

Risk, Reach and Resources

An Analysis of Colorado's Early Childhood Mental Health Investments

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Colorado is a forerunner in promoting early childhood mental health (ECMH). Still, parents report that one in seven children in Colorado needed mental health care in the past 12 months, and a quarter of those didn't receive it. Which parts of Colorado need more ECMH services? What services already being provided? How are they funded?

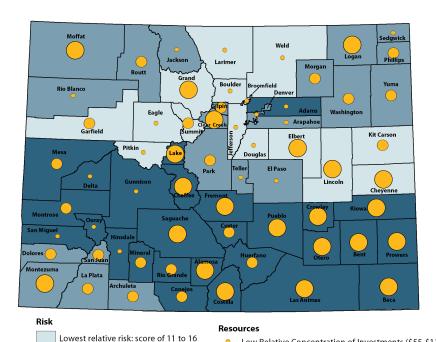
This analysis from the Colorado Health Institute (CHI), produced in partnership with the Colorado Office of Early Childhood with support from The Piton Foundation, dives into these questions. The research points to a need for more investment in early childhood mental health.

Map 1: Early Childhood Mental Health Risk Factors + Resources.

Comparing the highest risk counties with their per capita investments for children aged zero to eight reveals some potential resource gaps.

For example, Adams County's ECMH risk is high compared to other counties because of several factors such as a high poverty rate and a significant number of child suspensions or expulsions. But ECMH per capita funding for children aged zero to eight is one of the lowest in the state at \$110.

Why? One explanation might be that Colorado is underinvested in Adams County. But another reason for a low per capita investment might be a large population of children or cost-effective program spending rather than financial disadvantage. Regardless, this analysis indicates there may be opportunities for investment statewide.



Major Findings:

Medium relative risk: score of 17 to 20

High relative risk: score of 21 to 27

A southern swath of the state, as well as Adams County, has the highest risk for ECMH issues based on an index of nine indicators.

Low Relative Concentration of Investments (\$55-\$118)

Medium Relative Concentration of Investments (\$119-\$187)

High Relative Concentration of Investments (\$188-\$430)

The 12 selected ECMH programs serve less than 10 percent of Colorado's children aged zero to eight in 2017-18.

Colorado's private philanthropies contributed
11 percent of the \$62 million that supports the 12 selected
ECMH programs. Some programs are solely funded by private dollars.

Figure 1. ECMH Risk Indicators Included in this Analysis

Family Background Risk Indicators

- Maternal age
- · Maternal education
- · Maternal depression
- Children living in households below 200 percent of the federal poverty level
- · Adult adverse childhood experience scores

Mental Health Risk Indicators

- Suspension and expulsions for children in grades K-3
- Times in prior 12 months when child needed counseling or mental health care
- Parental concern of child's behavior, emotions, concentration, or ability to get along with others
- · Child abuse and neglect

Critical Action Steps for Colorado's Leaders

This analysis points to important questions regarding the advancement of ECMH services in Colorado.



Are enough ECMH services being provided in Colorado?

This analysis suggests Colorado is underinvested in ECMH services, though the data cannot support a definitive conclusion on this point.

A possible next question is: What mix of universal, targeted, and intervention services should all Colorado children receive and when? We can then begin to compare the Colorado experience to a benchmark or "gold standard."



How can Colorado best leverage philanthropic investment?

Colorado has an established record of using private philanthropic investments to incubate promising programs and scale those found to be evidence-based. In examples like Project LAUNCH and Incredible Years, private investment leverages state and federal funding. What can we learn from these investments?

What do we make of counties with high risk and low levels of services or investments, or low risk and high levels of services or investments? Our analysis identifies low-risk, high-reach counties and high-risk, lowreach counties. Yet drawing conclusions from these correlations is challenging. Deeper dives at the community level may help policy leaders and grant makers more fully understand the relationship among risk, reach, and resources.

> What data are needed to advance our knowledge of ECMH risk, reach, and resources?

The most significant opportunity is to improve the data measuring ECMH. For example, the field lacks an agreed-upon methodology to accurately gauge children at risk for ECMH challenges. This report, we hope, serves as a template that will be used to incorporate more data as it becomes available.

Programs Included in This Analysis

The analyzed 12 services and programs by funding and service provision.

Intervention and Treatment

- Core Services
- Preschool Special Education, Part B, Section 619
- Early Intervention Colorado Part C (Social-**Emotional Services**)

Targeted Supports and Services

- Expanding Quality in Toddler and Infant Care (EQIT)
- HealthySteps
- Incredible Years
- Nurse Family Partnership
- Parents as Teachers
- SafeCare

Systems Approaches

- Project LAUNCH
- LAUNCH Together