Federal Leadership for Children and Youth

Rationale for a White House Office and Conference

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Rationale for a White House Office and Conference

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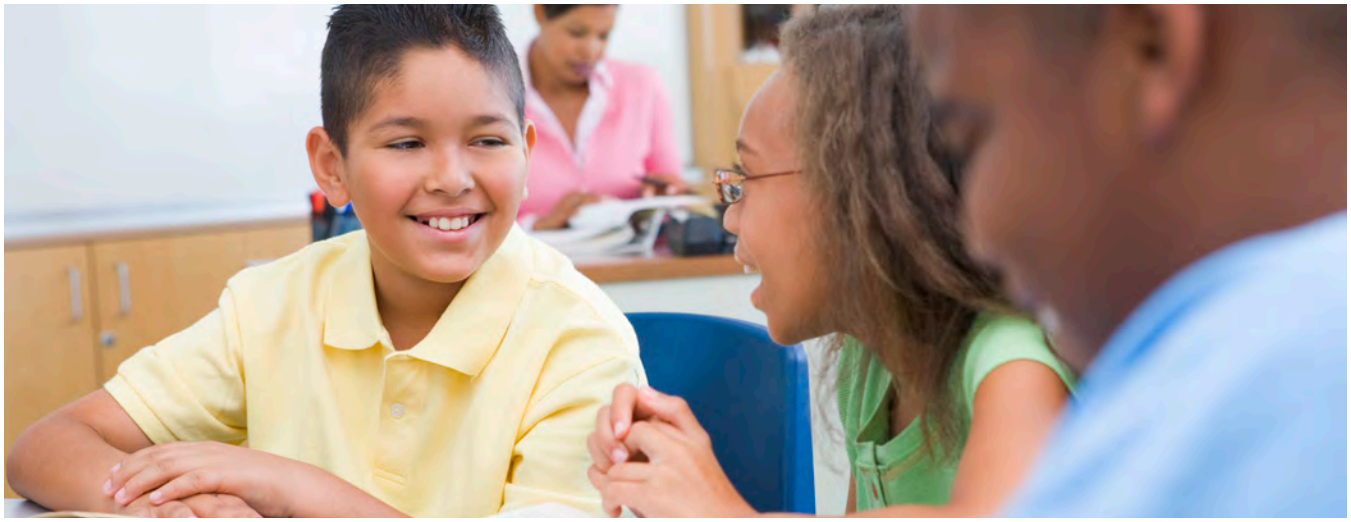


THE OPPORTUNITY AND VISION

Children are the future of our nation. Our future economic and civic strength and prosperity rely on today's investment in children and youth. However, an increasing number of children, youth and families are in a time of crisis across the nation as the health, economic and social impacts of the COVID-19 pandemic take root and the systems that serve them are stressed. Families are facing job losses. Many child care centers have permanently closed. Children and youth are not able to obtain the full benefits of school and community activities as in-person opportunities to learn, create relationships, grow through extracurricular activities and develop social-emotional skills are limited.

This crisis arises on top of significant structural and systemic challenges facing children, youth and families who have lower incomes or are Black, Indigenous, Hispanic or Latino, or other people of color. Glaring disparities have existed in many communities for centuries and this moment only sharpens the need for collective action now. We are at a unique crossroads with the opportunity to rebuild better systems and create more prosperous futures for ALL of our nation's children to cement America's prosperity for decades ahead. We put forth the following vision for our nation's children and youth:

- Children and youth should have the readiness, education and skills to compete, innovate, lead and thrive in the 21st century.
- A child's zip code, race, ethnicity, color, religion, sex, sexual orientation, gender identity, national origin, disability or veteran status or veteran family status, should not determine health, educational or economic opportunity and outcomes.
- Governmental policies should lead to measurable improvements that promote equitable outcomes and advance health, well-being and opportunities for children, youth and their families.

To help realize the opportunity and re-imagine our systems for optimal health, well-being and development, the White House should create an Office on Children and Youth to elevate the needs of children, youth and their families across the country. Federal leadership will shine a light on the needs of children and youth; bring greater policymaker attention to existing and emerging research, successful local models and policy recommendations; enhance alignment and coordination of federal programs; and ultimately set our country on a shared trajectory of well-being, prosperity and thriving for the future.

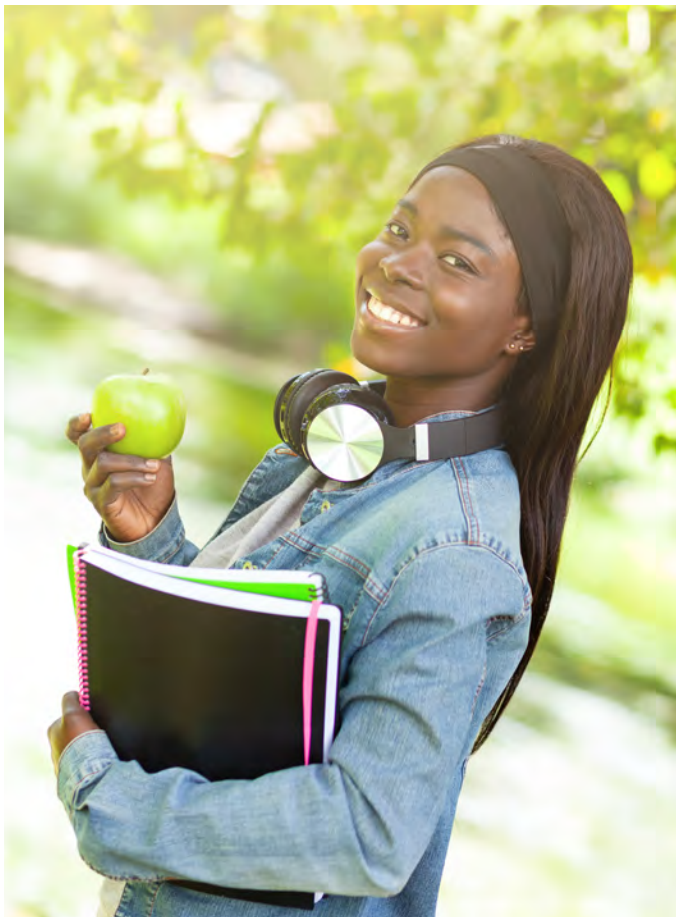
WHY FOCUS ON CHILDREN AND YOUTH

We know intentionally focusing on children will have positive short- and long-term benefits.[1] The federal government's policies should reflect that investing early in a child's life will make the greatest impact and a lack of investment contributes to worse outcomes and greater costs in the future. When children arrive in school hungry, experience homelessness or grow up amidst violence and trauma, their opportunity to thrive as adults is compromised.

- Alternatively, prioritizing the health and well-being of children (starting in the early years) and youth, strengthening families and supporting opportunities in all communities will lead to better health and economic outcomes for decades into the future.[2,3]
- Numerous studies demonstrate how exposure to stress and adverse experiences in utero and infancy affect lifelong health and behavior and how intervention in early childhood can reverse these effects and promote health equity as children grow and develop.[4,5]
- High-quality birth-to-five programs for children can have substantial life cycle return on investment and result in better outcomes in numerous areas, including education, health, social behaviors and employment.[6]

Importantly, adolescence — a period that begins around 10 years of age and lasts until 26 — offers another critical window for development and new opportunities to thrive and even overcome early and middle childhood challenges. While adoption of policies supporting early childhood is growing, adolescence often remains overlooked as a critical period for supporting youth — a time when disparities can be overcome or exacerbated.

- Major studies such as the National Academies of Sciences, Engineering and Medicine's *Promise of Adolescence* demonstrate that adolescence is a time for development and learning and provides opportunities for life-long impact.[7]
- Disparities in family and neighborhood resources and supports, biased and discriminatory interactions with important social systems and resulting inequalities in opportunity and access severely curtail the promise of adolescence for many youth, underscoring the imperative of equitable supports and approaches.[8]
- Healthy, productive and skilled young adults are critical to the nation's workforce, global competitiveness, public safety and national security.[9]
- Across the U.S., 4.5 million young people ages 16-24 are not in school or the workforce and the adolescent development science shows that meaningful opportunities to re-engage can help them create new, positive trajectories.[10]



THE PROBLEM

While some children in the United States have the opportunity to succeed, too many face structural barriers that dramatically reduce their opportunities in life. Almost one in five children lives in poverty.[11] More than 44 million children are exposed to violence, crime or abuse in their homes, schools and communities.[12] As a result of the opioid epidemic, thousands more children experience parental addiction, family member incarceration or even loss of a parent to overdose.[13] Over the past decade, youth mental health has declined, with the number of youth reporting suicide attempts increasing by 41 percent. Meanwhile, the COVID-19 pandemic has amplified and exacerbated these crises.

Of course, the real lives of young people underlie these statistics — children whose opportunities remain limited by their communities and conditions in which they were born, without the healthy housing, high-quality child care and education and other critical opportunities that would position them to lead long, healthy and fulfilling lives. These statistics demonstrate a snapshot into the scale of this problem:

- 13 million children live in poverty.[14]
- 22.5 million children live in households with housing insecurity.[15]
- 19.5 million children have parents who lack secure employment.[16]
- 44 million (60 percent) children are exposed to violence, crime, or abuse in their homes, schools and communities.[17]
- 4.2 million 3- and 4-year-old children lack early childhood education.[18]
- 4 million children lack health insurance.[19]
- 37 percent of youth report feeling sad or hopeless.[20]
- 50 percent of children are on track to experience obesity in adulthood.[21]

Equity and Disparities

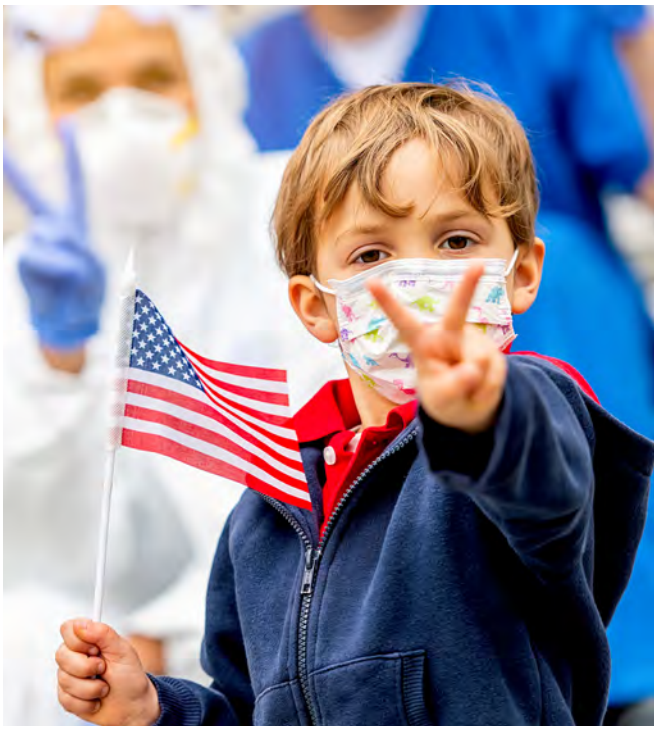
The nation's inequities remain deep, systemic and stubbornly persistent. Children from Black, Indigenous, Hispanic or Latino and many rural communities have significantly worse outcomes across every key indicator than their peers.[22, 23]

- Children who live in the most economically disadvantaged counties in America die at rates up to five times those of their peers in the same state. The same children are three times more likely to lack regular access to healthy food and are 14 times more likely to drop out of high school. In addition, teen pregnancy rates are up to 26 times higher in these counties.[24]
- More than 45 percent of youth identifying as American Indian or Alaska Native reported feeling sad or hopeless in 2019, as did 40 percent for Hispanic or Latino and 66.3 percent for gay, lesbian, or bisexual, as do 36 percent for those identifying as white and 32.2 percent for those identifying as heterosexual.[25]
- 1 in 17 children spend part of their childhood in foster care. That number rises to 1 in 9 for Black children and 1 in 7 for Indigenous children.[26]
- Children who live in rural counties fare far worse than their urban counterparts. Across the country, 46 of the 50 counties with the lowest overall well-being are rural and only three rural counties are ranked in the 50 counties with the highest well-being.[27]
- Poor, vulnerable and underrepresented children disproportionately (and by some measures increasingly) live

in neighborhoods with far less social, physical, economic, environmental, educational and employment capital than their peers.[28]

- Studies increasingly find that community context is predictive of a child's developmental outcomes, even independent of the immediate family's socioeconomic status.[29]

The COVID-19 Pandemic



The COVID-19 pandemic has drawn increased attention to, and amplified, these long-standing disparities.[30] In addition, it has exacerbated economic and social stressors on families, especially those who have experienced job losses or evictions and highlights the challenges resulting from institutional racism. Children and youth are living through these compounded stressors from the pandemic in these additional ways:

- Of the children who have died from COVID-19, more than 75 percent have been Hispanic, Black, American Indian or Alaska Native, while those populations represent only 41 percent of the U.S. population.[31]
- Between six and eight million families — including two and one half million children — fell into poverty from May to October 2020 as federal aid from the CARES Act expired.[32]
- Data indicate that between mid-March and mid-April 2020, physicians ordered 2.5 million less doses of non-influenza vaccines and 250,000 less measles-containing vaccines than during the same period in 2019.[33] Lower vaccination rates increase the likelihood of infectious disease outbreaks once congregate activities resume.[34]
- Furthermore, the Centers for Medicare and Medicaid Services reports that when compared to data from the same time period last year (March-May 2019), preliminary data for 2020 shows, children enrolled in Medicaid received 1.7 million (22 percent) fewer vaccinations for beneficiaries up to age 2, 3.2 million (44 percent) fewer child screening services, 6.9 million (44 percent) fewer outpatient mental health services even after accounting for increased telehealth services and 7.6 million (69 percent) fewer dental services.[35]
- Of the children living in rental housing, more than 40 percent live in a household that either is not getting enough food or is not paying rent on time.[36]
- The pandemic has further harmed youth mental health, with more than 25 percent of young adults reporting they seriously considered attempting suicide in the past 30 days in a representative sample taken in June 2020.[37]
- There is already evidence that school closures in the spring of the 2019-2020 school year have had negative educational impacts on children.[38]
- Financial distress and social isolation can intensify adverse childhood experiences and lead to toxic stress, a known risk factor in the development of chronic diseases and health risk behaviors in adulthood.[39,40]

- Stay-at-home orders can reduce levels of physical activity, especially among children living in urban areas or without access to outdoor areas large enough to accommodate social distancing.[9] Stay-at-home orders are also likely to increase screen-time, which is associated with childhood overweight and obesity.[9]
- Given the operational and financial challenges of operating any in-person congregate facility, child care capacity in the United States could be cut in half. This is likely to exacerbate existing disparities in child care availability between racial and socioeconomic communities.[41]

Falling Behind International Peers

Even before the pandemic, children were not thriving in the United States. The United States ranks near the bottom in nearly all child well-being measures compared to its peers. The Organisation for Economic Co-operation and Development (OECD) is an intergovernmental organization with 37 member countries that includes some of the world's largest economies, such as Germany, Canada, the United Kingdom, South Korea, Japan and France, as well as more recently developed countries such as Columbia, Estonia, Lithuania, Mexico and Slovenia. As shown in Table 1, the United States ranks in the bottom third of countries in half of child well-being measures.[42] **To maintain its status an an international leader, the United States must focus on promoting the health and well-being of all children and advancing equitable outcomes.**

How the United States compares to other OECD countries on 20 key measures

● Top third ◆ Middle third ■ Bottom third

Home and family environment	Jobs and income	Average disposable household income for children ●
		Children in relative income poverty ■
		Children in jobless households ◆
	Parent-child relationships	Adolescents talking to their parents before or after school ◆
Health and safety	Infant health	Infant mortality ■
		Low-weight births ■
	Child and adolescent health	Adolescents skipping either breakfast or dinner ■
		Adolescents regularly engaging in vigorous exercise ●
Education and school life	Educational resources at home	Adolescents with a desk and a quiet place to study at home ■
		Adolescents with books for school work at home ■
	Educational attitudes and expectations	Adolescents who feel anxious about school tests ■
		Adolescents who expect to complete a university degree ●
	Quality of school life	Adolescents who feel like they belong in school ◆
		Adolescents who report being the victims of bullying ◆
	Educational performance	Reading performance at age 15 (PISA) ◆
		Mathematics performance at age 15 (PISA) ■
Activities and life satisfaction	Subjective well-being	Adolescents reporting high life satisfaction ◆
		Adolescents reporting low life satisfaction ◆
	Other adolescent activities and outcomes	Adolescents not in education or employment ■
		Adolescent fertility ■

Note: Placement in top/middle/bottom third of OECD countries with available data on each measure. 'Top third' (green circle) always represents good relative performance with respect to child well-being, and 'bottom third' (red square) poor relative performance. For measures where a larger value is generally 'better' (e.g. 'adolescents reporting high life satisfaction'), 'top third' means the country is in the top third when countries are ranked largest to smallest value down. For measures where a smaller value is better (e.g. 'adolescents reporting low life satisfaction'), 'top third' means the country is in the top third when ranked smallest to largest.

Lack of Federal Leadership

The federal government currently lacks a coordinated agenda, a clear set of priority outcome metrics and a cohesive, multi-agency budget to prioritize the health and well-being of children and youth. Moreover, the federal government spends much of its resources later in life when it is much more difficult and costly to change life's outcomes and after individuals have experienced significant trauma from inequitable systems.

- Medicaid, EITC, CTC, SNAP, TANF and SSI are the largest sources of funding for child-related programs that target low-income families with children.[43] These funds flow from different agencies within the federal government to states and local governments. The uncoordinated funding and rule-making result in disjointed, repetitive, underfunded and sometimes conflicting federal, state and local-level programs and interventions.[44]
- There are few federal authorities that attempt to blend and braid funding streams — or encourage states, tribes and localities to do so — in order to have the greatest impact for children, youth and families.[45]
- The share of federal spending on children has hit its lowest level in five years.[46]
- Of the major interagency memos on community and economic development in the past 10 years, only one initiative focused on the needs of children.[47]

- Total federal spending on children's education has dropped consistently over the past five years resulting in a cumulative reduction of 11.4 percent.[48]
- Of the three past strategic plans developed by the U.S. Department of Health and Human Services, children were only priorities in a handful of objectives and are frequently not represented in the strategic plans of other key agencies.[49]
- Of the over 80 innovative payment models developed to improve the health of Americans and tested by the federal Centers for Medicare and Medicaid Services, Center for Medicare & Medicaid Innovation (the Innovation Center), only one focused on children and two others focused on pregnant women. In addition, studies find that children's needs are not prioritized in models not focused specifically on children.[50]

Children and youth need **whole-community, cradle-to-career strategies** that engage multiple sectors in order to grow up healthy — this includes coordination between sectors, but also implementation of evidence-based interventions shown to measurably improve lives. States and other countries have recognized this reality and have taken action. For example, numerous states, counties and cities have children's cabinets that create policy frameworks for addressing the comprehensive needs of children and coordinate cross-agency responses to their needs. In other countries such as Norway and Ireland, national children's ministries and departments formulate goals and policies to improve outcomes for children, youth and families and promote alignment of services for children and families across government agencies. *A companion document describes achievements of these and other domestic and international examples.*

The lack of a single leadership point with a dedicated focus on creating more prioritization, alignment and coordination for the health, well-being and education of children and youth has not served America's children well. **Out of the current crisis can come a powerful opportunity to create a leadership structure for our nation's children and youth, one that is needed in order for America to have a prosperous future for the next generation.**

CONCLUSION

Through Executive Order, the President should create a White House Office on Children and Youth and host a White House Conference on Children and Youth to improve the health, well-being and education of children and youth, advance equity, eliminate disparities and ensure that federal policies prioritize their unique needs. The companion to this brief sets forth a proposal for how to structure this new office to give children, youth and their families the attention and resources they deserve.

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