

HR0037 LRB103 27629 LAW 54005 r

1 HOUSE RESOLUTION

8

9

10

11

12

13

14

15

16

17

18

19

20

21

WHEREAS, The opioid crisis has exacted a terrible toll on our State and nation over the past three decades, including the loss of over 3,000 Illinoisans to overdose in 2021 alone, which is a nearly 36% increase in just two years of an epidemic that has hit some areas, including many rural regions and some communities of color, particularly harshly; and

WHEREAS, The countless victims of the opioid epidemic include young children, the most vulnerable and helpless; every 25 minutes in the United States, a baby is born suffering from opioid withdrawal, also known as Neonatal Abstinence Syndrome (NAS); Illinois' own NAS rate grew 64% between 2011 and 2017 alone; and

WHEREAS, Babies born with NAS face a higher likelihood of experiencing health complications at birth, as well as long-term health challenges and developmental delays; and

WHEREAS, Overdose is now the leading cause of maternal death in Illinois, adding to the many challenges experienced by young children, their families, and communities; and

WHEREAS, Parental substance use disorder is considered an Adverse Childhood Experience (ACE), and research consistently

- 1 shows that children experiencing ACEs are more likely than
- 2 their peers to grow up to use drugs themselves and face
- 3 physical and mental health challenges, as well as educational
- 4 difficulties that can impact their ability to succeed later in
- 5 life; and
- 6 WHEREAS, Recognizing the need to address these issues, the
- 7 Children and Families Committee of the Illinois Opioid Crisis
- 8 Response Advisory Council has called for increased focus on
- 9 how this drug epidemic has impacted children and their
- 10 households; and
- 11 WHEREAS, During development of the most recent iteration
- of the State Opioid Action Plan (SOAP), that committee made a
- 13 number of relevant recommendations for increasing supports for
- 14 affected children and families, in addition to strengthening
- 15 the systems that help them; and
- 16 WHEREAS, Several key birth-to-3 programs have been shown
- 17 to play an important role in remediating the detrimental
- 18 effects of opioid use disorder as well as preventing future
- 19 such problems, among many other positive health outcomes; and
- 20 WHEREAS, Voluntary home-visiting programs are one key
- 21 example of these initiatives, services provided through such
- 22 evidence-informed models as Healthy Families America, Nurse

- 1 Family Partnership, BabyTALK, and Parents As Teachers, in
- 2 which trained professionals visit the homes of new or
- 3 expecting parents and their young children to help support a
- 4 wide variety of health, education, and developmental needs;
- 5 and
- 6 WHEREAS, Quality home-visiting services have been shown to
- 7 help build resilience among young children and reduce the
- 8 likelihood that they experience ACEs and become involved in
- 9 later-in-life drug use and crime, thus playing an important
- 10 prevention role, and can also help connect parents with any
- 11 substance-use recovery services they might need; and
- 12 WHEREAS, The Maternal Morbidity and Mortality Report
- 13 published in 2021 by the Illinois Department of Public Health
- 14 recommends expanding home-visiting programs as a key strategy
- for addressing these significant maternal health challenges;
- 16 and
- 17 WHEREAS, Early Intervention services are another vital
- 18 birth-to-3 priority, providing physical, developmental,
- 19 speech, and other therapies desperately needed by infants and
- 20 toddlers with developmental delays or disabilities, or risks
- of such challenges, which are experienced more often by
- 22 children born with NAS; and

birth-to-3 services; and

7

12

13

14

15

16

17

18

19

20

21

- 1 WHEREAS, Our State's existing home-visiting and Early
 2 Intervention programs, which are administered through the
 3 Illinois Department of Human Services and work with
 4 local-level service providers statewide, are limited by
 5 existing resources, preventing them from reaching all the
 6 children and families who could benefit from high-quality
- 8 WHEREAS, These longstanding shortcomings include 9 inadequate compensation for hardworking and often-overextended 10 community-level service providers and support staff, fueling 11 high caseloads and staff turnover; and
 - WHEREAS, It is an urgent priority to identify and pursue promising new sources of support for these early childhood initiatives that have a demonstrated history of beneficial outcomes for children, their families, their communities, and our entire State; and
 - WHEREAS, One potential and appropriate source of funding is represented in the settlement of several lawsuits against the manufacturers and distributors of opioids, lawsuits that were initially filed by a number of Illinois state's attorneys and ultimately combined with others across the country; and
- 22 WHEREAS, The Illinois Attorney General has joined in

- 1 negotiating the settlement of these national lawsuits that are
- 2 leading to hundreds of millions of dollars in new resources
- 3 for Illinois over the course of two decades, intended to
- 4 strengthen efforts at drug treatment and remediation, as well
- 5 as prevention of future opioid problems; and
- 6 WHEREAS, Determination of the use of these forthcoming
- 7 resources is split between local-level and state-level
- 8 decision makers, with the latter being aided by an Illinois
- 9 Opioid Remediation Advisory Board; and
- 10 WHEREAS, One approved use of these settlement funds, as
- 11 delineated in the Illinois Opioid Allocation Agreement, is to
- 12 address the needs of pregnant or parenting women and their
- families, including babies with NAS; and
- 14 WHEREAS, Members of the nonprofit, bipartisan Fight Crime:
- 15 Invest in Kids organization, representing 340 Illinois police
- 16 chiefs, sheriffs, and prosecutors, including those from
- 17 several of the state's attorney's offices that initiated a
- 18 number of these very same lawsuits, strongly support the use
- 19 of these settlement dollars for home-visiting and Early
- 20 Intervention services as an important way to aid our State's
- 21 response to the opioid epidemic; therefore, be it
- 22 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE

15

16

17

18

19

20

21

22

23

- HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that
 we support home-visiting and Early Intervention programs as an
 essential component of our State's multifaceted approach to
 the opioid crisis, helping remediate many of its corrosive
 impacts on young children, their parents, and families, while
 also assisting efforts at preventing children from future
 struggles with substance use disorders of their own; and be it
 further
- 9 RESOLVED, That we affirm these vital birth-to-3 services 10 are a top priority for increased public resources, to 11 strengthen their quality and extend their reach to more of the 12 children, parents, and families who could benefit from them, 13 particularly in communities of greatest need and those hit 14 hardest by the opioid epidemic; and be it further
 - RESOLVED, That we affirm home-visiting and Early Intervention services are an appropriate and necessary use for some of the hundreds of millions of funding coming to Illinois from the settlement of lawsuits against opioid makers and distributors, initiatives that can help meet the settlements' stated aims of boosting opioid remediation, treatment, and prevention; and be it further
 - RESOLVED, That suitable copies of this resolution be delivered to the offices of the Governor, the Lieutenant

- 1 Governor, the Attorney General, the Illinois Department of
- 2 Human Services, the Illinois Department of Public Health, the
- 3 Governor's Opioid Prevention and Recovery Steering Committee,
- 4 the Illinois Opioid Crisis Response Advisory Council, and the
- 5 Illinois Opioid Remediation Advisory Board.