Ensuring that women can plan their families in the way that works best for them improves child health and well-being. Nationally, about half of all pregnancies are unintended, but among women under the age of 19, 4 in 5 pregnancies are unintended. Unintended pregnancies are associated with increased rates of maternal depression and low birth weight and poor child health. Teens who give birth experience additional challenges and lack of supports, which leads to lower rates of high school graduation and lower incomes as adults. One way to reduce unintended pregnancy is to ensure that women have access to the most effective family planning methods, including access to long-acting reversible contraceptives such as hormonal implants and IUDs. In 2009, Colorado expanded access to these most-effective forms of contraception and saw a dramatic decline in teen pregnancy rates.

Thanks to decisions made by state policymakers and federal health reform, Colorado has seen a historic decline in the percent of kids without health insurance.

Public coverage programs not only help ensure kids can access the care they need to grow up healthy and strong—they also help fight poverty by protecting a family’s financial resources. A 2017 study examined the impact of health benefits on poverty rates and found that Medicaid decreased the child poverty rate more than all other non-health means-tested programs combined.

Colorado’s Teen Birth Rate Per 1,000 Women Ages 15 to 19, 1991 to 2016

Source: Colorado Department of Public Health and Environment
Colorado has work to do to ensure a healthy start for babies of all racial and ethnic backgrounds. The infant mortality rate for Colorado’s black babies remains particularly high, even when controlling for a mother’s income and level of education. As of 2014, a black family in Colorado making between $50,000 and $75,000 per year faced an infant mortality rate nearly twice as high as a white family earning less than $15,000 per year. Research suggests that the stress associated with racism, discrimination and social isolation may be creating these disparities.

1 in 7 Colorado children experience food insecurity, which is correlated with poor health outcomes including increased rates of obesity and jeopardizes brain development leading to lower academic achievement, behavioral challenges, and increased rates of depression among adolescents.

SNAP provides critical support to families experiencing food insecurity and WIC provides assistance to pregnant and breastfeeding moms and to kids under 5. For children over the age of 5, school meal breakfast and lunch programs are often a critical support, providing up to half of a child’s food each day.

Questions for Candidates

Here are questions you might ask candidates to learn more about their positions on issues affecting Colorado kids. Whether you ask in person, online or by phone, these questions are designed to help you educate candidates while learning more about whether they are making kids a priority in their platform:

1. We know that quality health insurance coverage provides access to critical health services and financial protection for families. Kids with health insurance are less likely to drop out of high school, more likely to graduate from college, and have higher incomes as adults. How would you protect our historic gains in ensuring that kids have health care coverage and work to extend coverage to the 4 percent of Colorado kids that still don’t have it?

2. What would you do to continue Colorado’s success at ensuring that all women can access the most-effective methods of contraception so that they can plan their families in the way that works best for them?

3. How would you work to address infant mortality in Colorado to ensure that all women have the opportunity to watch their child grow up healthy and strong?

4. Only 76 percent of eligible Coloradans are enrolled in SNAP and only 41 percent of all eligible women and children are enrolled in WIC. What would you do to expand the percentage of eligible Coloradans who are enrolled in these programs?

5. What would you do to expand access to healthy food during breakfast and lunch in our schools?