

WHATCOM COUNTY COUNCIL

SPECIAL COUNCIL MEETING AS THE HEALTH BOARD

10:00 a.m. Tuesday, November 1, 2016 Council Chambers, 311 Grand Avenue

AGENDA

Meeting Topics	Pages	Time
1. Public Session	no ppr	10:00-10:10
2. Director/Health Officer Report	no ppr	10:10-10:20
3. Public Health Advisory Board (PHAB) Update	no ppr	10:20-10:30
4. Tobacco 21 Resolution	1-3	10:30-10:50
5. Healthy Planning Resolution Update & Next Steps	4-14	10:50-11:05
6. Strategies for Child & Family Health Policy	15-20	11:05-11:30



HEALTH BOARD Discussion Form November 1, 2016

AGENDA ITEM #4: Tobacco 21 Resolution

PRESENTER: Regina Delahunt

BOARD ACTION:	Action Item	Discussion	FYI - Only

OVERVIEW

The Health Board has expressed interest in supporting measures aimed at reducing tobacco use particularly in youth. The Washington State Attorney General and the Secretary of Health will be jointly asking the State Legislature to pass legislation that will raise the minimum age of sale for tobacco products, including electronic products, to 21 years old in Washington. They are seeking support in the form of resolutions (Attachment 1) from local legislative bodies throughout the state to present to the legislature in the upcoming session. The Tobacco 21 initiative has collective support of the American Cancer Society, the Cancer Action Network, the American Heart Association, the American Lung Association and the Campaign for Tobacco-Free Kids.

Both opponents of smoking and purveyors of cigarettes have long recognized the significance of adolescence and early adulthood as the period during which smoking behaviors are typically developed. Research shows that nearly 90% of smokers begin smoking before the age of 18, and nearly 100% of smokers begin smoking by age 26. Further, adolescents are still going through critical periods of brain development, including the parts responsible for decision making, impulse control, sensation seeking, and susceptibility to peer pressure. The U.S. Surgeon General reports that adolescents can become dependent on nicotine very rapidly, and at lower levels of consumption than adults.

Action today will save lives. There are 104,000 Washington kids alive today who will ultimately die prematurely from smoking. Tobacco use remains a leading cause of preventable death in Washington, contributing to 8,300 deaths annually and costing the state more than \$5 billion a year in healthcare costs and lost productivity. Raising the national minimum age of sale for tobacco products to 21, over the long term, is projected to reduce adult smoking prevalence by 12% and reduce smoking-related deaths by nearly 10%.

BOARD ROLE / ACTION REQUESTED

• Pass Resolution Supporting Raising the Legal Sales Age for Tobacco & Vapor Products from 18 to 21

ATTACHMENT(S)

1. Whatcom T21 Resolution

PROPOSED BY: ______ INTRODUCTION DATE:

RESOLUTION NO. _____

WHATCOM COUNTY HEALTH BOARD RESOLUTION SUPPORTING RAISING THE LEGAL SALES AGE FOR TOBACCO & VAPOR PRODUCTS FROM 18 TO 21

WHEREAS tobacco use remains the leading cause of preventable death in the United States, killing more than 8300 Washingtonians each year—more than alcohol, AIDS, car crashes, illegal drugs, murders, and suicides combined —and causing cancer, heart disease, and respiratory diseases, among other health disorders, that add an estimated \$2.81 billion in annual health care costs in Washington alone;

WHEREAS, in 2014, the number of Washington 10th graders using either cigarettes, smokeless tobacco, or electronic cigarettes was 20 out of 100;

WHEREAS in 2015 the Institute of Medicine (IOM) concluded that raising the legal sales age for tobacco products to 21 would reduce tobacco initiation among youth, especially those aged 15-17, improve health across the lifespan, and save lives;

WHEREAS, the IOM projected that if the legal sales age for tobacco products were raised to 21 nationwide, there would be approximately 223,000 fewer premature deaths, 50,000 fewer deaths from lung cancer, and 4.2 million fewer years of life lost for persons born in the US between 2000 and 2019, and result in near-immediate reductions in preterm births, low birth weight babies, and sudden infant death syndrome;

WHEREAS raising the legal sales age for alcohol to 21 is associated with reduced alcohol use and dependence among persons under 21;

WHEREAS raising the legal sales age for tobacco from 18 to 21 will help lead to less smoking and tobacco use among Washington teens aged 12-17, sparing these young people from the ravages that develop over time from harmful and highly addictive tobacco products;

WHEREAS legislation to raise the legal sales age for tobacco and vapor products from 18 to 21 has been introduced in the Washington State Legislature but has not yet been enacted;

WHEREAS the Whatcom County Health Board wants to protect the young people of our city from the ravages of tobacco and nicotine addiction;

THEREFORE the Whatcom County Health Board calls upon the Washington State Legislature, and the senators and representatives who represent the people of

Whatcom County, to pass legislation raising the legal sales age for tobacco and vapor products from 18 to 21.

RESOLVED this _____day of _____, 2016.

ATTEST:

WHATCOM COUNTY HEALTH BOARD WHATCOM COUNTY, WASHINGTON

Dana Brown-Davis, Clerk of the Council

Barry Buchanan, Health Board Chair

APPROVED AS TO FORM:

Civil Deputy Prosecutor



WHATCOM COUNTY HEALTH DEPARTMENT HEALTH BOARD PRESENTATION

Agenda Item No: 5

TO PR

DATE: November 1, 2016 TOPIC: Healthy Planning Annual Progress Review PRESENTER(S): Astrid Newell

BACKGROUND:

On October 6, 2015, the Whatcom County Health Board adopted Resolution 2015-038 committing Whatcom County to adopt a healthy planning approach. With this resolution, the Health Board established, as a matter of policy, that the County will apply a "Healthy Planning" approach to community planning processes and decision-making, including but not limited to the Whatcom County Comprehensive Plan. The resolution calls on the Whatcom County Public Health Advisory Board (PHAB), working with the Whatcom County Health Department and other city and county departments, to identify and recommend tools, processes, and opportunities to integrate a health perspective in community planning processes and decision-making. The resolution also calls on the Health Board to review progress on an annual basis. This presentation serves as the annual progress review for 2016.

IMPORTANCE:

A healthy planning approach supports the Whatcom County Health Board's stated commitment to address health as a community priority and increase opportunities for all people to be healthy. The approach serves as a mechanism to pro-actively consider health in the development of county plans and policies as well as to facilitate progress on key community health priorities, including access to healthy foods, affordable housing, active transportation modalities, and parks and recreation facilities. The approach ensures attention to the needs of vulnerable populations and geographic areas, including those that are disproportionately impacted by health and social challenges.

ANALYSIS:

Over the past 12 months, the Health Department and partners have taken concrete steps to implement the Healthy Planning Resolution. This has included actions related to:

- Framing healthy planning work
- Providing health input on policies and plans, particularly the County Comprehensive Plan
- Strengthening cross-departmental connections and knowledge

Opportunities exist to build on this foundation with further cross-departmental and cross-jurisdictional engagement, focused work on a subset of issues (e.g., transportation, housing), and improved coordination of county efforts in targeted geographic areas (e.g., Kendall/Columbia Valley).

REQUESTED ACTION:

• Health Board provides feedback and input on next steps for healthy planning efforts

Attachments

1. PowerPoint Presentation

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HEALTHY PLANNING ANNUAL PROGRESS REVIEW

Whatcom County Health Board November 1, 2016



A vision for Healthier Communities

Health Board Agenda Packet - Page 6

WHATCOM COUNTY HEALTHY PLANNING RESOLUTION October 2015

Healthy Planning

PROPOSED BY: Barry Buchanan

INTRODUCED: _

RESOLUTION NO. 2015-038

COMMITTING WHATCOM COUNTY TO ADOPT A "HEALTHY PLANNING" APPROACH

WHEREAS, the health and well-being of the residents of Whatcom County are critical for a prosperous and sustainable Whatcom County; and

WHEREAS, health starts—long before illness—in our families, neighborhoods, schools, and jobs; and

WHEREAS, there is growing awareness that health is influenced by the interaction of many factors, and not simply by genetics, individual behavior, or access to medical care; and

WHEREAS, it is now widely accepted that health is also determined by social and economic factors and opportunities including the availability of resources and supports in homes, neighborhoods, and communities-at-large; and

WHEREAS, all people in Whatcom County should have the opportunities to make the choices that allow them to live long, healthy, and productive lives regardless of their income, education, or ethnic background; and

WHEREAS, data show that people living in poverty, or who have limited education, or who live in isolated areas in Whatcom County, or who experience racial or ethnic discrimination or other social stresses are more likely to report poor health status and have lower life expectancy; and

WHEREAS, data also show that people who have greater access to economic resources, social supports, and healthy community amenities such as quality affordable housing, safe places to walk, bike, play, and connect, and places to get affordable healthy foods for their families are more likely to experience good health status; and

WHEREAS, plans and policies implemented by Whatcom County outside of the traditional health sector significantly affect access to health opportunities; and

WHEREAS, these plans and policies include those related to land use, food access, housing, transportation, public safety, education, parks and recreation, water and air quality, criminal justice, and economic development; and

WHEREAS, increasing health opportunities can lead to improved health, reduced health disparities, reduced health care costs, and reduced criminal justice costs; and

WHEREAS, a "Healthy Planning" approach involves inclusion of health criteria in the development and adoption of community plans and policies; and WHEREAS, by adopting a "Healthy Planning" approach, Whatcom County demonstrates its commitment to address health as a community priority and increase health opportunities; and

WHEREAS, the Whatcom County Public Health Advisory Board serves in an advisory capacity to the Health Board and to the Whatcom County Health Department; and

THEREFORE BE IT RESOLVED that it shall be the policy of Whatcom County to apply a "Healthy Planning" approach to Whatcom County's community planning processes and decision-making, including but not limited to the Whatcom County Comprehensive Plan; and

BE IT FURTHER RESOLVED that the Whatcom County Public Health Advisory Board, working with the Whatcom County Health Department and other city and county departments, will identify and recommend tools, processes, and opportunities to integrate a health perspective in community planning processes and decision-making; and

BE IT FURTHER RESOLVED that topics of consideration in community planning may include, but are not limited to, access to health care services; affordable, safe, and healthy housing; active living and transportation; access to healthy food; clean air, water, and soil; parks, recreation, and green spaces; economic opportunity; safety and violence prevention; and support for children, families, and other vulnerable populations; and

BE IT FURTHER RESOLVED that the Public Health Advisory Board will make initial recommendations to the Health Board regarding a "Healthy Planning" approach on or before January 31, 2016; and

BE IT FINALLY RESOLVED that the Health Board will review this policy on an annual basis to evaluate progress.

APPROVED this 6th day of October 2015.

ATTEST

Dana Brown Davis, Clerk of the Board

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WHATCOM COUNTY BOARD OF HEALTH WHATCOM COUNTY, WASHINGTON

Carl Weimer, Health Board Chair

APPROVED AS TO FORM: aun Karen Frakes, Civil Deputy Prosecutor

Healthy Planning Resolution

Schematic of Proposed Process

COUNTY DEPARTMENTS

COUNTY COUNCIL

- Standing committee that meets periodically comprised of representatives from County departments
- Tools & processes to consider health in policy and planning decisions are provided for all department staff
- Applies a health lens to decision-making
 Proposals, Policies, Plans using a range of policy analysis tools

Final decision

 May also request additional information if warranted

2016 ACTIONS

Framing healthy planning work

- Public Health Advisory Board (PHAB) workgroup (January)
- Health Board presentation (February)
- Health Department internal planning and coordination (ongoing)

• Providing health input on policies and plans

• County Comprehensive Plan review and recommendations (February-April)

Strengthening cross-departmental connections and knowledge

- Health Department cross-divisional conversations (March)
- Cross-departmental key informant interviews (April-May)
- Healthy Planning workshop (June)

WHATCOM COUNTY COMPREHENSIVE PLAN 2016 Update

Health topics

- Physical activity
- Mental health
- Healthy food access
- Injury and safety
- Social connectedness

Evidence-based policy recommendations



Comp Plan Chapters

- Land Use
- Transportation
- Recreation
- Housing
- Economics

COMP PLAN OUTCOMES

- Strong relationships between public health and planning staff
- Majority of health recommendations included in updated chapters
- Opportunities for public health to support implementation and monitoring
- Potential for future expansion of health perspective in Comp Plan and other planning processes

CROSS-DEPARTMENTAL CONNECTIONS

• Health Department internal collaboration

- Weekly core team meetings (4 staff + consultant)
- 2 cross-divisional planning meetings (all divisions)

• Key informant interviews

• 5 departments/ 10 participants

• Healthy Planning Workshop

- 29 participants (5 depts + City of Bellingham, Whatcom Council Of Governments, PHAB)
- Generally strong evaluations, opportunity to simplify tools

NEXT STEPS

- Engage County Executive/Administration
- Reconnect with departments and offices (Planning, Public Works, Parks, Council office)
- Establish crossdepartment working group of interested staff to identify upcoming opportunities
- Consider a focused approach to address key community health priorities: food, housing, transportation, parks/recreation
- Coordinate county planning and community improvement efforts in targeted areas: Kendall/Columbia Valley

HEALTH BOARD DISCUSSION

- Feedback on Comprehensive Plan recommendations and process?
- Particular areas of interest or focus moving forward with healthy planning approach?
- Requests for PHAB or cross-departmental consideration?
- Other thoughts or comments?



WHATCOM COUNTY HEALTH DEPARTMENT HEALTH BOARD PRESENTATION

DATE:November 1, 2016TOPIC:Strategies for Child and Family Health PolicyPRESENTER(S):Astrid Newell

BACKGROUND:

Evidence is clear—the first years of a child's life are critical for establishing a strong foundation for lifelong health and well-being. During this time period, a child's family and caregivers play essential roles in promoting healthy development. Prolonged and unmitigated stress ("toxic stress") within the family and community is strongly associated with negative impacts on child development, while positive nurturing relationships and experiences buffer children from stress and promote optimal development of healthy brains and bodies. Growing evidence also demonstrates the importance of maternal health and well-being before, during and after pregnancy on long-term child outcomes.

Through the *Community Health Assessment* (2011) and other local efforts, there is growing recognition that a significant number of families with young children in Whatcom County are experiencing high levels of stress due to economic instability, housing challenges, mental health and substance use concerns, strained family relationships, and challenging social contexts. Manifestations of significant family stress can be seen in our child abuse and neglect rates, child development outcomes, readiness for school statistics, and increasing behavior challenges seen in pre-school and school-aged children. Our community understands these issues impact some populations more than others, leading to an "uneven start" for some children and families in Whatcom County. These issues are prioritized in the *Community Health Improvement Plan (2012-16)*. Many in our community also understand that there are real opportunities to reduce stressors, build on family and community strengths, and improve the health and developmental trajectories for large numbers of children through collaborative action.

In early 2016, Public Health Advisory Board (PHAB) identified early child and family well-being as a topic of interest for further exploration and potential policy focus. The full PHAB has received several packets of information and had discussion at three meetings (May, July, and September 2016). A workgroup of PHAB members and Health Department staff met twice to further discuss direction.

IMPORTANCE:

Strong consensus among national experts identifies investment in young children and families as one of the most impactful areas for community investment with long-term benefits across multiple domains including health, education, economics, and criminal justice. For this reason, the PHAB suggests that the Health Board dedicate focused attention to this topic over the next year (2017). The timing also aligns with current community interest and opportunity.

ANALYSIS:

The attached recommendations and menu of opportunities for Health Board action reflect deliberation of Health Department staff and PHAB workgroup, with initial input from Council's policy analyst and selected community partners involved in local early child and family initiatives. Further exploration will

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WHATCOM COUNTY HEALTH DEPARTMENT HEALTH BOARD PRESENTATION



DATE:November 1, 2016TOPIC:Strategies for Child and Family Health PolicyPRESENTER(S):Astrid Newell

be needed to identify costs, feasibility, and other considerations. The overarching goal of these recommendations is to improve the health and well-being of Whatcom County's youngest children and families.

REQUESTED ACTION:

- Health Board adopts a 2017 theme focused on "young children and families"
- Health Board reviews recommendations and potential Health Board/County Council actions and selects at least one action in each category for further exploration or initial action.

ATTACHMENTS:

- 1. Menu of Opportunities
- 2. In Brief-The Foundations of Lifelong Health, Center on the Developing Child (pdf)
- 3. Build a Scaffolding of Support, Heckman (pdf)

Improving the health and well-being of Whatcom County's youngest children and families

	Recommendations	Potential actions	Explore Further?
1)	Enhance County focus and resources to meet the needs of young children and families in Whatcom County	 Consider and prioritize early childhood policies and programs in County resource allocation (budgeting, contracting) Encourage consideration of needs of young children and families across county departments and 	
		 programs (examples: human resources, parks, planning, health, etc.) Expand County support for home visiting (e.g., Nurse-Family Partnership), centralized access to services (e.g., Single Entry Access to Services), and other innovative and evidence-based early childhood and parenting support services Participate in/or endorse a collective action initiative, bringing multiple groups, agencies, service providers and families together for action planning and coordination. 	
		 Provide County support for a child and family tax levy, such as King County's Best Starts for Kids Advocate for additional state and federal resources for improving health service programs for low- income families, including Medicaid Maternity Support Services and WIC Nutrition Program. 	
2)	Support County employees caring for young children and model family-friendly workplace policies for other local employers	 Expand paid parental leave for both mothers and fathers after birth of a child (e.g., King County provides 12 weeks) 	
		Expand flexible scheduling/part-time scheduling options for County staff	
		Implement bring-infant-to-work provisions, similar to WA State DOH and Clark County	
		• Expand and promote breastfeeding-friendly workplace provisions, such as protected break time and dedicated lactation rooms for both staff and public	
		Consider development of on-site child care options	
3)	Seek solutions to reduce or mitigate key stressors for young children and families living in Whatcom County	• Convene taskforce to address limited availability of high quality, affordable child care, particularly infant-toddler care in Whatcom County	
		 Request explicit consideration of needs of young children and families in plans and proposals developed by County advisory groups and task forces, including those addressing: Economic development Housing Behavioral health (parental mental health and substance use, child mental health) Incarceration prevention and criminal justice involvement 	
		• Prioritize community improvements in areas with high proportion of vulnerable families with young children (e.g., East Whatcom County, farmworker communities, tribal communities, low income housing)	

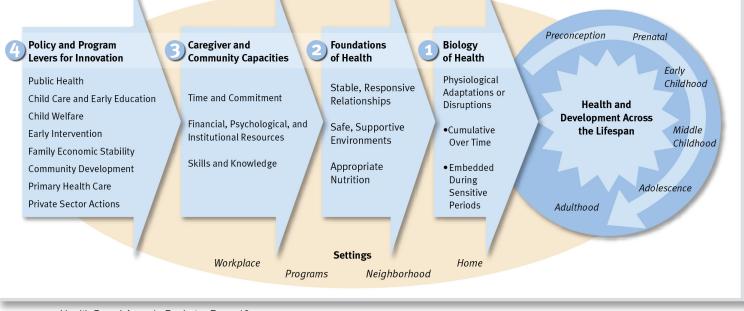
INBRIEF | THE FOUNDATIONS OF LIFELONG HEALTH

A series of brief summaries of essential findings from recent scientific publications and presentations by the Center on the Developing Child at Harvard University. A vital and productive society with a prosperous and sustainable future is built on a foundation of healthy child development. Positive early experiences provide a foundation for sturdy brain architecture and a broad range of skills and learning capacities. Health in the earliest years — beginning with the future mother's wellbeing before she becomes pregnant — strengthens developing biological systems that enable children to thrive and grow up to be healthy adults. The science of child development now helps us to see healthy development as a causal chain — policies and programs across the public and private sectors affect the capacities of caregivers and communities to strengthen three foundations of healthy development: stable, responsive relationships; safe, supportive environments; and appropriate nutrition. These foundations, in turn, trigger physiological adaptations or disruptions that influence lifelong outcomes in health, learning, and behavior. Understanding how each link in this chain affects the others can provide a science-based framework for decisions about policies, systems, and practices that support the healthy development of all young children and their families.

1 The biology of health explains how experiences and environmental influences "get under the skin" and interact with genetic predispositions, which then result in physiological adaptations or disruptions that affect lifelong outcomes in learning, behavior, and both physical and mental well-being. Advances in neuroscience, molecular biology, and genomics have converged on three compelling conclusions:

- Early experiences are built into our bodies, creating biological "memories" that shape development, for better or for worse.
- Toxic stress caused by significant adversity can produce physiological disruptions that undermine the development of the body's stress response systems and affect the architecture of the developing brain, the cardiovascular system, the immune system, and metabolic regulatory controls.
- These physiological disruptions can persist far into adulthood and lead to lifelong impairments in both physical and mental health.

A Framework for Reconceptualizing Early Childhood Policies and Programs to Strengthen Lifelong Health



2 The foundations of health establish a context within which the early roots of physical and mental well-being are nourished. These include

- A stable and responsive environment of relationships, which provides young children with consistent, nurturing, and protective interactions with adults that enhance their learning and help them develop adaptive capacities that promote well-regulated stress response systems;
- Safe and supportive physical, chemical, and built environments, which provide places for children that are free from toxins and fear, allow active, safe exploration, and offer families raising young children opportunities to exercise and make social connections; and
- Sound and appropriate nutrition, which includes health-promoting food intake and eating habits, beginning with the future mother's pre-conception nutritional status.

3 Caregiver and community capacities to promote health and prevent disease and disability refers to the ability of family members, early childhood program staff, neighborhoods, voluntary associations, and the parents' workplaces to support and strengthen the foundations of child health. These capacities can be grouped into three categories:

- *Time and commitment*, which includes the nature and quality of time caregivers spend with children and on their behalf, as well as how communities assign and accept responsibility for monitoring child health and developmental outcomes and pass and enforce legislation and regulations that affect child well-being;
- Financial, psychological, and institutional resources,

POLICY IMPLICATIONS

which includes caregivers' ability to purchase goods and services, their physical and mental health, and their child-rearing skills, as well as the availability of community services and organizations that promote children's healthy development and supportive structures, such as parks, child care facilities, schools, and after-school programs; and

• *Skills and knowledge*, which includes caregivers' education, training, interactions with child-related professionals, and personal experiences, plus the political and organizational capabilities of communities to build systems that work for children and families.

Public and private sector policies and programs can strengthen the foundations of health by enhancing the capacities of caregivers and communities in the multiple settings in which children develop. Relevant policies include legislative and administrative actions that affect public health, child care and early education, child welfare, early intervention, family economic stability, community development, housing, environmental protection, and primary health care. In short, nearly any policy that touches the lives of children and families can be seen as an opportunity to improve lifelong health outcomes in our communities and states. The private sector can also play an important role in strengthening the capacities of families to raise healthy and competent children, particularly through supportive workplace policies.

For more information, see "The Foundations of Lifelong Health Are Built in Early Childhood" and the Working Paper series from the Center on the Developing Child at Harvard University.

www.developingchild.harvard.edu/library/

- Current health promotion and disease prevention policies focused on adults would be more effective if evidence-based investments were also made to strengthen the foundations of health in the prenatal and early childhood periods. For example, obesity-reduction measures focused on changing adult and adolescent behaviors would be more successful if they were coordinated with programs supporting appropriate nutrition and better access to nutritious foods for pregnant mothers, infants, and toddlers.
- Significant reductions in chronic disease could be achieved across the life course by decreasing the number and severity of adverse experiences that threaten the well-being of young children and by strengthening the protective relationships that help mitigate the harmful effects of toxic stress.
- Effective health promotion and disease prevention depend on more than access to high-quality medical care. A wide range of service systems could improve outcomes significantly by applying a unified scientific understanding of the early childhood origins of health, learning, and behavior across multiple sectors. In other words, child welfare agencies could help prevent adult physical and mental health impairments, not just provide immediate child protection. Zoning and land-development policies could facilitate improved population health (and reduced health care costs), not just generate commercial profit. High-quality early care and education programs that buffer young children from excessive stress could promote health and prevent disease, not just prepare the children to succeed in school.

The authors gratefully acknowledge the contributions of the National Governors Association Center for Best Practices and the National Conference of State Legislatures.

Center on the Developing Child HARVARD UNIVERSITY www.developingchild.harvard.edu

ALSO IN THIS SERIES:

IN**BRIEF**: The Science of Early Childhood Development IN**BRIEF**: The Impact of Early Adversity on Brain Development IN**BRIEF**: Early Childhood Program Effectiveness

The Heckman Equation



Build a Scaffolding of Support A comprehensive approach to human capital development pays off.

James J. Heckman is the Henry Schultz Distinguished Service Professor of Economics at the University of Chicago, a Nobel Laureate in economics and an expert in the economics of human development.

When Professor Heckman presents his research on the economics of early childhood to policymakers and advocates, one question is often asked: "If we had X dollars to invest in reducing inequality or promoting human capital development, where should we invest it?"

The question begs for a simple answer. Unfortunately, the answer is not that simple. It depends very much on what the problem is and where gaps exist in investments in human development over the lifecycle of learning. However, there are simple guidelines for promoting flourishing individuals who reduce inequality through acquired skills and personal initiative:

- Pre-distributing wealth is much more effective than redistributing wealth. While inequality could be addressed with direct transfers of money to disadvantaged individuals and families, unconditional transfers are not as effective as programs that provide early resources for developing skills in children that increase productivity and earnings in the adult years.
- Resist the temptation to look for one silver bullet investment or program. A range of investments should follow the child through his or her development.
- Understand that skills beget skills. The earliest investment produces the best outcomes.
- Look to build a scaffolding of support around disadvantaged children: parental education, nutrition, early learning and early health. Strong families and parents are the catalyst for better education, health and economic outcomes for children.

- Follow up on investments in parenting, early learning and health with access to high-quality preschool that develops cognitive and social and emotional skills. The latter are critically important for a number of positive life outcomes, including school persistence, full-time employment, lifetime wages, better health and positive social behaviors.
- Make sure K-12 education develops the whole child, not just cognitive skills. Unfortunately, very little in public education focuses on this goal.
- Remediation efforts in K-12 and the young adult years should emphasize social and emotional development and mentorship. Improving social and emotional skills, which are more malleable during these years, have proven to be more effective than efforts to increase cognitive skills alone.
- Finally, focus on value, not on cost. While the cost of solving for inequality may seem daunting from an economic, social and political standpoint, keep in mind that the wisely targeted investments in proven supports and programs can deliver significant returns in individual flourishing and better economic and social outcomes for society.



www.heckmanequation.org

The Heckman Equation project is made possible with support from the Pritzker Children's Initiative.