

IMPACT REPORT



Right Start for Colorado Team:
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Right Start for Colorado is an initiative that aims to strengthen and expand infant and early childhood mental health services across Colorado by building statewide workforce capacity of professionals serving young children birth to 5 years of age and their families.

Right Start for Colorado was originally seeded in 2018 with a five-year Infant and Early Childhood Mental Health (IECMH) federal grant from the Substance Abuse and Mental Health Administration (SAMHSA). Generous additional funding came from Buell, Caring for Colorado, Community First, Gary Community Investments, and Zoma Foundations.

We conceptualize our IECMH workforce as two complementary and interdependent groups of professionals who collaborate and cross-refer to ensure the thriving welfare of Colorado's youngest residents. This includes clinical mental health professionals with expertise in infant and early childhood mental health and allied providers who work with infants, toddlers and preschoolers including child welfare, home visitation, early care and education, Part C early intervention sectors, among others. These allied profesionals are the first line in identifying and referring very young children for appropriate mental health assessment and intervention, when needed.

An Interdependent Workforce



Allied Professionals

(Promotion, Prevention & Identify/Refer)



Clinical Providers

(Provide IECMH Intervention/Treatment)



Coordinated system of care, strengthened workforce, thriving children & families.



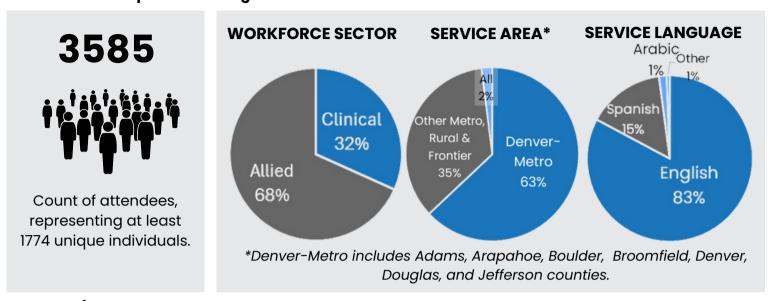
The graphics above highlight Right Start for Colorado's approach. We strive to grow Colorado's infant and early childhood mental health system of care; strengthen and expand the IECMH workforce with specialized training and ultimately increase access to and quality of developmentally sensitive infant mental health services across the state. These icons identify which outcomes are present in the IECMH spectrum. We aim to give every child in Colorado the "right start" no matter their circumstances at birth. This report shows the robust outcomes we can continue to co-create if we provide sufficient IECMH workforce supports that in turn will provide better outcomes for Colorado's youngest children and their families.





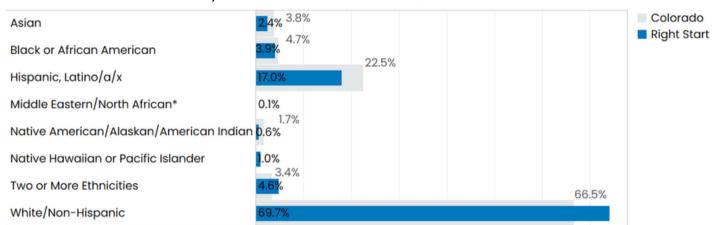


Below is an overview of the various professionals who have participated in Right Start for Colorado's workforce development trainings between 2018-2023.



Race/Ethnicity of Right Start for Colorado Participants and Colorado's State Demographics

Colorado data most recently available from U.S. Census, 2022



30% of participants identify as BIPOC and/or Hispanic, Latino/a/x.

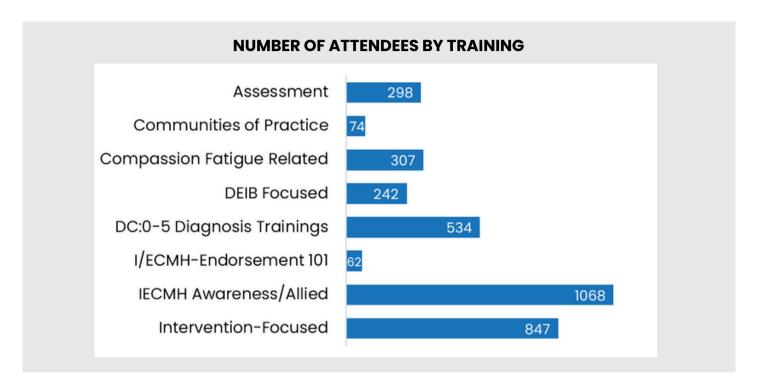
Right Start for Colorado has provided no-cost training to professionals across all regions of Colorado, prioritizing those with BIPOC and/or Hispanic/Latinx identities, and those who provide services in languages other than English. We partnered with several community organizations and provided select trainings in Arabic and Spanish. This approach led us to train professionals who are more representative of average state demographics, as shown in the graph above. However, there is still a large gap in representation of BIPOC professionals and an ongoing need for more BIPOC, Hispanic/Latinx and language-diverse professionals to support the diversity of families who live, work and play in Colorado.

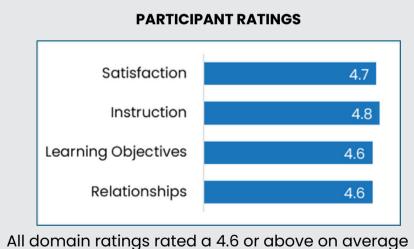






Numerous IECMH workforce trainings were offered between 2018-2023. Each training was followed with an evaluation survey and we used the evaluation data not only to measure impact and effectiveness of our offerings, but for continuous quality improvement.





Participants have rated trainings highly across all years. We did not find any significant difference in ratings by profession, sector, or by race and/or ethnicity. Open ended feedback showed themes of participants leaving trainings with valuable tools and specific skills that are directly applicable to their work.

"A lot of the material I felt can be very validating for parents who do not understand why they have a hard time understanding the difficulties of their relationship with their children. It can be very helpful to normalize and use this [curriculum] to help parents recognize it may not be things they did, but things that have happened to them when they were young that changes the way they perceive their child."

- Participant in Circle of Security Parenting - Facilitator Training



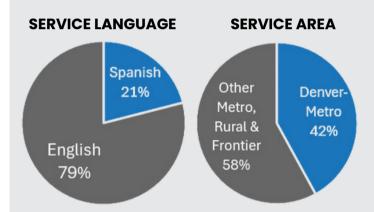


COMMUNITY OF PRACTICE

Between 2020-2023, Right Start for Colorado offered a 12-month IECMH Clinical Community of Practice to 3 separate cohorts of 8 clinicians from across the state. These clinicians received monthly didactics, regular individual and group reflective supervision/consultation, with varied additional supports. Participants left trained in IECMH assessment, diagnosis and treatment, as well as with a sense of community and support among their peers. These findings show the importance of providing comprehensive workforce support and creating peer communities to bolster resilience for clinicians delivering IECMH services, which ultimately leads to better outcomes for young children and families.

24

Clinicians serving families across 13 Colorado regions have participated in the IECMH Clinical Community of Practice.



Participants in the COP provide services all over Colorado with 20% providing services in Spanish. Racial/ethnic identities are comparative to overall Right Start and statewide demographics, still highlighting a need for more BIPOC clinicians in our state.

420

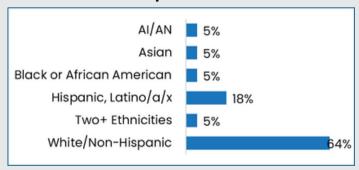


Hours of reflective supervision/consultation provided to to IECMH COP clinicians.

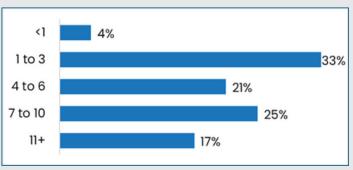
Clinicians in the IECMH Clinical Community of Practice received the following trainings:

- Monthly individual and group reflective supervision/consultation with an IMH-E clinical mentor
- DC:0-5 Clinical Diagnosis Training
- Crowell Parent-Child Interaction Play Procedure Training
- Working Model of the Child Interview Training
- Diversity-Informed Tenets for Work with Infants, Children & Families Workshop
- Child Parent Psychotherapy 18-month Learning Collaborative
- Circle of Security Parenting Facilitator Training
- Circle of Security Core Sensitivities/Human Condition Training
- Perinatal Mood and Anxiety Disorders trainings

RACE/ETHNICITY



YEARS OF EXPERIENCE







COMMUNITY OF PRACTICE

Clinicians with varying years of experience participated and benefited from the Communities of Practice (COP). We found statistically significant outcomes including decreases in job burnout, increases in compassion satisfaction and reflective practice skills, and increases in their use of a relationship-based dyadic approach to IECMH treatment.

Professional Quality of Life Improved

Compassion satisfaction increased while burnout decreased from pre to post COP participation



"To have that reflective space to integrate things that we're noticing, how that impacts families, babies, children, myself... that was one of the most valuable pieces on so many levels. As a person working in mental health, I think it does increase my resiliency...to be able to have these reflective muscles."

-IECMH Community of Practice Participant

Confidence in Reflective Skills Increased



Best-Practice Treatment Configuration Improved



The use of a dyadic infant-caregiver relationship-based treatment approach improved pre to post from 27% to 62% of clinicians' caseloads.

"I have a much deeper understanding of how to address trauma in young children and a much greater appreciation for the importance of dyadic work."

-IECMH Community of Practice Participant







ALLIED

Hundreds of providers from across Colorado received training on IECMH evidence based interventions including Circle of Security Parenting (COS-P) and Child Parent Psychotherapy (CPP). These trainings equip providers to offer IECMH services to families in areas that did not previously have readily available IECMH access.

Circle of Security Parenting - Facilitator Training

257



Participants serving families across 63 of 64 Colorado counties were trained as Circle of Security- Parenting facilitators.



Caregivers received the Circle of Security-Parenting curriculum from trained facilitators (and counting!).

COSP Learning Objectives Achieved

I can now describe the fundamentals of attachment theory and of the Circle of Security approach.

97%

I can now teach caregivers to use quality of relationship enhancement rather than behavior management.

98%

I now know specific steps for building self-reflection in caregivers.

99%

I now know how to show video examples of parent-child relationships to support increased empathy in caregivers.

96%

The vast majority of Circle of Security- Parenting facilitators (96-99%) agreed that they left the training meeting learning objectives, including knowing how to support caregivers to recognize their children's emotional needs and explore how caregivers' own experiences influence their parenting.

"Information from this training will enhance my dyadic work with families and caregivers. In addition, I will facilitate COSP groups for caregivers."

- COS-P training participant

COS-P Pre to Post Changes

Self-ratings out of a 5-point scale







Child Parent Psychotherapy (CPP) Learning Collaborative



Participants serving families across 30 of 64 Colorado counties were trained in Child Parent Psychotherapy in an 18month learning collaborative. CPP is the gold standard evidence-based trauma treatment for children ages 0-5.



Caregiver-child dyads have received Child Parent Psychotherapy from Right Start trained clinicians.

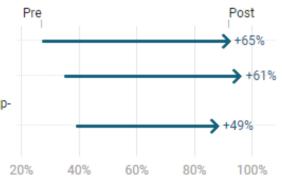
At the conclusion of the learning collaborative, CPP participants reported more confidence in their IECMH skills, including their ability to screen for trauma in young children 0-5 and adults, as well as in providing dyadic trauma treatment to young children ages 0-5 and their families.

CPP Pre Post Increases in Confidence

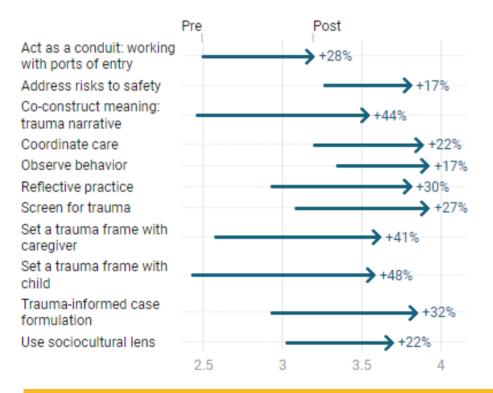
Screening for trauma in children 0-5

Screening for trauma in adults

Providing dyadic relationshipbased trauma treatment to children 0-5 and their caregivers



CPP Core Competencies Increased



From pre to post, all respondents reported increases in Child Parent Psychotherapy core competencies. Some highlights of these gains include increased competence in clinicians' ability to set a trauma frame with caregivers, address risks to safety, formulate cases with a trauma-informed lens and incorporate a sociocultural lens. Themes from open-ended feedback include clinicians feeling more confident working with very young children and families who have experienced trauma.

"Honestly CPP feels like best practice for providing trauma focused treatment for young children, and I feel much more comfortable providing this type of care, especially in terms of dyadic sessions." -CPP Learning Collaborative Participant





Trainings for Allied Professionals

ALLIE

Allied professionals made up the majority of our 3585 training attendees. We provided offerings specifically geared towards various sectors, including trainings for child welfare professionals and court appointed special advocates (CASA), early interventionists, home visitors; and IECMH awareness trainings for mixed allied audiences. Allied professionals are vital to a strong Colorado IECMH system of care as one of their many vital roles is to identify concerns and provide referrals for infants, toddlers, preschoolers and their families who can benefit from infant mental health services.

"I just want to express how amazing and talented and professional all of the trainings were and how valuable they were for me as a home visitor who works with families."

- Home Visitation Community of Practice Participant

33 /23 Early Interventionists from 12 of 20 Community Center Boards participated in this Community of Practice.

"This feeling of competency...I definitely didn't have before. Or confidence level and being able to share with my students and my colleagues to support families."

- Early Intervention COP Participant

We offered a year long Community of Practice to support 33 early intervention providers.

Throughout the year Right Start provided:

- 170 hours of group reflective supervision/consultation
- 48 hours of IECMH training

Qualitative feedback from participants included the following positive effects:

- Peer Relationships and Sense of Community
- Increased Confidence in IECMH skills such as making IECMH referrals and discussing IEMCH with families.

CASA Volunteer Knowledge and Confidence Increases

% Change in Self-Ratings from Pre to Post



The majority of CASA volunteers (95%+) left the trainings reporting that they had met learning objectives, including how to identify symptoms of trauma in young children ages 0-5, and how to recognize behaviors that warrant referral to infant mental health services.



CASA volunteers participated in trainings aimed at increasing Infant and Early Childhood Mental Health awareness.

"I now have knowledge of what to look out for, and resources to refer a child and caregiver in need of mental health services."

- CASA participant







Child Welfare
professionals
participated in
trainings aimed
at increasing
Infant and Early
Childhood Mental
Health

awareness.

"As a service navigator I have more tools from this training to staff cases with caseworkers and make referrals to the appropriate services and resources."

- Child Welfare participant feedback

The majority of child welfare professionals (95%+) left the trainings reporting that they had met learning objectives, including how to recognize behaviors that warrant referrals to infant mental health specialists, identify symptoms of trauma in young children ages 0-5, and identify the importance of all caregiver relationships in child development.

Child Welfare Professional Knowledge and Confidence Increases

% Change in Self-Ratings from Pre to Post



Right Start for Colorado partnered with several organizations to deliver Diversity, Equity, Inclusion, and Belonging (DEIB) focused trainings. These vital components of high quality care support the IECMH workforce in recognizing bias in our work and growing in cultural humility.

After

+19%

+32%

100%

Changes in Diversity-Informed Practice Beliefs

Increases in % agreement with beliefs

I understand the role of selfawareness in my own
developmental history and
experiences towards DEI
I can utilize a historical
perspective to analyze the
ways in which systems of
oppression structure
present-day experiences of
professionals, children, and
families.

60%

70%

80%

DEIB-Focused Trainings offered throughout the grant included the following:

- Cultural Responsivity in Early Intervention
- Diversity-Informed Tenets
- Healthy Equity Training
- Reflective
 Supervision/Consultation
 Learning Collaborative

"[I value] the safe space to reflect and learn about how my experiences, privilege and background impact everything that I do as a child/family therapist and require much more reflection and awareness during all aspects of providing services and support to families."

90%







IECMH Clinical Treatment Outcomes

CAREGIVERS CHILDREN

Right Start for Colorado funding allowed WellPower to expand our existing clinic-based IECMH clinical services to offer home-based treatment for families of children ages 0-5 who need more intensive care. The clinical outcome data below show the benefits of infant mental health services when young children ages 0-5 and families have access to a highly trained clinical workforce who provide developmentally sensitive, evidence-based and culturally responsive dyadic treatment services.

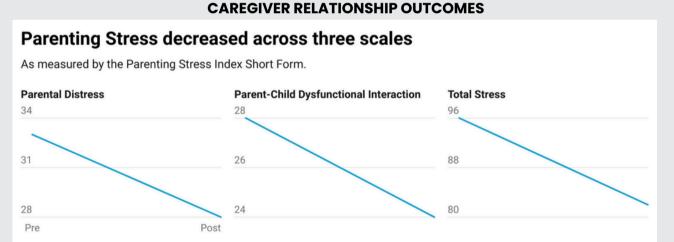


Individuals representing 94 caregiver/child dyads were referred to Right Start for Colorado home-based services.



Individuals have received behavioral health screenings since the beginning of Right Start for Colorado grant.





Parental Distress (PD), Parent-Child Dysfunctional Interaction (PDCI), and Total Stress (TS) had a significant decrease in either categorical or frequency scores.

"Sometimes I would come home from work, I would feel frustrated, tired and stressed and when my son would ask for something, it would bother me. I didn't understand him since I didn't see him all day. He had a reason to be like once I got back from work[...] But like I said, the therapy I got [...] helped me so much because I can now understand my son. Now I can be a different person than who I was before."

- Caregiver

Qualitative themes from family interviews for **caregiver outcomes** show:

- Improved caregiver mental health
- Increased caregiver understanding of IECMH
- Increased confidence in parenting skills

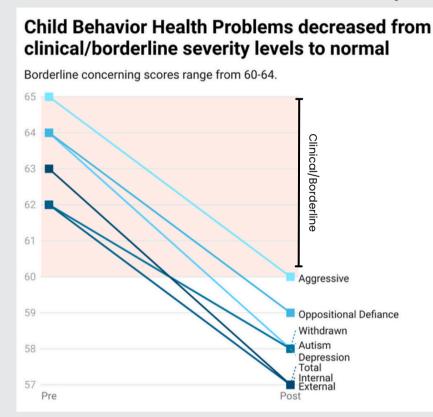




CHII DRFN

The majority of young children served by Right Start for Colorado clinicians met criteria for a trauma-related disorder at intake. Diagnosis data and caregiver reported data on behavioral health assessment measures show statistically significant improvements for children who were engaged in services (defined as attending more than three sessions).

CHILD OUTCOMES (CBCL 1 1/2-5)



As measured by the Child Behavior Checklist (CBCL), Aggressive, Autism, Depressive, Withdrawn, and Oppositional Defiant, Internalizing, Externalizing, and Total Problem behaviors had a statistically significant decrease in either categorical or frequency scores (p<.05) from first to latest assessments for all children who were meaningfully engaged in services, whether or not they had completed or were still receiving services.

"And to see the development happen from me going from his mom thinking that he can't handle it to understanding...why he's acting the way he's acting. To being able to have a good conversation and get those feelings out and get those emotions understood of what's happening to both of us."

- Caregiver

Qualitative themes from family interviews for **child outcomes** show:

- Improved child coping skills
- Improved child communication with parents
- Improved child mental health and behaviors



Findings also show there was a statistically significant change in diagnostic status from intake to discharge with nearly all children no longer meeting criteria for a diagnosis at discharge (p<0.0001).





Conclusion and Future Directions

When supported with the necessary financial investments in specialized IECMH workforce training, professionals can increase their skill, competence and confidence in providing mental health services to very young children and their families. Targeted focus on improving awareness among allied professionals of the existence IECMH challenges and the significant impact of early treatment, coupled with a prepared clinical workforce with specialized IECMH training, allows for an effective continuum of care for our most vulnerable population. While the outcomes of the last 5 years of this project are promising, gaps in access to both care and IECMH specialty trained professionals remain. This is especially true when data is examined geographically (particularly in rural and frontier regions of the state) and through a DEI lens (e.g., access to racially concordant care). Colorado needs to prioritize ongoing, sustained funding to continue to support the IECMH workforce to ensure increased access to high quality care for all families.

*About our Data

Data reported are most recently available spanning from 2018 to 2023. We completed annual reports each year of the grant as well as continuously monitored feedback and data to continue to adapt Right Start for Colorado as necessary. Quotes from interviews or surveys may have been shortened and/or edited to remove identifiable information to maintain confidentiality. Data analysis and interpretation was completed by an internal team of evaluators working on the Right Start for Colorado grant before being reviewed by the Right Start team as a whole.

Definitions

Attendees: Duplicate count of total attendees.

BIPOC: For the purposes of this report, we are including anyone who identified a Asian, Black or African American, Hispanic, Latino/a/x, Middle Eastern/North African, Native American/Alaskan/American Indian, Native Hawaiian or Pacific Islander, and Two or More Ethnicities.

We are thankful for our generous funders for supporting the mission and vision of Right Start for Colorado.



Caring for Colorado







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