

February 27, 2023

Dear Chair White, Ranking Member Lett, and members of the House Children and Human Services Committee,

Thank you for the opportunity for the Health Policy Institute of Ohio (HPIO) to submit written testimony on several provisions of HB 96 requested by the Department of Children and Youth. The purpose of this testimony is to inform the committee of several provisions with strong evidence of effectiveness of improving the health and well-being of children and families.

A strong body of research has found investments in high-quality early childhood programs to have a higher rate of return on investment than interventions implemented in later years.¹

Early childhood education

Evidence-based early childhood education programs lay the foundation for Ohio's youngest learners to succeed throughout their lives. High-quality programs lead to:²

- Increased school readiness
- Improved cognitive and emotional development
- Improved academic achievement
- Savings in healthcare costs, better jobs and higher earnings

High-quality early childhood education has been found to be especially beneficial for children from families with low incomes.

Further, there is strong evidence of return on investment, with an estimated cost-benefit ratio of 3.15:1, meaning that for every \$1 invested in these programs, Ohio could expect to realize \$3.15 in savings.

Evidence-based home visiting

Home visiting programs are an evidence-informed, multi-generational strategy with proven benefits for parents and caregivers as well as children. Research has identified many benefits of home visiting, although different home visiting models have different expected benefits. Some include:³

- Improved birth outcomes
- Improved parenting
- Reduced child maltreatment



- Improved kindergarten readiness
- Improved family economic self-sufficiency

Home visiting programs that are comprehensive and focused on high-need participants are more likely to have positive results. Evaluations of home visiting programs have demonstrated that savings outweigh costs, with the amount depending on the home visiting model.⁴

Fatherhood involvement programs

Having a father involved in a child's life has been linked to positive child outcomes such as improved academic achievement, behavior and social-emotional well-being.⁵ Evidence-based fatherhood involvement programs show strong evidence of improving family functioning and parent-child interaction.

Safe, stable and nurturing relationships with parents or other caregivers are a critical protective factor, which can keep a child from experiencing mental health challenges and harms caused by trauma exposure. However, to build these important relationships, parents and caregivers must have what they need to provide a safe and healthy environment without constant stress. This is more difficult for families who are experiencing financial instability, living in an unsafe neighborhood or have difficulty accessing necessary supports, such as medical care. The **child tax credit** proposal in HB 96 is another evidence-informed intervention that could support parents, help them create a safe and nurturing environment and improve child and family well-being.

In closing, high-quality early childhood education, home visiting programs, fatherhood involvement programs and the child tax credit are all evidence-informed interventions that are likely to improve the health and well-being of Ohio children and families. Public sector funding for these strategies can expand the reach and scale of these approaches, and evaluation of these strategies can further build the base of evidence so that we can invest in what works in the future.

HPIO is a non-partisan and independent health policy research organization. Our mission is to advance evidence-informed policies that improve health, achieve equity and lead to sustainable healthcare spending in Ohio. HPIO's work is grounded in both data and evidence.

Thank you, Chair White and members of the committee, for accepting our testimony for HB 96. Please feel free to reach out to HPIO with any questions.

https://www.healthpolicyohio.org/files/publications/policybriefacesprotectivefactors10.11.2024.pdf

¹ Heckman, James. "Schools, skills and synapses." Economic Inquiry 46, No. 3 (2008): 289-324.

² "Preschool education programs" and "Publicly funded pre-kindergarten programs." County Health Rankings and Roadmaps. Accessed Feb. 25, 2025.

https://www.countyhealthrankings.org/strategies-and-solutions/what-works-for-health

³ "Early childhood home visiting programs." County Health Rankings and Roadmaps. Accessed Feb. 25, 2025. https://www.countyhealthrankings.org/strategies-and-solutions/what-works-for-health

⁴ Estimates via the Washington Institute of Public Policy

⁵ McWayne C, Downer JT, Campos R, Harris RD. Father involvement during early childhood and its association with children's early learning: A meta-analysis. Early Education and Development. 2013;24(6):898-922.

⁶ "Protecting against the harms of adverse childhood experiences (ACEs)." Health Policy Institute of Ohio. 2024.