NH ALLIANCE OF EARLY CHILDHOOD COALITIONS

Lunch and Learn Series
January 7, 2026

Presenters:

Kelly Dussault
Executive Director, Coos Coalition for Young Children and Families

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Evaluator, the Behavioral Health Improvement Institute at Keene State College

Recap of events to date

- **2024**: Creation of a New Strategy within the Coalition's System's Plan
- **March 2025**: First Behavioral Health Tactical Team convenes (12-14 people)
  - Purpose: Establish a process for engaging community in the need and potential solutions.
- **May-July 2025:** Needs assessment conducted via interviews and focus groups
- **October 2025**: Convening held
- **November 2025** Creation of steering committee to drive solutions

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Background

Coös County Early Childhood System Plan

2024-2027

July 2024

- What is the Coos Coalition for Young Children and Families
  - System's Plan
- Historical Conversations, SAU's, Childcare, Mental Health Providers
- Need to gather data and organize around this
- Bring data to a larger convening- tell stories- and uses our collective voices, experiences and leverage to develop non-clinical solutions
- Multiple, braided funding sources

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Tactical Team

Tactical Team's Charge:

Coös Coalition for Young Children and Families

System Plan Strategy 3:

Increase the availability of non-clinical community resources to support child and family behavioral health.

Planning Team: Plan and implement a Behavioral Health focused convening for community level problem solving where participants will identify collaborative activities to increase non-clinical supports for behavioral health.

Tactical Team Participants:

Coös Coalition Family Leadership Coalition

New Hampshire SAU 20

Berlin Public Schools

Northumberland Stark Stratford

Behavioral Health Improvement Institute | Keene State College

Northern Human Services
Changing Lives

coös county Family Health

Coös County Director Network

Step 1: Defining the Need

Needs statement

- Families with young children in the North Country with behavioral health concerns lack access to adequate supports and services that effectively meet their needs and bolster protective factors for behavioral health and wellness.
- Access to clinical behavioral health services is limited by workforce shortages, lengthy wait times, stigma around mental health treatment, lack of knowledge about how to navigate behavioral health systems, and access issues such as transportation, childcare, and other structural barriers.
- Early care and education providers (childcare and public schools) need greater resources and staffing to manage and support significant behavioral health challenges effectively
- There is a need for Community-supported, non-clinical, preventative supports and activities that bolster social-emotional wellness, healthy lifestyles, and a sense of belonging and connectedness.

Step 2: Assessing the Need

Three grounding questions:

1. Most pressing needs?
2. What "non-clinical" supports are currently available, and how helpful are they?
3. What's missing?

Methods:

- Interviews with community-based support providers
- Focus groups with ECE providers and caregivers

Step 2: Assessing the Need

Findings:

- Young children and their families increasingly need support for self-regulation.
- Access to clinical services is limited.
- Families need validation, connection, and natural supports.
- A range of non-clinical supports and services are available.
- Early childhood policies are outdated and unrealistic.
- Caregivers experience challenges transitioning to school-based services.
- Providers and caregivers would benefit from training and coaching.

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The Convening

Convening Norms

- **Co-create boldly.** Build on ideas (“yes, and…”), share airtime, invite quieter voices.
- **Listen with curiosity.** Honor stories, ask open questions.
- **Care for self & group.** Take needed breaks; step up/step back to balance participation.
- **Dream big, land practical.** Be ambitious, then name **Now / Next / Later** actions.
- **Speak from your place of leverage (with data).**
  - **Position:** What role/authority can you bring to solutions?
  - **Location:** What assets does your org/community offer?
  - **Resources:** What funding, people, space, or relationships can you mobilize?

Communicating the Need

- Two presentations, highly overlapped
  - Liz: shared research findings through a narrative summary
  - Ren: Shared statistics about region-wide trends
- Focus on qualitative data and personalization through stories, not aggregate numbers

The Process:

- Round 1: What did we hear?
- Round 2: What are possible solutions?
  - Where are we aligned?
  - What are 1-3 concrete approaches we could take? Who should be involved?
- Round 3: Voting

Top 4 Ideas

- **Peer Groups for caregivers and kids**
  - Similar to format of “better together”
  - Located in public spaces (e.g., libraries, FRC)
  - Many are already doing the work, we just need to put it all together
- **Resource Hub for community partners/caregivers**
  - Potential format: app, web page, mass email list
  - Include trainings, services
  - Advertise on social media, flyers
- **Cohabitation of Resources**
  - Non-clinical services providers (e.g., CHW, care coordination, navigators) located at least part time in public places (e.g., schools, food pantries, libraries)
- **Individualized Family Wrap Around Supports and Services**
  - Options include all identified non-clinical supports
  - Based on families’ needs (or available supports)

Who Should be Involved?

Peer Groups- Caregivers and Kids	Cohabitation of Resources
• Chrissy Grant • Danielle Roy • Wendy Fahlbeck	• Caleb Gilbert • Ardis Yahna • Karen Thomas • Kassie Eafrati
Resource Hub/Guide/App (combined)	**Individualized Family Wrap Around Supports and Services**
• Joanne Kawecki • Jessica Ball • Alyssa Antonucci • Abbie Vashaw • Wendy Conway • Scarlett • Maegan • Kim	• Shelli Roberts • Kim • Vicki • Sandy

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The Steering Committee

Overview

- Collection of volunteers from a range of roles in the field

- 11 months
  - December 2025 – October 2026
  - Phases as outlined in the next slide

- 1.5 hours per month (e.g., monthly meetings, work sessions)

- Final product: detailed plan of action for your workgroup’s initiative
  - Feasible
  - Actionable
  - Has buy-in from affected parties

Timeline

December

- **Topic**: Grounding in the problem(s) and proposed solution
- **Guiding question**: How does the proposed solution solve the problem(s)?
- **Product**: Mural board with brainstormed ideas

January-April

- **Topic**: Assets/gaps research
- **Guiding questions**: What already exists? What are assets upon which we can build? Where are the gaps?
- **Product**: Summary of findings

May

- **Topic**: Share out of findings
- **Guiding questions**: What did we discover? Where do the groups overlap?

June

- **Topic**: Identifying next steps
- **Guiding questions:** What are 2-3 potential next steps? Which do we want to focus on and why? Who needs to be a part of the planning?

Timeline

July

- **Topic**: Drafting a project proposal
- **Guiding questions**: What does success look like? What steps need to occur to make this happen? What's a reasonable timeline? Who is responsible for driving each piece? Who will manage the project?
- **Product**: Completed project planning template

August

- **Topic**: Critical friends workshop/feasibility testing
- **Guiding questions**: Where are groups stuck and how can the larger group help? Is the plan feasible?

September

- **Topic**: Finalizing the project proposal (working session)
- **Guiding questions**: What refinements should be made based on feedback received last month?
- **Product**: Refined project planning template

October

- **Topic**: Group share out

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Takeaways

What's worked?

- Rooted in the region's strategic plan
- Led by a trusted convener
- Driven by data
- "Moves at the rate of change"

Discussion/Q+A