

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



# Advocacy Report

Summer 2023



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With a wide array of child health issues under consideration in Washington and the states, the AAP and AAP state chapters continue to lead efforts to advance policies that optimize the health and well-being of children and adolescents while speaking out against harmful proposals that threaten to undermine these goals.

On May 11, the national emergency and public health emergency (PHE) designations related to the COVID-19 pandemic ended, marking a significant shift in the federal government's approach to the pandemic and a recognition that policymaker attention to the coronavirus is waning. The Academy continues to advocate for pediatricians and families in response to the impacts of the COVID-19 pandemic and articulate their needs as pandemic-era policies that bolstered the social safety net and health care systems are rolled back.

Advocacy continues across multiple domains to address the needs of children. 2022 saw important progress on AAP priorities, including the passage of landmark federal legislation to address gun violence, climate change, and a \$1.7 trillion year-end omnibus spending bill. However, divided control of Congress and a recent debt ceiling agreement to limit federal spending have already made it more difficult to advance the policy and funding needed to support children and pediatricians.

No matter the political environment, the Academy and AAP chapters' advocacy across all levels of government remains steadfast with the needs of America's young people as its guiding principle. In all its work, the Academy is focused on ensuring that public policies account for the needs of all children and adolescents with special attention to children from minoritized communities, including children of color and LGBTQ youth, those who have experienced trauma and childhood adversity, and system-involved youth in alignment with the **AAP's Equity Agenda**.

AAP members continue to advocate both outside and within their own clinic walls for their patients. AAP recently launched the **#WeArePediatricians campaign** to lift up the voices and stories of AAP members, showing all of the ways that pediatricians nurture, care for, and empower all children and teens to thrive. Additionally, more than 320 pediatricians came to Washington, DC, in March for the AAP Advocacy Conference—the first in-person convening since 2019. The attendees, hailing from 46 states and DC, took to Capitol Hill to urge their lawmakers to pass policies to protect young people online. In this challenging political environment, the pediatrician voice is more important than ever to advancing the needs of children.



## ADVOCACY OPPORTUNITIES

To learn more about the Academy's latest federal advocacy priorities and urge your members of Congress to support the health and well-being of children and families, **visit [federaladvocacy.aap.org](https://federaladvocacy.aap.org)**.

To learn more about state advocacy engagement opportunities, contact your AAP chapter or the AAP State Advocacy Team at **[stgov@aap.org](mailto:stgov@aap.org)**.

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## AAP Priorities

### Debt Ceiling

In June, Congress passed the Fiscal Responsibility Act, which raises the debt ceiling through January 2025 and sets federal government spending caps for fiscal years (FY) 2024 and 2025. The legislation increases defense spending by 3 percent in FY 2024 and reduces non-defense discretionary (NDD) spending by around 5 percent for FY 2024. However, the agreement rescinds about \$27 billion in unused COVID-19 funds, and cuts \$20 billion in IRS funding to be used for NDD programs that will essentially keep FY 2024 spending at the same level as FY 2023. Both defense and non-defense discretionary programs will receive a 1 percent increase in funding in FY 2025. During the negotiations, AAP weighed in with this **press statement** and a **statement** with leading physician groups opposing Medicaid work requirements.

### Health Workforce

In one of the most widely anticipated Supreme Court rulings of the term, a majority of justices voted to **strike down race-conscious admissions programs** in higher education for violating the Equal Protection Clause of the 14<sup>th</sup> Amendment, which forbids legal distinctions based on race or color. While exceptions to the Equal Protection Clause can be justified when the use of race is narrowly tailored and done to further compelling governmental interests, the Court found that race-conscious admissions programs did not meet that burden. Six justices voted in favor of ending affirmative action, while the Court's other three justices vigorously dissented.

The decision is expected to dramatically alter the college admissions process, potentially leading to drops in

enrollment among historically minoritized communities. The Academy **expressed concern** that the new prohibition on affirmative action would set back efforts to diversify the health workforce and had previously filed an amicus brief before the Supreme Court arguing that the use of race in admissions was critical to addressing health disparities. The AAP will continue to support the development of a diverse pathway of future pediatricians to meet the needs of an increasingly diverse population of children.

## Indigenous Children's Health

On June 15, the US Supreme Court upheld the Indian Child Welfare Act (ICWA), the 43-year-old federal law that reaffirms the rights of Tribal nations to be involved in child welfare matters and keeps American Indian and Alaska Native (AI/AN) children connected to their community and culture. The 7-2 **decision** in *Haaland v. Brackeen* was authored by Justice Amy Coney Barrett.

In August of last year, the AAP led an **amicus brief** that included the American Medical Association in this case defending ICWA. The **New York Times article on this decision** highlighted the AAP's amicus brief. And in November of last year, an op-ed by AAP's Committee on Native American Child Health Chair Allison Empey, MD, FAAP, **ran in STAT News' First Opinion**, in which she called for the Supreme Court to uphold ICWA and shared her personal experiences to explain the importance of the law.

## Gender-Affirming Care

### Litigation Update

In June, a federal district judge struck down Arkansas' ban on gender-affirming care for minors as unconstitutional. In the first ruling to overturn such a ban, U.S. District Judge Jay Moody issued a permanent injunction against the state law, which is the first in the nation to prohibit medical professionals from providing any gender-affirming medical care to anyone under 18.

The AAP led an amicus brief with other major medical organizations in support of the plaintiffs. In his ruling, Judge Moody wrote: "The evidence showed that based on the decades of clinical experience and scientific research, it is widely recognized in both the medical and mental health fields—including by major medical and mental health professional associations—that gender-affirming medical care can relieve the clinically significant distress associated with gender dysphoria in adolescents."

Now that the court has issued a permanent injunction, Arkansas is unable to implement the law. Although it is likely that the state will appeal, this ruling is significant because of the precedent it sets.

## GAC Health Coverage

In June, the House Appropriations Committee passed the FY 2024 Defense bill, which includes a provision banning Department of Defense funds from being used for surgical procedures or hormone therapies for the purposes of gender-affirming care. While TRICARE coverage of gender-affirming care is already limited, the AAP will continue to oppose this provision to protect existing coverage for gender diverse youth.

## Transgender Sports Bans

In April, the House passed H.R. 734, the *Protection of Women and Girls in Sports Act of 2023*, which would ban transgender female students from participating on school sports teams consistent with their gender identity. The AAP, along with the American College of Obstetricians and Gynecologists and the American Psychiatric Association, sent a **letter** opposing the legislation. Despite passage in the House, the Democrat-controlled Senate is unlikely to take any action on the bill. Also in April, the Department of Education released a **proposed rule** regarding student participation in sports according to their gender identity; the AAP submitted a **comment**. Under the proposed regulation, schools would not be permitted to adopt a policy that categorically bans transgender students from participating on teams consistent with their gender identity.

## Pediatric Subspecialty Loan Repayment Program

After over a decade of advocacy from the American Academy of Pediatrics, **applications are now open** for the first awards from the Pediatric Subspecialty Loan Repayment Program.

Pediatric medical subspecialists and pediatric surgical specialists are eligible to apply for \$100,000 in loan repayment. **The deadline to apply is July 20.**

Awardees must commit to serving an underserved area for three years. The program is available for both fellowship trainees and those who have completed fellowship. The Health Resources and Services Administration (HRSA) will fund 150 awardees this year.

Visit **HRSA's website** to learn more, including details about upcoming live Q&A sessions.

## Children's Coverage

### Unwinding

April 1 marked the earliest date that states could begin disenrolling individuals from Medicaid coverage as part of the "Unwinding," where state Medicaid programs redetermine the eligibility of all enrollees over a 14-month period. CMS requires all states to report on the Unwinding; these data reports are due to CMS on the 8<sup>th</sup> of each month.

following each state's disenrollment start. As such, in early May, initial data as to how the Unwinding was proceeding became available.

Early data demonstrates that a significant number of individuals have lost coverage; as of June 27, over 1.5 million people have been disenrolled from 26 state Medicaid programs. Some states are disenrolling significantly higher proportions of individuals than others, and some are also disenrolling more individuals for *procedural* reasons, meaning that paperwork never reached families or was not returned in time.

Those that are disenrolled for procedural reasons can return forms and required paperwork to regain coverage during the 90-day reconsideration period. Messaging has thus shifted to also highlight the need for families to regain coverage whenever possible, as well as obtain it via CHIP or the Marketplace, as eligibility determines.

The AAP continues to advocate that the Centers for Medicare and Medicaid Services (CMS) use all powers at its disposal—including those granted by Congress via the 2022 omnibus package—to ensure states are not inappropriately disenrolling eligible individuals. On June 12, HHS Secretary Xavier Becerra sent a **letter to the nation's governors**, highlighting HHS concerns about early coverage losses, particularly with respect to children. At the same time, HHS announced **new flexibility options for states** to help prevent inappropriate coverage losses, including allowing Medicaid managed care organizations (MCOs) to help enrollees complete forms, expanding use of presumptive eligibility, and giving states an extra month to attempt to reach individuals on track to be procedurally disenrolled.

AAP will continue to advocate with CMS and Congress to ensure appropriate oversight of the Unwinding. AAP also continues to work with state AAP chapters in responding to state Unwinding data and activities, and will continue to update [www.aap.org/MedicaidUnwinding](http://www.aap.org/MedicaidUnwinding) with new resources for chapters and members.

### Courts Preserve Access to Care

In June, the US Supreme Court issued a decision in *Health and Hospital Corporation of Marion County, IN v Talevski*, confirming that legislation passed by Congress pursuant to its spending powers can create rights that can be enforced by individuals against states through federal litigation. This case was of critical importance for preserving the rights of Medicaid beneficiaries, as the Medicaid Act is a law created through Congress's spending powers. AAP and the Children's Hospital Association filed an amicus brief in this case arguing the essential nature of individual litigation as an

enforcement mechanism when states deny children rights under Medicaid's EPSDT benefit.

In addition, the Affordable Care Act mandate for coverage of preventive services with an A or B rating from the US Preventive Services Task Force (USPSTF) will remain in place for the time being after a June order from the US Court of Appeals for the Fifth Circuit in the case *Braidwood Mgmt Inc. v Becerra*. A federal district court judge had previously ruled that the ACA mandate for coverage of preventive services is unconstitutional because of the way the members of the USPSTF are appointed. The Fifth Circuit's order reflected an agreement between the US Department of Justice and plaintiffs, and it is expected to remain in place while the case undergoes judicial review. AAP joined an amicus brief with a number of other medical organizations arguing the importance of coverage for preventive services.

### Section 1115 Waivers

In April, Washington became the second state to receive CMS approval to cover children in Medicaid from birth to age 6 continuously. This approval followed Oregon's groundbreaking waiver approval in September 2022 to also provide such 0-6 continuous coverage. New Mexico currently has a waiver proposal before CMS to extend Medicaid coverage from 0-6, and California is working on its legislature-approved proposal to provide continuous coverage to age 5. Also of note, in May 2023, Minnesota enacted legislation to provide continuous coverage in that state from ages 0-6; as in other states, this will require a waiver submission.

### Child Nutrition

#### School Meals

In February, USDA released a rule proposing **new nutrition standards** for school meals. As called for by the AAP, the rule would align school meal standards with the Dietary Guidelines for Americans by creating the first added sugar limit for school meals, decreasing sodium, and increasing access to whole grains and cultural and geographic foods. The AAP submitted detailed **comments** on the proposal. USDA also released a proposed rule in March that would expand eligibility for the Community Eligibility Provision (CEP). The CEP permits schools with a high proportion of low-income students to provide free school meals to all students without requiring families to submit eligibility paperwork. The AAP submitted **comments** in support of the proposal.

#### SNAP

The debt limit deal reached in June expands the age range of work requirements for able-bodied SNAP beneficiaries with no dependent children from ages 18-49 to ages 18-54, placing

275,000 low-income Americans at risk of losing their SNAP benefits. While on its face the provision excludes parents of dependent children, non-custodial parents who may contribute to child support or other adults who may supplement a family's income will face harmful impacts.

However, the deal also expands exemptions from work requirements to include veterans, people aging out of the foster care system, and people experiencing homelessness, who previously were not exempt. It is estimated that an additional 300,000 people could become newly eligible for SNAP through this change, though extensive outreach will be needed to make these populations aware of their eligibility and to help them enroll.

### Online Protections for Children and Adolescents

In early May, the AAP-endorsed, bipartisan *Kids Online Safety Act* (S. 1409, KOSA) and *Children and Teens' Online Privacy Protection Act* (S. 1418, COPPA 2.0) were reintroduced. KOSA, led by Sens. Richard Blumenthal (D-Conn.) and Marsha Blackburn (R-Tenn.), would require technology companies to act in the best interests of young people when designing their platforms and give children and teens new tools to control their online experience. COPPA 2.0 is led by Sens. Ed Markey (D-Mass.) and Bill Cassidy (R-La.) and would expand current data privacy laws for children to further limit data collection while giving teens new protections online. KOSA has nearly 40 cosponsors in the Senate, and both bills are expected to be considered by a key committee later this summer. The AAP will continue work to move these bills through the Senate and enact new online protections for young people into law.

### AAP Center of Excellence on Social Media and Youth Mental Health

The AAP Center of Excellence on Social Media and Youth Mental Health kicked off collaborations with the Technical Expert Panel, a mix of experts from the tech industry, mental health, education, parenting organizations, and youth. In May, the Center launched an **interactive portal** with questions from and responses for clinicians, educators, parents, and youth about social media. Co-medical directors **Jenny Radesky** and **Megan Moreno** published videos for parents in conjunction with the **Surgeon General's Advisory on Social Media and Youth Mental Health**. AAP President Dr Sandy Chung was quoted in the official press release for the advisory which directs to the Center and its resources in several sections. Dr Moreno and Dr Radesky also recently published an **article on the Center** in the *Journal of Adolescent Health* and participated in May's **AAP podcast discussing the Center**.

## Immigration

### AAP-MPI Report

In April, AAP and the Migration Policy Institute (MPI) released a joint report, ***A Path to Meeting the Medical and Mental Health Needs of Unaccompanied Children in US Communities***, which chronicles the barriers to care for unaccompanied children and promising community practices to strengthen medical and mental health services. It also included recommendations on steps that governments, health systems, schools, and communities can take to improve access to medical and mental health care, for the benefit of the children and broader society.

### Title 42

Title 42—the AAP-opposed policy used to expel immigrants at the border—expired with the end of the PHE in May. Under Title 42, US Department of Homeland Security officials rapidly expelled millions of immigrants to Mexico or their home countries, without providing access to asylum procedures. Unaccompanied children were exempt from this policy, which is expected to lead to some families self-separating in Mexico and sending their children into the United States alone. In response to the end of Title 42 and expected surge of immigrants at the US southern border, the Biden administration issued a new rule that severely restricts families' ability to seek asylum in the United States if they do not first apply for asylum in Mexico or have an appointment at a border checkpoint.

AAP **expressed** serious concern with this policy and will be closely monitoring its impact on families and unaccompanied children. The ACLU filed a lawsuit to prevent the rule from taking effect, much like it did when a similar asylum restriction was proposed under the Trump administration. Recently, two children died while in custody due to the lack of appropriate medical care. AAP President Dr Sandy Chung's **op-ed** in *USA Today* calls for a full and transparent investigation of these deaths and implementation of recommendations she and other experts have provided to Customs and Border Protection.

## Gun Violence Prevention

The AAP continues its work leading the medical, public health, and research community's advocacy for federally funded research to prevent firearm violence. The Joyce Foundation has provided the AAP with a second year of funding to continue and expand its leadership in this work.

Recently, the AAP led more than 400 medical, public health, and research organizations in **calling on Congress** to maintain and increase this funding. AAP also organized a first-of-its-kind Washington, DC, convening of firearm

violence researchers from strategic states and congressional districts, to educate members of Congress and the Biden administration about the impact of these investments.

In July, AAP will host its first virtual Town Hall on gun violence prevention on July 25<sup>th</sup> at 7:00 pm Eastern time. This Town Hall is open to all AAP members and will be the first of many upcoming major engagement opportunities on gun violence prevention. **Register here.**

## Mental Health

The AAP leads the Child and Adolescent Mental Health Coalition (CAMH), which released refreshed **principles** in April driving the coalition's work, priorities, and advocacy efforts. In May, CAMH held a Hill **briefing** to formally release the principles and increase awareness of the coalition and its work. Senator Tom Carper (D-Del.) kicked off the event and AAP President Dr Sandy Chung was a featured panelist.

## Childhood Immunizations

### Nonmedical Exemptions to School Entry Immunization Requirements

In April, a US District Court judge issued a preliminary injunction barring Mississippi from enforcing its medical-only exemption to school entry immunization requirements and directing the state to create a religious exemption. Mississippi is one of only six states permitting only medical exemptions and has consistently been a national leader on childhood immunization rates due to its strong immunization laws. Also in April, with the advocacy of the AAP Montana Chapter, a bill to expand nonmedical exemptions was defeated on the house floor in a bipartisan vote. No state has expanded nonmedical exemptions through an act of the legislature since 2003.

## Reproductive Health

State level efforts to curtail reproductive rights and abortion care access continued in the 2023 state legislative sessions, with 8 states further restricting access to abortion care in 2023. Conversely, 6 states enacted legislation providing additional protections for abortion care access in 2023. At present, 25 states significantly restrict or wholly ban abortion care access, and 25 states plus the District of Columbia permit expansive access. Litigation in opposition to abortion care restrictions is ongoing, with the most recent action via a Wyoming court's ruling in opposition to that state's ban on mifepristone access.

At the federal level, access to the abortion medication mifepristone is at issue after a US District Court judge ruled the drug must come off the market. The sweeping ruling in response to litigation brought by organizations representing

anti-abortion physicians suspended the Food and Drug Administration (FDA)'s approval of the medication nationwide, finding the agency's decision unlawful.

The AAP expressed concern about the ruling immediately following its release and joined amicus briefs to higher courts urging them to temporarily block the ruling while it is challenged. Following emergency consideration, the US Supreme Court blocked the ruling from taking effect while the legal issues in the case are resolved. The decision temporarily preserves access to the drug.

Mifepristone was originally approved by the FDA in September 2000 for the termination of early pregnancy, subject to special restrictions on how the drug is prescribed and dispensed. In recent years, the FDA has taken further action to loosen medically unnecessary restrictions on the drug in light of a substantial body of evidence documenting mifepristone's safety. A final ruling invalidating the FDA's decisions to expand access to mifepristone has the potential to dramatically limit or entirely eliminate the use of mifepristone, which has become the most common method of abortion nationally.

The AAP will continue to advocate with other medical organizations to preserve access to this important reproductive health care option.

## Tobacco Control

The 2023 state legislative sessions have brought several notable tobacco control victories, including Georgia and Illinois adding e-cigarettes to their respective clean indoor air laws, Kansas passing legislation to raise the age of purchase for tobacco products to 21, and New York increasing its state cigarette tax by \$1. Bills restricting the sale of flavored tobacco products were introduced in at least 10 states, with several still pending a final vote. In April, seven states settled a joint lawsuit against the e-cigarette manufacturer JUUL for \$462 million for the company's role in the youth e-cigarette epidemic, which followed a \$23.8 million settlement with the City of Chicago in March, and a 33-state \$438.5 million settlement in September 2022. AAP chapters have advocated for the JUUL settlement dollars to be reinvested in prevention.

AAP and partners continue to advocate for the FDA to use its enforcement authority to take illegal e-cigarettes off the market while the agency works to complete premarket review of pending e-cigarette marketing applications. In recent months, the FDA has issued marketing denial orders to 11 e-cigarette companies covering a range of more than 6,750 products. It has also issued warning letters to more

than 200 retailers, as well as several manufacturers, importers and distributors.

In addition, this spring, AAP and 10 national partners wrote to the FDA requesting that the agency act swiftly to remove “non-menthol” cigarettes from the market. These products, which contain cooling additives rather than flavors, emerged in California shortly after menthol cigarettes were taken off the market when the state’s flavored tobacco prohibition took effect. This development comes against the backdrop of FDA’s own efforts to prohibit the use of menthol flavoring in cigarettes and all flavoring in cigars nationwide, and AAP continues to urge FDA to finalize rules quickly.

## Injury Prevention

### Weighted Sleep Products

The AAP recently sent [a letter](#) to the Consumer Product Safety Commission (CPSC) and ASTM International (ASTM) opposing the development of a voluntary standard for weighted sleep products, which AAP policy says are unsafe. An [NBC News article](#) on weighted infant products highlighted the AAP’s opposition letter. The AAP is concerned that the development of a voluntary safety standard for these weighted infant products would give the false impression that they are safe and will continue advocating for vigorous oversight on all weighted sleep products, especially those marketed for infants and children.

### Furniture Tip-Overs

In May, the CPSC adopted its final rule to regulate furniture or clothing storage unit tip-overs. This action follows last year’s enactment of the AAP-endorsed *Stop Tip-overs of Unstable, Risky Dressers on Youth Act (STURDY Act)*. This rule allows the CPSC to engage in robust and timely enforcement of the STURDY Act beginning on September 1, 2023. The AAP will continue to work to ensure the CPSC is enforcing this robust safety standard to protect children and their families.

### Button Batteries

Following enactment of the AAP-championed Reese’s Law, the CPSC announced a proposed rule establishing child safety standards for button cell or coin batteries. The AAP joined coalition partners in [a letter](#) providing input to ensure a strong federal standard.

## Child Welfare Policy

### AAP Report on State Implementation of Family First Congregate Care Reforms

AAP recently released [a report](#) on the Family First and Prevention Services Act. This report was developed with experts from the University of Chicago’s Chapin Hall, individuals with lived experience in foster care, and pediatricians to examine state-level implementation of the

congregate care reforms contained in the AAP-championed Family First Prevention Services Act. Through a survey of all states and targeted focus groups, this study informs policymaker efforts to support the success of Family First. AAP Immediate Past President Moira Szilagyi, MD, PhD, FAAP, wrote a [blog post](#) reflecting on continued opportunities to improve the foster care system and uplifting this report.

### Title IV-B Reauthorization

Title IV-B of the Social Security Act is a significant child welfare law that will expire on September 30 absent congressional action. Title IV-B flexibly funds key state child welfare services, including efforts to keep families safely together and to support families after reunification. The AAP is advocating for a long-term comprehensive Title IV-B reauthorization that would include expanded investments in mental health for youth in foster care, increased funding for family supports, and additional support for the child welfare workforce. AAP is leading stakeholder efforts to develop and advocate for these reforms.

### CAPTA Reauthorization

The AAP is continuing to advocate for a reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA) following last year’s unsuccessful efforts. Unfortunately, an AAP-supported bipartisan proposal failed following efforts to attach anti-gender affirming care language to the legislation. CAPTA has not been reauthorized in over a decade. The AAP will continue to advocate for a bipartisan CAPTA reauthorization that prioritizes critical updates to identify, prevent, and treat child maltreatment.

## Home Visiting

Last year, the bipartisan, AAP-endorsed *Jackie Walorski Maternal and Child Home Visiting Act* (H.R. 8876) became law as part of the 2022 omnibus appropriations package. This bill reauthorizes the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program for five years and doubles its federal funding.

The AAP is continuing to work with our partners in the Home Visiting Coalition (HVC) to ensure the successful implementation of MIECHV and to maximize its complementary impact with other relevant federal programs. Recently, the AAP joined letters calling for funding for home visiting programs from the [Family First Prevention Services Act \(FFPSA\)](#) and [Medicaid](#).

## COVID-19 Advocacy

While the COVID-19 PHE ended on May 11, COVID-19 vaccines are still paid for and distributed by the federal government. The purchase and distribution of COVID-19



vaccines will likely transfer to the commercial sector once a new bivalent strain is available later this summer or early fall, and COVID-19 vaccines will then be included in the Vaccines for Children (VFC) program. The AAP and the Association of Immunization Managers (AIM) recently sent a **joint letter** to then-CDC Director Walensky to urge the administration to consider the needs of participating providers in the VFC program, as well as their patients, as the CDC prepares to include COVID-19 vaccines in the VFC program. The letter urges CDC to consider allowing VFC providers a “ramp up” period to purchase COVID-19 vaccines for their commercially insured patients; ease storage requirements; allow borrowing between VFC and commercial COVID-19 vaccine stock; allow vaccine counseling payment in VFC and continue federal investment in promoting COVID-19 immunizations; and encourage manufacturers to provide flexibility with ordering, package size, and return policies.

## Appropriations

While the debt ceiling agreement set spending caps for FY 2024 at FY 2023 levels, House Republicans are thus far treating these caps as a “ceiling, not a floor” and have set funding levels for appropriations bills at FY 2022 levels or lower. The House Labor, Health and Human Services, Education, and Related Agencies bill, which includes most federal programs that impact children, is set to be funded at \$147 billion, which is almost 30% lower than in FY 2023. However, these numbers do not include the rescinded funds included in the debt ceiling agreement, and it remains unclear how those funds will be allocated. The Senate is expected to release appropriations bills in the coming weeks consistent with the topline numbers included in the debt ceiling agreement. The AAP will continue to monitor FY 2024 negotiations and urge Congress to provide robust funding for child health.

## Global Child Health

### Global Child Thrive Act Implementation

After the successful passage of the Global Child Thrive Act on January 1, 2021, the AAP has been working with USAID, Congress, and the White House towards effective implementation of the law. On February 28 following significant AAP input, USAID released Implementation Guidance for the law. The AAP, through its work on the Thrive Coalition, is utilizing the guidance to engage USAID missions on integrated early childhood interventions into their programming.

## Children in Crisis and Conflict Settings

With the support of a Friends of Children grant, the AAP completed a landscape analysis of federal advocacy opportunities to support children in crisis and conflict settings. The AAP identified two priority areas of work: advocating for emergency assistance funds at USAID and the Department of State and supporting the passage of Mental Health in International Development and Humanitarian Settings (MINDS) Act, which aims to enhance mental health and psychosocial support within US foreign assistance programs.

## PEPFAR Reauthorization

The AAP is working with allied organizations from the Global AIDS Policy Partnership on the reauthorization of the President’s Emergency Plan for AIDS Relief (PEPFAR) program to ensure the reauthorization continues to meet the needs of children, including orphans and other vulnerable children.



## AAP ADVOCACY GUIDE

Check out AAP’s new digital **Advocacy Guide**, available to AAP members at [aap.org/advocacyguide](https://aap.org/advocacyguide). This digital guide offers interactive tools, resources, and information to help pediatricians develop their advocacy skills – more features coming soon!

## How to Sign Up for Advocacy Emails

Email [kids1st@aap.org](mailto:kids1st@aap.org) with your name, AAP ID if known, and your preferred e-mail address to receive timely advocacy communications and requests for action as well as a weekly advocacy recap, the Capital Check-up.

## Engage with AAP on Social Media

Follow and engage with AAP on social media (Twitter, Facebook and Instagram) via [@AmerAcadPeds](https://twitter.com/AmerAcadPeds) and [@healthychildren](https://twitter.com/healthychildren). To receive monthly social media communications and more opportunities to advocate on social media platforms, request to be added to AAP’s #tweetiatrician list by emailing [tjackson@aap.org](mailto:tjackson@aap.org).