



**Colorado's Child Welfare System
Interim Study Committee
Hearing Three: August 22nd, 2023**



*"Our children's future and the world's future are one."
-C. Henry Kempe*





Introduction: Kendall Marlowe MA JD, Kempe Foundation Public Policy Consultant

Kempe's Vision:

Every child should have the opportunity to develop and grow in a safe, healthy and nurturing environment. Our vision is a world without abuse and neglect.

Overview:

- The Kempe Foundation & The Kempe Center - Separate entities with a common vision
- Hearing from Kempe Center experts: Kathryn Wells, MD, Executive Director, Michelle Davis Director of Justice, Equity, Diversity & Inclusion, Dr. Sue Kerns Director of Transformative Research
- Overview of Legislative Proposals





Kathryn Wells, MD

- Bringing a **Whole Health Approach** to meet the children and youth in care settings
- Removing barriers, increasing eligibility and funding for a much broader segment of children and families
- Centralizing and coordinating systems of care
- Bringing 25 years of research and knowledge of the impacts of **Adverse Childhood Experiences** to both treatment models and upstream prevention measures to create resiliency through positive experience interventions





PHYSICAL & MENTAL HEALTH EFFECTS FROM ACES

Abused and neglected children are at **greater risk** for developing:

- Cardiovascular artery disease
- Auto-immune diseases
- Lung/liver diseases
- Hypertension
- Diabetes
- Asthma
- Obesity
- Elevated cholesterol
- Metabolic syndrome
- Mental illness

Maltreated children also have **life expectancies 20 years shorter** than children who have not been abused or neglected



Michelle Davis M.S., LPC, PCC

- Acknowledging historical inequities and prioritizing solutions is paramount when seeking better outcomes
- Overrepresentation of black and brown children in child welfare is well documented
- Bringing justice, fairness, and opportunity to all families is everyone's responsibility





JUSTICE, EQUITY, DIVERSITY, and INCLUSION

- We must examine the disparate definitions of neglect and its conflation with poverty
- Training only imparts knowledge but does not support transformation of the person as equity coaching could
- Wrestling with our unconscious bias and its impact is a critical first step
- We can't just look at what families need without looking at the dissonance between our intention and impact



Sue Kerns PhD

- The current array of services and service availability are not sufficient to address the mental health crisis children are experiencing
- Only 1-3% of children potentially eligible for Evidence-based practices have access to them (Bruns, Kerns et al., 2016)
- Evidence-based practices, when implemented well, can have effects that are superior to medication and are also superior to general treatment (Weisz et al., 2013)
- When not implemented well, they don't have as strong effects, and could even cause harm



- Investing in high-quality implementation of effective programs supports quality care for children while saving taxpayer dollars
- Many Evidence-Based Practices on the State Family First plan have cost savings of \$1.30 to well over \$5.00 for every dollar spent (WSIPP, 2023)
- Collaboration with state agencies, and coordination with other intermediaries who disseminate programs, such as Invest in Kids, will be crucial to achieving desired outcomes for a much broader array of services for children and families



KEMPE LEGISLATIVE PROPOSALS

- **Whole Health Coordination For Children In Care : Develop legislation that centralizes and coordinates services and supports**
- **Colorado Child and Family Wellbeing Implementation Institute: Pass legislation to create and funding for the Institute**
- **Colorado Family Success Act: Enact a law to create an enhanced family support program, building on the success of Colorado's Family Resource Centers**
- **Colorado Child and Family Workforce Support Task Force: Establish a Task Force to research and develop solutions to challenges in recruiting and retaining the workforce involved in child welfare**



THANK YOU FOR YOUR TRUST AND PARTNERSHIP WITH KEMPE

Together we can improve the lives of children and families and make Colorado a model state to raise a family and to be a child!





Appendix: KEMPE CENTER PROGRAM HIGHLIGHTS

- **CARE Network (Child Abuse Response & Evaluation Network):** Training and ongoing mentoring and support of community-based healthcare practitioners.
- **SafeCare:** Home visitation serving at-risk families with children ages 0-5.
- **KICS Clinic (Kids in Care Settings):** A new clinic that serves as a medical home for youth, ages 0-18, in out-of-home placements with fully integrated mental and behavioral health services at every clinic visit.
- **TASK Clinic (Trauma-Sensitive Assessment & Treatment Services For Kids)** for children with complex mental and behavioral health needs, ages 3-12.
- **TRIP (Trauma-Responsive Implementation and Practice):** integrates, enhances and implements trauma-responsive and culturally appropriate practices for parents, educators and others to help mitigate the impact of trauma. Takes place at schools and state-wide systems.
- **Rocky Mountain MST (Multisystemic Therapy):** Therapists work in the home, school and the community and are on call 24/7 to provide caregivers with the tools they need to transform the lives of troubled youth.
- **Fostering Healthy Futures:** Evidence-based mentoring and skills training program for teens and pre-teens with child welfare involvement or who are at risk for child welfare involvement.