

## Georgia THRIVE: At a Glance

The Infant Toddler Court Program (ITCP) is funded by the Health Resources and Services Administration Title V Maternal and Child Health Services Block Grant. The Center of Excellence for Behavioral Health & Wellbeing at the Georgia Health Policy Center received this funding to implement ITCPs at three local sites in Georgia over five years.

Georgia THRIVE aims to improve the well-being of families and young children by strengthening the system of care, transforming courts, and reducing child welfare system involvement. The program envisions a well-coordinated child welfare and court system resulting in safe, stable communities where families thrive.

### PROGRAM OBJECTIVES

1. Establish leadership capacity
2. Develop and implement a state action plan
3. Increase capacity through training
4. Improve child and family outcomes
5. Establish sustainability and scale



### Our locations:

1. Athens-Clarke County Intervention site
2. Gwinnett County Intervention and prevention site
3. Troup County Intervention and prevention site

### PROGRAM INFRASTRUCTURE

The Georgia THRIVE program works concurrently at both the child and family level and the state and site level. The state level receives support from the State Advisory Group and three workgroups: local implementation, data and evaluation, and program sustainability. At the site level, each family works closely with a community coordinator and participates in frequent Family THRIVE meetings and monthly court hearings, which provide collaboration, trauma-informed support, and real-time problem solving and resources. Every child receives consistent pediatric care and a developmental assessment, with referral to early intervention services to address and treat identified developmental delays. Every family is referred to evidence-based therapeutic services tailored to meet its unique individualized needs. Families can also receive home-visiting services, parenting education, and child-parent psychotherapy to meet the child's need for safe, secure attachments.

### THE SAFE BABIES APPROACH

Each Georgia THRIVE site receives state and national level technical assistance to implement the ITCP using the Safe Babies approach, a program of Zero To Three.

The Safe Babies approach is guided by five areas of focus, with the needs of babies and their parents at the center of every conversation, action and decision:

1. Enhanced oversight and collaborative problem-solving
2. Interdisciplinary collaborative and proactive teamwork
3. Trauma-responsive support
4. Expedited, appropriate, and effective services
5. Continuous quality improvement

## PROGRAM IMPLEMENTATION

Each Georgia THRIVE ITCP site has strong participation and leadership from the following Safe Babies Court Team agents of change:

- Juvenile court judge
- Child welfare staff (Division of Family and Children Services case workers, attorneys, court-appointed special advocates, etc.)
- Community coordinator (full-time role dedicated to the ITCP program)
- Active community team (service providers and community representatives)

## ELIGIBILITY REQUIREMENTS

To participate in Georgia THRIVE, local families must meet the following enrollment criteria:

1. Be court-involved or at risk of child-welfare involvement
2. Have a child between the ages of 0 and 3 years
3. Participation consent from at least one parent

## DATA AND OUTCOMES

### Safe Babies Approach Outcomes for Child and Family

	<b>0.7%</b> first year rate of maltreatment recurrence, compared with the <b>9.1%</b> standard national rate.
	<b>43.7%</b> reunification rates, compared with a national standard rate of <b>25.6%</b> , as well as a shorter median time to reunification of 9-10 months, which is 6-8 months sooner than reunification rates in comparison groups.
	<b>94.2%</b> of children in out-of-home care for <12 months experienced <2 placements before permanency, compared to the national median rate of <b>83%</b> . <b>79.4%</b> of children in out-of-home care for 12-23 months had <2 placements before permanency, compared to the national median rate of <b>65%</b> .
	Within 1 month of referral, children in Safe Babies sites received needed physical health services. Within 2 months of referral, <b>&gt;83%</b> of children in Safe Babies sites received evidence-based interventions, developmental screenings, and other additionally needed services.

Source: Zero To Three. (2023). Safe Babies Approach: Evidence and Impact. Accessed at [https://www.zerotothree.org/wp-content/uploads/2023/09/Safe-Babies-Approach\\_Evidence-and-Impact\\_Final-Dec-2023.pdf](https://www.zerotothree.org/wp-content/uploads/2023/09/Safe-Babies-Approach_Evidence-and-Impact_Final-Dec-2023.pdf)