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Female: Welcome to Conversations on Health Care with Mark Masselli and Margaret Flinter, a show where we speak to the top thought leaders in health policy, health innovation and technology and the great minds who are shaping the health care of the future. This week with the leadership changes at Homeland Security, Mark and Margaret decided to revisit their 2018 conversation with Dr. Colleen Kraft, President of the American Academy of Pediatrics who spent time with migrant children separated from their parents at the border and the impact of such toxic stress on children. She also discusses the importance of vaccines reducing harm from gun violence and limiting access to screen time for better mental health and development for kids.

Lori Robertson also checks in Managing Editor of FactCheck.org looks at misstatements spoken about health policy in the public domain separating the fake from the facts. We end with a bright idea that's improving health and well being in everyday lives. If you have comments, please email us at [chcradio@chc1.com](mailto:chcradio@chc1.com) or find us on Facebook or Twitter. We love you hearing from you. You can also find us on iTunes, SoundCloud or ask Alexa to play the program Conversations on Health Care. Now, stay tuned for our interview with Dr. Colleen Kraft, President of the American Academy of Pediatrics on Conversations on Health Care.

Mark Masselli: We're speaking to Dr. Colleen Kraft, President of the American Academy of Pediatrics, an organization of 67,000 pediatricians dedicated to the physical, mental and social health of America's children. Dr. Kraft is the founding pediatric program director at the Virginia Tech Carilion School of Medicine. She was also the Medical Director of the Health Network by Cincinnati Children's. She is co-author of the book Managing Chronic Health Conditions in Child Care and Schools. She earned her medical degree from Virginia Commonwealth University where she also completed her residency in pediatrics. Dr. Kraft, welcome to Conversations on Health Care.

Dr. Colleen Kraft: Well, thank you so much for having me.

Mark Masselli: Yeah, and, you know, obviously you've been in the news and the larger story in the news is certainly been the separation of immigrant children from their parents at the border, which has led to a hue and cry across the country to end the practice from a wide array of sectors, including your organization the American Academy of Pediatrics. You personally were given access to a shelter holding some of these children so you have firsthand experience of how it's impacting. I'm wondering if you could share with our listeners what you witnessed, and what you yourself have called government sanctioned child abuse.

Dr. Colleen Kraft: Sure. At the American Academy of Pediatrics, we keep our eyes and our lens on the children and what's right for child health. As I was invited to come to visit one of these shelters, I came in and the shelter itself was one of the tender age shelters and was very homey looking, there were beds and cribs, and books and toys. I walked into the toddler room and if you've ever been in a room full of toddlers, they are rambunctious and loud and these kids were not. They were quiet and scared and looking at you.

There was one child in the middle of the room who was just uncontrollably sobbing. The staff person next to her wanted to help her out, was trying to give her a toy, was trying to give her a book, but this child was crying. The staff person couldn't pick her up and couldn't hold her she was not allowed to do that. We all knew in that room that what these children needed were their parents, that because their parents weren't there, they were suffering from toxic stress, and their behavior was so abnormal for toddlers

Margaret Flinter: Well, Dr. Kraft these are heart wrenching images you share and we know the kids were suffering in the moment. But we also know as clinicians that the impact of early childhood trauma and toxic stress sets the stage for really lifelong negative impacts. Maybe you could share with us what the science tells us about these adverse childhood experiences of trauma and separation, fleeing disasters, and the effect of this trauma on health into adulthood. What kind of interventions are called for to mitigate some of the worst effects from these experiences, obviously mitigating the effect of what's happened to these kids?

Dr. Colleen Kraft: What the separation does is it creates in these very young children, a rush of their stress hormones of cortisol of epinephrine. These hormones when they're not buffered by a loving and caring adult, cause something called toxic stress, where the neurons don't develop normally, they don't have the synapses with other neurons. This actually develops disruption in the brain architecture of these young children. What they don't develop is speech and language, they don't develop their ability to bond socially and emotionally with adults and with others. Down the road that actually leads to school failure, to use of substances, to anxieties and depression, to chronic health problems like diabetes or heart disease.

Mark Masselli: Dr. Kraft I know the court has ordered the government to reunite the families and obviously there are some roadblocks, I think we all read where a number of parents have already been deported to their country of origin. But I understand that your organization has taken an active role in addressing the situation joined by some of your professional colleagues at the American College of Physicians, the American Psychiatric Association, to try to figure out how to resolve

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this. I'm wondering if you could share with us about your efforts that are underway with the American Academy of Pediatrics that will lead to help facilitate the reuniting of these families.

Dr. Colleen Kraft:

The mission of the American Academy of Pediatrics is to protect the health and wellbeing of all children regardless of where they or their parents were born. From the moment that they're in our custody in the United States, children should have access to health care. The American Academy of Pediatrics has offered our assistance in reuniting families and supporting their needs. Pediatricians across the country are prepared to provide care for these immigrant children as they enter our communities. We play an important role in caring for these children and families and connecting them with other resources, like trauma informed care.

But right now, our pediatricians don't currently have a way of knowing when a child is released from federal custody. We have recommended that the Office of Refugee Resettlement and the Department of Health and Human Services create a mechanism to identify willing medical and mental health providers and connect these children and families being released from its custody to those sources of care. That way we can provide the physical and mental health care that these kids and families need as they're being reunited.

Margaret Flinter:

But you know, gosh, there's so many challenges for children's health these days. We wonder if you could talk to us a little bit about another issue that's both been in the news and one I think we thought maybe we were past worrying about and that's the whole issue of supporting breastfeeding as a vital contributor to the health of children to long term health that's been supported by your organization. It's certainly been supported by the World Health Organization as the best way to support sound nutrition. But we've had quite a bit of controversy recently, when the administration pushed back against the protocol that was being recommended. You've got some pretty clearly defined guidelines on breastfeeding recommendations at the American Academy of Pediatrics. What are those guidelines? Why is it so important for early childhood health and development?

Dr. Colleen Kraft:

We know the science of infant feeding, and that breastfeeding is meant for human children and that breastfeeding supports brain development, it supports optimal nutrition, it helps to promote optimal growth, but also to prevent obesity, and allergies and other infections. For the mothers that actually helps to get them back to normal weight gain, it helps to prevent breast cancer. Based on this, the American Academy of Pediatrics is aware of this that the US government sought to weaken the resolution supporting

breastfeeding at the recent World Health Assembly. But based on the science, we encourage all countries to promote and protect and support breastfeeding for the health of all children.

Mark Masselli:

We're speaking today with Dr. Colleen Kraft, President of the American Academy of Pediatrics, an organization of 67,000 pediatricians dedicated to the physical, mental and social health of American children. Dr. Kraft your bio has an interesting note that you're a graduate of one of the first Head Start programs in the country. I sort of want to connect back to our history back in 1972, our first program initiative is with our local Head Start program, and they do such important work. That experience shaped your professional and personal quest to eliminate health disparities. You've really translate that into the type of training that you're trying to give to medical students at Virginia Tech. Also to take the poverty challenge, help them understand what it's like to live just a few dollars a day. If you could talk about that approach to training medical professionals, as well as why you believe programs like Head Start the CHIP program are so vital to ensuring better outcomes.

Dr. Colleen Kraft:

If you look at the children in the United States today, 43% of children live under 200% of the federal poverty level. I know that because 43% of the children in our country are insured by either Medicaid or the Children's Health Insurance Program. Almost half of our children are living under 200% of the federal poverty level. But for pediatricians it really is important to understand what that means to a family. Head Start was an amazing opportunity for me as a five year old. When I went to a Head Start, and I could read, the first thing that my teacher said to me was that you are so smart that you could be a doctor when you grow up. That's -- those words to a young child who's ready to learn are so motivating.

The CHIP program, and then supplemental nutrition, anything that we can take these kids who were living in struggling families, to get them to be able to eat nutritious food, and to have access to quality early childhood education is only going to help to support the health and wellbeing of the next generation, the poverty challenge. This is something that all residency programs in pediatrics are doing, we now have a required month called Community and Advocacy, and so I had my residents live on \$4 and 50 cents a day. They could not take anything but public transportation, and they could not use their smart phones, they had to only use computers in the clinic or in the public library. You learn a lot when you don't have access to anything but public transportation when you have a limited amount of money to live on. You develop that compassionate insight for those families who come to see you as patients.

Margaret Flinter:

Well, Dr. Kraft you've made an -- are making so many contributions to

the health of children in the country. But one of them is that you've co-authored a book that covers the topic that we take very seriously in our organization, and that is *Managing and Improving and Building Upon Childhood Health in the School Setting*. We have many school based health centers around our state that provides integrated behavioral health and medical care really in dozens of schools. Your book *Managing Chronic Health Conditions in Child Care and in Schools* offers guidelines for how to manage chronic conditions that can impact learning for a growing number of children and certainly set the stage for adolescent and adult health. Maybe you could share with us some of your recommendations for how to best manage chronic conditions in the learning environment.

Dr. Colleen Kraft:

When I see a patient in my office, I see them for 15 minutes that they live in the community. The only way to really be effective in managing their health is to inform and educate and be an advocate within the community. This book was written so that anybody who works in childcare, or works in school can understand what a tracheostomy tube is or gastrostomy or ADHD or asthma or food allergies. You first have to understand what that child has, and understand it in a way that makes sense for somebody who doesn't have medical training. Secondly, you need to know who's on their treatment team, because that way you can call a nurse or a doctor if you've got questions about that child.

Third, you need to know what the emergencies are. When is it an emergency for a child who may have a seizure disorder or a child who may have diabetes, and what to know in terms of their treatment plan for those certain types of things going on there. Because overall, if you understand their condition, you understand who to call for help, you're already better prepared to handle something that may be going on. The more our school and childcare workers are comfortable with these settings, the better they are in terms of being able to care for these kids and not to be afraid of them.

Mark Masselli:

And Dr. Kraft, I was thinking as you were talking about the number of children who are growing up in poverty, and we know from the statistics that zip code is going to determine so much about your health. But there are also other social trends impacting childhood health certainly this generation of school children is first to deal with the issue of gun violence. Also, the spread of smart phones in the world has led to an increase in depression and anxiety, even addictive behaviors. Your organization now has analyzed the impact of these more recent phenomena on childhood health. I'm wondering if you could talk about the guidelines that both pediatric clinicians and parents should be embracing to mitigate the harm from some of these troublesome social trends.

Dr. Colleen Kraft: Okay, so let's start with gun violence. None of us want our children to die from an unintentional gun injury, or from suicide. What we know is that 12 children teens and young adults under 21 died from gun violence every day. We know that pediatricians play that unique and vital role in preventing gun violence because we can talk with families about safe storage, about trigger locks, about not having firearms anywhere where children are. Very young children don't understand that if they were able to shoot a gun that it could actually fatally hurt somebody. Tackling an epidemic, like gun violence requires very comprehensive solutions at every level of government in partnership for all of us who take care of kids, and that all of our children needs to feel safe, where they live and learn and play. We have the tools we need to stop this public health epidemic, and we just need the political will to enact them.

With regard to media and smart phones and computers, we actually have two policy statements, one on the media use in school aged children and adolescents, and media in young minds. We know that today's generation of children and adolescents is growing up immersed in the media, and that three quarters of teenagers these days own a smart phone. 24% described themselves as constantly connected to the Internet, and 50% of them feel addicted to their phones. What we tell our families to do is this, first of all, create a family media plan, like you have to do with any other diet and knowing that this media plan should start early and apply to all family members, because a lot of times we see our parents on smart phones when they should be interacting with their children, so cutting back will help. Set stream limit times, have things like family meal times where you put your phones and your iPads away, have certain times during the day for connection. Particularly with very, very young children, they learn best from people and not from screens. Interact with your children, talk and sing and read a book and do those things that we have science that tells us build children's brains.

Margaret Flinter: Well, Dr. Kraft I'd like to touch on another subject that's not exactly new, but it seems to be a growing trend. That's the trend of parents refusing to vaccinate their children against a variety of diseases that are preventable. Then, of course, we've seen some measles outbreaks, pertussis or whooping cough outbreaks. Can you share with us the vaccine guidelines recommended by the American Academy of Pediatrics?

Dr. Colleen Kraft: Absolutely. Immunizations have been a significant public health boost to us in preventing vaccine preventable diseases. In 2009, that birth cohort routine childhood immunization will prevent about 42,000 early deaths and 20 million cases of diseases and saving about \$13 billion in direct cost. But we have parents who've not ever seen these diseases. Some of the messages that are not science based are really

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making parents be concerned about vaccines. Our message here is that vaccines are safe and they're effective.

Serious disease can occur if you and your child and family are not immunized. The best way to answer this is with talking with your child's pediatrician, because most parents who are hesitant about vaccines are not opposed to immunizing their kids, but they're unsure. We are open minded about answering questions, but making sure that parents know that the safety of vaccines is better than it's ever been. The diseases are out there and will come back if we don't keep our kids immunized.

Mark Masselli: We're speaking today with Dr. Colleen Kraft, President of the American Academy of Pediatrics. You can learn more about their work by going to [aap.org](http://aap.org) or you can follow them on Twitter @Ameracadpeds. Dr. Kraft thank you so much for your clarion voice and your dedication to the health and wellbeing of children and for joining us on Conversations on Health Care today.

Dr. Colleen Kraft: You're welcome and thank you for the opportunity.

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Mark Masselli: At Conversations and Health Care we want our audience to be truly in the know when it comes to the facts about health care reform and policy. Lori Robertson is an award-winning journalist and managing editor of FactCheck.org a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori what have you got for us this week?

Lori Robertson: Acting White House Chief of Staff, Mick Mulvaney said that all of the congressional republican health care plans had, quote, covered preexisting conditions. Senator Bernie Sanders, meanwhile, who is running for the democratic presidential nomination said, President Donald Trump's idea for health care is, quote, doing away with the protections that the ACA has for preexisting conditions. The GOP health care plans which were debated in 2017 offered some preexisting condition protection, but they were not as comprehensive as those in the Affordable Care Act. Mulvaney and Sanders made their comments in TV interviews in reaction to questions about the Trump Administration's decision to side with plaintiffs in a Texas court case and ask federal courts to find the ACA unconstitutional.

In his comments Mulvaney said, quote, the debate about preexisting conditions is over. Both parties support them, and anyone telling you anything different is lying to you for political gain. But that debate isn't over. Under the ACA insurers can't deny coverage or charge more based on health status. That protection primarily impacted the individual market where those without employer coverage by their

own insurance, and were before the ACA denials or higher premiums for those with medical conditions were commonplace. The GOP health plans didn't offer the same level of protection. The American Healthcare Act, a bill proposed by House Republicans in 2017 required insurance companies to offer coverage regardless of preexisting conditions. However, states could get a waiver to allow insurers on the individual market to charge higher premiums based on medical status for one year to those who had a 63 day gap or more in coverage.

The Senate Better Care Reconciliation Act would have allowed insurers to sell noncompliant plans on the individual market outside of the market places such as healthcare.gov. Those non compliant plans could deny coverage or charge more based on medical conditions. Another senate bill the Graham-Cassidy Legislation also would have allowed states to enable insurers on the individual market to price premiums based on health status. States would have to describe how they intended to maintain affordable access to coverage to those with preexisting conditions. That's my fact check for this week. I'm Lori Robertson, Managing Editor of FactCheck.org.

Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact that you'd like checked, email us at [chcradio.com](mailto:chcradio.com), we'll have FactCheck.org's Lori Robertson check it out for you here on Conversations on Health Care.

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Margaret Flinter: Each week Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. Childhood obesity is a national epidemic, but in the south it's far more prevalent. In Louisiana for example, over half of the children are either obese or overweight, with many experiencing symptoms such as high blood pressure, high cholesterol, and prediabetes. Louisiana State University Researcher Dr. Amanda Staiano has been studying protocols to tackle childhood obesity, tapping into readily available resources that make it easier for kids to adopt better exercise and activity habits. Since video games are ubiquitous in children's lives, she thought that would be a great place to start

Dr. Amanda Staiano: Video games are still very popular. With these new active video games that require physical activity to play, I thought this might be an innovative way to make such productivity and exercise fun.

Margaret Flinter: Her team at the Pennington Biomedical Research Center at LSU developed an intervention called GameSquad, giving prescriptions for playing movement video games for a full hour three times a week.

Dr. Amanda Staiano: In addition to giving the kids these extra games, we gave them a fitness coach that they would talk to over their video game. The coach would check in with the parent and child once a week and basically help hold them accountable. We also gave the kids a step tracker so that they could keep track of their physical activity throughout the six months.

Margaret Flinter: Kids were encouraged to have other family members join them in the movement video games like this young 12 year old boy who enjoyed gaining a competitive edge over his mom.

Male: I get to speak to our coach, he motivates me -- my mom, motivates me. I have to say like 60% of the time I beat her, I love to do disco, Boogie Wonderland with my mom.

Margaret Flinter: Dr. Staiano says during the six month GameSquad trial, over 90% of the kids who are given video game prescriptions and a fitness coach intervention stayed active throughout the study and the gaming group reduce their BMI by about 3% while the control group saw an increase in theirs. GameSquad an effective intervention to increase exercise in sedentary and overweight kids, leveraging already existing video games that are designed to get kids up and moving, improving health and fitness for kids in a fun, engaging and sustainable way. Now that's a bright idea.

Mark Masselli: You've been listening Conversations on Health Care. I'm Mark Masselli.

Margaret: And I'm Margaret Flinter.

Mark Masselli: Peace and health.

Female: Conversations on Health Care is recorded at WESU at Wesleyan University streaming live at [chcradio.com](http://chcradio.com), iTunes or wherever you listen to podcasts. If you have comments, please email us at [chcradio@chc1.com](mailto:chcradio@chc1.com) or find us on Facebook or Twitter. We love hearing from you. This show is brought to you by the Community Health Center.