# Supporting Children with Disabilities: Lessons from the Pandemic

Explore promising approaches and innovative strategies employed during the pandemic to address challenges faced by children with disabilities and their families, including access to clinical service and treatment needs, home caregiving, and mental health treatment with an emphasis on underserved/under resourced children and families

Consider policies and/or practices that might be sustained or implemented beyond the pandemic to support children with disabilities and their families

#### Welcome to Day 3 of the Workshop

- Today we will cover Public Health and Emergency Planning as well as Planning for Recovery
- You may find the agenda and the slides from our presentations if you scroll down the page you are on now to the bottom
- ASL interpretation is available as is live captioning
- We encourage discussion and questions in the "ask your question" section just below the video player



# Advancing Services for Children with Disabilities: Reflections and Thoughts

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## Themes to Support Children with Disabilities

Engaging people with lived expertise

Partnerships and coalitions

Flexibility

Technology

Children with disabilities have rights

Coordination and communication



# Engaging Lived Expertise

- Formalize relationships
- At every stage
- "Nothing about us without us!"
- Pay families for what they do



# Partnerships & Coalitions

- Use existing structures such as family-to-family networks
- To make real change MCHB can lead coalitions
- Undo structural hierarchies



### Flexibility

- Medicaid waiver flexibilities should be extended
- Schools need to maintain flexibility to serve children as risks and needs change
- Remove administrative roadblocks



### Technology

- Continued payment for telehealth services
- Make broadband a public good
- Recognize preferences for technology use



Children with disabilities have rights

- These rights cannot be an afterthought
- Utilize laws to assure access
- Clarify EPSDT care coordination benefit
- Increase the Federal Medicaid Assistance Percentage



Coordination and Communication

- Focus on what children and families need
- MCHB can foster across sector coordination
- Find the right stakeholders
- Communications should be cultural responsive
- Title V registries can help coordinate in future emergencies and for services generally



Education **Health Care** Access and Access and Quality Quality Poverty is a major barrier to good health + health Neighborhood equity **Economic** and Built Stability Environment احاحاحا Children with disabilities are Social and

Community Context

disabilities are more likely to be poor than other children

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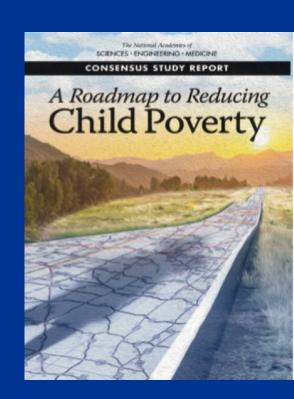




# Reducing Child Poverty by 50% in 10 Years

- Convert the Child and Dependent Care Tax Credit to a fully refundable credit that concentrates benefits to the families with the lowest incomes
- Increase the Supplemental Nutrition Assistance Program
- Increase housing vouchers (accessible housing for children with disabilities)
- Expand the Earned Income Tax Credit to increase payments

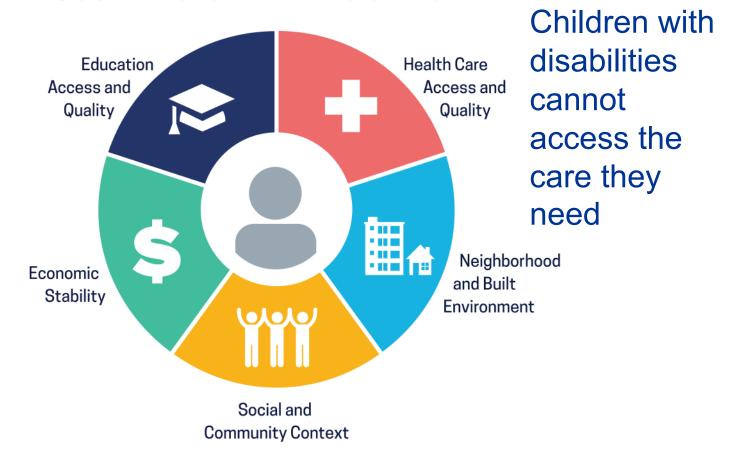




# Address Policies That Keep People with Disabilities Poor

- Reduce burden of accessing programs that support economic stability
  - Single point of entry
- Eliminate Sub-minimum wage
- Extend FMLA coverage
- Expand Vocational Rehabilitation programs (partnering with schools and Title V services)
- Make sure home and community-based services are covered and available for all who need them
- Recognize the extra cost of having disabilities and pay families
  - Revolutionize Supplemental Security Income





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# Medically Underserved Populations

- May face economic, cultural, or language barriers to health care
- Face a shortage of primary care health services

https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation

 Authorize people with disabilities as a "health disparities population" under 42 USC Section 285t(d)(1)

https://ncd.gov/publications/2021/ncd-letter-nimhd-ahrq-health-disparity-population-designation

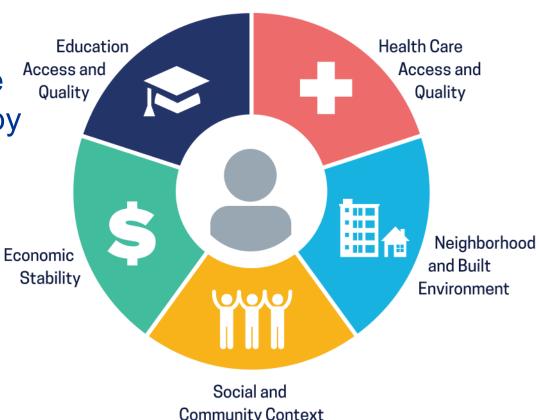


### Federalize Medicaid

- Cover all children and young adults
  - Destigmatize minoritized and poor children
  - Eliminate churning
  - Eliminate the need for children to be covered by private insurance (increase flexibility for families who are often tied to jobs because of the adequacy of their private insurance)
  - Decrease administrative hurdles and burdens
- Fund to fully realize EPSDT
- Fund to fully realize the promise of Olmstead (HCBS)
- Pay providers appropriately for their services
  - Preventative services
  - Care coordination (including across sectors)
  - Team based care
  - Address family needs



Children with disabilities are underserved by their schools



**Community Context** 

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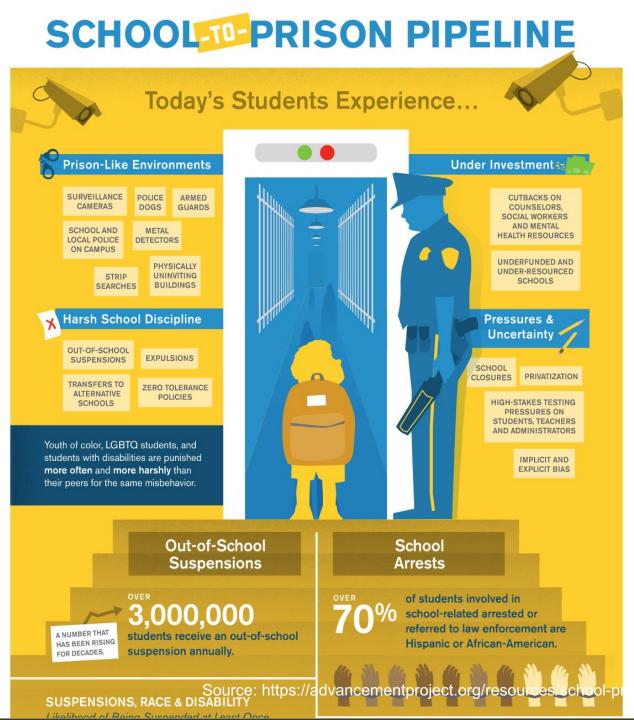




### **Addressing Educational Inequities**

- Eliminate the divide between rich schools and poor schools
  - Use a strategy to re-align funding
- Provide things children need at school
- Prioritize funding for special education services
- Use evidence-based strategies to promote inclusion and self-determination
- Foster relationships with other sectors that serve children and youth with disabilities





- Behavior & Discipline problems thought as criminal problems
- Fewer nurses
- Fewer counselors

More resource officers

on-pipeline-infographic/

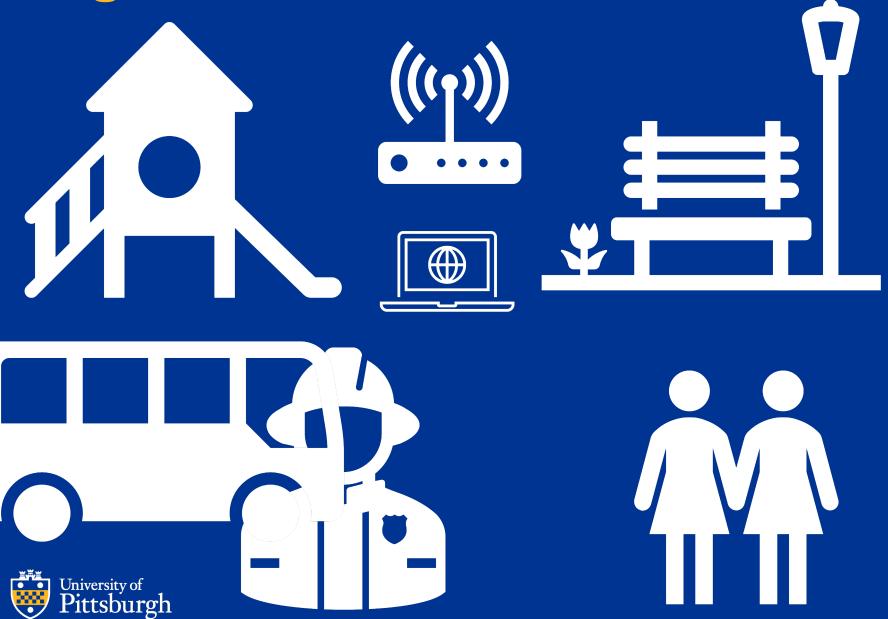


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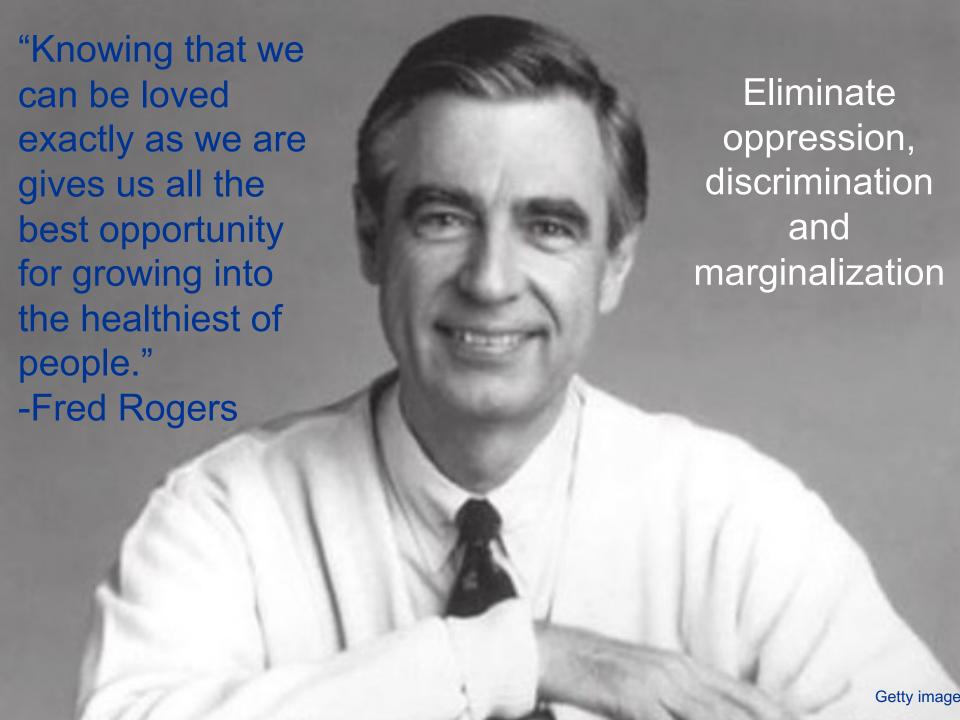


### Neighborhoods









### **Actions to Address Discrimination**

- Assess one's own implicit biases
- Create and assess programs/interventions through a health equity lens
- Involve the people who are being marginalized in the planning, creation, implementation and assessment of programs and services
- Leverage medical-legal partnerships
- Teach professionals about ableism and how it impacts how they evaluate and treat/address the needs of children with disabilities



collaborate community flexibility simplify telehealth empower flexible strength-based engage equitable innovate trust families technology care lived-expertise knowlege navigate diverse payment-reform listen leverage title-v share train family



- 1) All need to row in the same direction to achieve our transformational goals
- 2) We have ample examples of programs, services and supports that should be continued

