



Rikhil Ranjit, Muntaha Rahman, Joey Kaji, Sahana Srikanth

# Health Policy

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# About Us

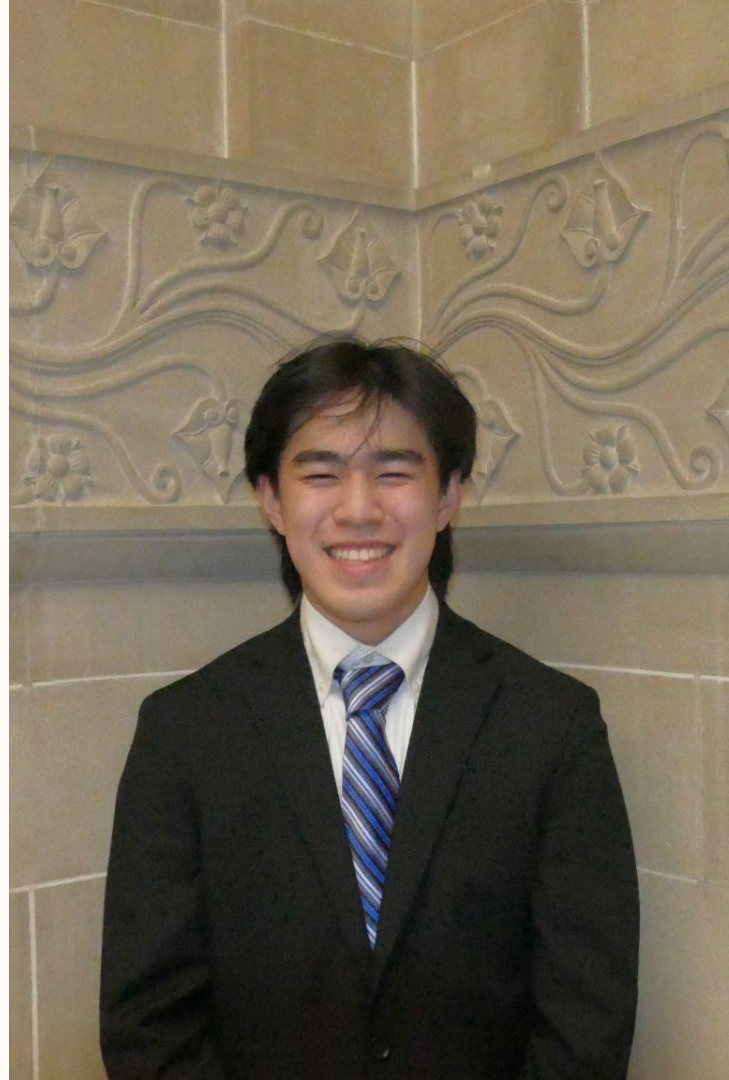


# Sahana Srikanth (she/her)

- Senior at William Mason High School
- First-Year member of the SBHA Youth Advisory Council
- Passionate about global health and youth literacy
- Fun fact: Coffee & tea lover!

# Joey Kaji(He/Him)

- Sophomore at the University of Rochester
- 3rd Year as a member of the Youth Advisory Council
- Majoring in Chemistry and Computer Science
- Fun Fact: Plays both violin and piano!



# Muntaha Rahman (she/her)

- University of Michigan
- Second year on the YAC
- Majoring in Neuroscience
- Super passionate about grassroots health initiatives, medical research, and journalism
- Fun fact: I'm ambidextrous!





# Rikhil Ranjit (He/Him)

- Rising freshman at Stanford
- 2nd year YAC member
- Passionate about public health and health care antitrust
- Fun fact: NBA Fan!

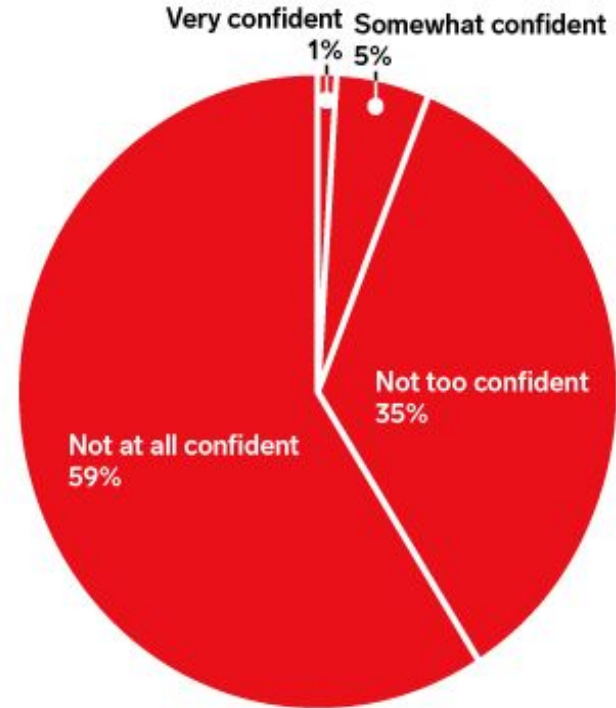


# What is Health Policy?

- The **collection** of decisions, goals, and actions within **public and private industries** that make up the healthcare system
- Health policy is a rare tool that the **everyday person** can **influence** to incite foundational change

## How Confident Are US Adults That Their US Members of Congress Will Take Action to Lower the Cost of Healthcare?

% of respondents, June 2022



Note: in the next 12 months

Source: Gallup and West Health survey as cited in company blog, Aug 4, 2022

# Objectives

## Four Goals:

- Track the state of status quo state/federal healthcare
- Determine how public healthcare policy runs
- Recognize school-based health centers as a novel solution
- Learn how youth can get involved in policy advocacy





# Your Experiences



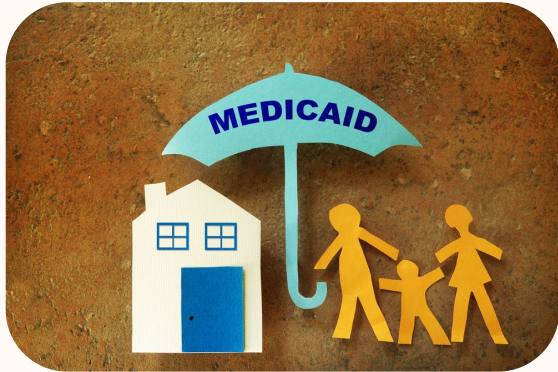


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# Health Policy Stories

# Stories: Healthcare Financial Struggles

*My mother lost her battle to metastatic breast cancer this year in part due to not being able to afford her medical bills. She held off on being seen & treated sometimes due to the amount of money she owed or would owe...When she died, she had thousands of dollars in medical bills. Those that struggle with breast cancer should not lose their life because they can't [pay]. ~ Alicia, Parma, OH*



*I lost my grandmother to cancer in 1994. She went without insurance for several years before her Medicare kicked in. As a direct result, her cancer went undetected and untreated. When doctors at University Hospital in St. Louis made the diagnosis, we were told that...if she had been seen sooner, [the] outcome could be quite different. She passed away 15 months later. Even after 14 years, her passing still affects my life. She was my guardian while growing up...I still miss her. Because she did not have access to affordable health care, my life was robbed of her joy too soon. ~ Tina, Santa Fe, TX*

# The Volatile Nature of Health Insurance

## Beginnings

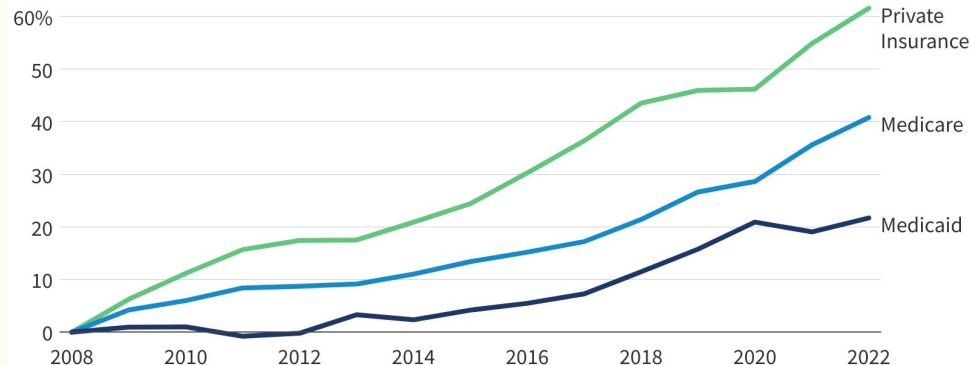
- Legalization of Medicare and Medicaid under Title XIX
- Medicaid ⇒ 83 mill. people
  - 1 in 5 people
- Medicare ⇒ 65 mill. people

## Current #s

- The Big Beautiful Bill's budget cuts
- Millions lose health coverage

Figure 5

**Cumulative Growth in Per Enrolled Person Spending by Private Insurance, Medicare, and Medicaid, 2008-2022**



Source: KFF analysis of National Health Expenditure (NHE) data

# Stories: Substance Abuse

## Anonymous, Connecticut



"In high school no one seemed concerned about my drinking so I wasn't either. I hide my drinking from a lot of people... Discontent, irritable and restless: how I felt every single day, waking up and going to high school however still thinking that it was normal. How couldn't it be, when everything else in my life seemed so ordinary... I never thought that I would be someone who would face the struggles of addiction. I knew I needed help after I ended up in the hospital one night drunk and combative."

# Substance Abuse Prevalence

## Declining Funding

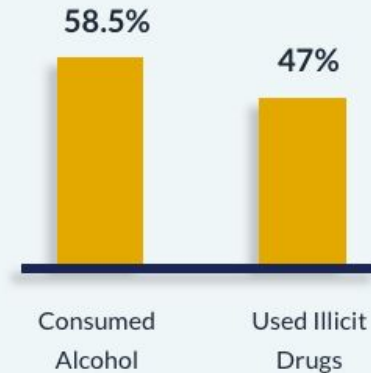
- **50% drop** in prevention program funds
- **Mere 8%** of school admin use evidence based substance abuse interventions

## Little Participation

- **16% decline** in prevention program participation
- Worryingly **minimal** state policy focus

## High School Student Substance Abuse

Statistics from a 2018 study by *The National Institute on Drug Abuse (NIDA)* showing teenage substance abuse by senior year of high school







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# Policy Specifics

# National Health Policy

## Federal Government Tasks

1. Health Coverage
2. Research
3. Regulate

## The Branches

- a. **Executive** ⇒ Oversee
- b. **Legislative** ⇒ Fund
- c. **Judicial** ⇒ Comply

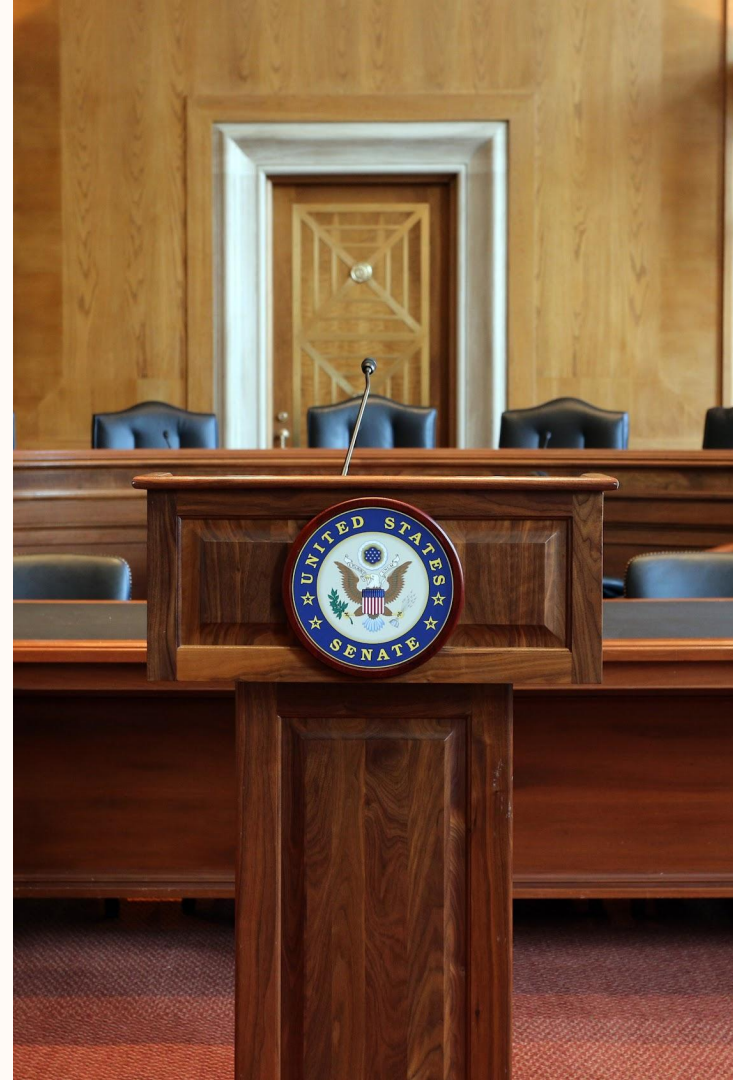


## Change isn't Easy...

- Interest groups & lobbying
- Ambiguous compromise
- Contagious complacency

**... but you can make an impact!**

- Local campaign volunteering
- Projects to raise awareness
- Building youth policy coalitions





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# **SBHCs in Action**

# SBHCs

## Federal Level

- “Constant” funding base
- FQHC-sponsored centers
- Social Security Title V

## State Level

- Partnering w/ Medicaid & CHIP
- Siphoned block grant funds
- SBIRT Prevention Programs



# Where does SBHC funding come from?

Figure 1. SBHC Sponsor Type

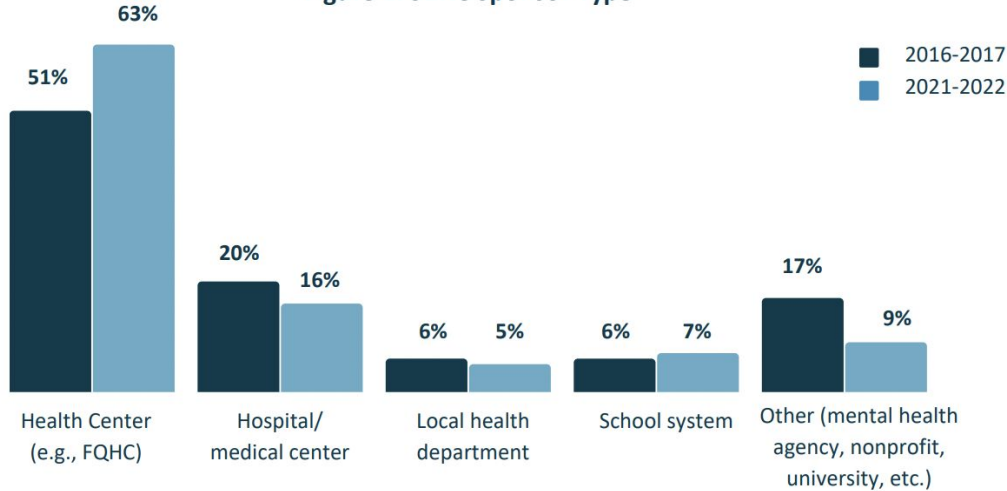
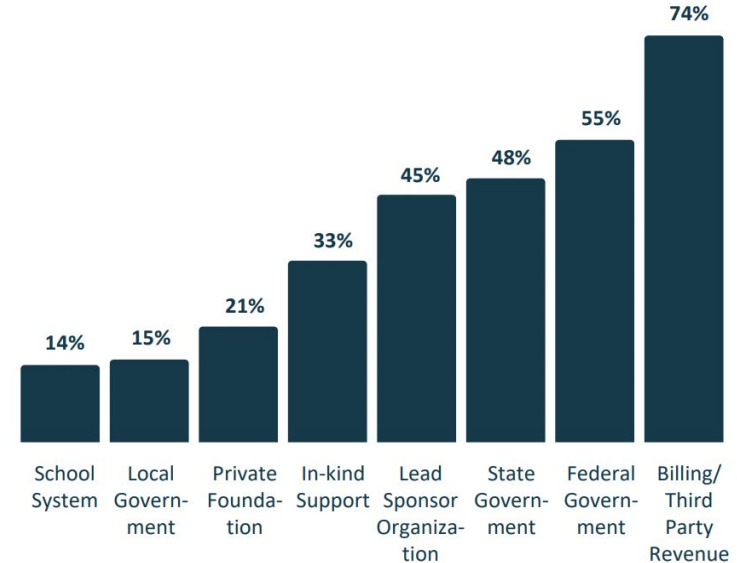


Figure 2. SBHC Funding Sources







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# **Your Advocacy Work**

# Our Health Policy Experience

## Grassroots



## Lobbying



## Legislative





## Policy Simulation

# The Health Problem

**Issue**: Your state is facing an increase in rates of malnourished youth in low-income neighborhoods.

● **Background**: You are serving as a member of the Health Policy Task Force on your state's School-Based Health Alliance Council.

- **Goal**
- Address the following youth health issue within your state by drafting a policy that can address the causes and effects of the problem.
  - You will be assigned a budget to simulate what a state would allocate to a similar issue
  - Draft a Resolution describing your plan to accommodate this health crisis and why it would be successful.

● **Budget**: Groups 1 & 2 receive \$5 million; Groups 3 & 4 receive \$10 million

## Successful Health Policy Ideas

- Onsite Food Pantry ~\$5000/Pantry
- Nutrition Education ~\$250,000
- Produce Prescription Program  
~\$40-\$80/person
- School Garden - \$5000/Garden

# No Kid Hungry Toolkit: Home



SCHOOL-BASED  
HEALTH ALLIANCE

The National Voice for School-Based Health Care



**NO KID  
HUNGRY**

by SHARE OUR STRENGTH

## Emerging Models And Resources To Address Food Insecurity In School-Based Health Centers

No Kid Hungry and School-Based Health Alliance believe that by embracing and building on families' trust in school-based health centers, we can promote federal nutrition programs and nutritious food consumption in support of favorable health outcomes and improved food security for families.

This toolkit highlights promising practices for integrating nutrition and food access into school-based health center (SBHC) services to address social influencers of health, improve food security for families, and support student success and wellness. The development of this toolkit and grants for the Learning Network were generously supported by **The Kroger Co. Zero Hunger | Zero Waste Foundation.**





**Thank You!**

# References

KFF. (2024, October 24). *Health Care Costs and Affordability* | KFF.

<https://www.kff.org/health-policy-101-health-care-costs-and-affordability/>

Mozafaripour, S. (2025, April 22). *Healthcare policy: What is it and why is it important?* University of St. Augustine for Health

Sciences. <https://www.usa.edu/blog/healthcare-policy/>

*Program History and prior Initiatives* | Medicaid. (n.d.).

<https://www.medicaid.gov/about-us/program-history#:~:text=Authorized%20by%20Title%20XIX%20of,coverage%20for%20low%2Dincome%20people>

# References

- Salas-Wright, C. P., AbiNader, M. A., Vaughn, M. G., Schwartz, S. J., Oh, S., Delva, J., & Marsiglia, F. F. (2019). Trends in Substance Use Prevention Program Participation Among Adolescents in the U.S. *The Journal of adolescent health : official publication of the Society for Adolescent Medicine*, 65(3), 426–429. <https://doi.org/10.1016/j.jadohealth.2019.04.010>
- Socialreco. (2025, January 24). *Fewer teens receiving substance use prevention messages | Substance Abuse and Behavioral Health Services in NJ*. Social Recovery Center.  
<https://www.socialrecoverycenter.com/fewer-teens-receiving-substance-use-prevention-messages>
- The Susan G. Komen Advocacy Alliance. (2009). *Personal Stories about the U.S. Health Care System*.  
[https://www.komen.org/uploadedFiles/Content/GetInvolved/Legislation/Public\\_Policy/Personal\\_Health\\_Care\\_Stories.pdf](https://www.komen.org/uploadedFiles/Content/GetInvolved/Legislation/Public_Policy/Personal_Health_Care_Stories.pdf)