

# VOTE for OHIO KIDS



## Integrated child-serving prevention, health, and education workforce

**KNOW**  
THE ISSUES

**An integrated child-serving prevention, health, and education workforce is the foundation of support for children and families across every child-serving system.**

*From a child's earliest years through adolescence, a child's healthy development is directly influenced by their day-to-day interactions with caregivers – from early educators to clinical providers. The critical work of caring for and educating children as they develop across a robust continuum of care requires a coordinated and strategic effort to ensure professionals are supported to meet the growing and diverse needs of Ohio children and families.*

The COVID-19 pandemic has exposed the fragility of our systems in both responding to and preventing behavioral health crises and it has further decimated the workforce's capacity to support the healthy development of children and meet the increased demand for infant, early childhood, and adolescent mental health prevention and treatment services.

### ***What does the data tell us?***

Unfortunately, even prior to the COVID-19 pandemic, Ohio's child-serving workforce faced incredible challenges:

→ The average wage for Ohio early educators in child care settings based on a study in 2020 was



**\$10.67/HOUR**

and most workers received **no employer supports**, such as paid leave or planning time. In addition, many child care workers qualified for public assistance and were **unable to meet their own families' basic needs**.<sup>1</sup>

→ Ohio had **ONLY 11** child psychiatrists per 100,000 children in 2017, with more than

→ **60 OF 88** Ohio counties with **NO** child psychiatrists.<sup>2</sup>

The American Academy of Child and Adolescent Psychiatry (AACAP) estimates that the U.S. should be at **47 child psychiatrists per 100,000 children for current needs**.





→ An estimated **53%** of child welfare case workers reported some level of secondary trauma from what they see and experience.<sup>3</sup>

This trauma, associated with higher rates of worker burnout, results from continuous exposure to stressful and emotional experiences associated with caring for children in protective custody.

Since the pandemic, the challenges of child-serving industries to recruit and retain highly qualified staff have only increased as they compete with other sectors that offer higher wages, better benefits, and more supportive work environments.

Professionals within the child-serving workforce are also too often not representative of the children they serve. As a result, children of color, who live in Appalachian or rural regions of the state, with disabilities, who are from families with low incomes, and LGBTQ+ youth are more likely to be negatively impacted by the lack of highly skilled, culturally competent, and available professionals that can meet their unique needs.

## *To improve mental health & well-being, Ohio's next governor should support an integrated child-serving prevention, health, & education workforce by:*

-  Developing integrated career pathways and pipeline programs that provide a road map for recruiting and retaining a diverse child-serving workforce.
-  Supporting increased compensation and robust employer benefit standards for child-serving workers.
-  Developing and maintaining a comprehensive child-serving professional development system with stable funding, and that includes continuing education standards and quality assurance measures.
-  Providing training to ensure the child-serving workforce is culturally competent and can provide trauma-competent care.

## Sources

1. Groundwork Ohio, [The Workforce Behind the Workforce](#) (October 2020).
2. Mind the Gap
3. The Statehouse News Bureau, [Children Services Group tells Congress about crisis among Ohio workers, kids in foster care](#) (February 7, 2022)

Presented by:



  
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