

PAES/Invest in Kids Working Group Meeting

Monday, March 24, 2008

Renee Jenkins, MD, President, American Academy of Pediatrics

Dina Lieser, MD, Executive Director, Docs For Tots

Laura Jean Shipley, MD, Co-director and Co-founder, Pediatric Links with the Community, University of Rochester

Jeff Kaczorowski, MD, Co-director and Co-founder, Pediatric Links with the Community, University of Rochester

Medical professionals treat the health of children and families, but they also understand that illnesses can be caused by more than just germs. In fact, more doctors are becoming advocates for their patients' overall well-being, not just their physical health, and are using their medical expertise to identify other reasons for their patients' poor health. At this Invest in Kids/PAES Working Group meeting, leading pediatricians Renee Jenkins, Dina Lieser, Laura Jean Shipley, and Jeff Kaczorowski discussed their individual work in advocating for and investing in young children's overall health, including education, nutrition, and the production of well-trained child care professionals.

Dr. Jenkins began the discussion by highlighting the work of the American Academy of Pediatrics. As the current President of AAP, she credits former President Jay Berkelhammer for partnering with both PAES and America's Promise to promote investments in early childhood. Dr. Jenkins presented UNICEF's overview of child well-being and pointed out the United States' very low ranking, relative to other comparable countries, on several measures. Despite being a wealthy, industrialized country, there is much work needed to be done.

As AAP continues to grow, it has found increasingly strong links between health and education. Dr. Jenkins emphasized the critical role of pediatricians in addressing school readiness, as well as childcare and other economic investments made in early childhood development and noted that children's path to education starts long before they enter kindergarten. In this context, AAP is quickly becoming an important resource for groups and organizations, providing technical assistance, web-based information, and trainings to early education teachers. The organization is expanding its work by identifying leaders to continue this mission, meeting with stakeholders, and developing a plan to move forward to the next phase.

Dr. Lieser continued the discussion by explaining Docs For Tots' role as an advocacy organization that supports doctors who are interested in doing more for children than providing traditional one-on-one medical care. She pointed out that the typical medical model is disease-based, so doctors tend not to treat problems until there is a clinical reason, which can be too late. Early childhood development has a profound impact on health, and the opportunity to invest in early intervention methods can prevent various health implications later on. Furthermore, public opinion has strongly suggested that doctors are considered to be trusted and effective messengers of early childhood well-being. Docs For Tots supports doctors in their advocacy efforts by encouraging them to advocate for young and other social justice issues in various ways, such as testimonies, reports, and by lending quotes. The focus is on early childhood and social justice issues. She asks, "How do we get beyond band-aids?"

Docs For Tots also believes that the clinical setting is an underutilized opportunity for professionals to intervene. By sharing tools with physicians, introducing methods to work with patients in their training that includes working with families, and developing other opportunities for residents to

change their professional development, Docs For Tots hopes to provide doctors outlets to continue their advocacy work.

Drs. Shipley and Kaczorowski presented a community case study of how investments in young children became a local priority to develop positive economic returns. In Rochester, NY, children's programs had been the first to be cut, and many vulnerable children were left without resources. In 2003, this trend began to reverse: community members and professionals rallied to save preventative programs for at-risk children. In particular, physicians, a previously untapped source for advocacy of these programs, helped to restore funding for those programs. This new network of advocates created a dialogue between physicians, community leaders, and policy makers.

In conclusion, the Rochester pediatricians attribute the city's successful promotion of investments in kids to the partnership in Rochester between public and private funders, and 25 active community-based organizations. They believe that pediatricians were not formerly a part of this partnership due to a lack of training, knowledge, and education. Their future work thus focuses on improving such training.

The audience then had a chance to ask questions and discuss with the presenters.

**Rochester:** Dr. Kaczorowski clarified that some of the programs in Rochester were built upon existing work, but others were newly created to address the needs of the community. In terms of replicability, Dr. Jenkins adds that stakeholders tend to commit themselves to proven programs, and so such development of new programs may be difficult to produce in other places. While public funding was a major factor, NFP, for example, was privately funded.

**Proven programs:** Drs. Shipley and Kaczorowski suggested that the most effective and proven programs be widely implemented because trying to "reinvent the wheel" can be difficult to pitch to both the public and policymakers. They believe that prevention is an important angle to use. At the same time, we must continue to evaluate programs so that we have more choices of "proven" investments moving forward. It is also important to not repeat mistakes as much as cutting programs simply because they are not evaluated. Dr. Jenkins added that there are also limitations to evaluations, for example small sample sizes and a lack of funding.

Participants were also concerned that children's programs will suffer as a result of the current economic slowdown. Some believe that one potential solution is shifting funds from inefficient programs to ones that work, but they acknowledged the political difficulties of such shifts.

**Resources:** Several participants were interested in finding resources for other proven programs throughout the country. Fortunately, PAES continues to develop a repository of information of such programs through its website and materials.