Healthy Families, Healthy Ohio:
Banking on Wellness for Ohio’s Families & Communities to Make Ohio Thrive

Background
Ohio has several urgent initiatives that prioritize the social, emotional, physical, intellectual, financial, occupational, environmental, and spiritual well-being of Ohio's children and youth. Among these enterprises is the Third Grade Reading Guarantee; patient-centered healthcare; ending human trafficking, reducing the number of youth involved with the Department of Youth Services; ending Ohio's opiate epidemic; and creating a strong workforce in Ohio. While schools and communities have a significant impact on children, parents are at the center of childhood development. Parents need a healthy environment and supports to rear healthy children.

Research indicates that the greatest window of opportunity to develop our children's social intelligence (attachment, independence, cooperation), emotional intelligence (trust and impulse control), motor development, vision, thinking skills (cause and effect, problem solving) and foundational reading skills (early sounds, vocabulary) is between the ages of 0 and 48 months. The greatest chance to enhance these areas of intelligence and competence is early school years through puberty (Schiller, 2009).

Ohio has the talent needed to create opportunities for families to flourish, making our state the premier place to live, work, and raise a family. And we know that a one-size-fits-all approach will not allow the creativity of experts in local areas to generate responses that best use local resources available through private and public partnerships to meet the needs of parents and children in their communities.

Policy Recommendations
To this end, The Ohio Council proposes environmental and individual supports that promote healthy families and a healthy Ohio regardless of whether the family is in rural Ohio, Appalachia, an urban center, or suburban neighborhood. Specifically, The Ohio Council proposes the following policy recommendations to support Ohio's children and families.

Invest in Families with Young Children:

1. **Embed Prevention and Consultation Services in Primary Health Care:** Create regulations that enable providers to prioritize health promotion activities in primary care and access the prevention option in Medicaid.

2. **Strengthen and Support Families with Young Children:** Embed parenting supports for current parents in families’ natural environments such as physical and behavioral healthcare, education, workplaces, places of worship, and community events. Resources could include information dissemination, e-resources, parenting courses, bike paths, green spaces, and alcohol- and drug-free community events. Priority focus should be given to families with children prenatal to 8 years of age because of the numerous opportunities to enhance the foundation for good health, school achievement, economic productivity, responsible citizenship, and future parenting.
3. **Prepare Today’s Youth for Their Eventual Role as Tomorrow’s Parents:** Include wellness curriculum in junior high and high school education focusing on:
   a. the critical aspects of the student's own social, emotional, physical, intellectual, financial, occupational, environmental, and spiritual development, and
   b. the same human development aspects for students to consider in their own understanding of their future role as parents of children prenatally through age 8.

**Support Communities**

4. **Invest in Local Communities and Private-Public Partnerships that Yield Healthy Environments:** Promote public-private partnerships in local communities to create healthy environments in which Ohioans can grow, develop, work and play.
   a. Partners should include small businesses, corporations, arts organizations, libraries, schools, hospitals, criminal justice, faith-based organizations, non-profits such as social services, private foundations and other funders, and local government.
   b. Collaborators will create a community action plan that results in an environment filled with resources and structures that contribute to the well-being of families. References: SAMHSA’s publication, *Supporting Infants, Toddlers, and Families Impacted by Caregiver Mental Health Problems, Substance Abuse, and Trauma: A Community Action Guide* (HHS Publication No. SMA-12-4726, 2012); *Triple P* (Positive Parenting Program); Promise Neighborhoods/Harlem Children’s Zone; and *Summit County Ohio’s First Things First*.
   c. Provide incentives or seed money for collaborative investment with local partners to promote healthy communities and families.

**Statewide Policy**

5. **Coordinate the Use of Ohio’s Resources to Support Parents and Families:** Form an Ohio Family Trust Board of for-profit, non-profit, and government executives from a variety of disciplines to focus on multi-system collaboration resulting in streamlined and coordinated use of resources to support current and future parents.

6. **Create Renewable Revenue to Support Investment in Strategic Initiatives that Promote Strengthening of Families and Local Communities:** Establish an Ohio Family Trust Fund outside of GRF to spur private, local investment in initiatives that strengthen families and communities.

7. **Identify Urgent Themes for Targeted Investment:** Focus State priorities and create targeted opportunities for communities to align local policies, practices, and resources to strengthen families and communities.

8. **Promote the Consistent Use of Coordinated Multi-system Outcome Measures:** Unify practice and data collection around a simplified, valid, and reliable set of multi-system outcome measures to evaluate targeted investments, practices, and outcomes. Example: *Family Strengthening Protective Factors:* parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need, social and emotional competence of children.