilitation of a Community School Coordinator. At the same time, Community School Councils engage families and community partners to develop a shared vision and supported pathways for student success (Medina, 2020). This collective framework establishes schools as resource hubs within the community to achieve better student, family, and neighborhood outcomes (Potapchuk, 2013).

Strength-based approaches improve the relationships between school personnel and families, which may positively impact engagement with community partners offering necessary resources and services.

Wayne Township Fire Department Personnel Discuss Fire Safety with Students of Matchbook Learning at Wendell Phillips School #63, A Model Community School in Indianapolis



Each of the recommendations will only be sustained if an increased investment in public education exists. During the 2017-2018 school year, Indiana ranked 47th in average per-pupil funding and 34th in average teacher salary nationwide (National Education

Association, 2019). Our assessment identified the systemic and interwoven challenges resulting from decades of financial disinvestment – challenges teachers and other school personnel must navigate daily. Moreover, public education underfunding is not

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equitably distributed, sustaining the systemic racist practice of segregation within our education systems (EdBuild, 2019). To equitably impact student outcomes and academic success at the systems level, we must advocate for revised public education funding systems and historical increases in investment from our local, state, and federal policymakers.

#### FROM RESEARCH TO ACTION

The success of the assessment and subsequent report has inspired the expanded Education Action Team to continue collaborating on multiple projects to further the report recommendations. Next, we discuss the initiatives being implemented in part by this foundational collaboration.

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### SCHOOL-BASED COMMUNITY HEALTH WORKER PILOT PROJECT

In 2020, MCCOY and IUPUI began conversations with a participating K-8 school principal within Indianapolis Public Schools about addressing chronic absenteeism exacerbated by the COVID-19 pandemic. Together, they successfully submitted multiple proposals —Title II funding by the Indiana Criminal Justice Institute beginning in January 2021, Title V funding by the Indiana Department of Health in October 2021-September 2023 — to pilot a schoolbased community health worker (CHW) program in the school to reduce chronic absenteeism by engaging families and connecting them to community resources and services. This is one of the most ambitious projects to date resulting from our Closing the Gap assessment, as we continue to develop and evaluate the program to show the critical importance of school/community partnerships. This initiative involves several West Indy neighborhood partners, including Eli Lilly & Company, West Indy Development Corporation, West Indy Public Library Branch, West Morris Street Church, Gleaners Food Bank, Mary Rigg Neighborhood Center, and Ingredion Corporation.

#### **CLOSING THE GAP CASE STUDIES**

While the assessment we completed centered on the needs of schools, we identified significant strengths and assets throughout the assessment process. The Education Action Team is developing case studies of effective school/community partnerships to remain strengths-based. Examples include implementing in-school mental health services, a district-supported family resource center, access to university optometry and dental services, Communities in Schools of Indiana, and a two-generation approach by an Early Childhood Education Center. The case studies will highlight innovative ways schools partner with community services and inspire other communities to develop partnerships. Case studies will be published on MCCOY's website dedicated to

the Closing the Gap initiative. Printouts will be shared at relevant events and shared digitally with schools and relevant community partners when appropriate.

### CLOSING THE GAP COMMUNITY CONVERSATIONS

In addition to the case studies, the Education Action Team has secured funding to hold additional community conversations to continue the Closing the Gap initiative. We are still working the details out but plan to do four community conversations focused on the four key recommendations of the support. Stipends are being provided to support family and youth participation, and a local consultant has been contracted to support this effort. The goal is to identify actions that individuals, communities, and schools can take to implement the recommendations of the report further. The additional community conversations will focus on the assessment findings and recommendations designed to result in further clear action steps and projects that various community partners can take to improve the connections between Marion County schools and community services and resources. The community conversations will culminate in a symposium, bringing together partners and experts to identify innovative solutions to the complex challenges identified throughout the assessment.

# ADDRESSING CHRONIC ABSENTEEISM THROUGH SYSTEMS CHANGE

Chronic absenteeism is a symptom of some of the root causes we identified as challenges through our assessment (mental health, trauma, violence, and social/emotional health). Yet, it is a symptom that has garnered significant attention in the post-pandemic education arena. MCCOY has convened a new workgroup of community stakeholders, with representation from the Indiana Department of Child Services, Marion County Prosecutor's Office, Juvenile Probation, and

public schools, to identify ways of shifting the multiple systems addressing attendance from punitive to more restorative paradigms and practices.

### LESSONS LEARNED FOR EFFECTIVE COLLABORATIONS

Community-based partnerships are critical to building a community's capacity to improve outcomes through community building and empowerment (Doyle et al., 2019). Strategies for partnership development include community-based goals, strength-focused discussions, shared power, realistic expectations, and celebrating accomplishments (Chaskin et al., 2001; Glanz et al., 2015; Minkler, 2012). Additionally, it is helpful for researchers and community partners to establish shared operations practices and decision-making styles to overcome divides in organizational/professional

cultures (Bstieler et al., 2017). Once combined with the Culture of Health group, the Education Action Team developed practices aligned with the research-based strategies to continue effectively collaborating beyond the assessment project. Most importantly, the identified critical ingredient to the collaborative process is trust.

#### COMMUNITY-BASED GOALS: WORKING TOGETHER TO BUILD COMMUNITY CAPACITY

Developing shared definitions of issues, collectively searching for information, and collaborating to select and implement solutions are critical activities of community-building partnerships (Cox, 2000). Neither MCCOY's Education Action Team nor IUPUI's Culture of Health Leadership Team established goals in isolation. Instead, when the directions of their two



Note: Drs. Barbara Maxwell and April Newton of the Indiana University School of Medicine (center) with Kate Roelecke of the Marion County Commission on Youth (right) assist students at the Indianapolis Public School Daniel Webster #46 Family Back-to-School Bash. Such engagement helps families to increase student attendance with a Community Health worker through the Marion County Commission on Youth's collaboration with Indiana University Purdue University Indianapolis.

separate projects began to overlap, the groups leveraged existing relationships to merge their efforts. The trust-building amongst university and community partners is strengthened through reciprocal communication (i.e., consistent, timely, and adequate communication) (Bstieler et al., 2017). The Education Action Team and University partners frequently corresponded through various channels, including email, phone calls, and virtual- and in-person meetings. Partners felt comfortable asking clarifying questions and checking in frequently to move project activities along.

# STRENGTH-FOCUSED DISCUSSIONS: LEVERAGING EXPERTISE AND TALENT

While our efforts centered around the needs assessments, the group intentionally collected data on existing strengths, assets, and resources of schools and community partners. This helped to identify potential leverage points for future collaboration. In discussing future action steps based on the assessment results, the group launched a series of case studies showcasing promising and effective school/community partnerships, highlighting the strengths of our communities rather than the deficits. Additionally, the team not only centered on identifying the strengths of the communities we were assessing, but we also leveraged the strengths and skills of the group, leaning on the expertise that partners brought to the table. Specifically, IUPUI shared the expertise of researchers to help analyze data and well-established school/community relationships, while school partners shared their expertise in school settings, adding to the space and time to hold community conversations mutually facilitated by IUPUI and MCCOY personnel. MCCOY coordinated efforts over the assessment study to keep the project on track and ensure that various community sectors were engaged throughout the process.

### SHARED POWER: DATA AND INFORMATION EXCHANGE

This assessment would not have been successful without partners sharing power, specifically through their access to data and information. Multiple school partners shared survey tools to aid in the development of the initial online survey used in the assessment. Demographic data was readily available through the Indiana Department of Education website and database Insight Indiana. However, the informal information sharing during our monthly meetings opened doors of opportunity and unearthed key insights, guiding the

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assessment process and informing the development of our key recommendations. The conversations developed trust and a shared understanding of respect for the information provided, resulting in shared ownership of the process and the assessment findings.

### REALISTIC EXPECTATIONS: NAVIGATING A GLOBAL PANDEMIC

This project cannot be discussed without acknowledging the effects of the COVID-19 public health emergency (PHE) that brought the world to a standstill on March 13, 2020. The Education Action Team had set goals and a timeline for completing the data collection phase of the assessment that was instantly interrupted by the onset of the global pandemic. As schools closed and much of the U.S. workforce sheltered at home, MCCOY staff and Education Action Team partners had to navigate how to work virtually from home – most for the first time. Practices and expectations had to change considering

this PHE reality, resulting in overcoming challenges and finding improvements and hidden successes in the process. Key informant interviews were completed via Zoom, for example, making it easier to record and transcribe the interviews for analysis. Report writing was aided by the slowed-down nature of working through the pandemic. A significant amount of grace was afforded to MCCOY staff in the report-writing, perhaps driven by everyone's adjusted reality due to our shared ongoing experience of the pandemic.

The Education Action Team discussed how the overall assessment findings may or may not be impacted by the pandemic-driven school closures and interruption to the education system. The group concluded that while our assessment data was collected prior to pandemic closures and the challenges we identified were "pre-COVID," the pandemic would exacerbate the challenges. Indeed, secondary data collected after schools returned, in most cases, to a full calendar year in 2021-2022 point to the same challenges being present in schools, but at more significant degrees (Middleton, 2020; Curriculum Associates, 2021; Dorn et al., 2021; Indiana Department of Education, 2021). Chronic absenteeism is a prime example.

One of the participants suggested next steps include a deep dive into absenteeism, which is often a symptom of a much larger set of struggles for families. The current attendance laws are outdated and do not accurately reflect the reality of the situation. It is frustrating for educators not to have real support for students and families in this area. Additionally, it could help to have easier access to services for students and families. When there are such services, it usually is either difficult to access them or the school is unaware of them.

## CELEBRATING ACCOMPLISHMENTS: REFLECTIONS AND 'WHAT'S NEXT' CONVERSATIONS

Reflecting on the assessment process and the success of the collaboration, one of the most significant factors identified by the authors was our sense of shared purpose and the mutual joy cultivated through this work. That joy and purpose continue through affirmation, validation, and celebration - whether through kind words and congratulations shared in an email, checking in on a personal level during meetings, or reflecting on our shared success by presenting together at a national conference (and simply enjoying attending a conference in-person). MCCOY, in convening several groups of community partners on various issues over its 30-year history, has learned that when groups succeed, no matter how large or small the endeavor, the efforts typically result in a "what's next" conversation. Recognizing success and celebrating even the smallest of victories lets community partners know that their time and efforts lead to results, and the results have an impact. This builds momentum for the next project or initiative, enabling groups to scale their efforts.

### THE MAGIC INGREDIENT TO EFFECTIVE COLLABORATIONS

While not an original discovery, one significant finding deserves repeating: trust is the identified magic ingredient in collaboration at its best. Indeed, "through trust, information may become available that would otherwise be overlooked or not forthcoming, partners may choose to provide free information for which they would otherwise charge, and the sharing of information may eliminate duplication in collection and analysis" (Cox, 2000). The trust between the partnerships in this study supported data and information sharing, shared goals, resources, and expertise, and the ongoing culture of sincere mutual respect.

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