



OHIO PERINATAL BEHAVIORAL HEALTH TASK FORCE

Strategic Framework, Direction & Activation Plan

Three-year Strategy

June 2026 | FINAL

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SECTION 1

Introduction & Contents

The Task Force: Building Momentum

600+

providers, community organizations,
researchers, advocates, and people
with lived experience

OPBHTF is a statewide collaborative united by a shared commitment to improving behavioral health outcomes for pregnant and postpartum mothers and their families. The power and potential of OPBHTF lies in three things it does for the field:



Connect. Link people and organizations across sectors so the work is coordinated, not duplicated.



Equip. Provide members with the knowledge, tools, and resources to act in their own settings.



Center voice. Ensure the people most affected by these systems are present in the conversations that shape them.

Strategy Objective

In collaboration with Ohio Department of Behavioral Health, the Task Force will develop and adopt a strategic plan to guide the next phase of perinatal behavioral health work in Ohio. The plan must identify priority areas, roles, and timelines, ensuring shared ownership among members and alignment with statewide maternal, infant, and behavioral health initiatives.

About This Document

To go forward, the OPBHTF must refine its focus while maintaining and growing the engagement of its membership. This document articulates the following:



Clarity around the opportunity

Discovery findings ground a deliberate choice about where OPBHTF should concentrate its finite organizational capacity, drawing on the contributions of staff, coalition leaders, and members while leveraging the assets, positioning, and momentum that have been carefully built.



Strategic direction

The strategic framework defines a three-year goal state and supporting priorities that set objectives, structure, and workflows.



An activation plan

The action plan (Section 4) translates the goals into phased horizons and year-one action projects that are focused, timely, achievable, and measurable.

SECTION 2

Discovery Findings

How We Listened

The strategic framework is grounded in four streams of discovery, and is synthesized per the information and input collected, and in consideration of the institutional requirements.



Stakeholder Feedback

Structured interviews with the Task Force Action Team Chairs alongside feedback from staff, funders, and other existing feedback collected from the 600+ member network.



Landscape Review

Organizational capacity, an evolving policy environment, and a shifting set of institutional practices and requirements shape the potential strategic pathways, programs, and deliverables of the Task Force.



Metrics & Momentum

Metrics and indicators from the recent activities, initiatives, and project showcase what the Task Force can accomplish and what it's well-positioned to maintain and sustain.

What We Heard from the Members (1 of 2)

Eight observations from structured interviews with the Task Force Action Team Chairs and other key stakeholders — what we heard, and what it means for strategy.

1

Centering mothers and parents across the full spectrum of support

Heard — A consistent emphasis on the real needs of mothers and parents with support spanning stigma reduction, awareness and education, screening, access to care, and ongoing family and community support.

For strategy — Anchor every priority in one guiding question: “what will most improve outcomes for mothers, parents, and their babies?” The voices of parents and families should continue to inform directions and actions.

2

A strong foundation: convening, learning, and sharing

Heard — Advocacy Day was a standout success because participants found it energizing and meaningful. The value was in the convening: bringing voices together, especially lived experience, across regions, perspectives, and roles in the system.

For strategy — Double down on convening and amplification as a core function, without the focus on advocacy; formalize OPBHTF’s role as connector, resource hub, and platform for collaboration.

3

A two-way channel: the information flow must be authentic

Heard — Members value hearing directly from mothers, parents, families, providers, and communities facing barriers and expect the exchange to be real, continuous, and translated for application and action.

For strategy — Build intentional listening and sharing loops, close them visibly (“you said, we did”), and prioritize engagement over volume to ensure authenticity, trust, and credibility.

4

Moving priorities into action

Heard — Strong ideas and initiatives are regularly generated through OPBHTF's collaborative work. Participants expressed a desire for greater visibility into implementation progress, opportunities for engagement, and pathways for activating ideas.

For strategy — Clarify the purpose of each activity, define how and when information will be collected, establish ownership and accountability, outline the process and timeline, and implement regular progress reporting.

What We Heard from the Members (2 of 2)

Eight observations from structured interviews with the Task Force Action Team Chairs and other key stakeholders — what we heard, and what it means for strategy.

5

Desire for internal clarity, communication, and continuity

Heard — Members expressed a desire for greater visibility into project progress, opportunities for engagement, and shared measures of success, while emphasizing the importance of sustaining momentum through leadership/membership transitions.
For strategy — Maintain a simple operating system that clarifies the ways to participate and contribute, designed to sustain and grow established momentum.

6

Need for clear priorities and a unifying focus

Heard — Members emphasized the value of a focused strategic agenda supported by clear priorities and consistent messaging that can be shared across partners and communities.
For strategy — Establish a focused strategic agenda anchored to clear objective and set a narrative that can be easily repeated and used as a rallying cry.

7

Focusing Collective Expertise

Heard While the diversity of expertise, perspectives, and priorities related to perinatal behavioral health is one of the Task Force's greatest strengths, members also acknowledged finite time and capacity to devote to initiatives.
For strategy — Focus the Task Force's collective expertise on a manageable set of high-impact priorities, with clear roles and opportunities for engagement that enable members to contribute their unique perspectives and strengths.

8

Opportunity to expand issue awareness and dialogue

Heard — Strong interest in moving maternal behavioral health into the spotlight for providers across the care continuum, maternal and family support systems, and the community.
For strategy — Embrace the public awareness and targeted communications strategies to reduce stigma, create understanding, and activate more people in the work.

What the Findings Mean for Strategy

Three implications shape the strategic direction:



This is a “focus” moment

As the Task Force enters its next chapter, it should transition from looking at perinatal behavioral health across a breadth of issues to narrowing to a more intentional depth of focus.



Maintain the network

The incredible participation in the Task Force was built in a relatively short amount of time. In order to continue delivering on its purpose, it must maintain and expand its network membership.



Build awareness and engagement

With the foundation of the Task Force established, OPBHTF should leverage its assets to reach more people, mothers and parents, communities, providers, and partners with research- and community-informed information.

SECTION 3

Strategic Framework & Direction

How a Strategic Framework Works

A strategic plan must provide clear focus and direction while staying flexible and adaptable. The framework builds in that agility through three connected components, each answering a different question.

GOAL STATE

Where will we be? — A strategic picture of where OPBHTF will be at the end of the three-year timeline, in service of its mission.

PRIORITIES

What must hold true? — The set of priorities and focus areas that are critical to reaching the goal state, each with strategic purpose that establish the workstreams to activate.

STRUCTURE

How do we deliver? — The structure must facilitate action, organizing people, resources, and activities against the goal and priorities.

Goal State: What We Are Working Toward

By 2030, the OPBHTF has used its expanded statewide network to shift how perinatal behavioral health is talked about, across the care continuum and in communities, to increase understanding so that more people seek, receive, and stay engaged with care.

Why this goal, why now



Building awareness in communities

OPBHTF shapes the messages it develops and tests, the materials it creates and distributes, the trusted messengers it activates across its 600+ member network, and the settings it prioritizes for community-level engagement. A network-driven awareness campaign carried into waiting rooms, faith communities, and family networks by the network members themselves, can be effective.



Reducing barriers to care

The language providers use, the questions they ask, the assumptions they make, and the referrals they offer all influence whether individuals feel understood, supported, and willing to engage in care. OPBHTF can leverage its network and established provider relationships to develop and share resources that promote respectful, person-centered communication and strengthen connections to care.



Sustaining and building network engagement

Building a statewide Task Force of more than 600 members in a relatively short timeframe is an incredible accomplishment and reflects the strong commitment across Ohio to improving perinatal behavioral health. The membership is a core strength of OPBHTF, therefore it's vital that the Task Force membership remains representative, strong, connected, engaged, and energized.

Four Priorities to Activate the Strategy

The strategy is supported by four priorities, each one a distinct function OPBHTF must perform to deliver meaningful outcomes and impact in service to the goal. Together they form the complete arc from building the network to driving change.



INVOLVE

Build engagement and participation

Involve encompasses OPBHTF's work to build and activate the people and relationships that make everything else possible, from the 600+ member network to the parent and family voices that keep the work authentic to the strategic partners who expand capacity and reach.



IDENTIFY

Determine where action will advance outcomes

Identify is the action of defining and elevating key information, experiences, and data that will support the awareness-building and access-to-care initiatives, targeting key audience segments through the most effective, efficient, and authentic methods.



INFORM

Create and share resources to build awareness and understanding

Inform includes OPBHTF's work to generate, translate, and spread knowledge leveraging the network as a communications channel, building the shared understanding that providers, communities, and families need.



IMPLEMENT

Accelerate adoption of practices and protocols

Implement encompasses OPBHTF's work to support better practice on the ground, equipping the providers and systems that touch perinatal mothers to screen more consistently, respond more effectively, and connect people to the support they need.

Priority Detail: Involve & Identify

INVOLVE

Build engagement and participation

- Develop and run flexible and collaborative Task Force engagement strategies to build and sustain membership.
- Clearly define the membership experience and expectations.
- Assess membership to ensure the composition is representative of the care continuum and the target communities.
- Provide members consistent messaging about the Task Force and its work that they can adapt and carry into their own communities.
- Sustain the membership engagement rhythm that includes ways to get involved, onboarding, and recognition so the network grows and stays active.
- Support the formation and management of strategic partnerships and collaborations.
- Plan and execute regular convenings to enable connection, collaboration, learning, and sharing.

IDENTIFY

Determine the actions that will advance outcomes

- Gather and analyze input and data related to improving experiences inside care settings, giving providers and institutions a framework to examine their own culture.
- Create structured opportunities for people with lived experience to share their care encounters and experiences, and carefully document stories, input, and insights.
- Collect, document, and share the reach and resonance of campaign materials through member feedback loops to evaluate what works well.
- Elevate key community experiences and data to identify where targeted messaging will have the greatest impact for specific audiences.
- Use data from screening, referral, and care engagement patterns to identify gaps and prioritize where OPBHTF resources will move the needle most.
- Maintain tracking to ensure that campaign activities reach the target audiences, using the data to identify gaps, trends, and opportunities.

Priority Detail: Inform & Implement

INFORM

Create and share resources to build awareness and understanding

- Develop, refine, update, and run a network-driven awareness campaign with consistent messaging that member organizations and individuals can adapt and carry into their own communities.
- Co-create campaign messaging with parents and families to ensure that messaging is authentic and resonant.
- Translate the campaign into ongoing outreach, awareness building, and engagement communications to support Task Force goals.
- Activate Members as dissemination partners, equipping members with ready-to-use content for social media, waiting rooms, community events, faith settings, and community centers.
- Ensure community-facing outreach and awareness touchpoints include clear, accessible information about where to seek help, what to expect, and how to stay engaged.
- Generate and distribute shareable materials — for social media, waiting rooms, community events, and faith settings — that normalize help-seeking in plain language.
- Build a shared communications resource library that the full network can access, adapt, and deploy.

IMPLEMENT

Accelerate adoption of practices and protocols

- Embed person-centered, trauma-informed language and practice standards into all Task Force screening and referral tools, modeling the cultural shift in every resource the Task Force produces.
- Develop provider-facing content to elevate compassionate care, such as brief trainings, reflective tools, and communication guides, that can be integrated into onboarding, team meetings, and continuing education.
- Publish an Ohio perinatal behavioral health snapshot, translating data and real experiences into a format that providers, and community partners can use.
- Host provider training and peer-learning opportunities that keep the care continuum equipped, with a focus on consistent screening, effective response, and active linkage to support.
- Support adoption of care models that address shame and stigma as clinical barriers, equipping providers with the tools and shared language to reduce them in practice.
- Working with partners and providers, ensure that perinatal behavioral health perspectives are included in broader statewide maternal and infant health strategies.

The Structure: Aligning SAATs to the priorities

Each Strategic Area Action Team should transition to align with and carry forward the strategic priorities. This will be the new structure that enables activation of the strategy. Each Team will have a part to play in the coming years to accomplish the goal.

SAAT	NEW TEAM NAME	Role / Action
	<i>INVOLVE:</i> Advisory Committee	Led by the staff and chairs, responsible for supporting Task Force planning, membership engagement, strategy activation, and partnerships.
Research & Data	<i>IDENTIFY:</i> Data, Research and Evaluation Team	Leveraging subject matter expertise to collect, assess, and shape information and insights to understand where to invest resources and what to deliver.
Public Awareness	<i>INFORM:</i> Public Awareness Team	Maintain a steady drumbeat of campaigns and lived-experience storytelling for the public, providers, and other partners and influencers.
Treatment & Support; Screening & Identification	<i>IMPLEMENT:</i> Screening & Care Continuum Team	Apply and target the public awareness campaign and outreach to address critical moments in the care continuum to advance coordination and provider practices.

Transitioning “SAATs” to Teams, and evolving Chair roles:

In alignment with sharpening the focus of the Task Force, the structure now consists of an Advisory Committee and three Teams. While the SAATs played an important role in the first phase of the Task Force, this new structure will enable greater efficiency and effectiveness in service to the three-year goal. The Advisory Committee will be comprised of the Team Chairs, which will roll over from the SAATs to the Teams.

Note: Policy & Regulation SAAT was retired in January 2026



SECTION 4

Action Plan

Activation Horizons

Activation moves in three overlapping horizons. Each horizon has a different job; none waits for the previous one to finish completely.

NOW

0–6 months

Set the foundation

- Socialize the plan with the action team chairs, funder, and partners for feedback and buy-in
- Adopt the goal state and priorities; transition SAAT Chairs to Committee Chairs and the Advisory Committee
- Convene the Advisory Committee to set year 1 plans
- Publish the strategic framework summary to network
- Define the membership experience and set expectations; Launch the membership engagement rhythm
- Give Task Force a “sneak peek” to the campaign
- Refine and launch Phase 1 of the Public Awareness Campaign

NEAR

6–18 months

Build Momentum

- Plan for an annual convening of the Task Force with a focus on expanding delivery of the public awareness campaign
- Activate members to support delivery of Phase 2 of the campaign
- Publish a perinatal behavioral health snapshot (data + stories)
- Deliver provider-facing content, training and peer exchange to encourage welcoming care environments
- Collect and document real stories to normalize conversations about behavioral health
- Conduct annual planning against each priority

SUSTAIN

18–36 months

Grow & sustain

- Annual review: assess progress against the 2030 goal state and adjust priorities
- Expand campaign reach; document what resonated and build the evidence base
- Deepen provider culture-change work and track activity
- Grow membership with intention: recruit new voices, retain experienced members
- Leveraging the campaign, explore new partnership opportunities to facilitate outreach
- Conduct annual planning; assessment to prepare for next strategic plan

Year-One Action Projects

First-year projects organized by priority, with the lead SAAT chairs or owners. Each project is focused, timely, achievable, and measurable.

Priority	Year-one action project	Lead
INVOLVE	Evolve and manage membership engagement; prepare, guide, and monitor the first annual action plan to deliver on the strategy, setting the model and cadence.	Staff + Advisory Committee
IDENTIFY	Gather and document stories, data, and insights, and translate these to shape outreach, communications, and content.	Data, Research, and Evaluation & Public Awareness Teams
IDENTIFY	Publish an Ohio perinatal behavioral health snapshot (data + lived-experience stories) in year one.	Data, Research, and Evaluation Team
INFORM	Launch the public awareness campaign: co-created messaging, member toolkit (social, waiting room, events), and two campaign cycles in year one (phases 1, 2)	Public Awareness Team
INFORM	Build and publish the shared public awareness campaign resource library that network members can access, use, and deploy.	Public Awareness Team
IMPLEMENT	Work with providers to determine opportunities to create welcoming care environments and normalize behavioral health conversations.	Screening & Care Continuum Team
IMPLEMENT	Promote applying person-centered language into screening and referral tools; deliver provider-facing stigma reduction guidance content.	Screening & Care Continuum Team

Immediate Next Steps

Six near-term actions to adopt, communicate, and begin delivering the strategy.

1

Adopt the plan

The Task Force formally adopts the goal state, four priorities, and transition to Teams at the next full convening. Prepare a tracking dashboard to monitor strategic activation progress.

2

Socialize the plan

Share the strategic framework with the full 600+ member network through a summary document, member communications, and Team briefings — so every member understands the direction and their role in it.

3

Seat the Advisory Committee

Communicate Team changes to Chairs; establish the Advisory Committee and conduct first meeting within 60 days of adoption.

4

Launch the engagement cadence

Staff launches the membership engagement rhythm and works with the Advisory Committee to set the Year-One action projects within 90 days of adoption.

5

Refine the public awareness campaign

Working with the leads and team, finalize campaign messaging, materials, and target audiences, ensuring the campaign is co-created, in plain and respectful language, and ready to activate.

6

Plan for phase 1 of the campaign launch

Launch the next phase of the public awareness campaign with Task Force support, leveraging the network by giving them tools and guidance for how to help deliver the campaign.

How We Will Know the Strategy Is Working

Measures are tied to each priority and ask two questions: Is the work happening? And is it moving the needle on awareness and engagement, stigma reduction, and care integration?

INVOLVE

Membership retained and growing · Advisory Council active and convening · Parent and family voices engaged · Members report a clear, meaningful way to contribute

IDENTIFY

Stories, insights, and perspectives collected and documented · Snapshot published · Audience and channel analysis informing campaign decisions · Feedback loops closed visibly (“you said, we did”)

INFORM

Campaign cycles delivered on schedule · Member toolkit accessed and adapted by network · Person-centered language present in all network materials · Reach and resonance documented through feedback loops

IMPLEMENT

Screening and referral tools to improve care experiences · Provider training events delivered · Increase provider participation

Create a **dashboard** to track activation of the strategy against the priorities and to inform annual reporting and planning.



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Thank You

Prepared in collaboration with Plentiful

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