

# **BLUEPRINT FOR CHILDREN**



# 2019 ARIZONA

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

# **Building a healthy future**

#### **Policy Goals**

#### PROMOTE HEALTHY CHILDREN

All children 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 immigration status:

- have affordable and high-quality health care coverage,
- have insurance with comprehensive, pediatric-appropriate benefits,
- · have access to needed primary and subspecialty pediatric care and mental health services, and
- receive comprehensive, family-centered care in a medical home.

#### SUPPORT 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,
- safe and secure housing,
- affordable and safe child care.
- access to adequate, healthy, nutritious foods throughout the year, and
- resources that support positive parenting skills training.

### **BUILD 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 programs,
- 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 policy that:

- funds and supports public health and health services to help children grow into healthy adults,
- addresses environmental health and climate change issues that affect children, and
- addresses factors that make some children more vulnerable than others, such as race, ethnicity, religion, immigration status, sexual orientation or gender identity, and disability.

# 2019 Advocacy Agenda

### **Arizona Chapter | American Academy of Pediatrics**

## **Assuring Continued Access to KidsCare**

The Arizona Children's Health Insurance Program (CHIP), KidsCare, finances quality health coverage for more than 88,000 children in families with incomes too high to qualify for Medicaid but too low to afford private health coverage. Medicaid and CHIP work together as a lifeline for children and families with benefits that cover a comprehensive array of medically necessary services, including developmental, vision and hearing screenings. Evidence shows that children enrolled in CHIP and Medicaid are more likely to get check-ups, miss less school, graduate college, have higher earnings and be healthier as adults than their uninsured peers. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- repeals or amends the current state enacted law that immediately freezes enrollment if federal funding decreases,
- encourages the state to appropriate funding to keep the KidsCare (CHIP) program at current levels as the federal funding match decreases, and
- opposes any efforts to destabilize Medicaid through capped funding or other policies that limit access to quality, comprehensive and affordable care.

# **Health and Safety of Immigrant Children**

More than 1 in 8 Arizona residents is an immigrant, while nearly 1 in 5 is a native-born US citizen with at least one immigrant parent. Immigrant children are more likely to live in poverty and struggle in school as well as face other disparities. These disparities, coupled with the stress and threat of possibly losing their parents to deportation or detention, can take a toll on these children. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- advances policies that support, protect and promote the health of immigrant children,
- opposes the practice of separating the migrating children from parents or caregivers at the border,
- ensures that no children will be forced into detention since even short periods of detention can cause psychological trauma and long-term mental health risks,
- monitors, investigates and improves the quality of care and treatment families receive while in the federal government's custody,
- prevents public charge proposals that could deter families' willingness to access nutrition support, housing assistance, and health care, and
- improves opportunities for immigrant children to enroll in early childhood education programs to help narrow developmental achievement gaps.

#### **Childhood Immunizations**

The percentage of Arizona children entering kindergarten who are up to date on the immunizations that protect against whooping cough, tetanus, diptheria, polio and measles is now less than 95%. The Arizona

Department of Health Services (ADHS) advises that at least a 95% vaccination rate among children in school is necessary to maintain public health and safety. Thus, our current vaccination rate makes it possible for these vaccine-preventable diseases to spread quickly through schools and the wider community, endangering the health of children and other members of the community. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- supports ADHS in developing policies and safeguards related to school-required immunizations, and
- develops systems to adequately inform Arizona parents about the risks prior to receiving a nonmedical exemption from school entry immunization requirements such as implementing webbased educational programs required to be completed by parents considering a nonmedical exemption for their child, and
- supports appropriate payment delivery systems for immunization services and vaccine acquisition as critical components to ensure children are fully vaccinated and protected against vaccine preventable diseases across the population.

# **School Safety and Gun Violence Prevention**

The absence of guns in homes and communities is the most reliable and effective measure to prevent firearm-related injuries in children and adolescents. Over the last 6 years, the Arizona child firearm mortality rate has steadily increased. 63% of these firearm deaths occurred in the child's home and 51% of these deaths involved guns owned by parents. AzAAP is committed to protecting children from firearm-related injury and violence through the strongest-possible legislative and regulatory approaches to reduce children's accessibility to guns. Gun violence is a public health threat, and Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- enacts Child Access Prevention (CAP) laws that enforce safe storage practices including the use of trigger locks, lock boxes, and gun safes,
- places a ban on the sale of assault weapons and high capacity magazines to the general public,
- increases the minimum purchase age for firearm and ammunition purchases to 21,
- enforces a system of comprehensive and enforceable background-check laws for firearm purchases which take place through a licensed dealer and closes the unregulated private seller loophole,
- enacts Extreme Risk Protection Orders or gun violence restraining orders which allow families or law
  enforcement to petition a judge to remove a firearm from the possession of a person deemed at risk of
  harming themselves or others,
- ensures children and their families have access to appropriate mental health prevention and services, particularly to address the effects of exposure to violence, and
- supports further gun violence prevention research, public surveillance and training.

### **School Mental Health and Suicide Prevention**

In the U.S., nearly 1 in 5 children have a mental, emotional, or behavioral disorder. Children with these disorders benefit from early diagnosis and treatment. Unfortunately, challenges such as lack of access to appropriate mental health providers, cost, insurance coverage, and the time and effort involved in coordinating care, make it difficult for families to get mental health care for their children. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

promotes mental health and suicide prevention as a core component of health care services,

- supports training programs for schools, community, clinical and behavioral health service providers on suicide prevention and other mental health disorders,
- appropriates funding to increase the number of school-based psychologists, social workers and counselors to ensure children and their families have access to appropriate and coordinated mental health prevention services,
- develops emergency protocols for clinicians, first responders, crisis staff and others on how to communicate and collaboratively manage children and teens who pose a threat to themselves or others, and
- encourages the implementation of safety strategies to reduce access to guns and other lethal means for those at risk.

#### **Prevention Services**

The Family First Prevention Services Act, a comprehensive federal effort to improve how the child welfare system serves children and families in adversity, offers Arizona much-needed federal funding to support mental health, substance abuse and in-home parenting skills programs for families of children at-risk of entering foster care. The law addresses and provides program funds to address the unique and complex medical needs of children and families in adversity as they are more likely to be vulnerable and exposed to trauma. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- develops and improves evidence-based prevention programs to equip families in meaningful progress toward protecting their children,
- applies resources to strengthen families so children can remain safe in their homes or in a kinship placement,
- removes barriers from kinship placement programs to allow relatives to safely care for children and maintain important family connections, and
- ensures that children in foster or out-of-home care receive the services they deserve and are being placed in the most family-like settings possible.

# **Child Passenger Safety**

There is strong evidence that child safety seat laws are effective in increasing child safety seat use. Motor vehicle crashes are the leading cause of accidental child and adolescent death in Arizona. In 2017, motor vehicle crashes were responsible for 65 child deaths. Child safety seats reduce the risk of death in passenger cars by 71% for infants, and by 54% for toddlers ages 1 to 4 years. Missing from Arizona's child passenger laws are requirements for safety seats to be rear-facing until age 2 years and rear seat requirements for older children. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- requires infants remain rear-facing until the age of two while permitting forward-facing if the child weighs at least 40 pounds and the child is secured in a manner that complies with the height and weight limits specified by the manufacturer of the car seat,
- ensures young children ride in car safety seats with a harness until at least age 4 years, with guidance
  educating parents and caregivers about the benefits of riding in a seat with a 5-point harness up to the
  highest weight or height allowed by the manufacturer,

- recommends school-aged children ride in belt positioning booster seats until at least age 8 years or until the seat belt fits correctly, as described by the AAP and National Highway Traffic Safety Administration (NHTSA),
- advocates for children to ride in a rear seat until age 13 years, and
- imposes seat belt laws apply to all vehicle occupants and should be subject to primary enforcement.

# **Decreasing Nicotine Use By Children and Teens**

Tobacco is the No. 1 cause of preventable death in the United States, and about 95% of all adult smokers start before the age of 21. More than 480,000 Americans die each year from tobacco use, including 8,300 in Arizona. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- supports important strategies for preventing youth smoking exposure and initiation,
- enacts legislation to raise the minimum age to purchase tobacco, e-cigarettes and similar devices to 21 years of age,
- enforces laws and regulations prohibiting the sale of tobacco, e-cigarettes and similar devices to minors, and
- appropriates funding for enforcement activities,
- prohibits youth point-of-sale advertising for tobacco, e-cigarettes and similar devices.

#### **Skin Cancer Prevention in Children**

Rates of skin cancer—including melanoma, the most serious form of skin cancer—continue to rise, even in young people. Protecting children against overexposure of dangerous sun and artificial sun (UVR) rays is particularly important to prevent or reduce the lifetime chance of developing skin cancer and other skin damage. Arizona pediatricians are committed to partnering with decision-makers to develop and implement policy that:

- preserves statutory protections that permit school-aged children to carry and apply sunscreen while at school without a note or prescription,
- passes legislation to ban minors' access to tanning salons and work to ensure that such legislation is enforced,
- supports campaigns to raise awareness among children, adolescents, and parents about the dangers of exposure to artificial sources of UVR and overexposure to sun.