

DULCE

Adopting DULCE to Better Serve Vermont Families and their Infants

Developmental Understanding and Legal Collaboration for Everyone

DULCE in Vermont is supported by the Vermont Department of Health and the Vermont Child Health Improvement Program. For more information contact Laura Pentenrieder at Laura.pentenrieder@vermont.gov



DULCE
An initiative
of CSSP

DULCE is an evidence-based approach based in the pediatric health care setting that proactively addresses social drivers of health, promotes the healthy development of infants from birth to six months of age, and provides support to their families.

HOW IT WORKS

- Family Specialists from the local Parent Child Center are embedded in the pediatric health care setting, which provides a unique opportunity to connect with all new families.
- Family Specialists have advanced training in child development, are members of the local Children's Integrated Services team, build trusting relationships with families, provide screening and referrals, and connect families to services in the early childhood system.
- An integrated legal partner helps children and families receive the comprehensive services for which they qualify and improve the functioning of systems for the broader community.
- The interdisciplinary team meets weekly to support families and improve the systems of care.

DULCE Interdisciplinary Team



MOST PREVALENT NEEDS IDENTIFIED¹



Parental/caregiver depression



Food insecurity



Economic hardship

DULCE OUTCOMES²



Accelerated access to supports



Better completion rates for well-child visits and immunizations

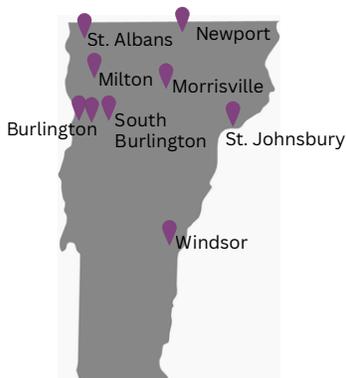


Reduced use of emergency department care

A UNIVERSAL APPROACH

- Universal programs reduce stigma which results in increased acceptance by families.
- Approaches with access criteria have been shown to miss up to 75% of families with a health related social need.³

THE IMPACT OF DULCE IN VERMONT¹



- When offered DULCE, 95% chose to enroll and 87% completed the program.
- 88% of DULCE families were screened for ten health-related social needs.
- 100% of families with a need identified learned about resources to address needs.
- 84% of families with identified need were connected to resources.

1. Data from families enrolled in DULCE sites in Vermont, July 1, 2024 - June 30, 2025. Analysis by the Vermont Child Health Improvement Program. Contact Rachel.Wallace-Brodeur@med.uvm.edu

2. Arbour MC, Floyd B, Morton S, et al. Cross-Sector Approach Expands Screening and Addresses Health-Related Social needs in Primary Care. *Pediatrics*. 2021;148(5):e2021050152

3. Arbour MD, Fico P, Atwood S, et al, Benefits of a Universal Intervention in Pediatric Medical Homes to Identify and Address Health-Related Social Needs: An Observational Cohort Study. *Academic Pediatrics*. 2022; 22:1328-1337