

## **February Prevention Meeting Agenda**

February 18, 2026

3:00-4:30PM

ZOOM

- 1. TCB Administrative Updates**
  - a. Workgroup updates
  - b. Legislative updates
- 2. Presentation - Martha G. Welch, MD, DFAPA**
- 3. TCB Prevention Workplan**

## **DRAFT PREVENTION ANNUAL WORKGROUP WORKPLAN 2026:**

*Workgroup Co Chairs: Ingrid Gillespie, Director of Prevention, Liberation Programs Inc & Pamela Mautte, Director, Alliance for Prevention & Wellness Program of BH Healthcare*

*\*Annual Workplans are developed from the 2025-2028 Strategic Plans and other priority areas and strategies identified in the strategic plan will be added to the workplan annually*

**Draft Purpose Statement:** The Prevention Workgroup of the Transforming Children's Behavioral Health Policy and Planning Committee (TCB) is committed to strengthening behavioral health prevention services and programming for children, youth, and young adults' from ages birth to 26. We collaborate to identify challenges, examine solutions, and provide advisory recommendations to enhance prevention efforts statewide. The workgroup's work is anchored in a commitment to equity, gender responsiveness, cultural responsiveness, utilizing innovation and policy-informed strategies to champion a strength-based approach at the individual family- and community level. We collaborate to identify challenges, examine solutions, and provide advisory recommendations to enhance prevention efforts statewide.

### **Priorities:**

- Evaluate how to expand access to suicide prevention and behavioral health services through a 'birth-to-young adult' lens, ensuring early childhood interventions prevent the development of serious emotional disturbances and reduce future crises, and strengthen resilience and emotional regulation early in development.
- Promote resilience and emotional well-being through enhancing positive caregiver-child relationships, education, community engagement, and policy advocacy through primary secondary and tertiary prevention.
- Evaluate how to embed brief screenings in healthcare, schools, and community programs to improve early identification, strengthening nurturing relationships, build social-emotional learning (SEL) skills, reinforce positive choices, and connect individuals to appropriate supports.
- Providing care coordination supports to families to enhance community connection and decrease stressors that impede healthy development (social drivers of health).

### **Short Term Workgroup Goals:**

- Identify meeting schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup
- Establish/Maintain a Workgroup Foundation
  - Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
  - Create space for workgroup members to share their personal priorities, biases, or special interests that bring them to the workgroup, connect, feel a sense of belonging and discuss how that intersects with the priorities of the workgroup
  - Compile, discuss and share initial definitions important for active participation (defining primary, secondary, tertiary prevention)
  - Level-set with the workgroup with an overview of progression or lack of prevention efforts across the State and set a foundation for cross agency collaboration.

### **Medium Term Workgroup Goals (2026):**

- Create an inventory of services and programs in the state for ages 0-5, to evaluate what services are in place and identify any gaps and barriers in services
  - Utilize information gathered from the CT Children's Behavioral Health Survey once complete to further assess needs and gaps for the early childhood age group
    - Consider all necessary services that would provide a continuum of care from prevention to intensive intervention, also evaluating their evidence of effectiveness.
    - Consider funding opportunities that would provide parity with funding for older children.
    - Consider strategies to increase the early childhood workforce.
    - Narrow in on the substance use data results from the CT Children's Behavioral Health Survey and build opportunities for collaboration with DCF and OSAC and other key partners to develop policy and service recommendations.
    - Consider development of an Early Childhood Subgroup of the Prevention Workgroup that would report to the Prevention Workgroup, in order to accelerate progress.

- Collaborate with the Office of Legislative Research and the Office of Early Childhood to create a cross walk of existing services in the state for ages 0-5
  - Utilize the workgroup’s Prevention Report Card to score services identified in both the CT Children’s Behavioral Health Survey, as well as the crosswalk on existing services, by further assessing how services address risk and protective factors at the individual, family, and community levels, particularly to better identify gaps at the community level.
    - From the Report Card, identify gaps to inform potential legislative recommendations.
- Explore evidence-informed, classroom-based strategies that may complement existing approaches for pre-school to high school age students.
  - The workgroup will have various presentations to further evaluate services for this age group and expand the report card to evaluate, identify and measure protective factors and strengths.
  - Evaluate innovative approaches to prevention, such as an evaluation of current apps and programs, to further see the impact and outcomes these programs have, what resources they provide, and evaluate what works and what does not, by overall looking at protective factors of services and programs.
- Investigate resources, services, and vocational supports for transition age youth (18-22) and identify any gaps and barriers to services.
- Develop a set of 2027 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2026
  - TCB leadership will review drafts and provide feedback
  - Draft Workgroup recommendations will be presented at the October TCB Meeting

*\*The workgroup may not develop a set of recommendations for the 2027 legislative session, depending on priorities, and progress within the group. If the group does come up with a set of recommendations, the recommendations may not be included in the 2026 legislative package depending on committee and leadership feedback*

### **Long-Term Workgroup Goals (2026-2028):**

\*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

- Utilize the results of the services array to build sustainable recommendations and priorities in 2026, 2027, and in subsequent years.

- Utilize information from the workgroup to plan for 2027, 2028, and in subsequent years.

***Meeting Schedule: Prevention Workgroups reoccur on the third Thursday of the month from 3:00-4:30 PM. All meetings will be virtual. Meeting agendas and the zoom link will be sent out prior to the meeting each month.***

Prevention Workgroup  
February 19<sup>th</sup>, 2026  
3:00 – 4:30 PM  
Zoom

### **TCB February Prevention Workgroup Meeting Summary**

#### **Attendees:**

Ingrid Gillespie  
Pamela Mautte  
Martha Welch  
Marc Jaffe  
Sarju Shah  
Adrianna Ramirez  
Tara Viens

Edith Boyle  
Katie Rudek  
Matt Hoppler  
Darcy Lowell  
Lorna Thomas-Farquharson  
Leslie Sexer  
Emuna Patterson

#### **TYJI Staff:**

Emily Bohmbach  
Stacey Olea

#### **Meeting Objectives:**

- ❖ **TCB Administrative Updates**
- ❖ **Presentation**
- ❖ **TCB Prevention Workplan**

#### **Meeting Summary:**

##### **1. Relational Health for Behavioral Health Presentation**

- a. The presenter provided an overview of research examining the role of caregiver–child emotional connection in child development and behavioral health. The speaker explained that strong emotional connection supports healthy development, while disruptions due to stress, separation, or caregiver depression can contribute to behavioral and physiological challenges.
  - i. The presenter highlighted the concept of co-regulation, noting that young children develop emotional regulation through responsive caregiver interactions, and introduced the Welch Emotional Connection Screen as a tool to assess caregiver-child connection. Research findings showed improvements in caregiver well-being, child behavior, and developmental outcomes following relational interventions. Efforts to expand this work through the Martha G. Welch Center for Emotional Connection, including educational resources and a mobile application for families, were also discussed. The speaker emphasized that strengthening early relational health, especially during the first five years, can support prevention and early intervention efforts.

##### **2. Q&A**

- a. Following the presentation, members discussed the presenter’s mobile application designed to support caregiver–child emotional connection for families with children ages 0–5. The speaker explained that the app, available through the organization’s website, provides guided video-based content to help caregivers strengthen co-regulation and emotional connection with their children.

- i. The presenter also outlined plans for a professional version of the platform that would allow institutions, such as pediatricians, school districts, and early childhood programs, to upload short videos of caregiver-child interactions. These interactions could be evaluated using the Welch Emotional Connection Screen to provide feedback on relational connection. The platform includes privacy and security protection. Members discussed potential applications within early childhood systems and raised the possibility of collaboration with existing tools, such as the Sparkler app used by the Office of Early Childhood. The presenter welcomed opportunities for partnership and further research to expand the use of the approach.

### **3. TCB Administrative Updates**

- a. The TCB Senior Project Manager provided updates from the February monthly meeting, including a quick overview of the recommendations to then proceeding to voting, all three recommendations passed unanimously. The TCB Senior Project Manager provided the workgroup with an upcoming date for the March TCB meeting. The March TCB meeting will be focusing on Psychiatric Residential Treatment Facilities (PRTFS).

### **4. TCB Prevention Workplan**

- a. The Prevention Workgroup reviewed the updated work plan and highlighted revisions based on member input. A key update expanded the scope from birth through age 26 to ensure prevention strategies address developmental needs from early childhood through young adulthood. The purpose statement was refined to emphasize cross-sector collaboration, equity, culturally responsive approaches, and strength-based strategies supporting individuals, families, and communities. Members reaffirmed that the workgroup's primary goal is to identify prevention challenges, explore solutions, and develop recommendations for the FY27 legislative session.
  - i. Short-term priorities include strengthening early childhood support, improving early identification through behavioral health screening, expanding prevention strategies across prevention levels, and addressing social drivers of health that influence child development. Members discussed implementation considerations, particularly the need to better understand service gaps for children ages 0–5, where prevention and treatment infrastructure remains limited. Conducting a service inventory for this age group was identified as a priority, along with reviewing findings from the forthcoming Children's Behavioral Health Services Survey to identify barriers and system gaps.
  - ii. Participants also noted challenges related to incomplete survey data and potential underrepresentation of private providers serving young children. To support deeper analysis, the workgroup proposed creating breakout workgroups organized by age groups (0–5, 6–11, 12–18, and 18–26). Members supported this structure but raised questions about ensuring representation from relevant agencies and avoiding siloed discussions. Leadership suggested identifying additional stakeholders to participate and

using a shared framework to guide breakout discussions, ensuring findings can be compared across age groups and reported back to the full workgroup.

The next workgroup meeting will be on **March 19<sup>th</sup>, from 3:00 PM to 4:30 PM on Zoom.**