

AGENDA FOR NEW MEXICO'S CHILDREN

A Project of the New Mexico Pediatric Society

New Mexico's greatest natural resource is our children and our future is in their hands. Yet, a majority of our children lack access to the opportunities that all kids need to reach their full potential. If our children are not on the path to success, neither is our state. Effective solutions exist, but they require bold and immediate action. Interventions are most powerful when delivered in a child's first years of life. What's more, success is generational: by improving the outcomes of today's children, we also improve our potential as a state.



The Agenda for New Mexico's Children draws attention to the most urgent needs of children and families and makes achievable recommendations for improving our children's lives. New Mexico will thrive when the needs of our children and families are addressed. Therefore, we look to our elected officials as partners in the effort to make the health of New Mexico's children a top priority in the following ways:

LEADERSHIP AND COLLABORATION

A shared vision and plan for collaboration across state government to address child health priorities is needed.

Recommendations:

- 1) Reinvigorate and direct the New Mexico Children's Cabinet to engage with stakeholders such as pediatricians, educators, research universities, and the business community to create an overarching, collaborative vision uniting health, social services, and the education of children; and,
- 2) Designate resources and staff support for the Children's Cabinet to assist leaders, members, and stakeholders with establishing program objectives, defining infrastructure needs, coordinating and integrating programs and services, optimizing the use of available funds for children's services, streamlining duplication of efforts, and advocating for enhanced resources to address gaps in programs, services, and care.

ACCESS TO CARE

Efforts to enhance access and innovation, and to limit fragmentation and inefficiency, are vital to ensuring a robust child health system in New Mexico.

Recommendations:

- 1) Facilitate collaboration between New Mexico's major health systems, (i.e., Presbyterian Health Care Services and the University of New Mexico), to provide specialized health services to children and their families in a strategic and integrated fashion to maximize resources, improve care coordination and health outcomes, and capitalize on the strengths of each system;
- 2) Assure that children in need of specialty services can access services in a timely and coordinated fashion without unnecessary travel or other hardship; and,
- 3) Ensure New Mexico adolescents have access to reproductive health information and a full range of contraceptive options including long-acting reversible contraceptives (LARCs).

HEALTH CARE

All children deserve access to needed medical care. In New Mexico, however, there are inequities in obtaining care for children. Healthy kids are more likely to attend school, be ready to learn, and graduate from high school and college, while poor health in childhood can have lifelong consequences.

Recommendations:

- 1) Increase the state's commitment to Medicaid, even if that requires revenue enhancement;
- 2) Expand outreach and decrease barriers to enrollment to ensure all eligible children (and adults) are enrolled, maintain retroactive eligibility, and implement express lane eligibility (ELE);
- 3) Explore innovative opportunities within Medicaid to help address social determinants of health, such as expanded home visiting, community health programs, and provision of legal services for problems that directly affect health; and,
- 4) Ensure access to needed health care services for those most vulnerable including immigrant families, children with special health care needs, and those in rural/under-served areas.

HOME VISITING

Currently, high-quality home visiting is only available for a minority of New Mexico's of newborns.

Recommendations:

- 1) Support the development and delivery of high-quality home visitation services by the year 2020 for all newborns in families insured by Medicaid; and,
- 2) Maximize federal Medicaid matching funds to expand home visiting capacity.
- 3) Fully fund the Families, Infants and Toddlers (FIT) program budget to support the growth in children being served as well as implementing the rate increase as recommended in the 2017 FIT Provider Rate Study.

EDUCATION AND LITERACY

Currently, New Mexico ranks 50th among all the states for education, and 74% of fourth graders in the state are not proficient in reading. More than a third of New Mexico schools were rated "D" or "F" by the NM Public Education Department in 2016.

EDUCATION AND LITERACY

Recommendations:

- 1) Improve school readiness by increasing access to, and funding of, high-quality early childhood education programs;
- 2) Commit to making early childhood education programs available to all of New Mexico's children by 2022;
- 3) Adopt comprehensive child health, curriculum, quality, and safety standards for all early childhood education programs;
- 4) Fully fund early literacy programs, such as Imagination Library and K-3 Plus; and
- 5) Renew the New Mexico Early Learning Advisory Council.

CHILDHOOD OBESITY/PHYSICAL ACTIVITY

Currently, New Mexico has the 12th highest rate of Type 2 diabetes in the United States. Strong state policies to improve access to healthy food and increase physical activity for children are needed to prevent development of obesity that leads to Type 2 diabetes.

Recommendations:

- 1) Support the Children's Fitness, Physical Education and Obesity Task Force proposed by Senate Joint Memorial 2 (Second Session, 2016), which requests a task force to assess the role of elementary school physical education in reducing obesity in children and to develop a plan to increase weekly instruction to improve children's fitness;
- 2) Support improved access to affordable healthy foods (e.g., fruits and vegetables) by maximizing federal funds; and,
- 3) Support a plan for more safe parks, playgrounds, bike-ways, and sidewalks that facilitate physical activity to help children and families maintain healthy weights.

SUBSTANCE ABUSE AND OPIOID ABUSE

Over the last decade there has been a parallel rise in the prevalence of prescription opioid abuse and the incidence of neonatal abstinence syndrome (NAS). Children with NAS are at a higher risk for developmental delays. In 2015 the rate of NAS in our state was 9.6/1000—one of the highest in the nation. New Mexico has consistently high rates of drug-induced deaths, and opioid-related treatment admissions have been increasing.

Recommendations:

- 1) Increase funding for youth-specific, evidence-based treatment programs and work to raise awareness of opioid use among youth;
- 2) Increase availability of opioid overdose rescue drugs (i.e., naloxone/buprenorphine) and treatment through practitioner incentives and training; and,
- 3) Engage stakeholders—including UNM Milagro/FOCUS programs, the NM Department of Health, Medicaid managed care organizations, and the Perinatal Collaborative—to implement shared and statewide care models of newly delivered mothers and their infants with integrated early intervention activities, with the goals of:
 - initiating and continuing treatment of maternal substance use disorder and mental health needs;
 - lowering barriers, including social determinant factors which can impede comprehensive care; and
 - mitigating related adverse childhood experiences (ACEs).

BEHAVIORAL HEALTH

In 2015, 32.5% of New Mexico's youth reported feeling sad or hopeless, putting them at higher risk for smoking, binge drinking, and illicit drug use. Suicide is the second leading cause of death for youth 10 to 24 years of age. Yet families consistently report being unable to access behavioral health services for their children.

Recommendations:

- 1) Commit to funding, developing, and providing needed behavioral health services for children and youth;
- 2) Recruit and train behavioral health providers to serve New Mexico's children and youth; and
- 3) Support policies that promote socio-emotional screening and referral for young children and their parents (two-generation approach), using validated tools.

CHILD PROTECTION

Access to needed medical evaluations and related investigations for alleged child abuse and neglect are lacking in our state and require collaborative improvement efforts.

Recommendations:

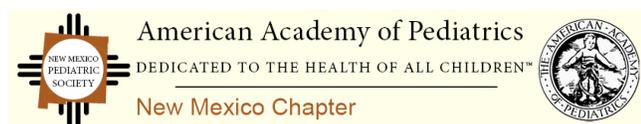
- 1) Ensure Protective Services has adequate staffing to investigate all reports;
- 2) Require appropriate payment for medical evaluations for these programs to ensure quality and solvency; and,
- 3) Ensure that such services are readily available throughout the entire state.

FIREARM INJURY AND VIOLENCE

Children in New Mexico, ages birth to 19, are killed by guns at a rate almost 60% higher than the national average and are murdered by guns at a rate almost 40% above the national average. In 2010, New Mexico ranked 6th and 7th in these measures, respectively.

Recommendations:

- 1) Enact common-sense firearm policies that includes universal background checks, addressing firearm trafficking, and encouraging mandating safe firearm storage in homes where children are present; and,
- 2) Ensure access to appropriate mental health services, particularly to address the effects of exposure to violence.



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