

# MONTANA



## A State Child Health Policy Agenda 2020 and Beyond

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Priorities and recommendations to foster child health and well-being, achieve health equity, eliminate health disparities, optimize lifespan outcomes, strengthen families, support our communities, and enhance the position of Montana as a leading state for children.

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# Policy Goals

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## PROMOTE HEALTHY CHILDREN

All children, adolescents, and young adults from birth to the age of 26 years must have access to the highest-quality health care, so they can thrive throughout their lifespan. Policymakers must ensure that all children, regardless of their race, ethnicity, income, family composition or immigration status have:

- equitable, non-discriminatory access to affordable and high-quality health care coverage,
- insurance with comprehensive, pediatric-appropriate benefits,
- access to needed primary and subspecialty pediatric care and mental health services,
- access to necessary COVID-19 services, supports, and treatments, and
- comprehensive, family-centered care in a medical home.

## PROMOTE SECURE FAMILIES

Together we can work to advance efforts to ensure that parents can give their children the best foundation for the future. Policymakers must ensure that all families have:

- work that provides a stable and adequate income and family-friendly benefits, including paid family medical and sick leave,
- safe, secure, and non-discriminatory housing,
- affordable and safe high-quality child care,
- access to adequate, healthy, nutritious foods throughout the year, and
- resources to support family placement and permanency within the child welfare system.

## PROMOTE STRONG COMMUNITIES

Strong communities are the building blocks for secure families and healthy children. Policymakers must ensure that communities:

- are safe from violence and environmental hazards,
- provide high-quality early education, especially in segregated urban, suburban, and rural communities,
- support public health systems that protect children from infectious diseases and support maternal and child health, and
- respond effectively when disasters and public health emergencies occur.

## ENSURE OUR STATE IS A LEADER FOR CHILDREN

Child health and well-being must be elevated and maintained as a priority in our state. Policymakers must develop and implement policies that:

- acknowledge racism as a public health crisis and work towards reducing racism through interdisciplinary partnerships with organizations that have developed campaigns against racism,
- fund and support public health and health services to help children grow into healthy adults,
- address environmental health and climate change issues that affect children, and
- address factors that make some children more vulnerable than others, such as race, ethnicity, religion, immigration status, sexual orientation or gender identity, and disability.

# Advocacy Agenda

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## Montana Chapter | American Academy of Pediatrics

### ACCESS TO CARE

Rates of uninsured children are climbing. Supporting adults' access to health insurance improves child health as well. Children with special health care needs are particularly at risk. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Investigate the causes of a rise in uninsured children in the state,
- Reduce unnecessary barriers to enrollment in insurance programs such as Medicaid and CHIP,
- Continue Montana's commitment to Medicaid expansion for all eligible residents, without unnecessary administrative barriers, and
- Actively work to find strategies to increase the availability of home nursing for children with special health-care needs and technology dependent children.

### EARLY CHILDHOOD EDUCATION

An investment in high-quality, universal early childhood education is an investment in the future of our state.

As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Increase state funding for Early Head Start and Head Start programs,
- Collaborate to support access to other high quality child care programs throughout the state,
- Improve child care providers' abilities to address child safety and health emergencies, and
- Address food insecurity in child care settings by supporting healthy meals.

### MENTAL AND BEHAVIORAL HEALTH

Montana leads the nation in suicide rate, and suicide is particularly high among the Native American population. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Support training for schools, community, clinical and behavioral health service providers on recognizing warning signs and preventing suicide,
- Fund a robust, coordinated system of first-line outpatient mental and behavioral health care, to include school-based psychologists, social workers and counselors,
- Encourage the implementation of strategies to reduce access to guns and other lethal means of suicide for teens who are at risk, and
- Develop and support programs for screening, brief intervention and referral to treatment for substance use disorders, mental health issues and suicide.

# Advocacy Agenda

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## Montana Chapter | American Academy of Pediatrics

### CHILD POVERTY AND FOOD INSECURITY

Poverty affects many of Montana's children, with 64,000 living below 150% of the Federal Poverty Level. More than 18% of Montana's children live in a food-insecure household. Participation in the Supplemental Nutrition Assistance Program (SNAP) and Women, Infants, and Children program are at 39% and 59%, below the national average. Living in poverty means children may not have access to food, secure housing, and quality health care. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Support aggressive action to reduce food insecurity among children, including increasing access to meals in childcare and school,
- Increasing Montana's participation in the Supplemental Nutrition Assistance Program (SNAP) and the Women, Infants, and Children (WIC) program,
- Raise the minimum wage, which has been shown to have a strong positive effect on working families.

### VAPING

According to the 2019 Montana Youth Risk Behavior Survey, 58% of high school students have tried e-cigarettes or electronic vapor products, and 30% are current users. As teen vaping reaches epidemic levels, Montana must act now to keep nicotine addiction from overwhelming a new generation. Vaping is unsafe for teens, and teens who vape are also more likely to smoke. In addition, Montana has had several confirmed cases of acute lung injury related to vaping. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Pass a permanent ban on flavored nicotine and THC products, including mint and menthol flavors, and including disposable products,
- Amend the Clean Indoor Air act to include e-cigarettes, in order to get e-cigarettes out of public places,
- Provide resources to teens and young adults trying to recover from nicotine addiction, and
- Appropriately fund and support enforcement activities.

### LGBTQ YOUTH

Montana's LGBTQ youth are at risk for bullying and associated mental health issues. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Add sexual orientation and gender identity as protected classes against discrimination, Bullet point
- Prohibit conversion therapy for minors, and
- Provide all appropriate mental and physical health care for LGBTQ youth.

# Advocacy Agenda

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## Montana Chapter | American Academy of Pediatrics

### SUBSTANCE USE AND FOSTER CARE

According to the Montana Department of Justice, 65% of children are placed in foster care due to parental substance abuse. Our foster care system is overwhelmed. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Increase access to both outpatient and inpatient substance use disorder treatment for parents, and especially programs able to treat pregnant women,
- Increase access to both outpatient and inpatient substance use disorder treatment for parents, and especially programs able to treat pregnant women,
- Improve access to health services for children and teens in foster care, including services that serve youth up to age 21, and
- Support initiatives to improve support for families working towards reunification.

### CHILDHOOD IMMUNIZATIONS

Montanans are susceptible to vaccine-preventable diseases when immunization rates fall below 95%. Unfortunately, active misinformation and ease in obtaining nonmedical exemptions is leading to a falling childhood immunization rates, which places children's health and safety at risk. As Montana's pediatricians, we commit to work collaboratively with decision-makers to:

- Reinforce the importance of routine child immunization and actively counter misinformation,
- Increase ease of tracking vaccine status to ensure children stay up to date, by changing the state immunization registry from "opt in" to "opt out" participation, and
- Eliminate nonmedical exemptions to vaccination.

### CLIMATE CHANGE

Children are uniquely vulnerable to environmental contaminants, from air pollution to the effects of climate change. In addition, children face disproportionate exposure to environmental factors that negatively affect health; they breathe faster than adults, spend more time outside and have lungs that are still developing. Montana pediatricians support the American Academy of Pediatrics' belief that aggressively addressing climate is necessary, and that to do otherwise is an injustice to our children.

- Shift Montana towards renewable energy and increasing energy efficiency.
- Lessen the effects of air pollution on Montana children.
- Reduce greenhouse gas production.