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LRB103 25879 LAW 52230 r

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SENATE RESOLUTION

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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

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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

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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

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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

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

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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
12 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
15 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
21 of such challenges, which are experienced more often by
22 children born with NAS; and

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
7 birth-to-3 services; and

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

12 WHEREAS, It is an urgent priority to identify and pursue
13 promising new sources of support for these early childhood
14 initiatives that have a demonstrated history of beneficial
15 outcomes for children, their families, their communities, and
16 our entire State; and

17 WHEREAS, One potential and appropriate source of funding
18 is represented in the settlement of several lawsuits against
19 the manufacturers and distributors of opioids, lawsuits that
20 were initially filed by a number of Illinois state's attorneys
21 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
13 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 SENATE OF THE ONE HUNDRED THIRD GENERAL

1 ASSEMBLY OF THE STATE OF ILLINOIS, that we support
2 home-visiting and Early Intervention programs as an essential
3 component of our State's multifaceted approach to the opioid
4 crisis, helping remediate many of its corrosive impacts on
5 young children, their parents, and families, while also
6 assisting efforts at preventing children from future struggles
7 with substance use disorders of their own; and be it further

8 RESOLVED, That we affirm these vital birth-to-3 services
9 are a top priority for increased public resources, to
10 strengthen their quality and extend their reach to more of the
11 children, parents, and families who could benefit from them,
12 particularly in communities of greatest need and those hit
13 hardest by the opioid epidemic; and be it further

14 RESOLVED, That we affirm home-visiting and Early
15 Intervention services are an appropriate and necessary use for
16 some of the hundreds of millions of funding coming to Illinois
17 from the settlement of lawsuits against opioid makers and
18 distributors, initiatives that can help meet the settlements'
19 stated aims of boosting opioid remediation, treatment, and
20 prevention; and be it further

21 RESOLVED, That suitable copies of this resolution be
22 delivered to the offices of the Governor, the Lieutenant
23 Governor, the Attorney General, the Illinois Department of

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