Early Childhood Education & Home Visiting Programs

A child's relationship with others inside and outside the family plays a role in healthy brain development, as well as in the development of physical, emotional, social, behavioral, and intellectual capacities. Parents may struggle to provide the care and nurturing necessary for children to develop these capacities and thrive for a number of reasons, including health, substance misuse, mental health, financial issues, or access to resources or support. Early childhood home visitation can prevent ACEs by providing information, caregiver support, and training about child health, development, and care to families in their homes to build a safe, stable, nurturing and supportive home environment. High-quality childcare and preschool enrichment programs with family engagement help children build a strong foundation for future learning and opportunity by improving their physical, social, emotional and cognitive development, language and literacy skills, and school readiness. These approaches also help by strengthening connections between home and school environments and can be especially beneficial to economically disadvantaged children who may not have educational resources at home or the support to help them learn and thrive (CDC, 2019).

PROGRAM EXAMPLES

Below are links to evidence-informed programs to prevent and mitigate the harms of ACEs in this strategy, as compiled by HPIO, 2021. These illustrate the kinds of programs United Way may fund, but not exclusively.

Child FIRST

Child-Parent Centers (CPCs)

Community health workers

Domestic Violence Home Visit Intervention

(DVHVI) Early childhood home visiting programs

Healthy Families America

(HFA) Incredible Years

Nurse-Family Partnership

(NFP) Parents as Teachers

(PAT) Preschool education

programs

Preschool programs with family support services

REPORTING REQUIREMENTS

Participant Demographics - Semi-annual reporting includes age, ethnicity, gender, household poverty level, parental status, race, military status, and zip code. Our goal is to receive reporting from 80% of participants.

Indicators & Outcomes - Semi-annual reporting is required for at least one Required Indicator and one Required Outcome. Each program may add up to 3 additional measures to more specifically show how and to what extent the program supported the required outcome or supported related goals. Programs relate to both.

The seven indicators reflect the type of program. Outcomes reflect broad goals of these types of programs:

- Percent of participants who establish or strengthen child-adult relationships by improving responsiveness and/nurturing (parent, caregiver, mentor or other adult).
- Percent of young children who improve essential life skills including healthy development, executive function, and self-regulation.

SOURCES

Adverse Childhood Experiences (ACEs): "A strategic approach to prevent ACEs in Ohio", Health Policy Institute of Ohio, 2021.

Centers for Disease Control and Prevention (2019). Adverse Childhood Experiences (ACEs) Prevention Resource for Action: A Compilation of the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

Mentoring or After School Programs including Social Emotional Component

Relationships with caring adults who are positive role models can prevent ACEs and improve future outcomes for young people. Caring adults could include teachers, coaches, extended family members, neighbors or community volunteers. Connecting youth to caring adults and activities helps to ground them, improve their engagement in school, and establish positive networks and experiences. It is an important preventive strategy to buffer against parental absence or other difficulties at home, frequent moves, and exposure to negative influences at school and in the community. It can also buffer against the impact of ACEs for youth who have already experienced ACEs.

Mentoring and after-school programs are ways to connect youth to other caring adults and activities. Mentoring programs pair youth with an adult volunteer with the goal of fostering a relationship that will contribute to the young person's growth opportunities, skill development, academic success, and future schooling and employment outcomes. Mentoring programs may be delivered in a school or community setting and to youth of all ages, from early childhood through adolescence.

After-school programs are a way to provide opportunities for youth to strengthen their behavioral, leadership, and academic skills and become involved in positive school and community activities. (CDC, 2019).

PROGRAM EXAMPLES

Below are links to evidence-informed programs to prevent and mitigate the harms of ACEs in this strategy, as compiled by HPIO, 2021. These illustrate the kinds of programs United Way may fund, but not exclusively.

After School Matters
program Big Brothers
Big Sisters (BBBS) CrossAge Youth Peer
Mentoring

Mentoring programs: delinquency

REPORTING REQUIREMENTS

Participant Demographics - Semi-annual reporting includes age, ethnicity, gender, household poverty level, parental status, race, military status, and zip code. Our goal is to receive reporting from 80% of participants.

Indicators & Outcomes - Semi-annual reporting is required for at least one Required Indicator and one Required Outcome. Each program may add up to 3 additional measures to more specifically show how and to what extent the program supported the required outcome or supported related goals. Programs relate to both.

The seven indicators reflect the type of program. Outcomes reflect broad goals of these types of programs:

- Percent of young children who improve essential life skills including healthy development, executive function, and self-regulation.
- Percent of participants who establish or strengthen child-adult relationships by improving responsiveness and/ nurturing (parent, caregiver, mentor, or other adult).

SOURCES

Adverse Childhood Experiences (ACEs): "A strategic approach to prevent ACEs in Ohio," Health Policy Institute of Ohio, 2021.

Centers for Disease Control and Prevention (2019). Adverse Childhood Experiences (ACEs) Prevention Resource for Action: A Compilation of the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Parent/Caregiver Skills Training Programs

Skill-based learning is an important part of a comprehensive approach to prevent ACEs. Decades of research shows that teaching children and youth skills to handle stress, resolve conflicts, and manage their emotions and behaviors can prevent violence victimization and perpetration, as well as substance misuse, sexually transmitted infections, including HIV, and teen pregnancy. Strengthening parenting skills and promoting nurturing and supportive family environments can build a strong foundation for children and protect them from multiple forms of violence, substance misuse, and other negative health outcomes across developmental periods and into adulthood. There are a number of approaches to teach skills. Social emotional learning approaches (also referred to as universal school-based programs when delivered to all students in a particular classroom, grade or school) are widely used across the United States to enhance interpersonal skills. This includes skills related to communication, problem-solving, alcohol and drug resistance, conflict management, empathy, coping, and emotional awareness and regulation. Parenting skills and family relationship approaches cover developmentally appropriate expectations for child behavior; teach behavior management, monitoring, and problem-solving skills; safe and effective discipline; healthy relationship behaviors; and work with parents to enhance parent-

child communication and ways to support children and youth (CDC, 2019).

PROGRAM EXAMPLES

Below are links to evidence-informed programs to prevent and mitigate the harms of ACEs in this strategy, as compiled by HPIO, 2021. These illustrate the kinds of programs United Way may fund, but not exclusively.

Adults and Children Together Against Violence: Parents Raising Safe Kids (ACT)

Families and Schools Together

Father involvement

programs Group-based

parenting programs

SafeCare

School-based social and emotional

instruction Strengthening Families

Program

The Triple P System

REPORTING REQUIREMENTS

Participant Demographics - Semi-annual reporting includes age, ethnicity, gender, household poverty level, parental status, race, military status, and zip code. Our goal is to receive reporting from 80% of participants.

Indicators & Outcomes - Semi-annual reporting is required for at least one Required Indicator and one Required Outcome. Each program may add up to 3 additional measures to more specifically show how and to what extent the program supported the required outcome or supported related goals. Programs relate to both.

The seven indicators reflect the type of program. Outcomes reflect broad goals of these types of programs:

- Percent of young children who improve essential life skills including healthy development, executive function, and self-regulation.
- Percent of participants who establish or strengthen child-adult relationships by improving responsiveness and/ nurturing (parent, caregiver, mentor or other adult).

SOURCES

Adverse Childhood Experiences (ACEs): "A strategic approach to prevent ACEs in Ohio," Health Policy Institute of Ohio, 2021.

Centers for Disease Control and Prevention (2019). Adverse Childhood Experiences (ACEs) Prevention Resource for Action: A Compilation of the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

School or Community-Based Violence Prevention

Norms are group-level beliefs and expectations about how members of the group should behave. Changing social norms that accept or allow indifference to violence and adversity is important in the prevention of ACEs. There are a number of norms that can protect against violence and adversity, including those that:

- Promote community norms around a shared responsibility for the health and well-being of all children;
- Support parents and positive parenting, including norms around safe and effective discipline;
- Foster healthy and positive norms around gender, masculinity, and violence to protect against violence towards intimate partners, children, and peers;
- Reduce stigma around help-seeking; and
- Enhance connectedness to build resiliency in the face of adversity (CDC, 2019).

PROGRAM EXAMPLES

Below are links to evidence-informed programs to prevent and mitigate the harms of ACEs in this strategy, as compiled by HPIO, 2021. These illustrate the kinds of programs United Way may fund, but not exclusively.

Coaching Boys into Men

Expect Respect Support Groups (ERSG)

First-Grade Classroom Prevention

Program Focused deterrence

strategies

Green Dot

PAX Good Behavior Game

Positive Action

Public education campaign targeting child physical

abuse School-based violence & bullying prevention

programs

School-wide Positive Behavioral Interventions and Supports (Tier 1)

REPORTING REQUIREMENTS

Participant Demographics - Semi-annual reporting includes age, ethnicity, gender, household poverty level, parental status, race, military status, and zip code. Our goal is to receive reporting from 80% of participants.

Indicators & Outcomes - Semi-annual reporting is required for at least one Required Indicator and one Required Outcome. Each program may add up to 3 additional measures to more specifically show how and to what extent the program supported the required outcome or supported related goals. Programs relate to both.

The seven indicators reflect the type of program. Outcomes reflect broad goals of these types of programs:

- Percent of participants who establish or strengthen child-adult relationships by improving responsiveness and/nurturing (parent, caregiver, mentor or other adult).
- Percent of young children who improve essential life skills including healthy development, executive function, and self-regulation.

SOURCES

Adverse Childhood Experiences (ACEs): "A strategic approach to prevent ACEs in Ohio," Health Policy Institute of Ohio, 2021.

Centers for Disease Control and Prevention (2019). Adverse Childhood Experiences (ACEs) Prevention Resource for Action: A Compilation of the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.