



CHILDREN'S AGENDA FOR THE 118TH CONGRESS

Kids at a Crossroads



FIRST FOCUS
CAMPAIGN FOR CHILDREN

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INTRODUCTION

Our Children are at a Crossroads

Our children — and our country — are at a crossroads. Over the past three years, COVID-19 and its economic fallout affected every aspect of the lives of children, infringing on their health, education, economic security, safety, and well-being. The full extent of the consequences for children will not be known for years.

At the same time, the pandemic spurred Congress and the federal government to invest in children at historic levels and to monitor their health and safety in unprecedented ways. The pandemic drove action on issues that children had been experiencing for years and that came to a head during the political, social and economic upheaval. As is often the case, children from historically marginalized communities, such as children of color and children in immigrant families, experienced the deepest impact. Thanks to Champions for Children in Congress, lawmakers passed some of the most significant legislative reforms for children to ever occur.

Through various pieces of pandemic legislation and the appropriations process, critical funding was provided to child care providers, public schools and Head Start centers to better support children and allow parents and caregivers to return to work. Investment was made in children's programs such as nutrition benefits and homeless children and youth wraparound services to address the problems that arose from increased unemployment and school closures. Legislation also expanded eligibility for essential programs such as the Children's Health Insurance Program and Medicaid health care coverage. In one of the most notable reforms, a more equitable tax code was created by strengthening the Earned Income Tax Credit and the Child Tax Credit — with the CTC improvements resulting in more than a 40% reduction in childhood poverty and millions of children being lifted out of poverty.

The impact of these provisions cannot be overstated. Congress provided relief and support for children and families when it was desperately needed. In fact, the federal share of spending on children rose from an all-time low of 7.55% in 2020 to a recorded high of 11.98% in 2022.¹ Unfortunately, many of these improvements were temporary. As the Public Health Emergency draws to a close, and many of these essential programs unwind or have already ended, children will be put at significant risk.

Certainly, poverty, hunger, homelessness, child health coverage, education, the mental health crisis, and other issues faced by children are emergencies in and of themselves. Will we continue to treat these issues as emergencies? Or will political gridlock inflict continued suffering on children and families?

It is now up to Congress to ensure that we continue to move our children forward. We must continue to listen to, and invest in, what children need, both in the United States and around the world to make lasting progress for kids.

The American public is united in their desire to support children. A May 2022 poll conducted by Lake Research Partners, found that voters want federal policy that centers children and invests in their well-being.² By a 5-to-1 margin voters said the federal government spends too little rather than too much on children. These margins increase when asked about spending on specific issue areas. For example, child poverty (66-10%), accessing mental health services (66-9%), reducing child homelessness (65-8%), and reducing child hunger (64-5%) all showed strong majority support for investing in children.

For a brief moment, children had Congress' attention and lawmakers seized the opportunity. They prioritized the current and future needs of kids with historic investments in climate change and environmental health. And they showed protecting children is a unifying issue when they took the first step to addressing gun violence and mental health in the Bipartisan Safer Communities Act, the first piece of meaningful gun reform in years.

However, we also saw how children get left behind. The House passed a plan that First Focus Campaign for Children said had the potential to be "the most important piece of legislation for children and families, ever." Unfortunately, as is often the case with legislation, when negotiations got tough, kids got cut out. In fact, the Build Back Better Act passed by the House of Representatives included 436 mentions of children, but in its final form — the Inflation Reduction Act — there was just 1 meaningful mention of kids.

Now is the time to choose whether we will make children's best interests and their well-being a priority or not. As the 118th Congress gets started, we urge your office to join advocates and other Champions for Children in committing to kids. Much remains to be done to earn back the expired gains from recent years, and to build upon the lessons learned.

First Focus Campaign for Children is eager to work alongside your office to that end. We are pleased to share our *Children's Agenda* as a first step in partnership.

1. First Focus on Children. 2022. "Children's Budget 2022." First Focus on Children. <https://firstfocus.org/resources/report/childrens-budget-2022>.

2. First Focus on Children. 2022. "Fact Sheet: Voters Strongly Support Making Investments in Our Children and Grandchildren." First Focus on Children. <https://firstfocus.org/blog/fact-sheet-voters-support-investments-in-kids>.



SECTION 1

Advance Equity for All Children

There is a prevailing myth that decision makers and the general public are sympathetic to children and therefore usually act in their best interests. Unfortunately, very often the opposite is true. Every single area of policy making affects children, yet decision makers often treat them as an afterthought, leading to policies that often work against their interests. Children rarely come up in conversations about equity, but they face discrimination just for being children. They are, in fact, an underserved population. Children make up approximately one quarter of the U.S. population, but as First Focus on Children's annual *Children's Budget* illustrates, they historically have not received their fair share of government funds, despite evidence that investing in children benefits their well-being and the country's overall economy.¹

Examples of discrimination against children are plentiful throughout our society. Families with children face discrimination,² larger security deposits, and increased risk of eviction³ even though federal law prohibits housing discrimination based on familial status. Transportation is another sector that often discriminates against children. In his 2023 State of the Union address, President Biden said "airlines can't treat your child like a piece of baggage." Yet, Congress only recently directed airlines to allow younger children to sit with their parents free of charge, and the Department of Transportation only began enforcing the directive this year.

Children also are the most diverse generation in the United States, exposing them to more compounding forms of discrimination.⁴ The racial generation gap — defined as the space between these young, diverse children and an aging, predominately white older population — has been widening. A number of studies show that communities and states with a large racial generation gap often devote less support to children's programs, such as education.⁵ Areas where the population of children of color is growing the fastest — the Southwest, the Southeast, and Appalachia — are the same places that report the worst outcomes for children.⁶

Longstanding systemic and institutional racism and its continued effect on every aspect of government policy has created the worst outcomes in every aspect of child well-being for children in communities of color including but not limited to Black, Hispanic, American Indian/Alaska Native, Asian, Native Hawaiian and other Pacific Islander, immigrant households, and children living in the U.S. territories.⁷ The COVID-19 pandemic and its economic fallout further exacerbated long-standing disparities for children of color and their families.⁸

Children in marginalized communities should not fare worse than their non-marginalized peers simply because of who they are, their ancestry, or where they come from. Federal policies must proactively seek to end disparities for children from marginalized communities and ensure that every child has the opportunity to reach their full potential. Our country can no longer afford to put forward policies that harm children's well-being and put them behind every other generation.

This *Children's Agenda* offers recommendations for advancing racial equity in each of its policy sections. This section addresses larger systemic changes and policy designs that Congress can pass to help achieve these goals.

Improve Government Structures

History has shown that many lawmakers will not take action to prioritize children or advance race equity unless held accountable to doing so. We need to put systems in place to ensure that policies' effects on children, especially children of color, are considered and prioritized.

1.1 Require child impact statements

Child impact statements are used to ensure that considerations of child well-being are built into the design of a policy. As with environmental impact statements, child impact statements require government agencies to answer fundamental questions about the potential positive and negative effects of regulations, policies, and programs on children.⁹ Child impact statements can advance equity by evaluating the impact of policies on specific demographics of children. The Children's Protection Act of 2021 (H.R. 3716), introduced by Reps. Caroline Maloney (D-NY) and Ayanna Pressley (D-MA) in the 117th Congress, would require federal agencies to analyze the effects of proposed and final regulation on children, including which demographics of children would be most affected. *See "Make Government Work Better for Children" on page 13 for more information on child impact statements.*

1.2 Improve data collection and disaggregation

For many years, government data has undercounted children or not sufficiently disaggregated data to determine the impacts of policies on children in underserved communities. Advancing equity in policies that affect children will require more and better data. For children's health, for example, social determinants of health (SDOH), also called "social drivers of health", are the non-medical factors that can account for as much as 50% of health outcomes.¹⁰ Children from low-income families and children of color are most likely to experience the impact of SDOH. When tracking children's health, for example, data on SDOH can provide the foundation for identifying disparities, targeting their sources, measuring progress, and establishing accountability.

Gaps in government data on child poverty also hinder progress. For instance, children living in the U.S. territories experience significantly higher rates of poverty than children in the 50 states and the District of Columbia, but the Official Poverty Measure and Supplemental Poverty Measure do not account for households in Puerto Rico and the U.S. territories. This lack of data on children in the territories masks the unequal access that territory residents have to anti-poverty programs and obscures the implications for economic stability.

The U.S. Census Bureau provides one major source of government data on children. Congress must therefore begin by addressing the continual undercount of children in the decennial Census, American Community Survey, and other U.S. Census Bureau surveys. Census data guides the allocation of more than \$1.5 trillion in federal funding to over 300 programs,¹¹ many of which help to support the healthy development of children and keep families from falling into poverty. Despite Census Bureau efforts to count all kids in 2020 the net undercount rate for young children in the 2020 Decennial Census increased from 4.6% in 2010 to 5.4% in 2020 — the highest net undercount rate for young children since tracking began in 1950.¹² Preliminary data from 2020 suggests the gap between non-Hispanic white and minority

children (Black and Hispanic) also grew, meaning that many of the children most in need of assistance are the least likely to get their fair share.

Congress must increase support for the U.S. Census Bureau's newly formed Directorate on the Undercount of Young Children in the Fiscal Year 2024 budget. The Directorate is designed to determine why young children are missed, improve data collection on young children, elevate research addressing the undercount of Hispanic and Black children, and expand outreach with stakeholders to enhance data accuracy. In addition, more funding would enable the Census Bureau to improve the American Community Survey's sample size, response rates, follow-up operations, and other functions to ensure that it accurately captures data about the nation's increasingly complex communities and households. Congress also must direct and fund efforts for the Census Bureau to account for all children in the United States and all of its territories in national poverty measurements.

The Interagency Forum on Child and Family Statistics gathers, pools and publishes data on children and families from multiple U.S. government agencies, including on its website [Childstats.gov](https://www.childstats.gov).¹³ However, the federal government could advance better informed policy and present a more accurate picture of children and their circumstances if the Forum and its cooperating agencies disaggregated their data more deeply. For example, the Forum's national indicators of well-being break down the child population by race and ethnicity, but ignore other characteristics relevant to effective children's policy, such as age group, gender, sexual orientation, disability, urban/rural location, income, and multi-language background. As the government is well aware, disaggregating data exposes hidden trends, particularly trends of discrimination and systemic barriers. The government must sufficiently disaggregate data on children to make informed decisions about policies that will improve well-being for all children.

Improve Policy Designs

Policy makers have many tools and techniques to advance racial equity and ensure that policy does not widen disparities. Yet many policies still in practice today were intentionally designed and implemented to exclude children and families of color and we continue to see the implications. Congress must use its opportunity to reform current policies and establish new ones to advance equity.

1.3 Make all children eligible for aid

First Focus Campaign for Children believes that every child should have a fair chance to thrive. Yet federal policies too often create categories of “deservedness” — applied mostly to low-income children and children of color — that negatively impact child well-being and harm both the short-term and long-term success of our kids. This disparity creates adverse consequences for our economy and doesn't reflect the values of our nation.

Government benefits and services often exclude immigrant children and children in immigrant families or erect significant administrative barriers to access. Eligibility limitations based on immigration status produce increased rates of uninsurance,¹⁴ food insecurity,¹⁵ and child poverty among children in immigrant families.¹⁶ Given the demographics of undocumented immigrants in the United States, disparities fall disproportionately onto Hispanic children.¹⁷ For example, an estimated one million immigrant children with Individual Taxpayer Identification Numbers (ITINs) remain excluded from receiving the Child Tax Credit, unfairly denying them critical support.

The COVID-19 pandemic provides a case study of the harms of excluding immigrant families from key benefits. The 2019 public charge rule took effect just weeks after the declaration of the Public Health Emergency related to COVID-19 and amplified the pandemic's health and economic harm to children.¹⁸ Many immigrants were more exposed to COVID as essential workers and families reported that cash, food, and employment were their most pressing needs during the pandemic, yet fear inspired by the 2019 public charge rule made immigrant families hesitant to access COVID-19 testing, treatment, and vaccines, unemployment insurance, the Paycheck Protection Program, and Pandemic EBT. Bills from the 117th Congress like the LIFT the BAR Act (H.R. 5227/S. 4311), led by Rep. Pramila Jayapal (D-WA) and Sen. Mazie Hirono (D-HI), and the HEAL for Immigrant Families Act (H.R. 3149/S. 1660), led by Reps. Jayapal and Nanette Barragán (D-CA)

and Sen. Cory Booker (D-NJ) expand immigrant access to critical health care, nutrition, and income support benefits and would start to close the gap between children in immigrant families and their peers.

As referenced earlier, children in Puerto Rico and the other U.S. territories also continue to face unequal access to federal benefits as part of a long history of racism and discrimination against Americans living in the territories. Before the American Rescue Plan Act (ARPA), only households with three or more children in Puerto Rico were eligible to receive the Child Tax Credit. Even after the ARPA permanently extended the Child Tax Credit to all households in Puerto Rico, families still were not given access to the advance monthly payments distributed between June and December 2021. The simplified CTC filing portal was only made available to families in Puerto Rico starting in July 2022, nearly a year after it was first made available to families in the 50 states and the District of Columbia. As a result, families in Puerto Rico are still struggling to receive their credit.

Now that the ARPA improvements have expired and the Child Tax Credit has reverted to the version passed in the 2017 Tax Cut and Jobs Act, fewer low-income families with children in Puerto Rico will benefit unless Congress makes a fix to allow residents in Puerto Rico to accrue the Child Tax Credit at the same rate as those in the 50 states and D.C.

In addition, families in Puerto Rico remain excluded from the Supplemental Nutrition Assistance Program (SNAP) and are only eligible for the Nutrition Assistance Program (NAP), a block grant that provides lower average monthly benefits per person and cannot respond easily when there is increased need.¹⁹

Reduce Administrative Barriers

Programs that place burdensome administrative requirements on enrollees, such as the need for significant documentation to prove eligibility or frequent reverification of income, create significant barriers to low-income children and families receiving benefits such as nutrition assistance, health care, cash assistance and other benefits that promote children's healthy development and household economic security. Surveys of people who applied for assistance under the Temporary Assistance for Needy Families (TANF) program or Medicaid/Children's Health Insurance Program (CHIP) found that people had difficulty finding applications, answering application questions, determining what documentation to submit, and following the long application process.²⁰ Policy makers specifically designed these administrative hurdles to be particularly onerous for Black and Latino families²¹ based on bigoted views that people of color are less deserving of aid.

It is illogical and cruel that the families most in need of assistance are often the ones without the time and resources to document their need, and therefore face the highest barriers to enrolling in programs. Low-income households, which are disproportionately households of color due to racism and discrimination, are more transient, and low-income workers often face volatile work hours and fluctuations in income. A lack of access to transportation makes it harder for these families to reach program offices, and the country's persistent "digital divide" makes them much less likely to have access to broadband internet at home to virtually apply for benefits.²²

Documentation challenges make it particularly hard for immigrant families to successfully enroll in available programs. Immigrant parents may not have identification for themselves or their children, may face language barriers, or may fear immigration-based consequences if they provide identification from their country of origin.

Families with children may struggle to maintain benefits when forced to recertify their eligibility every six or 12 months or when they move and must reapply for benefits, both situations that often lead to children losing services. When families are forced to recertify — at government offices generally open only from 8am to 5pm — parents must take time off from work (usually unpaid), find child care, and secure transportation to complete the paperwork.

For solutions, lawmakers should look to the several programs that already model best practices. The school meals program, for instance, uses "community eligibility," which allows schools in high-poverty areas to automatically provide free meals to all students, regardless of income, sparing families a lengthy enrollment process.²³ The Head Start programs use "categorical eligibility," which deems families who participate in the Supplemental Nutrition Assistance Program (SNAP), TANF, or Supplemental Security Income (SSI) benefits, automatically eligible for Head Start and Early Head Start.²⁴ Children experiencing homelessness and those in the foster care system also are automatically eligible.

Congress must greatly reduce the administrative barriers faced by families who need assistance.

1.4 Create multiple points of entry to programs

Offer families multiple points of entry to apply for programs. Categorical eligibility should be expanded to additional programs, and Congress should create a “one-stop shop”²⁵ where families can enroll in multiple programs through one application, with the option of using an online platform if they wish.

1.5 Expand accepted forms of identification

Expand allowed forms of documentation that immigrants can use to enroll their children in benefits to include Individual Taxpayer Identification Numbers (ITINs) and self-attestation of income verification.²⁶

1.6 Make administrative forms more accessible

Make forms in multiple languages and virtual and phone translation services readily available. For example, New York State requires state agencies to translate vital documents related to services into the top 12 languages spoken by those with limited English Proficiency. The state also maintains an Office of Language Access and language access liaisons to support agencies in providing services in people’s best languages.²⁷

1.7 Require states to provide continuous eligibility

Require states to provide continuous eligibility for children through age 5 in Medicaid and the Children’s Health Insurance Program.²⁸ Continuous eligibility would limit gaps in coverage for low-income children who experience disproportionate rates of health disparities, especially children of color, and ensure kids have access to necessary services during the most critical years of early development.

Eliminate Work Requirements

The racist roots of work requirements in benefit programs extend far back into our nation’s history, starting with the slave trade and continuing into present day, as racist stereotypes persist about Black and other people of color’s willingness to work.²⁹ TANF, which replaced Aid to Families with Dependent Children (AFDC) in 1996, was specifically designed to limit assistance to Black mothers and children. TANF placed extremely arduous administrative requirements on participants, such as strict work requirements, family caps, and time limits, and provided meager cash assistance in many places. Currently, states with larger percentages of Black residents, mostly in the South, offer lower levels of cash assistance and reach fewer poor families, contributing to disproportionately high rates of poverty among Black children compared to white children.³⁰ Nearly 30 years of evidence show that TANF’s work requirements have failed to improve employment outcomes for program participants.³¹ In fact, a 2019 nonpartisan study from the National Academy of Sciences determined “that work requirements are at least as likely to increase as to decrease poverty.”³²

Work requirements do nothing more than add an extra layer of bureaucracy by forcing families to document their existing employment. Data shows that in most low-income households with children, at least one family member is already working. For example, almost 90% of households with children work in the year before or after receiving SNAP benefits and more than 60% work while receiving SNAP.³³ Employment documentation requirements are especially onerous for low-wage workers who often have no control over their schedules and whose hours may vary from week to week. Workers in immigrant households are more likely to be paid in cash and to lack pay stubs or paychecks, making employment verification difficult. Certain employers may be unwilling to provide a letter of employment verification.³⁴ Furthermore, some immigrant parents are self-employed and may not have an employer available to provide verification. Work requirements also do not account for uncompensated child rearing and caretaking of family members, work that produces large benefits to the collective whole. Grandparents caring for grandchildren, or parents caring for children with disabilities or special health care needs face particular barriers to economic security.

In the end, work requirements harm children and their families. Confusing rules, complex reporting systems and other bureaucratic red tape can cause children to lose their essential benefits. For example, in Arkansas, 18,000 Medicaid recipients lost their coverage within the first seven months of the state implementing work requirements before a court order halted the program.³⁵ When parents lose benefits, evidence shows that children do too, making policies such as these harmful to family financial security and children's health and development.³⁶

1.8 Eliminate work requirements for critical programs

We urge Congress to eliminate work requirements for programs such as SNAP, TANF and Medicaid that erect barriers to children receiving food, health care and the other necessities they need to thrive.

1.9 Extend improvements to the Child Tax Credit

In addition, we also urge Congress to extend the improvements to the Child Tax Credit made in the American Rescue Plan Act. As implementation of the pandemic-era CTC showed, cash transfers given to families without earnings or work requirements attached do not reduce employment for adults in the recipient households,³⁷ and in fact can increase labor force participation by helping parents and caregivers, especially single mothers, afford child care, transportation, and other necessities that help them get to work.³⁸

Fund Outreach and Education Activities

All program funding should include separate funding for education and outreach efforts to support trusted community organizations in helping to raise awareness and increase enrollment. As an example, during the Trump Administration's public charge rule, immigrant caregivers did not enroll themselves or their children in programs for which they were eligible, including programs not considered under the rule, for fear of immigration consequences.³⁹ After the rule was overturned, 50% of respondents to a survey said that knowledge about changes to the public charge rule would make them more likely to use safety net programs when necessary, highlighting the importance of continued outreach to immigrant communities about changes to the policy.⁴⁰ All communities of color, including immigrant families, should receive information and support from community leaders and organizations that share their cultural and linguistic background about enrolling for services.

1.10 Emulate successful models

Successful models of this support include the “Parent Mentor” programs in Medicaid and the ACA Navigator program. Studies have shown that parent mentors — parents who use knowledge of their communities and their enrollment experience to assist and counsel other parents — are more effective in connecting children of color to coverage than traditional methods. Parent mentors improve the likelihood of renewal and of connecting kids to care after enrollment.⁴¹ Similarly, the ACA Navigator program, when adequately funded, has been successful in providing linguistically and culturally sensitive services, connecting people to health coverage and other social supports in underserved communities.⁴²

Evaluate Programs for Equity

All social policies must be evaluated for their impact on racial equity and to identify racially disparate outcomes so proper reforms can be made. All policy development must be informed from the start by experts with lived experience of racial discrimination and poverty. These experts must be equitably compensated for their time and engaged in a way that does not retraumatize.

1.11 Consider existing evaluation tools

Congress should look to existing evaluation tools and guidance, such as Bread for the World’s racial equity scorecard,⁴³ the Equity Scoring Initiative from the Urban Institute and PolicyLink,⁴⁴ the District of Columbia city council’s racial equity impact assessments for legislation,⁴⁵ and other tools.

Design Policy to Promote Racial Equity and Inclusion

Federal policies and programs have historically been designed to leave children and families of color behind. Congress must consider policies that purposefully promote equity and inclusion, and that are informed by those with lived experience. For example, Black children have been suspended from school and missed critical learning time because they have Afros, braids, or locs that are part of Black and African culture.⁴⁶ The CROWN Act (H.R. 2116/S. 888) from the 117th Congress, led by Rep. Bonnie Watson Coleman (D-NJ) and Sen. Cory Booker (D-NJ) in response, specifically prohibits discrimination against hair texture or style for all programs or activities that receive federal financial assistance, ensuring that children can access school, benefits, and housing programs. The following is a partial list of policies that specifically promote equity for children of color that lawmakers can replicate in other issues areas:

1.12 Close the racial wealth gap

As of 2019, white households had eight times the wealth of Black households and five times the wealth of Latino households. A national “baby bonds” program, as proposed by Rep. Ayanna Pressley (D-MA) and Sen. Cory Booker (D-NJ) in the American Opportunity Accounts Act (H.R. 1041/S. 441) offers one way to address the racial wealth gap. This legislation would authorize federally funded and managed savings accounts (American Opportunity Accounts) for children under the age of 18. The government would automatically deposit \$1,000 for each child born (annually adjusted for inflation), and funds would grow over time as the account earns interest until age 18. Each year, a child could receive up to an additional \$2,000 deposit from the government — children from lower-resourced households would be eligible

for higher amounts. The program's funding would be exempt from annual appropriations and the investments would be excluded from asset limits for other government benefits.

A child can access the funds at 18 for allowable uses such as educational expenses, purchasing a home, or other targeted wealth-building assets that break down the structural barriers in our society that many Black, Latino, and other communities of color face in accumulating wealth and achieving economic mobility.

1.13 Address maternal mortality

The United States has long had some of the worst and most racially disparate maternal mortality rates in the world, and they rose even higher during the COVID-19 pandemic. In an effort to improve these numbers and combat the racism that underpins them, Reps. Lauren Underwood (D-IL) and Alma Adams (D-NC) and Sen. Cory Booker (D-NJ) introduced a comprehensive Momnibus bill (H.R. 959/S. 346) in the 117th Congress. This legislation comprises 12 bills to improve the health and well-being of birthing people and their children to combat the maternal health crisis in our country.

1.14 Address racial and ethnic health disparities

The Health Equity and Accountability Act (H.R. 7585/S. 4486), led by Rep. Robin Kelly (D-IL) and Sen. Cory Booker (D-NJ) in the 117th Congress, with historic support from the Congressional Asian Pacific American, Black, and Hispanic Caucuses, offers a legislative outline to reduce racial and ethnic health disparities among children, individuals, and families. The bill would not only remove barriers to affordable health coverage, but also promote a diverse health care workforce, investments in health delivery methods to reach more communities, and better guidelines to diversify clinical trials.

1.15 Protect the best interests of Native American children

Since 1978, the Indian Child Welfare Act (ICWA) has protected the best interests of Native American children in custody cases through consideration of the child's connection to their community as an essential part of assessing their best interest. Congress first passed ICWA to end decades of forced assimilation of Native American children by removing them from their tribes and placing them with non-Native families or in boarding schools. The law emphasizes reunification of Native American children with tribal families and requires "active efforts" (a higher standard than the "reasonable efforts" standard required by other child welfare laws) to prevent a Native American child from being removed from their home.

The Supreme Court is currently considering a challenge to ICWA that if successful, could upend this best practice. We strongly urge Congress to pass the bipartisan Strengthening Tribal Families Act (H.R. 8954) of the 117th Congress, led by Reps. Judy Chu (D-CA) and Don Bacon (R-NE), which would strengthen and support enforcement around the Indian Child Welfare Act (ICWA) by assisting local and state child welfare agencies with implementing ICWA.

1.16 Improve the behavioral health of children

Behavioral health struggles with the same disparities based on race, sexual orientation, and gender identity found in other sectors of child well-being. Between 2007 and 2017, the suicide rate for Black children rose from 2.55 per 100,000 to 4.82 per 100,000, and suicide attempts are rising faster among Black youth than any other racial or ethnic group.⁴⁷ As two of our authors noted in *First Focus on Children's Big Ideas 2023*, "Pervasive inequities such as lack of access to high-quality, culturally sensitive mental health care; provider bias; and deficit-focused institutional practices harm children and families of color and deepen intergenerational and community trauma."⁴⁸

Data is vital to creating equity in health care, and Congress can take steps to improve data. Congress should request a Government Accountability Office (GAO) report to review the way states are spending Medicaid dollars for behavioral health and substance use disorder for children, teens and young adults ages 0-26, disaggregated by race and ethnicity. High-poverty schools and those with more non-white students often have armed school resource officers on-site, but few counselors, psychologists, or social workers. Congress must require the Department of Education to conduct a detailed analysis of student-to-school-based mental health personnel ratios in all school districts, with data disaggregated by students' race and ethnicity and their access to mental health services.

1.17 Promote environmental justice for marginalized communities

Children from low-income families and communities of color are usually at higher risk of exposure to toxic substances, pollution and the resulting negative health outcomes such as asthma and learning disabilities. The Environmental Justice for All Act (S. 872/H.R. 2021), led by Sen. Tammy Duckworth (D-IL) and Rep. Raul Grijalva (D-AZ) in the 117th Congress, would remedy these disparities by requiring federal agencies and larger corporations to further consider the health consequences of their actions and by ensuring compliance and enforcement to reduce health disparities and improve public health in disadvantaged communities.

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1. "Children's Budget 2022." First Focus on Children. October 6, 2022. <https://firstfocus.org/resources/report/childrens-budget-2022#:~:text=Children's%20Budget%202022%2C%20released%20today,of%20children%20without%20health%20insurance.>
2. "State of Fair Housing: Annual Report to Congress FY 2020." U.S. Department of Housing and Urban Development. <https://www.hud.gov/sites/dfiles/FHEO/documents/FHEO-Annual-Report-FY2020.pdf>. "HUD Announces Settlement in California Fair Housing Discrimination Case." FHANewsblog.com. March 2, 2020. <https://www.fhanewsblog.com/hud-announces-settlement-in-california-fair-housing-discrimination-case/>; "State of Fair Housing: Annual Report to Congress FY 2021." U.S. Department of Housing and Urban Development. Pp. 29-30. <https://www.hud.gov/sites/dfiles/FHEO/documents/FHEO%20Annual%20Report%20FY%202021.pdf>.
3. Desmond, Matthew, Weihua, An, Winkler, Richelle, and Ferriss, Thomas. "Evicting Children." *Social Forces* 92(1) 303–327. September 2013. https://scholar.harvard.edu/files/mdesmond/files/social_forces-2013-desmond-303-27.pdf
4. Fry, Richard and Parker, Kim. "Early Benchmarks Show 'Post-Millennials' on Track to Be Most Diverse, Best-Educated Generation Yet." Pew Research Center. November 15, 2018. <https://www.pewresearch.org/social-trends/2018/11/15/early-benchmarks-show-post-millennials-on-track-to-be-most-diverse-best-educated-generation-yet/>.
5. Lesley, Bruce. "The Racial Generation Gap and the Future for Our Children. First Focus on Children. January 2016. <https://firstfocus.org/wp-content/uploads/2016/05/The-Racial-Generation-Gap-and-the-Future-for-Our-Children.pdf>.
6. Frey, William H. "The Generation Gap." *Trend Magazine*. Pew Charitable Trusts. Winter 2018. <https://www.pewtrusts.org/fr/trend/archive/winter-2018/old-versus-young-the-cultural-generation-gap>.
7. U.S. Government Accountability Office. "Child Well-Being: Key Considerations for Policymakers." November 2017. <https://www.gao.gov/assets/gao-18-41sp.pdf>.
8. First Focus on Children. "Fact Sheet: Kids and COVID By the Numbers." March 12, 2022. <https://firstfocus.org/resources/fact-sheet/kids-and-covid-by-the-numbers>.
9. Lazarus, Wendy. "Child Impact Assessments: A Missing Piece to Spur Progress for U.S. Children." Kids Impact Initiative. May 2020. https://kidsimpact865312240.files.wordpress.com/2020/06/child-impact-assessment_6-5-fix.pdf.
10. "Addressing Social Determinants of Health: Examples of Successful Evidence-Based Strategies and Current Federal Efforts," ASPE, Office of Health Policy. April 1, 2022. <https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84ae8ff0fae7474af82/SDOH-Evidence-Review.pdf>.
11. "Counting for Dollars 2020: The Role of the Decennial Census in the Geographic Distribution of Federal Funds," The George Washington University, Institute of Public Policy, April 29, 2020. <https://gwipp.gwu.edu/counting-dollars-2020-role-decennial-census-geographicdistribution-federal-funds>.

12. O'Hare, Bill. "New Census Bureau Data Show Young Children Have a High Net Undercount in the 2020 Census," March 2022. <https://countalkkids.org/resources/new-census-bureau-data-show-young-children-have-a-high-net-undercount-in-the-2020-census/>.
13. Forum on Child and Family Statistics. "Charter of the Federal Interagency Forum on Child and Family Statistics." <https://www.childstats.gov/forum/charter.asp>.
14. Uninsured rates for U.S. citizen children of immigrants are double that of their peers because of eligibility restrictions and anti-immigrant policies that prevent families from accessing health care. Uninsured rates among Hispanic children widened for the first time in a decade, rising to 8.1 percent compared to 5.2 percent for all children and 4.2 percent for non-Hispanic children in 2018 and to 9.2 percent in 2019. "Health Coverage of Immigrants." Kaiser Family Foundation. April 6, 2022. <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-of-immigrants/>
15. Chilton, Mariana et al. "Food Insecurity and Risk of Poor Health Among US-Born Children of Immigrants. March 2009. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2661461/>.
16. Acevedo-Garcia, Dolores et al., "Including Children in Immigrant Families in Policy Approaches to Reduce Child Poverty." Academic Pediatrics. 2021. <https://reader.elsevier.com/reader/sd/pii/S1876285921003752?token=DD9DAD642E5C788BDE25A1057A694672BAED26790401860D6D7B9DEE889313B0F45E27E01EC4B797D457F4367C73E463&originRegion=us-east-1&originCreation=20220412183152>.
17. Data shows that more than half of all children of immigrants are Hispanic. "Part of Us: A Data-Driven Look at Children of Immigrants." Urban Institute. March 14, 2019. <https://www.urban.org/features/part-us-data-driven-look-children-immigrants>.
18. Abaya, Miriam, Baldari, Cara, and Gomez, Olivia. "The Biden Administration public charge regulation —what does it mean for children in immigrant families?" Policy Brief. First Focus on Children. October 26, 2022. <https://firstfocus.org/resources/fact-sheet/policy-brief-the-biden-administration-public-charge-regulation-what-does-it-mean-for-children-in-immigrant-families>.
19. Enchautegui, M. E., Blakely-Vallecillo, V. and Aguirre Mercado, V. (2022). "Leveraging the NAP to SNAP transition to promote the economic mobility of children and youth in Puerto Rico." San Juan: Instituto del Desarrollo de la Juventud. December 2022. https://assets-global.website-files.com/60f311e9e2e57d523d28bba2/638e3613343be9dacb972f14_2022_web-NAP_SNAP_2.pdf.
20. Pratt, Eleanor et al. "Improvements in Public Programs' Customer Service Experiences Could Better Meet Enrolees' Needs and Build Trust in Government." Urban Institute. January 2023. <https://www.urban.org/sites/default/files/2023-01/Improvements%20in%20Public%20Programs%E2%80%99%20Customer%20Service%20Experiences%20Could%20Better%20Meet%20Enrolees%E2%80%99%20Needs%20and%20Help%20Build%20Trust%20in%20Government.pdf>.
21. Lowrey, Annie. "The Time Tax: Why is so much American bureaucracy left to average citizens?" The Atlantic Monthly. July 27, 2021. <https://www.theatlantic.com/politics/archive/2021/07/how-government-learned-waste-your-time-tax/619568/>.
22. Vogels, Emily, A. "Digital divide persists even as Americans with lower incomes make gains in tech adoption." Pew Research Center. The Pew Charitable Trusts. June 22, 2021. <https://www.pewresearch.org/fact-tank/2021/06/22/digital-divide-persists-even-as-americans-with-lower-incomes-make-gains-in-tech-adoption/>
23. To go even further, we urge lawmakers to pass universal free school meals, which ensures no child in the United States will go hungry while at school and saves schools from costly paperwork. For more information, see our nutrition policy chapter.
24. Office of Head Start, Administration for Children and Families. "Head Start Category Eligibility for Families Eligible for the Supplemental Nutrition Assistance Program." April 21, 2022. <https://eclkc.ohs.acf.hhs.gov/policy/im/acf-im-hs-22-03>
25. Mathur, Aparna. "Proposal for a New US Social Safety Net: Direct Cash Support and One-Stop Shop." Forbes. December 30, 2022. <https://www.forbes.com/sites/aparnamathur/2022/12/30/proposal-for-a-new-us-social-safety-net-direct-cash-support-and-one-stop-shop/?sh=114f57d45a58>.
26. Broder, Tanya, Moussavain, Avidah and Blazer, Jonathan. "Overview of Immigrant Eligibility for Federal Program." National Immigration Law Center. December 2015. <https://www.nilc.org/issues/economic-support/overview-immeligfedprograms/>.
27. Munoz, Jenny and González-Murphy, Laura V. "Using Office Language Access Liaisons to Streamline Delivery and Language Services." Migration Policy Institute. <https://www.migrationpolicy.org/programs/language-access-liaisons>.
28. The Consolidated Appropriations Act, 2023 (Pub. L. 117-328), requires all states as of January 1, 2024, to provide 12 months of continuous eligibility to children enrolled in Medicaid and CHIP. Prior to this requirement, it was an option for states. For more information, please see the Health section of this Agenda.
29. Minoff, Elisa. "The Racist Roots of Work Requirements." Center for the Study of Social Policy. February 2020. <https://cssp.org/wp-content/uploads/2020/02/Racist-Roots-of-Work-Requirements-CSSP-1.pdf>.
30. Parolin, Zachary. "Temporary Assistance for Needy Families and the Black-White child poverty gap in the United States," Socio-Economic Review 19.3: 1005-1035. July 2021. https://www.researchgate.net/publication/322715782_Temporary_Assistance_for_Needy_Families_and_the_Black-White_Child_Poverty_Gap_in_the_United_States.
31. Safawi, Ali and Pavetti, LaDonna. "Most Parents Leaving TANF Work, But in Low-Paying, Unstable Jobs, Recent Studies Find." Center on Budget and Policy Priorities. November 19, 2020. <https://www.cbpp.org/research/family-income-support/most-parents-leaving-tanf-work-but-in-low-paying-unstable-jobs>.
32. "A Roadmap to Reducing Child Poverty." National Academies of Sciences, Engineering, and Medicine. National Academies Press. 2019. <https://nap.nationalacademies.org/catalog/25246/a-roadmap-to-reducing-child-poverty>.
33. Dean, Stacy, Bolen, Ed, and Keith-Jennings, Brynne. "Making SNAP Work Requirements Harsher Will Not Improve Outcomes for Low-Income People." Center on Budget and Policy Priorities. March 2018. <https://www.cbpp.org/research/food-assistance/making-snap-work-requirements-harsher-will-not-improve-outcomes-for-low>.
34. Gelatt, Julia and Kobal, Heather. "Immigrant Access to Health and Human Services." Urban Institute. October 2014. <http://www.urban.org/sites/default/files/publication/33551/2000012-Immigrant-Access-to-Health-and-Human-Services.pdf>.
35. Centers for Medicare & Medicaid Services. "Letter to Arkansas Medicaid Director Regarding "Arkansas Works" Section 1115 Demonstration Project." February 12, 2021. <https://www.medicid.gov/medicaid/section-1115-demonstrations/downloads/ar-works-cms-ltr-state-demo-02122021.pdf>.
36. Georgetown University Health Policy Institute Center for Children and Families, Health Coverage for Parents and Caregivers Helps Children (March 2017), available at <https://ccf.georgetown.edu/wp-content/uploads/2017/03/Covering-Parents-v2.pdf>
37. Karpman, Michael, Maag, Elaine, Zuckerman, Stephen, and Wissoker, Doug. "Child Tax Credit Recipients Experienced a Larger Decline in Food Insecurity and a Similar Change in Employment as Nonrecipients between 2020 and 2021." May 9, 2022. <https://www.urban.org/research/publication/child-tax-credit-recipients-experienced-larger-decline-food-insecurity-and>.
38. Hammond, Samuel. "New Research finds that the Child Tax Credit promotes work." Niskanen Center. December 10, 2020. <https://www.niskanencenter.org/new-research-finds-the-child-tax-credit-promotes-work/>.
39. Bernstein, Hamutal et al., "Amid Confusion Over the Public Charge Rule, Immigrant Families Continued Avoiding Public Benefits in 2019." Urban Institute. May 2020. https://www.urban.org/sites/default/files/publication/102221/amid-confusion-over-the-public-charge-rule-immigrant-families-continued-avoiding-public-benefits-in-2019_3.pdf.
40. "Public Charge was Reversed, But Not Enough Immigrant Families Know." No Kid Hungry. December 2021. https://www.nokidhungry.org/sites/default/files/2021-12/NKH_Public%20Charge_Micro-Report_English_0.pdf.
41. Flores, Glenn et al. "Parent Mentoring Program Increases Coverage Rates for Uninsured Latino Children." Health Affairs, Vol. 37, No. 3: Advancing Health Equity. March 2018. <https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.1272>.
42. Myerson, Rebecca and Li, Honglin. "Information Gaps and Health Insurance Enrollment: Evidence from the Affordable Care Act Navigator Programs." American Journal of Health Economics, Vol. 8, No. 4. Fall 2022. <https://www.journals.uchicago.edu/doi/abs/10.1086/721569?journalCode=ajhe>.
43. Gamblin, Marylsa D., "Using a Racial Equity Scorecard for Policies and Programs." Bread for the World Institute. Last accessed January 23, 2023. <http://votingrecord.us/pdf/racial-equity-scorecard-policies.pdf>.
44. Ashley, Shena, Acs, Gregory, Brown, Steven, Deich, Michael, MacDonald, Graham, Marron, Donald, Balu, Rekha, Rogers, Matthew, McAfee, Michael, Kirschenbaum, Josh, Ross, Tracey, Gardere, Ashleigh, and Treuhaft, Sarah. "Scoring Federal Legislation for Equity." May 2022. <https://www.urban.org/sites/default/files/2022-06/Scoring%20Federal%20Legislation%20for%20Equity.pdf>
45. "Racial Equity Impact Assessments." DC Council Office of Racial Equity. Last visited January 23, 2023. <https://www.dcraciaequity.org/racial-equity-impact-assessments>.
46. Locke, Charley. "6 Kids Speak Out Against Hair Discrimination." The New York Times. April 22, 2022. <https://www.nytimes.com/2022/04/22/magazine/kids-hair-discrimination.html>.
47. Michelle Zabel and Melissa Schobel. "An Urgent Response for Urgent Needs: Building and Sustaining a Children's Behavioral Health Crisis Continuum," First Focus on Children Big Ideas 2023: 118-134. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>
48. Ibid, 30



SECTION 2

Make Government Work Better for Children

Children stand at a crossroads.

Every single aspect of the lives of children has been negatively impacted by the global COVID-19 pandemic and its accompanying economic challenges worldwide. While social, cultural, and economic issues continue to divide our nation, the American public overwhelmingly supports taking action to address the needs, concerns, and best interests of children. In fact, public opinion polling demonstrates overwhelming support for children's policy improvements across gender, race, age, income, geography, education, marital status, and religious lines.

For example, in a May 2022 poll by Lake Research Partners, the public agreed by a wide margin (82-10%) that "federal policy involving children should always be governed by a 'best interest of the child' standard that makes the protection and safety of children the first priority."¹

When it comes to investing in children, voters also overwhelmingly agree (90-8%, 77% strongly agree) with the statement that "investing in children helps improve their lives, development, and outcomes."² And on this point, the public strongly believes — on issue after issue — that the government is investing too little rather than too much on children:

- Child abuse and neglect (66-7%)
- Accessing mental health services (66-9%)
- Reducing child poverty (66-10%)
- Reducing child homelessness (65-8%)
- Reducing child hunger (64-5%)
- Public education (60-14%)
- Early childhood education (56-10%)
- Assistance for child care expenses (56-14%)
- Preventing gun violence (53-16%)
- Providing affordable health coverage (49-8%)³

When it comes to specific policies, voters also strongly support affirmative change for children. For instance, a substantial margin of voters (72-21%) favor passing an enhanced Child Tax Credit that increases the credit and makes it fully refundable. They also favor making the Children's Health Insurance Program (CHIP) permanent (78-14%).⁴

Unfortunately, since children do not vote, do not give campaign contributions, and do not have lobbyists or political action committees (PACs), they have often been treated as an afterthought by policymakers. Lawmakers must do better and seek to forge bipartisan solutions to the threats to and needs and concerns of our children.

2.1 Create an independent Children's Commissioner

When a child cries out for help, whether it is a sick child, an abused child, a hungry child, a homeless child, or a victim of gun violence, adults should listen to and protect them. It is shocking how often we fail to do so.

Even though our country played an instrumental role in drafting the UN Convention on the Rights of the Child (CRC), the U.S. is the only country in the world that has failed to ratify the treaty. Other nations have also taken the additional step of creating an independent Children's Commissioner or Ombudsman to help meet the various articles of the CRC.

Absent adoption of the CRC, we should, at the very least, create an independent Children's Commissioner to establish a formal process to engage, listen to, and lift up the voices of our nation's children and youth when it comes to policies that involve children.

An independent Children's Commissioner would also help the government fulfill its duty to support and protect children by: Examining policy choices, issuing reports, and making recommendations to Congress and federal agencies on ways to coordinate their efforts and build on best practices, research, and lessons learned with respect to the impact of various policy options on children. This is in the best interest of our nation, as the cost of failing children is enormous in both human and socio-economic terms today and well into the future.

Whether its child sexual and physical abuse or neglect, child poverty, homelessness, child labor, the "troubled teen industry," or juvenile justice systems, our nation's leaders have failed to address the plight of our youngest, poorest, and most vulnerable who through no fault of their own, are faced with enormous challenges that threaten their ability to fulfill their potential, hopes, and dreams.

The fact is that violence, abuse, injustice, and discrimination against children in families, schools, prisons, and institutions (both public and private) can best be eliminated if children are enabled and encouraged to tell their stories and be heard by people with the authority to take action.

Far too often, institutions have repeatedly failed children. Rather than putting the protection and well-being of children first, institutions often tragically choose to silence the voices of children to cover up the abuse and protect the abusers rather than kids.

According to the Lake Research Partners May 2022 survey, voters support the creation of an independent Children's Commissioner to improve oversight and "to investigate and make recommendations on ways to protect and improve the care and well-being of children" by a more than 2-to-1 margin (57-27%).⁵

Before his death in 2019, House Oversight and Reform Committee Chairman Elijah Cummings (D-MD) was working on legislation to establish an independent Children's Commission. We would urge the introduction and enactment of such legislation in the 118th Congress.

2.2 Adopt a “best interest of the child” standard

Children deserve to have their best interests govern policy decisions that involve their lives and well-being. Unfortunately, children are — far too often — an afterthought in federal policymaking.

As Michael Freeman, author of *The Moral Status of Children* writes:

All too rarely is consideration given to what policies...do to children. This is all the more the case where the immediate focus of the policy is not children. But even in children's legislation the unintended or indirect effects of changes are not given the critical attention they demand... But where the policy is not “headlined” children..., the impact on the lives of children is all too readily glossed over.⁶

Children must rely on adults in society and government to serve their needs and interests but are often treated as an afterthought. Therefore, our leaders must make a government-wide commitment to address the best interests of children in all policymaking.

We urge the adoption of a “best interest of the child” standard for all federal departments and agencies that impact the lives of children. Again, the American people strongly support making such a standard a “first priority” by an 82-10% margin.⁷

2.3 Create child impact statements

Policy often impacts the lives of children, but children are often invisible to some policymakers, including those in the executive branch of government. Child impact statements by government agencies or independent entities would address this concern by answering fundamental questions about how a policy may benefit or harm children and ensuring that the impact is considered prior to implementation.

As Wendy Lazarus at Kids Impact Initiative explains:

Much like environmental impact assessments and fiscal impact assessments, child impact assessments apply to children a well-tested process used to advance priorities society considers important. Child impact assessments can focus policymakers' attention on shared goals for kids and analyze the implications of a proposal in relation to those goals.

To produce a child impact assessment, staff in government agencies or outside entities use a template to answer very basic questions which are designed to uncover the ways in which a proposal is good for children or could harm them. Child impact assessments can be used to guide decision-making at the city, county, state, or federal government levels — and by school boards and other public entities whose decisions have major impacts on kids' lives.⁸

In the U.S., communities, such as Shelby County, Tenn. and Santa Clara County, Calif., have established child impact assessments in their work and have found them to be quite beneficial to fully understanding the effect that policy decisions will have on children.⁹ Moreover, a number of countries around the world have similar processes.¹⁰

Just as the federal government requires impact assessments and/or statements with respect to the environment, small business, and unfunded mandates to state, local, and tribal governments, Congress should require that federal agencies implement child impact statements as part of the Administration's work in developing policies and implementing federal programs through regulations, rules, and guidance.

Furthermore, child impact statements would have a role beyond domestic policy. Per our fact sheet on the issue:

...creating child impact statements at the federal level is the only way to ensure that United States foreign policy and international programs examine their effect on children... Currently, the U.S. government's response to the needs of children and youth around the world is fragmented and lacks coordination, failing to gain a holistic understanding and focus on the needs of children. Policymakers must consider not only how their approach to international assistance programs and funding affects our economic standard or military standing, but also how effectively it addresses the needs of the world's children.¹¹

2.4 Establish a national child poverty reduction target

No child should live in poverty.

The American people agree. In fact, according to the Lake Research Partners May 2022 survey, American voters believe we are spending too little rather than too much on child poverty by a 66-10% margin. The nationwide survey also found that respondents are deeply concerned about child poverty, both the fact that U.S. children have a much higher rate of poverty than adults (83-13%) and that child poverty imposes enormous costs on society (86-12%).¹²

Furthermore, in a nationwide 2022 election eve poll by Lake Research Partners, voters supported the creation of a Child Poverty Target by a more than 3-to-1 margin (63-20%).¹³

As noted in the “End Child Poverty” section (see *“Recommendation 5.1: Establish a national child poverty reduction target” on page 38*), we urge Congress to codify a national child poverty reduction target and set a goal to end child poverty in the U.S. As an example, the Child Poverty Reduction Act (H.R. 1558/S. 643), introduced in the 117th Congress by Rep. Danny Davis (D-IL) and Sen. Bob Casey (D-PA), would codify a national child poverty reduction target and task the National Academy of Sciences with analyzing and monitoring progress toward this goal.

2.5 Create a White House Office on Children and Youth and/or a Children’s Cabinet

In addition to improving investments in children and families and giving children a voice in their government, programs for children need greater attention and coordination across governmental departments and agencies. The American people agree.

In the May 2022 national survey by Lake Research Partners, voters agree by an 82-13% margin that “programs for children need greater attention and coordination.”¹⁴ Creating a White House Office on Children and Youth and/or a Children’s Cabinet would help ensure that children are no longer treated as an afterthought and that services to children and families are better coordinated across federal agencies and departments.

For example, to truly combat child poverty in this country and around the world would require cross-departmental collaboration between the Department of Health and Human Services, the Department of Education, the Department of Agriculture, the Department of Housing and Urban Development, the Department of Commerce, the Department of Treasury, the Department of Labor, the Department of Justice, the Department of State, and the U.S. Agency for International Development.

2.6 Support the Children's Interagency Coordinating Council

Due to the leadership of Rep. Barbara Lee (D-CA) and former Rep. Lucille Roybal-Allard (D-CA) as well as House and Senate Appropriations leadership, Congress directed the Department of Health and Human Services to create the Children's Interagency Coordinating Council in the Fiscal Year 2023 omnibus spending bill and included \$3 million in funding for its establishment. We support ongoing and additional funding to ensure that relevant agencies across the federal government support and engage with the Children's Interagency Coordinating Council. *For more information, see "Recommendation 3.3: Support the Children's Interagency Coordinating Council" on page 23.*

2.7 Establish a cross-agency priority (CAP) for children across the federal government

Nearly every public policy issue has a children's angle, which is often ignored or neglected. One way to ensure that children's needs are considered during policy creation is to establish a cross-agency priority (CAP) across the federal government to ensure that children's issues receive the attention they need and deserve.

As our fact sheet on the issue explains:

In November 2017, the Government Accountability Office (GAO) issued a 67-page report recommending the creation of a cross-agency priority (CAP) for child well-being, given research that it was an area of government that required increased coordination. The report, based on consultation with a wide array of experts, found that improving child well-being "requires attention to a multiplicity of interrelated factors that can contribute to child well-being and the role that families, communities, governmental and nongovernmental organizations play in caring for these children."

In a more recent report, GAO reiterated its recommendation to create a CAP goal to improve child well-being "to better address the needs of children in ways that take into account the interrelatedness of federal actions and policies, that aim to improve child well-being." A CAP goal on improving child well-being would increase the efficacy of government policy for children through shared indicators, improving quality and use of data, and evaluation mechanisms.¹⁵

Congress should act to facilitate and support the adoption of a CAP goal for children to ensure government policy and funding for kids is better coordinated across all federal agencies.

2.8 Establish a new bipartisan commission on children

Our children face enormous challenges that have been compounded by the global COVID-19 pandemic and accompanying economic recession. This document puts forward a "Children's Agenda" to address many of these issues. However, for the long term, we would encourage Congress to establish a new bipartisan National Commission on Children.

A National Commission on Children would focus the attention of federal policymakers and the nation on children's needs, concerns, and issues, generate new ideas for policy reforms that meet the challenges that children face, and create momentum for change. The primary goal of a Commission could be to identify and consistently measure indicators of child well-being and to set forth new policy ideas aimed at improving outcomes for children and making America first among nations on child well-being over the next decade and beyond.

There is precedent for a National Commission on Children. More than 30 years ago (in 1991), a previous National Commission on Children that was created during the Reagan Administration delivered its final report to the George H.W. Bush Administration and Congress. That report served as a catalyst for enacting groundbreaking bipartisan legislation for children and families, including the Earned Income Tax Credit, the Child Tax Credit, the Children's Health Insurance Program (CHIP), and changes to child welfare policy.

Duties of a new Commission could include:

- Conducting a comprehensive study to examine and assess the needs of children
- Submitting a report to the President and Congress on specific findings, conclusions, and recommendations to address the needs and concerns of children
- Establishing national goals for improving child well-being
- Identifying and selecting national indicators of child well-being
- Making recommendations to Congress and the President on how to achieve the national goals for improving child well-being

2.9 Create a youth advisory council

Children deserve to be heard and to have their voices represented in our society, particularly with respect to the policies that affect them.

Long-term challenges will have the largest impact on the next generation. It is impractical to believe that our nation's young people will come to love and understand democracy if our society simultaneously structures public debate and policies that fail to ensure children's perspectives and voices are included and respected.

Young people have much to offer. Lawmakers must consider their views on issues of critical importance to their present and future, including education, the environment, racial justice, and gun safety. In fact, our nation's youth historically have led many of the movements that transformed our nation's sense of fairness and equity, our policy agenda, and our culture.

We must provide meaningful opportunities for our youth to offer input and must factor their views into the policies and actions that our government and society take. In fact, violence, abuse, injustice, and discrimination against children that occurs in families, institutions, and the broader society can best be eliminated if children are enabled and encouraged to tell their stories and if those stories are heard by people with the authority to act.

We can and must do better by our children, and it starts by listening to them.

2.10 Adopt a children's budget

We strongly agree with the words of Sen. Bob Menendez (D-NJ), who said:

If we as a nation value our children, then our federal budget must reflect those values.

Our budget reflects our values and unfortunately, far too often, children remain an afterthought in federal budget decisions. If we truly value our children, our budget must reflect that. One important step would be to install greater transparency in government spending decisions.

A comprehensive accounting of federal budget decisions affecting children would provide a detailed breakdown of spending on children and children's programs by agency and initiative, including tax expenditures, and present the data in terms of the share of federal spending on children. *For details on how this could best be achieved, see "Prioritize Children in All Budget and Policy Decisions" (Recommendations 3.5 and 3.6 on pages 24-25).*

2.11 Establish the second Sunday in June as National Children's Day and the second full week in June as Children's Week

In 2001, President George W. Bush proclaimed the first Sunday in the month of June as National Children's Day. The proclamation read:

*All adults must work together to ensure the safety and well-being of our Nation's most precious resource, our children... We must nurture our children's dreams, help them develop their talents and abilities, and ensure their healthy development so that they may reach their full potential. Our success in this endeavor will affect the direction of their lives and the future strength and vitality of our Nation.*¹⁶

Predating that proclamation, President Bill Clinton declared National Children's Day in October. In 1998, his proclamation read:

*One of the most important measures of our success as a Nation is the well-being of our children. As a society, we have no more important responsibility than to help our families raise healthy, happy, loving children in an environment that allows kids to reach their full potential.*¹⁷

Over the past six years, child advocates have promoted the second Sunday in June as National Children's Day and the week following as Children's Week in the U.S. We urge Congress to pass a resolution identifying the second full week in June as Children's Week.

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1. First Focus on Children, "Fact Sheet: Voters Strongly Support Investments in Our Children and Grandchildren," May, 2022, https://firstfocus.org/wp-content/uploads/2022/06/FACT-SHEET_LakePoll-May2022.pdf.
2. Ibid.
3. Ibid.
4. Ibid.
5. Ibid.
6. Freeman, Michael, *The Moral Status of Children*, Springer, 1997.
7. First Focus on Children, *supra* note 1.
8. Lazarus, Wendy, "Child Impact Assessments: A Missing Piece to Spur Progress for U.S. Children," Kids Impact Initiative, May 2020, https://kidsimpact865312240.files.wordpress.com/2020/06/child-impact-assessment_6-5-fix.pdf.
9. First Focus on Children, "Fact Sheet: Child Impact Statements," September 2021, https://firstfocus.org/wp-content/uploads/2021/09/FACT-SHEET_ChildImpactStatements.pdf.
10. Lazarus, *supra* note 8.
11. First Focus on Children, *supra* note 9.
12. First Focus on Children, *supra* note 1.
13. Lake Research Partners, 2022 Election Eve Omnibus Nationwide Survey, November 6-8, 2022, Unpublished.
14. First Focus on Children, *supra* note 1.
15. Abaya, Miriam, "Issue Brief: The Case for a Cross-Agency Priority (CAP) on Child Well-Being," First Focus on Children, August 2, 2022, <https://firstfocus.org/resources/fact-sheet/issue-brief-the-case-for-a-cross-agency-priority-cap-on-child-well-being>. See also, U.S. Government Accountability Office, Child Well-Being: Key Considerations for Policymakers, GAO-18-41-SP, November 2017, <https://www.gao.gov/assets/gao-18-41sp.pdf> and U.S. Government Accountability Office, Government Performance Management: Key Considerations for Implementing Cross-Agency Priority Goals and Progress Addressing GAO Recommendations, GAO-21-104704, September 2021, <https://www.gao.gov/assets/720/716998.pdf>.
16. Bush, George W., *Proclamation: National Child's Day 2001*, June 2, 2001, <https://georgewbush-whitehouse.archives.gov/news/releases/2001/06/20010604.html>.
17. Clinton, William J., *Proclamation 7139—National Children's Day, 1998*, <https://www.govinfo.gov/content/pkg/WCPD-1998-10-12/pdf/WCPD-1998-10-12PG2020.pdf>.



SECTION 3

Prioritize Children in All Budget and Policy Decisions

Investments in our children deliver a tremendous return, improving their near- and long-term outcomes and healthy development, increasing their economic opportunities and benefiting the economy as a whole. If we make investments in the future of children, we could save money in the long term. Budget decisions are value judgments, and we urge Congress to support and protect children when making spending and revenue raising decisions and prioritize efforts to address racial and economic inequities.

As a divided Congress with slim margins in both chambers undertakes legislative action in the 118th Congress, significant budget decisions already provoke many debates. The need to address the debt ceiling already has captured much attention. Treasury Secretary Janet Yellen notified Congressional leadership in a January 19, 2023 letter that the U.S. has reached its statutory debt limit (\$31.4 trillion), prompting her department to take “extraordinary measures” and initiate special accounting tools so the U.S. will not default on its loans in the near-term.¹ Secretary Yellen said that the challenges of predicting government revenues and payments make it difficult to predict how long such bookkeeping measures will work, and that Congress likely will have to address the debt limit before June.

Other elements of the budget debate include a push for spending cuts to mandatory programs, such as Medicaid and the Supplemental Nutrition Assistance Program (SNAP), potentially in exchange for addressing the debt limit, and a call by House leadership to cut non-defense discretionary spending back to Fiscal Year (FY) 2022 levels. In addition, adhering to the new House rules for budget and appropriations process for the 118th Congress could hurt investments in kids on both the discretionary and mandatory sides of the ledger, while also making it more difficult to raise revenue.² The rules establish a new point of order against an unauthorized appropriation in any annual spending bill in excess of the most recently approved funding amount. The rules also impose a point of order against consideration of any measure reported by a committee — other than the Appropriations Committee — that increases direct spending by more than \$2.5 billion in any decade over the next 40 years even if the investments are paid for with additional revenue. In addition, the new House rules replace the former “pay-as-you-go” requirements with a “cut-as-you-go” (CUTGO) rule that prohibits consideration of legislation that causes a net increase in mandatory spending within a five-year or 10-year budget window. Because the refundable portion of family tax credits, such as the Child Tax Credit, are considered mandatory funding, lawmakers would have to offset any improvements to those provisions with offsetting cuts in mandatory spending.

Revenue losses from tax breaks for large corporations and the wealthiest individuals, however, would not need offsetting cuts. If followed, the problematic new rules would hamper revenue collection and make robust investments in critical programs and services supporting children and low-income families very unlikely.

In contrast, last Congress, pandemic emergency measures — and the dogged efforts of Champions for Children in Congress — resulted in an unprecedented share of spending for children in the FY 2022 federal budget. The American Rescue Plan Act of 2021 highlighted the growing needs of children with its large investments in child care, nutrition, rental assistance, child health and other areas, and its temporary changes to child and family tax credits. The share of federal spending on children reached a record 11.98% in FY 2022, according to analysis by First Focus on Children, reversing a years-long decline that pushed spending to just 7.55% in FY 2020, the lowest level since we began tracking in 2006. During the five years from FY 2017 to FY 2022, the share of spending on children increased more than 21%.³ This increase represents a continuation of recent COVID-fueled spending and funding improvements over FY 2017, when the share of federal spending on children began to stagnate and then decline through FY 2020.

The United States historically has spent just a sliver of its international budget on children and that trend continued in FY 2022. Global crises, including the ongoing COVID-19 pandemic, have upended the lives of children and youth around the world, making it harder than ever for them to thrive and reach their full potential. In under-resourced parts of the world, this confluence of challenges is undermining decades of progress to improve children's health and well-being. Children and young people internationally receive a minimal share of foreign assistance funding. Only about 8.5 cents of every \$1 of foreign assistance investments benefited children.

Unfortunately, lawmakers have begun paring back these pandemic-era investments and are on track to reverse the progress made. For instance, from FY 2021 to FY 2022, funding for children dropped more than 17% in inflation-adjusted dollars. Nearly half of all investment areas have decreased since FY 2017 including early childhood, children's health, children's housing and youth training. For example, total federal spending increased 26% between FY 2017 and FY 2022 and included a 20% increase in spending on children's health. However, the share of spending on children's health decreased by nearly 11% in that time, outpaced by the increase in overall spending. This scenario played out in many policy areas, indicating that too often lawmakers do not prioritize children in federal budget decisions.

New budget caps and other potential structural changes on the 118th Congress's agenda make further cuts in children's spending likely. Congress faces a pivotal moment: It can secure the success that pandemic-era increases delivered to children's healthy development and well-being across early childhood, child protection and justice, education, health, housing, income support, nutrition, training, safety and many other areas. Or, it can squander that success by returning to the pre-pandemic mode of disinvestment that undercut support and services for our children and grandchildren.

The American people have seen the consequences of budget caps and other structural budget changes that disproportionately impact kids and people most in need. Americans strongly support increasing our investments in children and prioritizing their needs in public policy, according to a nationwide poll of likely voters conducted in 2022 by Lake Research Partners. The poll found that voters believe — by a 5-to-1 margin — that we are spending too little on children.⁴

Investing in our children sets them up to thrive, and when our youngest have the support to reach their full potential, our families, communities, and economy benefit. The 2019 landmark study by the National Academy of Sciences estimates that child poverty costs our country nearly \$1 trillion annually, and that reducing child poverty not only directly benefits individual children, it delivers a significant societal return on investment. If we turn away from ambitious goals for our children and grandchildren and go “back to normal,” the share of federal investment in children will dip dramatically, returning us to rising rates of child poverty, uninsurance, homelessness, and hunger.

To prevent this, and build on recent progress, we urge Congress to:

3.1 Prioritize children in budget decisions

- Increase topline funding level for non-defense discretionary (NDD) spending and prioritize higher allocations to subcommittees with jurisdiction over child-related programs and services.
- Support policies creating a fairer and more equitable tax code that works for everyone and supports robust investment in children's programs and services, especially for children with the greatest barriers to economic mobility. *See "Improve the Tax Code With Measures That Meet All Children's Needs" on page 29 for more information.*
- Resist attempts to renew austerity measures such as the discretionary spending caps and sequestration practices imposed by the Budget Control Act of 2011, which would hamper investment in our children, grandchildren and youth.
- Protect mandatory spending programs that benefit children and families and pass a clean bill to address the debt limit.
- Provide funding for the VA Medical Care program outside the topline NDD number to allow for other vital funding increases benefitting kids and families.
- Pass the annual spending bills to avoid the use of stopgap funding measures. Continuing resolutions harm children by typically funding programs at the same level as the prior year, effectively cutting programs and services.

3.2 Make funding for the Children's Health Insurance Program permanent

Although the Consolidated Appropriations Act, 2023 extended the Children's Health Insurance Program (CHIP) for an additional two years, until FY 2029, the program remains the only federal insurance program that is temporary and continuously needs to be extended. We strongly support making CHIP permanent. *See "Secure Gains in Children's Health Care Coverage and Services" on page 43 for more information.*

3.3 Support the Children's Interagency Coordinating Council

Due to the leadership of Rep. Barbara Lee (D-CA) and former Rep. Lucille Roybal-Allard (D-CA), as well as House and Senate Appropriations leadership, Congress directed the Department of Health and Human Services to create the **Children's Interagency Coordinating Council** in the FY 2023 omnibus spending bill and included \$3 million to fund its establishment. We support additional funding to ensure that relevant agencies across the federal government support the council and staff an Office of Children to collaborate with it. We also urge HHS to begin immediately coordinating with the National Academy of Sciences on the legislation's required report to Congress analyzing the impact of federal policies on child poverty and the racial poverty gap. *See "End Child Poverty" on page 37 for more information.*

3.4 Protect funding for the Internal Revenue Service (IRS)

The Inflation Reduction Act of 2022 increased funding for the Internal Revenue Service (IRS) by \$80 billion (available through FY 2031), a response to the 20% cuts to the agency since 2010.⁵ The House already has voted this year to repeal \$71 billion of that \$80 billion. We urge Congress to support this additional funding. The increased funding will help the agency manage the backlog of tax returns, enforce tax rules, modernize business systems, hire staff and improve customer service, including outreach to families who need assistance filing for tax credits such as the CTC and EITC. Additional resources will allow the IRS to collect taxes owed and will raise an estimated additional \$200 billion to \$400 billion over 10 years.⁶ In particular, we recommend that the agency dedicate staff and resources for outreach to hard-to-reach families, youth with experience in the foster care system, those at risk of homelessness, and individuals who are new to the tax filing system and have questions about the filing process and their eligibility for the Child Tax Credit, Earned Income Tax Credit, Child and Dependent Care Tax Credit, and past Economic Impact Payments. In June 2022, the IRS estimated that close to 2.3 million children under the age of 18 may be eligible for the expanded CTC but had not yet been claimed on a recent tax return.⁷ See *“Improve the Tax Code With Measures That Meet All Children’s Needs”* on page 29 for more information.

3.5 Adopt a Children’s Budget

Our budget reflects our values and unfortunately, far too often, children remain an afterthought in federal budget decisions. If we truly value our children, that must change, and one important and helpful step would be to install greater transparency in those spending and revenue raising decisions.

According to Congressional Budget Office projections, the federal government will spend an estimated \$1.65 trillion in discretionary funds in FY 2023, not including emergency support and funding under the Infrastructure Investment and Jobs Act of 2022 and Bipartisan Safer Communities Act. Of that \$1.65 trillion, CBO projects \$858 billion for defense budget authority and \$793 billion for non-defense discretionary spending.⁸ While much of spending on adults is mandatory, spending on children is disproportionately discretionary, temporary, capped, and lacks built-in growth and dedicated revenue. The federal government offers hundreds of children’s programs and services spanning myriad policy areas, but there is no comprehensive, widely agreed upon method or oversight process that regularly tracks federal spending on these programs. A formal tracking process would allow an accurate assessment of the overall level of investment in children and the spending trends affecting them. A comprehensive accounting of federal budget decisions affecting children would need to include a summary of new budget authority and outlays estimated for children’s programs, the share of federal spending on children, and a detailed breakdown of spending on children and children’s programs by agency and initiative, including tax expenditures. This goal could be achieved with the following measures:

- Require the **Office of Management and Budget (OMB)** to track federal spending on children: Create a Cross-Agency Priority (CAP) policy that would incorporate the provisions outlined in the Children’s Budget Act (S. 2127), introduced by Sen. Bob Menendez (D-NJ) and co-sponsored by Sens. Chris Van Hollen (D-MD) and Bob Casey (D-PA) in the 117th Congress. The bill would direct OMB to establish a Children’s Budget to track and provide detailed analysis of funding streams that benefit children. OMB would quantify investments in children across the entire federal budget, just as it does for areas such as meteorology, the Export-Import Bank, drug control policy and cybersecurity. OMB should engage with federal coordinating entities such as the Children’s Interagency Coordinating Council, established and funded in the FY 2023 omnibus spending package, to urge all agencies to integrate child well-being indicators, data, and evaluation mechanisms into their strategic plans. See below, *“End Child Poverty”* on page 37, and *“Make Government Work Better for Children”* on page 13 for more information.

- Authorize the **Congressional Budget Office (CBO)** to establish a baseline for spending on children: Congress must empower CBO to analyze the share of federal spending on children, including budget authority, outlays, tax expenditures and the share of federal spending on children. The Focus on Children Act (S. 2133) introduced by Sen. Chris Van Hollen (D-MD) in the 117th Congress, and co-sponsored by Sens. Menendez (D-NJ) and Casey (D-PA), would establish an approach to inform annual budget estimates for direct spending, appropriations requests, and tax expenditures. The process would determine an official share of federal spending on children and would aim to improve that share to fully meet children's needs.

3.6 Maintain and increase funding for children abroad

- **Improve Mechanisms to Track Funding and Program Outcomes.** The U.S. government's response to global child protection involves many federal entities, with funding spread among 26 to 30 offices. There is limited transparency into spending trends and outcomes specific to children.
- **Maintain and/or Increase Investments in Children and Youth Around the World.** We also urge Congress to support scaling up effective interventions to respond to the aftermath of COVID-19 and to rebuild.
- **Protect Funding for Orphans and Vulnerable Children (OVC).** During the reauthorization process of the President's Emergency Plan for AIDS Relief (PEPFAR) in 2023, we recommend that lawmakers ensure the Administration spends the full 10% on mitigating the impact of HIV on OVC. *See "Address the 'Confluence of Challenges' Threatening Children Around the World" on page 99 for more information.*

3.7 Advance kids' priorities in appropriations process

Appropriations for Subcommittee on Labor, Health and Human Services, Education, Labor and Related Agencies

- **The Administration Must Report on the "family glitch."** Until 2023, nearly 5 million low-income family members (more than half of them children) faced a terrible choice: Go without health insurance for spouses and children or pay a huge percentage of annual income for that coverage. The Biden Administration issued a final rule late in 2022 to correct the erroneous 2013 interpretation of the Affordable Care Act. Now the Department of Health and Human Services (HHS) must remain vigilant to ensure that eligible families know about the new rule. We encourage the House and Senate Appropriations Committees to require HHS to track the success of outreach and enrollment efforts and to provide additional resources, as necessary. *See "Secure Gains in Children's Health Care Coverage and Services" on page 43 for more information.*
- **Rebalance Investments of Mental Health Workforce to Serve More Children.** Nationally, 60% of youth who experience a severe depressive episode do not receive treatment. The U.S. does not spend enough on developing the child and adolescent mental health workforce needed to address the current mental health crisis children are facing. Congress should direct the Department of Health and Human Services to report the amount of federal workforce funding spent on behavioral health as a percentage of overall healthcare workforce development, and the amount of behavioral health workforce funding for pediatric and adolescent behavioral health. HHS should also report how many pediatric child and adolescent behavioral health professionals are currently being trained with federal funding and what plans are underway to increase the number of child and adolescent behavioral health professionals in order to better meet the behavioral health needs of children and adolescents in our country.

- **Review the Allocation of Resources for Children in the Certified Community Behavioral Health Clinics (CCBHCs) program.** CCBHCs are a valuable resource for children and families who might not otherwise receive behavioral health care. Congress must use the appropriations process to require the Department of Health and Human Services to report on what percentage of children, teens and young adults (ages 0-26) are receiving services at CCBHCs compared to adults. Any barriers to care for children, teens and young adults must be identified and solutions must be offered. See *“Secure Gains in Children’s Health Care Coverage and Services”* on page 43 for more information.
- **Track the Integration of Behavioral Health Services for Children Enrolled in Medicaid and the Children’s Health Insurance Program.** New guidelines from the Centers for Medicare and Medicaid Services (CMS) clarified that states can integrate behavioral health care into Medicaid and the Children’s Health Insurance Program. Congress must use the appropriations process to request that the Department of Health and Human Services collect and share data showing how often integrated care occurs in the pediatric setting for behavioral health, in children and youth from ages 0-26.
- **Design 988 Suicide and Crisis Lifelines to Address the Needs of Children. States are currently implementing their 988 Suicide and Crisis Lifelines.** Children’s needs can be very different from adults’, and states — with assistance from the federal government — must design and create these systems to meet the specific needs of children, youth, and families from the beginning. To date, 16 states have enacted legislation to implement 988. Of these, only four have included one or more child- or youth-specific planning provisions. Congress must require the Department of Health and Human Services through the Substance Abuse and Mental Health Services Administration to provide states with technical assistance on designing their systems to prioritize children’s needs, and require a regular report from HHS detailing how states are addressing children’s needs in their 988 systems.
- **Improve Data on Racial Disparities in Access to Mental Health in Schools.** Most public schools have an unacceptable student-to-school-based mental health personnel ratio. High-poverty schools and those with more non-white students often have armed school resource officers on-site, but few counselors, psychologists, or social workers. Data that identifies where the disparities exist would fuel a better allocation of resources. Through the appropriations process, Congress must require the Department of Education to conduct a detailed analysis of student-to-school-based mental health personnel ratios in all school districts, with data disaggregated by students’ race and ethnicity and their access to mental health services.
- **Support Reporting on State Mobile Crisis Intervention Services.** The American Rescue Plan Act enhanced the match rate for mobile crisis response in states, and the Centers for Medicare and Medicaid Services (CMS) has shared guidance with states on implementing this policy. Congress must require CMS to report on state efforts to create mobile crisis response systems that specifically address children’s needs to ensure that states are not using a system designed for adults to respond to children. See *“Secure Gains in Children’s Health Care Coverage and Services”* on page 43 for more information.
- **Improve standards of care and oversight for the care of unaccompanied immigrant children.** Congress should continue to support the establishment of and increase funding for the Office of the Ombudsperson within HHS to provide independent oversight on children’s care in government custody, and direct the Office of Refugee Resettlement (ORR) to address barriers hindering an increase of the number of foster care, group home, and small-scale placement in its permanent network of care providers for unaccompanied children. See *“Consider the ‘Best Interests of the Child’ for All Immigration Policies”* on page 95 for more information.

3.8 Ensure that the decennial Census accounts for all children

Congress must address the continual undercount of children in the decennial Census, American Community Survey, and other U.S. Census Bureau surveys. Census data guides the allocation of more than \$1.5 trillion in federal funding to over 300 programs,⁹ many of which help to support the healthy development of children and keep families from falling into poverty. Despite Census Bureau efforts to count all kids in 2020, the net undercount rate for young children in the 2020 Decennial Census increased from 4.6% in 2010 to 5.4% in 2020 — the highest net undercount rate for young children since tracking began in 1950.¹⁰ Preliminary data from 2020 suggests the gap between non-Hispanic white and minority children (Black and Hispanic) also grew, meaning that many of the children most in need of assistance are the least likely to get their fair share.

Congress must increase support for the U.S. Census Bureau's newly formed Directorate on the Undercount of Young Children in FY 2024.

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1. Yellen, Janet L. "Letter to Speaker Kevin McCarthy regarding the debt limit. January 19, 2023. <https://home.treasury.gov/system/files/136/Debt-Limit-Letter-to-Congress-20230119-McCarthy.pdf>.
2. U.S. House of Representatives. H.Res 5, January 9, 2023. <https://rules.house.gov/sites/republicans.rules/18.house.gov/files/BILLS-118hresPIH-118th-rules-of-the-house-of-reps-V3.pdf>.
3. First Focus on Children. "Children's Budget 2022." October 2022. <https://firstfocus.org/wp-content/uploads/2022/10/ChildrensBudget2022.pdf>.
4. First Focus on Children (2022, Jun. 30). Fact Sheet: Voters Strongly Support Making Investments in Our Children and Grandchildren (Poll by Lake Research Partners). <https://firstfocus.org/blog/fact-sheet-voters-support-investments-in-kids>.
5. Warmhoff, Steve. "Lawmakers Must Choose Between Funding the IRS or Protecting Cheaters," *Institute on Taxation and Economic Policy*." August 12, 2022. <https://itep.org/lawmakers-must-choose-between-funding-the-irs-or-protecting-wealthy-tax-cheaters/>.
6. Ibid 1
7. "By Zip Code: Number of Children Under Age 18 with a Social Security Number Who Are Not Found on a Tax 2019 or 2020 Return but Who Appear on a Tax Year 2019 Form 10954 and Associated Number of Policy Holders," U.S. Treasury Department. June 2021. <https://home.treasury.gov/system/files/131/Estimated-Counts-of-Children-Unclaimed-for-CTC-by-ZIP-Code-2019>.
8. Congressional Budget Office. "The Budget and Economic Outlook: 2023-2033." February 2023. <https://www.cbo.gov/system/files/2023-02/58848-Outlook.pdf>
9. Reamer, Andrew. "Counting for Dollars 2020: The Role of the Decennial Census in the Geographic Distribution of Federal Funds." April 29, 2020. <https://gwipp.gwu.edu/counting-dollars-2020-role-decennial-census-geographic-distribution-federal-funds#Latest%20Release>.
10. O'Hare, William P. "New Census Bureau Data Show Young Children Have a High Net Undercount in the 2020 Census." March 2022. <https://countallkids.org/resources/new-census-bureau-data-show-young-children-have-a-high-net-undercount-in-the-2020-census/>.



SECTION 4

Improve the Tax Code With Measures That Meet All Children's Needs

The United States tax code is the government's primary means of raising revenue to support a wide range of government functions, including the operation of numerous programs and services that benefit children and families throughout the country and abroad. Historically, the individual income tax has generated the most revenue. According to the Congressional Research Service in Fiscal Year (FY) 2021 the individual income tax contributed \$2.0 trillion, or 50.5% of the federal government's revenue. The corporate income tax contributed notably less, generating \$212 billion in FY 2021, or 9.2% of total revenue.¹

According to a December 2022 study by the General Accounting Office (GAO), in each year from 2014 to 2018, about half of all large corporations — those with \$10 million or more in assets — had no federal income tax liability.² The GAO also found that the average effective federal income tax rate paid by large, profitable corporations dropped to 9% in the first year that the provisions of the 2017 tax law went into effect. The share of these companies with no tax liability rose from approximately 22% to approximately 34% between 2014 and 2018. Corporate income tax revenues have become a smaller share of overall tax revenues, shrinking the resources available for programs assisting our children and grandchildren. House rules in the 118th Congress will increase this discrepancy: Going forward tax cuts for corporations and the wealthiest households can pass without offsets, but the refundable portion of tax credits — which benefit children and families, such as the Child Tax Credit (CTC) — must be paid for, or offset, with other mandatory spending cuts.

The design of the U.S. tax code and tax policy enforcement practices favor large corporations and the wealthiest households. Meanwhile, outdated assumptions and racial and gender biases embedded in the tax code continue to disadvantage low-income households, families with children, Black and brown communities, transition-age youth, women, immigrants, residents of U.S. territories, and those who encounter the biggest barriers to economic opportunity. Improving economic mobility for lower-income families, youth, and children requires a mix of policy solutions. Advancing a fairer, more equitable tax code that works for everyone would help those families afford basic living expenses, reduce child poverty, support healthy child development, address income and racial inequities, and build families' financial security.

Tax Credit Enhancements Transformed Millions of Young Lives

Extensive research shows that tax credits and cash transfers influence positive parent-child interactions, improve child development outcomes, and have a bigger impact than any other policy in reducing child poverty.³ The expansion of the CTC and Earned Income Tax Credit (EITC) in 2021 delivered dramatic, positive results. It is hard to overstate the impact of these improvements — they transformed the lives of tens of millions of children.

The CTC and EITC enhancements in the American Rescue Plan Act (ARPA) benefited children, youth, and families most in need. The CTC improvements increased the benefit to as much as \$3,600 a year per young child and \$3,000 a year for children 6 and older; included 17-year-olds, provided advanced payments each month starting in July 2021, and made the credit fully refundable. The EITC expansion nearly tripled the amount of the credit for low-income workers and broadened eligibility from 25 to 18 years old for foster youth and youth experiencing homelessness. The enhanced CTC likely reached nearly 40 million households with more than 65 million children, and the EITC improvements have the potential to benefit over 17 million workers,⁴ including as many as 500,000 former foster youth. When the full CTC became available for the first time to families with little or no income, it reached the one-third of our children previously left behind, who disproportionately are children of color.⁵ Recent analysis from Columbia University's Center on Poverty and Social Policy finds that children who were disproportionately ineligible for the CTC prior to the ARPA enhancements — Black and Hispanic children, young children, and children in single-parent, rural or large families — all experienced significant declines in child poverty in 2021.⁶

The CTC is a powerful tool that contributed significantly to the largest decrease in the child poverty rate on record (from 9.7% in 2020 to 5.2% in 2021),⁷ dramatically reduced food insufficiency,⁸ and eased material hardship for tens of millions of households. Families receiving the monthly CTC payments overwhelmingly spent them on basic necessities including food, utilities, housing, education resources, diapers, and paying down debt.⁹ Furthermore, several studies found the cash benefit had no impact on employment status.¹⁰ In fact, the CTC helped families, especially single mothers, increase their labor force participation by allowing them to afford child care, transportation, and other necessities that help them get to work.¹¹ Similarly, the EITC helped young people pay for transportation to and from job training, school or community-based support. The expiration of these unprecedented tax investments disrupted every aspect of children's lives: Roughly 4 million children slid back into poverty in January 2022¹² and food insufficiency rates among households with children increased 25%.¹³

Research out of the University of Washington suggests that the collective impact of tax credits for families led to a reduction in child maltreatment reports by helping to stabilize families.¹⁴ These results suggest that child neglect reports decrease when parents have more economic resources. Researchers believe the reduced number of reports could generate many other positive outcomes for children and their families.

Tax Credit Investments Make Smart Economic Sense for Families and Our Society

Enhancing the CTC helps children and also makes good economic sense for the country as a whole. The National Academy of Sciences estimates that child poverty costs the U.S. nearly \$1 trillion annually as a result of higher crime, poor health outcomes, and lower income levels when children living in poverty grow up. In a recent survey by Lake Research Partners, American voters expressed overwhelming concern about this data, with 86% saying they were concerned and just 12% saying they were not concerned. Researchers at Columbia University find that investment in a child allowance program will pay massive dividends — estimating an 8:1 return on investment.¹⁵ Improving the Child Tax Credit also strengthens local economies. The Niskanen Center found that extending the Child Tax Credit for even just one year would support the equivalent of 500,000 private-sector jobs.¹⁶ Finally, the improved CTC brings our child poverty rate closer to that of other wealthy countries, increasing our competitiveness around the world.¹⁷

Tax Code Improvements Can Address Inequities and Close Income Gap

The temporary 2021 tax credit enhancements delivered remarkable progress, and Congress must build on this to create a more equitable tax code that benefits all children. For example, the poverty gap for Black and Hispanic children compared to their white peers narrowed in 2021, but a sizable gap remains. Children in immigrant families continue to experience higher rates of poverty than their non-immigrant peers, often because they remain ineligible for assistance. An estimated 1 million immigrant children with Individual Taxpayer Identification Numbers (ITINs) remain excluded from the Child Tax Credit.¹⁸ Families in Puerto Rico did not receive the advanced monthly payments, and under current law Puerto Rico's families with children accrue the refundable portion of the Child Tax Credit at a slower rate than families in states.

The CTC and the EITC number among our most successful existing policies for reducing child poverty. In 2021, the Supplemental Poverty Measure (SPM), showed that together, the refundable tax credits — CTC, EITC and the Child and Dependent Care Tax Credit — lifted nearly 5 million children out of poverty. We urge Congress to build on this success and enact additional provisions to make the tax code fairer and more equitable for children in low- and moderate-income families, especially those in minority families and those who face the biggest barriers to economic stability.

4.1 Create a permanent, monthly child benefit (CTC expansion)

The expansion of the Child Tax Credit in 2021 led to the lowest child poverty rate on record in the United States. A National Academy of Sciences 2019 landmark study documented that cash transfers to households with children create positive momentum for children's long-term success, leading to better health outcomes, higher educational attainment, and increased earnings as adults. Furthermore, the Academy cites an extension of the Child Tax Credit as the most powerful tool we have to combat child poverty and narrow the racial poverty gap.¹⁹

A growing body of evidence from more than 90 guaranteed income pilots across the country shows important, positive impacts from direct cash benefit programs.²⁰ In addition, state legislatures and governors around the country are enacting or expanding state CTC programs, which will offer more information on their benefits.²¹ We strongly recommend that Congress create a permanent, federal, monthly child allowance program based on the “best interests of children.” The program should be administered by an agency equipped to meet the needs of all children and help families with the greatest barriers to economic stability. Designing the program around the “best interests of children” preempts debate about the “deservedness” of adults in the children's lives, a conversation that often winds up punishing children.

Congress should adopt a permanent child benefit program designed around the American Family Act (H.R. 928/S. 690) sponsored by Reps. Rosa DeLauro (D-CT), Suzan DelBene (D-WA) and Richie Torres (D-NY) in the 117th and Sens. Michael Bennet (D-CO), Sherrod Brown (D-OH) and Cory Booker (D-NJ) in the 116th and expected to be updated and reintroduced early in the 118th. The American Rescue Plan Act temporarily authorized many of H.R. 928's provisions with overwhelming success. We urge Congress to convert the Child Tax Credit into a permanent, monthly child allowance to ensure all families — including residents of U.S. territories and all immigrant children — can meet the economy's current financial challenges and the high and growing costs of raising children and supporting their healthy development. CTC expansion should protect lower- and middle-income children, parents and families from overpayments and hold them harmless when household circumstances change. Living arrangements for children can be complex, and a child benefit program needs to accommodate such circumstances and ensure the payments follow the child through diverse and dynamic family and non-relative caregiving, including families with safety risks due to domestic violence as well as those with any involvement with foster care or other public systems.

Payments delivered monthly to households with children would establish a steady cash flow that better meets the daily needs of families throughout the year. In 2021 the enhanced monthly tax credits helped households with children catch up on rent and translated to more food on the table, warm clothes in the winter, and more money for educational resources and purposes.²² The monthly benefit also meant more money for child care, gas, and car repairs that helped parents get to work. Parents and caregivers reported that the money gave them some breathing room,²³ and provided relief from the constant fear and distraction of making ends meet, giving them more time and energy to spend with their children.

The regular cash support also provides some financial stability that helps families meet unanticipated expenses, weather economic downturns, and participate in the economy during an emergency such as the COVID-19 crisis. Regular delivery of assistance also offers a ready mechanism to adjust benefit levels as needed — for example, to increase payments during an economic crisis. In addition to designing the child benefit according to the “best interests of children,” additional resources must be given to program administrators to ensure maximum efficiency and fairness. Important principles for reforming the CTC include:

- Making the credit fully refundable and increasing the credit (to at least \$4,000 per child per year)
- Creating a more generous young-child tax credit (at least \$4,600 per child per year)
- Including all children, regardless of immigration status
- Designating 17-year-olds as “qualifying children”
- Establishing equity for children in U.S. territories
- Designing a program that is accessible to all children, especially those in complex living arrangements, involved with foster care or other public systems, unbanked and/or not connected to the tax code so the benefit follows the child
- Providing advance payments on a monthly basis, just like household bills ensuring reliable funding and automatic adjustments to keep pace with inflation and the rising cost of raising children
- Guaranteeing that the cash benefit is not counted as taxable income and isn't considered income when determining household eligibility for other benefits and assistance,
- Offering a simple sign-up process with a sign-up tool in multiple languages and assurance the program complements, not replaces, other supports for families, and
- Protecting families from surprise tax bills and the credit from garnishment

Lawmakers also could draw lessons from the Social Security program and its successful delivery of income support to seniors. According to the 2021 Supplemental Poverty Measure (SPM), Social Security lifted more than 18 million seniors out of poverty. Congress could do the same for children using Social Security as a model for a child allowance. An October 2020 report from Brookings states, “If we gave each child living in poverty the average Social Security benefit received by a Social Security recipient age 65 and over — that's \$17,112 annually, according to Current Population Survey data — the rate of childhood poverty in this country would fall to less than 1 percent.”²⁴ A successful child allowance program would provide a meaningful, monthly cash benefit that helps families with the rising costs of raising children, supports children's healthy development, eliminates child poverty, promotes racial equity and justice, boosts the economy, and ensures increased economic opportunities for all children. *See “End Child Poverty” on page 37 for more information.*

4.2 Expand the Earned Income Tax Credit (EITC) for families with children and foster youth

The American Rescue Plan Act (ARPA) temporarily enhanced the Earned Income Tax Credit (EITC) in 2021, but according to the Center for Law and Social Policy even before that change “the credit lifted about 5.6 million people over the poverty line after taxes, including about 3 million children, and reduced the severity of poverty for another 16.5 million people, including 6.1 million children.”²⁵ We urge Congress to pass legislation to permanently expand and strengthen the EITC, using as models both the ARPA and the Working Families Tax Relief Act (S. 1138/H.R. 3157) introduced in the 116th Congress by Sens. Sherrod Brown (D-OH), Michael Bennet (D-CO), Dick Durbin (D-IL) and Ron Wyden (D-OR), and led by Rep. Dan Kildee (D-MI) in the House. We support boosting the EITC for families with children by increasing the maximum credit and the phase-in rate. We strongly support the ARPA provisions that lowered the eligibility age for childless workers, in particular, the drop from age 25 to age 18 for youth experiencing the foster care system and homelessness even while they are full-time students. These improvements would benefit many transition-age youth and prevent millions of low-wage, childless workers from being taxed into poverty. These workers are parents of adult children, non-custodial parents (who still have financial obligations to their children), and grandparents who help care for their grandchildren. The American Rescue Plan Act also expanded eligibility to workers with a child lacking a social security number by authorizing them to claim the EITC for workers without children.

4.3 Support the EITC Equity for Puerto Rico Act

Puerto Rico has a much higher proportion of people living in poverty than any state and more than 50% of Puerto Rico’s children live in poverty, according to the U.S. Census Bureau.²⁶ Residents of Puerto Rico do not have the same access to federal tax credits as people living in the states. The EITC Equity for Puerto Rico Act of 2023 (H.R. 257), introduced by Rep. Jenniffer González-Colón (Resident Commissioner-Puerto Rico), would make eligibility for residents of Puerto Rico equal to that of residents in the states.

4.4 Support the Foster Opportunity EITC Act

Foster youth aging out of the system lose access to services and support and often have poor outcomes. These youth and young adults are more likely to experience behavioral, mental, and physical health issues, housing problems and homelessness, employment and academic difficulties, early parenthood, incarceration, and other potential lifelong adversities. Congress must build on the EITC’s success in bringing recipients into the labor market and reducing poverty by making permanent changes such as those in the Foster Opportunity EITC Act (H.R. 4954/S. 2790), introduced by Rep. Danny Davis (D-IL) and sponsored by Sen. Bob Casey (D-PA) in the 116th Congress. The American Rescue Plan Act temporarily authorized similar provisions. The bill would make EITC improvements permanent, increasing the credit, reducing the phase-out rate and expanding eligibility to youth experiencing the foster care system and homelessness at age 18 (rather than age 25 under current law), even if they are full-time students. Making these EITC expansions permanent for childless workers and qualifying foster and homeless youth could benefit as many as a half-million youth who experience the foster care system. See *“Make the Child Welfare System More Efficient, Equitable, and Safe”* on page 85 for more information.

4.5 Expand the Child and Dependent Care Tax Credit (CDCTC)

The cost to a family of child care for two children in a center was more than annual mortgage payments in 44 states and the District of Columbia, and the cost of child care for an infant at a center was more than in-state tuition at a public university in 34 states and the District.²⁷

We urge Congress to make permanent, significant and comprehensive improvements to the Child and Dependent Care Tax Credit (CDCTC). The American Rescue Plan Act temporarily authorized many provisions contained in H.R. 927 and S. 271 introduced in the 117th Congress by Rep. Danny Davis (D-IL) and Sen. Bob Casey (D-PA), and these offer a solid basis for reform. The bill would make the CDCTC fully refundable, increase the maximum credit rate to 50%, adjust the phaseout threshold to begin at \$125,000 rather than \$15,000, greatly increase the amount of child and dependent care expenses that are eligible for the credit, and index the credit for inflation. This legislation complements the critically important direct spending programs for child care, collectively known as the Child Care Development Block Grant. The 2019 National Academy of Sciences study concludes that converting the CDCTC into a fully refundable tax credit, thus concentrating its benefits on families with the lowest income and with children under the age of 5, supports parents in the workforce and helps reduce child poverty by 9.2% over 10 years. See *“Invest in Our Youngest Children”* on page 67 for more information.

4.6 Support the Improved Employment Outcomes for Foster Youth Act

Youth who experience the foster care system lack effective, well-resourced, widely available programs and services to help prepare them for successful independence. Furthermore, the statistics known about youth transitioning out of the foster care system are alarming: 20% become instantly homeless, less than 3% earn a college degree, 25% are dealing with PTSD, and 60% end up in the sex industry.²⁸ We strongly support expansion of the Work Opportunity Tax Credit (WOTC) to include the hiring of qualified foster care transition-age youth. The WOTC permits employers hiring individuals who are members of a targeted group to claim a tax credit equal to a portion of the wages paid to those individuals. Modeled on H.R. 3986, sponsored by Rep. Danny Davis (D-IL) in the 117th Congress, the WOTC would be expanded to employers who hire “qualified foster care transition youth.”

4.7 Establish a national baby bonds program

Our country's long history of systematic and institutional racism continues to affect every aspect of the lives of children and families of color and contributes to a growing racial wealth gap in the United States. As of 2019, white households had eight times the wealth of Black households and five times the wealth of Latino households.

A national “baby bonds” program, as proposed by Rep. Ayanna Pressley (D-MA) and Sen. Cory Booker (D-NJ) in the American Opportunity Accounts Act (H.R. 1041/S. 441), offers one way to address the racial wealth gap. This legislation would authorize federally funded and managed savings accounts (American Opportunity Accounts) for children under the age of 18. See *“End Child Poverty”* on page 37 for more information.

4.8 Establish a renters' tax credit

Median household rent increased 15% from 2021 to 2022 in the United States and that increase was even higher in many metro areas.²⁹ Yet despite the great need for rental assistance, only 1-in-4 families who are eligible for rent assistance receive it.³⁰ Families with children represent a decreasing share of federal housing assistance beneficiaries³¹ even though the majority of households on the waitlist (60%) are families with children.³² Even when families do obtain vouchers, they struggle to find landlords who will accept them. Voucher discrimination is compounded by racial discrimination.³³

Creating a national renters' tax credit, if properly designed and implemented, could help meet the need for housing assistance by delivering resources directly to the families who need it most. A renters' tax credit should:

- Be targeted to low-income renter households
- Support families with children by adjusting for family size and inflation
- Reach families who lack a formal lease but are still paying rent or a motel bill
- Be large enough to relieve the housing cost burden of low-income families
- Be delivered monthly, just as rent is due, and allow for the credit to be adjusted quarterly to respond to fluctuations in household income or rent

Lawmakers should look to the lessons learned from the Internal Revenue Service's delivery of monthly Child Tax Credit payments in 2021 and build upon this effort. The Rent Relief Act (H.R. 8357/S. 4728), led by Rep. Danny Davis (D-IL) and Sen. Raphael Warnock (D-GA) in the 117th Congress, provides one design approach. *See "End Child, Youth, and Family Homelessness" on page 81 for more information.*

4.9 Support the Filing Simplification Act of 2022

In June 2022, the Treasury Department estimated that close to 2.3 million children under age 18 may be eligible to be claimed for the expanded Child Tax Credit but had not yet been claimed on recent tax returns.³⁴ Transition-age youth commonly earn incomes below the tax-filing threshold, and lack adequate information about the credits, guidance from parents, and mandatory tax support programs to help these young people.³⁵ We urge Congress to establish a simplified tax benefits portal for individuals who face the biggest barriers to accessing the CTC, EITC, CDCTC and other tax credits. Bills such as S. 4508, introduced by Sen. Elizabeth Warren (D-MA) and H.R. 8368 introduced by Reps. Brad Sherman (D-CA) and Katie Porter (D-CA) in the 117th Congress, would simplify the tax filing process for millions of Americans, saving them time and money while also ensuring more eligible families and youth have access to important tax refunds. The bills were introduced on the heels of an April 2022 GAO report that recommended the IRS identify and develop additional options for free, online filing.³⁶ The proposed legislation would authorize the IRS to create a permanent portal for tax filers and the funding to implement and maintain the program. *See "Prioritize Children in All Budget and Policy Decisions" on page 21 for more information.*

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1. Sherlock, Molly, F. and Marples, Donald J. "Overview of the Federal Tax System in 2022." Congressional Research Service. June 8, 2022. <https://crsreports.congress.gov/product/pdf/R/R45145>.
2. Lucas-Judy, Jessica. "Corporate Income Tax: Effective Rates before and after 2017 Law Change." U.S. Government Accountability Office. December 2022. <https://www.gao.gov/assets/gao-23-105384.pdf>
3. National Academy of Sciences, Engineering, and Medicine. (2019). "A Roadmap to Reducing Child Poverty." Washington, DC: The National Academies Press. February 2019. <https://nap.nationalacademies.org/catalog/25246/a-roadmap-to-reducing-child-poverty>.
4. The White House. "Fact Sheet: State-by-State Analysis of American Rescue Plan Tax Cuts for Families and Workers." March 8, 2022. <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/08/fact-sheet-state-by-state-analysis-of-american-rescue-plan-tax-credits-for-families-and-workers/>
5. Collyer, Sophie, CPSP, David Harris, CPSP & CREI, and Christopher Wimer, CPSP. "Left Behind: The One-Third of Children in Families Who Earn Too Little to Get the Full Child Tax Credit," Columbia University, Center on Poverty and Social Policy, Children's Research and Education Institute, Vol. 3 No. 6, May 2019.
6. Wimer, Christopher, Collyer, Sophie, Harris, David, and Lee, Jiwan. "The 2021 Child Tax Credit Expansion: Child Poverty Reduction and the Children Formerly Left Behind." VI. 6 No. 8. Center on Poverty and Social Policy at Columbia University. November 2, 2022. <https://static1.squarespace.com/static/610831a16c95260dbd68934a/t/63629828229a175d3864c0a1/1667405865381/Expanded-CTC-and-Child-Poverty-in-2021-CPSP.pdf>.
7. Creamer, John, Shrider, Emily A., Burns, Kalee, and Chen, Frances. "Poverty in the United States: 2021." United States Census Bureau. September 2022. <https://www.census.gov/content/dam/Census/library/publications/2022/demo/p60-277.pdf>.
8. Karpman, Michael, Maag, Elaine, Zackerman, Stephen, Wissoker, Doug. "Child Tax Credit Recipients Experienced a Larger Decline in Food Insecurity and a Similar Change in Employment as Nonrecipients between 2020 and 2021." Urban Institute, May 9, 2022. <https://www.urban.org/research/publication/child-tax-credit-recipients-experienced-larger-decline-food-insecurity-and>.
9. Zippel, Claire. "9 in 10 Families with Low Incomes Are using Child Tax Credits to Pay for Necessities, Education." Center on Budget and Policy Priorities. October 21, 2021. <https://www.cbpp.org/blog/9-in-10-families-with-low-incomes-are-using-child-tax-credits-to-pay-for-necessities-education>.
10. Ibid viii
11. Hammond, Samuel. "New Research Finds the Child Tax Credit Promotes Work." Niskanen Center. December 10, 2020. <https://www.niskanencenter.org/new-research-finds-the-child-tax-credit-promotes-work/>.
12. Parolin, Zachary, Collyer, Sophie, and Curran, Megan, A. "Absence of Monthly Child Tax Credit Leads to 3.7 Million More Children in Poverty in January 2022." Vol.6. No. 2. Center on Poverty and Social Policy at Columbia University. February 17, 2022. <https://static1.squarespace.com/static/610831a16c95260dbd68934a/t/620ec869096c78179c7c4d3c/1645135978087/Monthly-poverty-january-CPSP-2022.pdf>.
13. Bovell-Ammon, Allison, McCann, Nicole, Mulugeta, Martha, Ettinger de Cuba, Stephanie, Raifman, Julia and Shafer, Paul. "Association of the Expiration of Child Tax Credit Advance Payments with Food Insufficiency in U.S. Households." Jama Network, October 21, 2022.
14. Kovski, Nicole, L. Hill, Heather, D. Mooney, Stephen, J. Riva, Frederic, P. Rowhani-Rahbar, Ali. "Short-Term Effects of Tax Credits on Rates of Child Maltreatment Reports in the United States." Washington University, June 6, 2022. <https://publications.aap.org/pediatrics/article/150/1/e2021054939/188244/Short-Term-Effects-of-Tax-Credits-on-Rates-of>.
15. Garfinkel, Irwin, Sariscsany, Laurel, Ananat, Elizabeth, Collyer, Sophie, Hartley, Robert P, Wang, Buyi, Wimer, Christopher. "The Benefits and Costs of a Child Allowance." Volume 13. Cambridge University Press. September, 2022. <https://www.cambridge.org/core/search?filters%5BauthorTerms%5D=Christopher%20Wimer&eventCode=SE-AU>.
16. Hammond, Samuel, Orr, Robert. "Report: Measuring the Child Tax Credit's Economic and Community Impact." Niskanen Center. August 2, 2021. <https://www.niskanencenter.org/report-measuring-the-child-tax-credits-economic-and-community-impact/>.
17. Collyer, Sophie, Curran, Megan, Garfinkel, Irwin, Harris, David, Richardson, Dominic, and Wimer, Christopher. "A Step in the Right Direction: The Expanded Child Tax Credit Would Move the United States' High Child Poverty Rate Closer to Peer Nations." Vol. 6. No. 7. Columbia University, Center on Poverty and Social Policy, Children's Research and Education Institute, and The UNICEF Innocenti—Global Office of Research and Foresight. October 25, 2022. <https://static1.squarespace.com/static/610831a16c95260dbd68934a/t/6362774dac8c596df1f89c5c/1667397505780/Child-Tax-Credit-and-Relative-Poverty-CPSP-UNICEF-2022.pdf>.
18. Leibenluft, Jacob. "Tax Bill Ends Child Tax Credit for About 1 Million Children." Center on Budget and Policy Priorities. December 18, 2017. <https://www.cbpp.org/blog/tax-bill-ends-child-tax-credit-for-about-1-million-children>.
19. Ibid iii.
20. Dr. Nyandora, Aisha, "To Lift Up Black Families, Provide Them a Guaranteed Income." Springboard to Opportunities adapted for First Focus on Children's "Big Ideas, 2023." <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
21. Collyer, Sophie, Curran, Megan, Davis, Aidan, Harris, David, and Wimer, Christopher. "State Child Tax Credits and Child Poverty: A 50-state Analysis." Center on Poverty and Social Policy at Columbia University (CPSP), Institute on Taxation and Economic Policy (ITEP), and Children's Research and Education Institute. November 2022. <https://itep.sf2.digitaloceanspaces.com/Report-State-Child-Tax-Credits-and-Child-Poverty-A-50-State-Analysis-2022.pdf>.
22. Bovell-Ammon, Allison, Burnett Diana, Ettinger de Cuba, Stephanie, de Cuba, Gupta-Barnes, Shailly, JD, Banks, Jalen, Bates, Elizabeth, Coleman, Sharon, Charlotte, Bruce, Lê-Scherban, Félice. "How the Child Tax Credit Helped Families Catch Up on Rent and Improved Health." Children's HealthWatch. August 2022. <https://childrenshealthwatch.org/wp-content/uploads/CTC-Report-Aug-2022-Final.pdf>.
23. Barrón-López, Laura. "As Congress debates a child tax credit expansion, families struggle to get by." PBS News Hour. December 18, 2022. <https://www.pbs.org/newshour/show/as-congress-debates-a-child-tax-credit-expansion-families-struggle-to-get-by>.
24. Kearney, Melissa S. "We could abolish child poverty in the U.S. with Social Security benefits for poor kids." The Brookings Institution. October 2020. <https://www.brookings.edu/blog/up-front/2020/10/21/we-could-abolish-child-poverty-in-the-u-s-with-social-security-benefits-for-poor-kids/>.
25. Dolby, Teon, Burnside, Ashley, and Bunts, Whitney. "EITC for Childless Workers: What's at State for Young Workers." The Center for Law and Social Policy. June 2022. <https://www.clasp.org/publications/report/brief/eitc-childless-workers-2022/>.
26. United States Census Bureau. "Poverty, Under 18 years Old in Puerto Rico is 54.9%." American Community Survey. 2021. <https://data.census.gov/all?q=child+poverty+in+puerto+rico>.
27. Child Care Aware of America. "Catalyzing Growth: Using Data to Change Child Care." 2021. <https://www.childcareaware.org/catalyzing-growth-using-data-to-change-child-care/#ChildCareAffordability>.
28. Balistreri, Elisabeth. "What Happens to Kids Who Age Out of Foster Care." House of Providence. November 15, 2022. <https://www.thehofp.org/articles/what-happens-to-kids-who-age-out-of-foster-care>.
29. Ellis, Tim. "Rental Market Tracker: Typical U.S. Rent Surpassed \$2,000 for First Time in May," Redfin News, June 9, 2022, <https://www.redfin.com/news/redfin-rental-report-may-2022/>.
30. "Policy Basics: Federal Rental Assistance." Center on Budget and Policy Priorities. Updated January 11, 2022. <https://www.cbpp.org/research/housing/federal-rental-assistance>.
31. Kingsley, G. Thomas. "Trends in Housing Problems and Federal Housing Assistance." Urban Institute. October 2017. <https://www.urban.org/sites/default/files/publication/94146/trends-in-housing-problems-and-federal-housing-assistance.pdf>.
32. "The Long Wait for a Home." National Low Income Housing Coalition, Housing Spotlight 6. no. 1, (Fall 2016). <https://nlhc.org/resource/housing-spotlight-volume-6-issue-1>.
33. Lindsay, Jay. "Discrimination, flawed search process hurting housing assistance recipients." Federal Reserve Bank of Boston. August 2019. <https://www.bostonfed.org/news-and-events/news/2019/08/housing-assistance-vouchers.aspx>.
34. Dept. of the Treasury. 2021. "By ZIP Code: Number of Children under Age 18 with a Social Security Number Who Are Not Found on a Tax Year 2019 or 2020 Tax Return." Treasury. <https://home.treasury.gov/system/files/131/Estimated-Counts-of-Children-Unclaimed-for-CTC-by-ZIP-Code-2019.pdf>.
35. Johnson, Anna. "From Pilot to Practice: Lessons from Six Counties to Achieve Full Implementation of California's New Foster Youth Tax Credit," John Burton Advocates for Youth, August, 25, 2022.
36. McTigue, Jr., James, R. "IRS Free File Program: IRS Should Develop Additional Options for Taxpayers to File for Free." U.S. Government Accountability Office. April 2022. <https://www.gao.gov/assets/gao-22-105236.pdf>.



SECTION 5

End Child Poverty

No child deserves to grow up in poverty, yet historically the United States has had a higher rate of child poverty than other wealthy nations because we have failed to invest in our children.

The United States made significant inroads to addressing child poverty in 2021 with the passage of expansions to the Child Tax Credit that significantly increased the amount of the credit and, for the first time, made the full credit available to children in families with the greatest need. These expansions led to the lowest child poverty rate on record in the United States in 2021 and nearly cut child poverty in half in just one year.¹

This dramatic result meant that households had more money to provide food, clothing, and diapers for their children. It meant more money for child care, gas, and car repairs that helped parents get to work. It meant more money for educational resources, music or soccer lessons, or a trip to the zoo. It also meant reduced stress for many parents and caretakers, who reported that it gave them some breathing room,² relieving them of the constant fear and distraction of how to meet their children's basic needs.

A National Academy of Sciences 2019 landmark study documented that cash transfers to households with children create positive momentum for children's long-term success, leading to better health outcomes, higher educational attainment, and increased earnings as adults.³ As time goes on, research is likely to reveal more about the long-term positive impacts that these payments had on the millions of children whose households received them in 2021.

While the drop in child poverty and other progress of 2021 was unprecedented and worth celebrating, it also greatly underestimated hardship and still leaves many children behind. For instance, income thresholds used to measure poverty remain much too low, so households at double the poverty line still experience significant financial insecurity and struggle to make ends meet.

Children of color experienced poverty at record lows in 2021, but significant racial and ethnic disparities still exist. Children in immigrant families still face more significant barriers to economic stability than non-immigrant families due to restricted access to tax credits and other benefits. And children in Puerto Rico and the other U.S. territories continue to face higher rates of poverty than children in the 50 states and the District of Columbia due to their unequal access to federal benefits as part of a long history of racism and discrimination against Americans living in the territories.

The historic progress of 2021 confirmed that child poverty is solvable when lawmakers have the political will to act. When expansions to the Child Tax Credit expired at the end of 2021, some progress retreated and 2022 has brought significant increases to material hardship and food insecurity. Congress must not only work to regain the progress of 2021, but build upon it to reach the goal of ending child poverty in the United States. The American public agrees: In a 2022 poll conducted by Lake Research Partners, American voters said by a 6-to-1 margin that we spend too little to address child poverty, and voters across party lines said they are very concerned that children experience higher levels of poverty than adults in the United States.⁴

Ending child poverty requires big thinking and long-term solutions, such as establishing a permanent, monthly child allowance, improving income and work support for parents and caregivers, reforming homelessness and affordable housing assistance, and other steps.

To do this, we urge Congress to:

5.1 Establish a national child poverty reduction target

We urge Congress to codify a national child poverty reduction target and set a goal to end child poverty in the United States. Child poverty is a long-term problem in need of long-term solutions. A child poverty reduction target would create the accountability needed to pass the long-term policies that can ultimately end child poverty in the United States.

Other countries have proven the effectiveness of poverty reduction targets. After establishing targets, the United Kingdom cut its child poverty rate in half between 1999 and 2008⁵ and before the outbreak of COVID-19, Canada had reduced child poverty by more than a third since 2015.⁶ In the United States, momentum is growing, with child poverty reduction targets established in California, and most recently in Puerto Rico⁷ and New York state.⁸

The majority of voters across party lines strongly agree that the U.S. should establish a national child poverty reduction target.⁹ The Child Poverty Reduction Act (H.R. 1558/S. 643), introduced in the 117th Congress by Rep. Danny Davis (D-IL) and Sen. Bob Casey (D-PA), would codify a national child poverty reduction target into law and task the National Academy of Sciences with analyzing and monitoring progress toward this goal. In addition, we encourage President Biden and Vice President Harris to establish a national child poverty reduction target through executive action.

5.2 Establish a permanent, monthly child benefit

The expansion of the Child Tax Credit in 2021 led to the lowest child poverty rate on record in the United States, and a National Academy of Sciences 2019 landmark study documented that cash transfers to households with children create positive momentum for children's long-term success, leading to better health outcomes, higher educational attainment, and increased earnings as adults.¹⁰

Congress must examine the progress made in 2021 and build upon it to establish a permanent child allowance program that delivers monthly payments to children in families with the biggest barriers to economic security. Providing families with a guaranteed minimum income empowers them to support their children and plan for the future. To maintain their impact, these payments should not be counted as income when determining household eligibility for other public benefits and assistance.

Congress also should look to the growing body of evidence from the increasing number of state Child Tax Credits¹¹ and guaranteed income pilots across the country.¹² See *"Improve the Tax Code With Measures That Meet All Children's Needs"* on page 29 for more information.

5.3 Improve poverty data and measurement

While the progress made in reducing child poverty in 2021 is significant, the way we measure poverty greatly underestimates hardship and still leaves many children behind. Income thresholds used to determine poverty remain much too low, so many households with incomes significantly higher than the federal poverty line still experience financial insecurity and struggle to make ends meet.

The poverty threshold in 2021 stood at roughly \$30,000 for a family of four with two children. The Economic Policy Institute's Family Budget Calculator¹³ shows that in most areas of the country, a family of four with two children needs at least \$80,000 a year to have an adequate standard of living — and in many places, they need much more. By these standards, even families who live at double the poverty threshold cannot make ends meet. A realistic view of material hardship and deprivation must figure into calculations of progress to ensure that anti-poverty measures are making a meaningful impact.

The National Academy of Sciences has convened an expert panel to evaluate and make recommendations to improve the Supplemental Poverty Measure, which is currently the strongest and most realistic poverty measure used by the federal government.¹⁴ The panel is expected to release its conclusions in early 2023, and lawmakers should look to these expert recommendations for action items to improve the Supplemental Poverty Measure and consider alternative poverty measures that may provide a more holistic view of material hardship and deprivation in the U.S.

Equally important is that Congress address the continual undercount of children in the decennial Census, American Community Survey, and other U.S. Census Bureau surveys. Despite efforts by the Census Bureau to address the challenge of counting kids in 2020, analysis of the agency's data by Dr. William O'Hare for the Count All Kids committee finds that the 2020 Decennial Census net undercount rate for young children increased between 2010 and 2020: From 4.6% in 2010 to 5.4% in 2020. This is the highest net undercount rate for young children since 1950 when tracking started.¹⁵ Preliminary data from 2020 also suggests the gap between non-Hispanic white children and minority children (Black and Hispanic) was bigger in 2020 than it was in 2010, meaning that many of the children most in need of assistance are the least likely to get their fair share.

This undercount of young children is very troubling as census data guides the allocation of more than \$1.5 trillion in federal funding to over 300 programs, many of which support the healthy development of children and keep the most vulnerable from falling into poverty.¹⁶

We urge Congress to provide additional resources to the U.S. Census Bureau in the Fiscal Year 2024 budget to support the critically important work of its Directorate on the Undercount of Young Children and its capacity to determine why young children are missed, improve data collection, elevate research addressing the undercount of Hispanic and Black children, and expand outreach to enhance data accuracy. More funding also would allow the Census Bureau to improve the American Community Survey's sample size, response rates, follow-up operations, and other mechanisms to ensure the survey accurately captures data about the nation's increasingly complex communities and households.

5.4 Establish a national baby bonds program

Our country's long history of systematic and institutional racism continues to affect every aspect of the lives of children and families of color and contributes to a growing racial wealth gap in the United States. As of 2019, white households had eight times the wealth of Black households and five times the wealth of Latino households.¹⁷

A national "baby bonds" program, as proposed by Rep. Ayanna Pressley (D-MA) and Sen. Cory Booker (D-NJ) in the American Opportunity Accounts Act (H.R. 1041/S. 441), offers one way to address the racial wealth gap. This legislation would authorize federally funded and managed savings accounts (American Opportunity Accounts) for children under the age of 18. The government would automatically deposit \$1,000 for each child born (annually adjusted for inflation), and funds would grow over time as the account earns interest until age 18. Each year, a child could receive up to an additional \$2,000 deposit from the

government — children from lower-resourced households would be eligible for higher amounts. The program's funding would be exempt from annual appropriations and the investments would be excluded from asset limits for other government benefits.

A child can access the funds at 18 for allowable uses such as educational expenses, purchasing a home, or other targeted wealth-building assets that break down the structural barriers in our society that many Black, Latino, and other communities of color face in accumulating wealth and achieving economic mobility. The age limit for youth who have been in the foster care system should be at least 24 and the Secretary of the Treasury must be authorized to adjust these limits for certain categories of qualified expenses as appropriate. As part of the program, funding should be available to promote outreach and education with community partners, particularly in low-income areas and communities of color.

Connecticut was the first state to establish a baby bonds program, followed by the District of Columbia and more recently California. We urge Congress to pass a national baby bonds program informed by the lessons learned at the state and local level.

5.5 Improve income and work supports

More than 25 years of experience with the Temporary Assistance for Needy Families (TANF) program and the findings of a 2019 nonpartisan National Academy of Sciences study¹⁸ confirm that tying work requirements to benefits does not reduce poverty or boost economic security for families. Instead, these requirements create bureaucratic hoops for parents or caretakers — who often already are working — without addressing the underlying issues facing low-income workers. Work requirements offer no flexibility for the volatile nature of the job market, particularly the low-wage job market, and no support for families trying to obtain employment that will ultimately provide them with economic stability. Work requirements impose drastic consequences on children, undermining access to programs that improve their health and educational outcomes.

The dramatic spike in unemployment rates and the sudden closure of schools and child care in the early part of the pandemic exposed the fact that children in households with frontline, low-wage workers who lack access to affordable child care, paid sick days or paid family and medical leave suffer the most during economic downturns.

In addition, our society's view of the type of work that “deserves” compensation is also deeply flawed. Child rearing and caretaking of family members results in large gains to the collective whole, yet goes uncompensated. Grandparents caring for grandchildren, or parents caring for children with disabilities or special health care needs have particular barriers to economic security. We can become a nation that values our families by recognizing these contributions and the way they underpin our country's economic success.

One of the lessons we must take away from the COVID crisis and its economic fallout is that instead of attaching burdensome work requirements to benefits, we need a system that provides consistent support to children as they undergo critical stages of brain development. At the same time, we must provide parents and caretakers with paid family and medical leave, affordable child care, transportation support, job training, affordable higher education and other supports to help them get — and keep — employment that provides a steady household income.

Reform the Temporary Assistance for Needy Families program

The Temporary Assistance for Needy Families (TANF) program is the nation's primary program for providing cash assistance to families with children with very low income. While some states recently increased their TANF benefits and have made important reforms, federal progress to improve TANF remains stagnant.¹⁹ TANF was designed to limit assistance to Black mothers and children. States with larger percentages of Black residents, mostly in the South, offer lower levels of cash assistance and reach fewer poor families, contributing to disproportionately high rates of poverty among Black children compared to white children.²⁰ As a fixed block grant that is not indexed to inflation, TANF is not effective at adjusting to increased need during times of economic crisis, and its value has fallen significantly over time.²¹ The Supreme Court's decision to take away the Constitutional right to abortion in *Dobbs vs. Jackson Women's Health Organization* further exacerbates these geographic and demographic disparities. For additional detail on ways to reform TANF, please see *Undoing the Racist Legacy of Cash Assistance in the South: Reimagining TANF Using the “Black Women Best” Framework*,²² a contribution to *First Focus on Children's Big Ideas 2023* authored by Ife Finch Floyd of the Georgia Budget and Policy Institute, and Ali Zane at the Center on Budget and Policy Priorities.

Establish a National Paid Family and Medical Leave Program

The lack of earned family leave for millions of U.S. workers forces parents to make an impossible choice: Continue earning necessary income, or forfeit that income and care for their newborn, sick child, family member, or themselves. Paid family leave promotes healthy child development, family economic security, and labor force retention, by allowing parents and caregivers to maintain steady employment and income without sacrificing their family obligations.

The Bureau of Labor Statistics shows that only about 1-in-4 private sector employees have access to paid family leave. Hispanic and Black workers are much less likely to have access to paid leave compared to their white counterparts.²³ The U.S. is the only wealthy country in the world that does not offer paid parental leave at the national level.²⁴ Eleven states and the District of Columbia have passed paid family and medical leave laws, while New Hampshire and Vermont guarantee access to leave for state employees, but only provide a voluntary option to purchase coverage for the private sector.²⁵

Following the outbreak of COVID-19, Congress passed a temporary paid family and medical leave program through the Families First Coronavirus Response Act and required some employers to provide paid leave for employees to care for themselves or their children. This included the need to care for children whose schools or child care centers were closed due to COVID-19.²⁶

Lawmakers signaled with this program that they understand the pressing need for parents and caregivers to have access to paid leave. We strongly urge Congress to establish a permanent paid family and medical leave program as outlined in the FAMILY Act (H.R. 804/S. 248) in the 117th Congress, led by Rep. Rosa DeLauro (D-CT) and Sen. Kirsten Gillibrand (D-NY).

Provide Workers Access to Paid Sick Days

Parents and caregivers must have paid sick days to care for a child without risk of losing their job or forfeiting income. Even before the outbreak of COVID-19, 70% of school-age children miss a day or more of school due to illness or injury each year.²⁷ Parents without sick leave are twice as likely to send a sick child to school or child care as a parent who has sick leave.²⁸ In October 2022, 104,000 employees missed work to care for their children, a number that far exceeds any time in the past. Child illness in addition to challenges in the child care industry caused these absences, and adds to the urgent need for a national policy for paid sick days.²⁹

Many service jobs, such as those in food service and child care, require interpersonal contact. However, these low-wage workers often do not have the option of paid sick leave so when they get ill, they often cannot afford to stay home and lose wages, putting children and others at high risk of getting sick.

Almost 1-in-4 U.S. workers do not have even a single paid sick day.³⁰ Low-wage and part-time workers, the majority of whom are marginalized workers of color, are the least likely to have access to paid sick days. Fourteen states and the District of Columbia have passed laws guaranteeing paid sick days, as well as some cities and counties across the country, but Congress has yet to create a permanent, national program.

Following the outbreak of COVID-19, Congress passed a temporary sick leave program through the Families First Coronavirus Response Act, and required some employers to provide sick time to employees impacted by COVID-19 so they could care for themselves or their children.³¹ We urge Congress to permanently guarantee America's workers access to paid sick days as proposed in the Healthy Families Act (H.R. 2465/S. 1195) in the 117th Congress, led by Rep. Rosa DeLauro (D-CT) and Sen. Patty Murray (D-WA).

5.6 Reform homelessness and housing assistance

Poverty is inextricably linked to homelessness, yet policy makers often discuss and address these issues in different silos, as if children experiencing poverty and children experiencing homelessness are two completely separate populations. Time and time again, research has shown that prevention and early intervention are crucial to breaking the cycle of homelessness for children, youth, and families. Children and youth who are identified and given access to services are more likely to experience positive outcomes in physical and mental health, and in education.³² See *“End Child, Youth, and Family Homelessness”* on page 81 for more information.

1. Baldari, Cara. "Child Poverty in 2021." Fact Sheet, First Focus on Children. September 21, 2022. <https://firstfocus.org/resources/fact-sheet/u-s-child-poverty-in-2021>.
2. Luhby, Tami. "'It gave me some breathing room': Parents struggle after monthly child tax credit payments ended." CNN. Updated January 31, 2022. <https://www.wdsu.com/article/monthly-child-tax-credit-payments-end-parents-struggle/38946660#>.
3. "A Roadmap to Reducing Child Poverty." National Academy of Sciences, Engineering, and Medicine. National Academies Press. 2019. <https://nap.nationalacademies.org/catalog/25246/a-roadmap-to-reducing-child-poverty>.
4. Kayal, Michele. "By 6-to-1 margin, voters say the federal government should spend more on children." First Focus on Children. Press Release. June 13, 2022. <https://firstfocus.org/news/press-release/by-6-to-1-margin-voters-say-federal-government-should-spend-more-on-children>.
5. Branosky, Natalie and Mansour, Jane. "A Look Back at the UK Child Poverty Target: Transferable Themes for the U.S." First Focus on Children. 2015. <https://firstfocus.org/resources/report/a-look-back-at-the-uk-child-poverty-target-transferable-themes-for-the-united-states>.
6. "Over 1 million Canadians have been lifted out of poverty since 2015." Government of Canada, News Release. February 25, 2020. <https://www.canada.ca/en/employment-social-development/news/2020/02/over-1-million-canadians-have-been-lifted-out-of-poverty-since-2015.html>.
7. "Puerto Rico already has a law to reduce child poverty in half in 10 years." Institute for Youth Development. 2021. <https://en.juventudpr.org/blog/puerto-rico-ya-cuenta-con-una-ley-para-reducir-la-pobreza-infantil-a-la-mitad-en-10-anos>.
8. "Child Poverty Reduction Act Signed Into Law, Boldly Commits NYS to Fighting Child Poverty." Schuyler Center on Analysis & Advocacy. Press Statement. December 2021. <https://scaany.org/child-poverty-reduction-act-signed-into-law-boldly-commits-nys-to-cutting-child-poverty-in-half/>.
9. Kayal. "By 6-to-1 margin, voters say the federal government should spend more on children." <https://firstfocus.org/news/press-release/by-6-to-1-margin-voters-say-federal-government-should-spend-more-on-children>.
10. "A Roadmap to Reducing Child Poverty." National Academy of Sciences, Engineering, and Medicine. National Academies Press. 2019. <https://nap.nationalacademies.org/catalog/25246/a-roadmap-to-reducing-child-poverty>.
11. Collyer, Sophie, Curran, Megan, Davis, Aidan, Harris, David, and Wimer, Christopher. "State Child Tax Credits and Child Poverty: A 50-State Analysis." Institute on Taxation and Economic Policy and Columbia Center on Poverty and Social Policy. November 16, 2022. <https://itep.org/state-child-tax-credits-and-child-poverty-50-state-analysis/>.
12. "Celebrating 100 Guaranteed Income Pilots." Economic Security Project. Graphic. Last accessed January 18, 2023. <https://economicsecurityproject.org/wp-content/uploads/2022/10/ESP-100PilotsMap-SocialGraphic-V7-092722-3.png>.
13. Economic Policy Institute. Family Budget Calculator. Calculations done by First Focus on Children. Last visited January 5, 2023. <https://www.epi.org/resources/budget/>.
14. National Academies of Sciences, Engineering, and Medicine. "Evaluation and Improvements to the Supplemental Poverty Measure." Last visited January 6, 2023. <https://www.nationalacademies.org/our-work/evaluation-and-improvements-to-the-supplemental-poverty-measure>.
15. O'Hare, Bill. "New Census Bureau Data Show Young Children Have a High Net Undercount in the 2020 Census." March 2022. <https://countallkids.org/resources/new-census-bureau-data-show-young-children-have-a-high-net-undercount-in-the-2020-census/>.
16. "Counting for Dollars 2020: The Role of the Decennial Census in the Geographic Distribution of Federal Funds." The George Washington University, Institute of Public Policy, April 29, 2020. <https://gwipp.gwu.edu/counting-dollars-2020-role-decennial-census-geographic-distribution-federal-funds>.
17. Changes in U.S. Family Finances from 2016 to 2019: Evidence from the Survey of Consumer Finances." Board of Governors of the Federal Reserve System, Survey of Consumer Finances. Federal Reserve Bulletin Vol. 106, No. 5, September 2020. <https://www.federalreserve.gov/publications/files/scf20.pdf>.
18. National Academies of Sciences, Engineering, and Medicine. <https://nap.nationalacademies.org/catalog/25246/a-roadmap-to-reducing-child-poverty>.
19. Safawi, Ali and Reyes, Cindy. "States Must Continue Recent Momentum to Further Improve TANF Benefit Levels," Center on Budget and Policy Priorities, Updated Dec. 2, 2021. <https://www.cbpp.org/research/family-income-support/states-must-continue-recent-momentum-to-further-improve-tanf-benefit>.
20. Parolin, Zachary. "Temporary Assistance for Needy Families and the Black-White child poverty gap in the United States," Socio-Economic Review 19.3: 1005-1035. July 2021. https://www.researchgate.net/publication/322715782_Temporary_Assistance_for_Needy_Families_and_the_Black-White_Child_Poverty_Gap_in_the_United_States.
21. Falk, Gene. "The Temporary Assistance for Needy Families (TANF) Block Grant: Responses to Frequently Asked Questions." Congressional Research Service. Updated March 31, 2022. <https://sgp.fas.org/crs/misc/RL32760.pdf>.
22. Finch Floyd, Ife, and Zane, Ali. "Undoing the Racist Legacy of Cash Assistance in the South: Reimagining TANF Using the 'Black Women Best' Framework." Big Ideas 2023. First Focus on Children. December 8, 2022. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
23. "Racial and ethnic disparities in access to and use of paid family and medical leave: evidence from four nationally representative datasets." U.S. Bureau of Labor Statistics, Monthly Labor Review. January 2019. <https://www.bls.gov/opub/mlr/2019/article/racial-and-ethnic-disparities-in-access-to-and-use-of-paid-family-and-medical-leave.htm>.
24. Francis, Ellen, Cheung, Helier, and Berger, Miriam. "How does the U.S. compare to other countries on paid parental leave? Americans get 0 weeks. Estonians get more than 80." Washington Post, <https://www.washingtonpost.com/world/2021/11/11/global-paid-parental-leave-us/>.
25. Molly Weston Williamson. "The State of Paid Family and Medical Leave in the U.S. in 2023." Center for American Progress. Fact Sheet. January 2023. <https://www.americanprogress.org/article/the-state-of-paid-family-and-medical-leave-in-the-u-s-in-2023>.
26. "Families First Coronavirus Response Act: Employee Paid Leave Rights." U.S. Department of Labor, Wage and Hour Division. Last visited January 5, 2023. <https://www.dol.gov/agencies/whd/pandemic/ffcr-employee-paid-leave>.
27. U.S. Centers for Disease Control and Prevention, National Center for Health Statistics. "Summary Health Statistics: National Health Interview Survey, 2018 (Table C-6a)." September 2019. https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2018_SHS_Table_C-6.pdf.
28. Smith, T. W., & Kim, J. "Paid Sick Days: Attitudes and Experiences (Table 23)." National Opinion Research Center at the University of Chicago for the Public Welfare Foundation. June 2010. <http://www.issuelab.org/resources/10518/10518.pdf> (Unpublished calculation)
29. U.S. Bureau of Labor Statistics. "Labor Force Statistics from the Current Population Survey." Last visited January 2023. <https://data.bls.gov/timeseries/LNU02096055>.
30. U.S. Bureau of Labor Statistics. "Table 7. Leave benefits by average wage category, private industry workers, March 2022." National Compensation Survey: Employee Benefits in the United States, March 2022." September 2022. Excel file. ("private-average-wage-category-2022") <https://www.bls.gov/ncs/ebs/benefits/2022/home.htm>.
31. Families First Coronavirus Response Act: Employee Paid Leave Rights." <https://www.dol.gov/agencies/whd/pandemic/ffcr-employee-paid-leave>.
32. "Five Facts Educators Need to Know About Student Homelessness." SchoolHouse Connection. September 2021. <https://schoolhouseconnection.org/five-facts-educators-need-to-know-about-student-homelessness/>.



SECTION 6

Secure Gains in Children's Health Care Coverage and Services

Health care coverage is essential to a robust childhood that puts kids on a path to success as they mature. Myriad research shows that having health care coverage improves children's physical and mental health, and promotes greater educational attainment and better financial outcomes as they grow into adults. Before the COVID-19 pandemic, the number and rate of uninsured children had begun to rise after two decades of significant progress since the 1997 enactment of the Children's Health Insurance Program (CHIP).¹ Medicaid coverage protections enacted during the pandemic began reversing this downward trend.² However, some of these protections are set to expire this spring as the Consolidated Appropriations Act, 2023 (CAA, 2023) takes effect.³

The CAA, 2023 does provide some tools to mitigate children's coverage losses. The legislation obligates states to meet certain requirements before disenrolling children and families from Medicaid and CHIP when coverage protections end in the spring.⁴ Congress also mandated 12 months of continuous eligibility for children enrolled in Medicaid and CHIP even when their families' circumstances change; made permanent a state option to provide 12 months of postpartum coverage in the programs; and extended CHIP for an additional two years until Fiscal Year (FY) 2029.⁵

Despite these improvements, the U.S. child health care system is at a crossroads. To ensure that children and families retain the coverage to which they are entitled and that the country continues to build on its success in improving children's access to quality, affordable health care coverage, states must diligently apply these provisions and Congress must remain vigilant in its oversight.

Coverage is just the first piece of the puzzle. Lawmakers also must ensure that all children have access to equitable services that meet their physical and mental health needs from birth to adulthood. The country's youth mental health crisis has exposed many gaps in our public policies and in funding for the resources and services that children and youth need. The public's waning confidence in life-saving childhood and other vaccines has produced alarmingly low vaccination rates, and our maternal and infant mortality rates continue to rise, exposing unacceptable racial disparities. Children and their families still struggle to afford overpriced prescription drugs such as insulin and Epipens. Social drivers including nutrition, housing, and transportation continue to degrade children's health. These challenges are real, and Congress has many tools available to address them.

To build a health coverage and care system that meets the needs of all children in the United States, Congress must ensure:

- All eligible children are guaranteed health care coverage
- All children have access to quality, affordable coverage that meets their family's budget
- All children have equitable access to coverage and care, regardless of zip code, immigration status or other factors
- Families face less red tape to enroll their eligible children in coverage
- All children have affordable access to the prescription drugs they need
- Increased research captures and addresses the impact of nutrition, housing, transportation and other social determinants on children's overall health
- All children's mental health needs are fully met through prevention, early diagnosis, and treatment
- All children and their families have access to life-saving vaccines and that misinformation about vaccines is eliminated
- Public policy aims to improve maternal and infant mortality rates and address racial disparities

Health Care Coverage

Children are the future of our country's economy and success, and their healthy development is essential for our development. Providing children with health coverage is a proven investment in their future and the future of the country. Together, Medicaid and CHIP cover more than 41 million children.⁶ In some states, the programs cover as many as half of all children.⁷

6.1 Protect and expand children's access to health care coverage

- **Oppose attempts to cut Medicaid and/or block grant the program.** Medicaid efficiently provides quality health care coverage to more than 80 million Americans.⁸ The program offers critical coverage for more than 34 million children,⁹ ensuring they have access to the physical and mental health services they need to thrive. Any cuts to the program would have devastating impacts on the nation's children and their access to care, including necessary screenings and interventions for early childhood development. Congress must oppose all discussion of cuts and/or suggestions to block grant the program, which would starve states of the resources they need to continue to ensure children have access to quality physical and mental health care services.
- **Make CHIP permanent.** Although the CAA, 2023 extended CHIP for an additional two years, until FY 2029, the program remains the only federal insurance program that is temporary and continuously needs to be extended. The program's financial uncertainty burdens families who rely on CHIP to meet their children's health care needs and inhibits states that want to make improvements to their programs. Lawmakers introduced two bills that would have made CHIP permanent. The Children's Health Insurance Program Permanency Act (CHIPP Act) (H.R. 1791) was introduced by Rep. Nanette Barragán (D-CA) in the 117th Congress and the Comprehensive Access to Robust Insurance Now Guaranteed (CARING) for Kids Act (H.R. 66, 117th Congress) was introduced by Rep. Vern Buchanan (R-FL) and co-sponsored by Rep. Lucy McBath (D-GA).
- **Reduce administrative burden for states to expand CHIP eligibility.** Due to changes in the Affordable Care Act (ACA), states cannot expand CHIP eligibility above a certain threshold using a state plan amendment (SPA). Instead, most states must submit a section 1115 demonstration waiver to receive approval to expand eligibility. This process adds administrative burden and reduces efficiency for states that wish to cover more children. Language for this technical fix was included in the CHIPP Act and the Build Back Better Act (H.R. 5376), but fell out of the final version enacted as the Inflation Reduction Act.

- **Require continuous eligibility for children enrolled in Medicaid and CHIP from birth through age five.** Healthy development in a child's early years provides a solid foundation for lifelong health, educational attainment, and economic productivity. A key component of this development is ensuring children have consistent coverage so that they can access well-child visits, vaccinations, and specialty care. Any gaps in coverage during these early years could mean a child misses important physical, social, and emotional developmental milestones and appropriate referrals for intervention, stunting their overall development into adulthood. Though Congress made 12 months of continuous eligibility mandatory for children in Medicaid and CHIP with the enactment of CAA, 2023, the policy does not go far enough to ensure that every child has access to stable coverage during their most influential years.

The 118th Congress must build on the success of pandemic-era Medicaid coverage protections, which have helped more children gain and maintain health coverage, by enacting mandatory continuous eligibility for all children in Medicaid and CHIP from birth through age 5. Alternatively, Congress could facilitate states' adoption of continuous eligibility through age 5 by allowing them to submit a state plan amendment rather than a waiver.

- **Require 12 months of postpartum coverage in Medicaid and CHIP.** Medicaid and CHIP cover approximately 43% of all U.S. births each year.¹⁰ Postpartum coverage is currently only required for 60 days in both programs. The American Rescue Plan Act of 2021¹¹ gave states the time-limited option to provide 12 months of postpartum coverage in Medicaid and CHIP. More than 30 states have taken up the option with several more expected to do so in 2023. Lawmakers included language making this coverage mandatory in the failed Build Back Better Act but the 117th Congress did take a step forward in the CAA, 2023¹² by making the option permanent. However, keeping the 12 months postpartum coverage optional in Medicaid/CHIP leaves many mothers behind as the United States faces a maternal mortality crisis, which disproportionately affects women of color. *See the Maternal Health section on page 50 for more information.*
- **Require Medicaid to cover home visiting services.** Every child deserves the best start in life. Home visiting programs are associated with a variety of positive benefits including improving child and maternal health and a child's school readiness. Home visiting helps deliver and connect children and families to critical social, health, and educational services. These services can include screenings for physical, social-emotional, and developmental issues, case management, and family support and counseling. Some programs have seen decreases in hospitalizations, reductions in unnecessary emergency department visits, and lower rates of interaction with the youth justice system. Home visiting itself is not a covered service in Medicaid. Based on state design, however, services that are part of a home visit (e.g. screenings, case management) can be reimbursed through Medicaid. More support and flexibility for states to provide home visiting through Medicaid would greatly enhance the physical and behavioral health outcomes, educational readiness, and long-term success for children in the United States. Congress should pass legislation requiring Medicaid coverage of home visiting, including more flexibility on the models that can be reimbursed as well as ample time for states to ramp up their programs and build capacity to provide the services. *See "Invest in Our Youngest Children" on page 67 for more information.*
- **Allow families to purchase coverage through Medicaid, CHIP, or the Federal Employee Health Benefits Plan (FEHBP).** The ACA has resulted in historic insurance gains in the United States. Still, millions of Americans remain uninsured. In 2021, 27.2 million Americans (8.3%) were without health insurance,¹³ including nearly 4.2 million children.¹⁴ For some families, coverage is unaffordable despite enhanced assistance from the federal government. Additionally, many families are essentially locked out of coverage due to their immigration status.

The State Public Option Act (S. 2639/H.R. 4974), introduced by Sens. Brian Schatz (D-HI) and Ben Ray Lujan (D-NM) and Rep. Kim Schrier (D-WA) in the 117th Congress, would build on Medicaid's federal-state partnership, which provides efficient, comprehensive health coverage at a relatively low cost. The bill would allow states to increase access to coverage by letting residents, who would otherwise be ineligible, buy into Medicaid, regardless of income and immigration status, providing more families with options for coverage that meet their health needs and budgets. Similar approaches could use CHIP or the FEHBP. However, Medicaid's administrative structure, which already provides effective coverage to over 80 million Americans and allows state flexibility in program design, would be a solid anchor for such a policy approach.

Access to Coverage for Immigrants

The COVID-19 pandemic amplified the need to ensure that every person is able to get affordable health care no matter how long they have been in the United States or what status they have been granted. However, unnecessary and unjust policy barriers prevent immigrants from having access to health coverage. These barriers lead to a patchwork system where immigrant families often put off getting care until it results in more dire (and expensive) emergency care situations.

6.2 Remove barriers to health coverage based on immigration status

- **Pass the Health Equity and Access under the Law (HEAL) for Immigrant Families Act.** The Health Equity and Access under the Law (HEAL) for Immigrant Families Act of 2021 (H.R. 3149/S. 1660) — sponsored by Reps. Pramila Jayapal (D-WA) and Nanette Barragán (D-CA) and Sen. Cory Booker (D-NJ) — would remove unnecessary barriers to care for all immigrants, regardless of status. The bill would ensure critical access to Medicaid and CHIP by lifting the current five-year period that many lawfully present immigrants, including children, are required to wait before being able to enroll in the programs. The bill would also provide access to public and affordable health coverage for Deferred Action for Childhood Arrivals (DACA) recipients. It also would remove restrictions on undocumented immigrants from purchasing coverage through the Marketplaces.
- **Pass the Lifting Immigrant Families Through Benefits Access Restoration (LIFT the BAR) Act.** As a step toward ensuring that all children have access to health care and other federal benefits regardless of their immigration status, Congress must pass the LIFT the BAR Act of 2022 (H.R. 5227/S. 4311), sponsored by Rep. Pramila Jayapal (D-WA) and Sen. Mazie Hirono (D-HI). The bill expands the definition of “qualified” immigrants for the purposes of federal benefits and eliminates the five-year waiting period for many lawfully present immigrants to access federal health programs such as Medicaid and CHIP.
- **Pass the State Public Option Act.** *See the Health Care Coverage section on page 44 for more information.*

Enrollment

Despite significant increases to the number of insured Americans, millions remain uninsured, including more than 4 million children.¹⁵ Many of the uninsured are eligible for Medicaid, CHIP, or Marketplace coverage but do not know it and/or are unable to get past bureaucratic, red tape requirements for enrolling in the coverage for which they are eligible. Congress must modernize health care coverage enrollment and eligibility for America’s children and families.

6.3 Remove obstacles to health care enrollment

- **Support the Easy Enrollment in Health Care Act.** Many children are eligible for enrollment in Medicaid, CHIP or the Affordable Care Act but they simply don’t know they are eligible. The Easy Enrollment in Health Care 2021 legislation would allow information from a family’s tax filings to be used to flag whether that family qualifies for a health insurance affordability program. Sen. Chris Van Hollen (D-MD) and Rep. Ami Bera (D-CA) introduced the bill (S. 3001/H.R. 5610) in the 117th Congress.
- **Fix the arbitrary “birthday rule,” which snags new parents.** Support the Empowering Parents’ Healthcare Choices Act, introduced by Rep. Sharice Davids (D-KS) in the 117th Congress. The law would eliminate the birthday rule, which dictates that the parent with the earlier birthday in the calendar year becomes the parent who provides the coverage, whether or not that is the best choice for the child. H.R. 4636 provides a 60-day time frame within which parents with separate health insurance plans may choose which plan provides the best primary coverage for their newborn child.

- **Require HHS to report on outreach efforts and data collection regarding the “family glitch.”** Until 2023, nearly 5 million low-income family members (more than half of them children) faced a terrible choice: Going without any health insurance for spouses and children or paying a huge percentage of their income for that coverage. The Biden Administration’s new rule in 2022 rights this wrong by ensuring that millions of children and spouses can now access affordable health insurance through the marketplace. Ensuring that these families learn about the rule change, understand its implications and are directed to viable options will require significant time and outreach. HHS must remain vigilant in these efforts. Tracking “family glitch” families will reveal whether outreach efforts are successful and what other efforts might be required. We encourage House and Senate Appropriations Committee members to include report language that requires HHS to provide this information.
- **Encourage Use of Cross Enrollment Between Benefit Programs.** Modernizing and streamlining enrollment in federal benefit programs is critical to expanding health care access, and there are multiple steps Congress can take to reduce barriers to enrollment and administrative red tape. Congress must invest in a system that ensures families can seamlessly enroll in nutrition, health, and other benefit programs. Only some states have these integrated benefit systems. Therefore, Congress must encourage all states to streamline and modernize their eligibility systems and support legislation to improve the enrollment process for low-income families. For example, the Stabilize Medicaid and CHIP Coverage Act of 2021 (H.R. 1738/S. 646) would enhance data-sharing between the state and agencies administering employment, education, or social service programs on income, residency, age, and other relevant information to determine or renew eligibility.
- **Support and facilitate state experimentation with innovative eligibility and enrollment policies.** If Congress is unable to pass a comprehensive, nationwide statute that brings eligibility and enrollment policy into the 21st century, it should, at the very least, expand state authority to experiment with policies that streamline and automate enrollment in Medicaid, CHIP, and Marketplace coverage. Congress must also invest in information technology and other administrative activities to effectively implement and evaluate these innovative state policies.

Quality of Care

Children require age-appropriate health care tailored to their unique needs for healthy development. When children miss screenings, diagnoses, and treatments, it impacts their growth into adulthood and can result in long-term consequences and costlier care down the road.

6.4 Ensure timely access to quality, pediatric-focused care

- **Provide better oversight of the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit.** Medicaid’s Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit aims to provide comprehensive and preventive health care services for children under the age of 21. The benefit helps ensure that children receive appropriate preventive, dental, mental health, developmental, and specialty services. Most states, however, have struggled with meaningful implementation of the benefit. Of the more than 40 million children eligible for EPSDT between FY 2015-FY 2019 only about 50% received at least one initial or periodic screen.¹⁶ The Bipartisan Safer Communities Act, enacted in June 2022, requires the Department of Health and Human Services to review state EPSDT implementation by 2024.¹⁷ HHS must identify gaps and deficiencies in service that impact EPSDT compliance; provide support to states to address gaps; and issue guidance, including best practices for ensuring children have access to comprehensive health care services.¹⁸ Congressional oversight activities are crucial to ensure that HHS’ required activities under the law are comprehensive and timely so that appropriate interventions can be identified and developed to assist states with implementation of EPSDT.

Health Equity

Inequities and disparities in access to and delivery of quality, affordable health care have persisted through our nation's history in systematically marginalized and underserved communities.

6.5 Invest in comprehensive solutions that ensure equitable health care for communities that have been historically excluded and neglected

- **Pass the Health Equity and Accountability Act (HEAA).** Supported historically by the Congressional Tri-Caucus, made up of the Congressional Asian Pacific American Caucus, the Congressional Black Caucus, and the Congressional Hispanic Caucus, the ten titles of Health Equity and Accountability Act (HEAA) (H.R. 7585/S. 4486, 117th Congress) address every feature of health care and its delivery system. HEAA would remove barriers to affordable health insurance coverage, promote investments in new health delivery methods and technologies, and improve research and data collection about the health needs and outcomes of diverse communities. HEAA acts as a legislative outline to reduce racial and ethnic health disparities and establish a health care system that will lead us to true health care equity for all children, individuals, and families.

Prescription Drugs

When parents encounter high prices for their children's prescription drugs they're often forced to choose between the life-saving medications for their children or paying household bills.

6.6 Lower the cost of prescription drugs for children

- **Pass The Affordable Insulin Now Act.** This legislation (S. 3700), sponsored by Sen. Raphael Warnock (D-GA) in the 117th Congress would cap insulin prices at \$35 a month for all children. Congress passed caps on insulin for older Americans in the Reconciliation bill this fall, but did not include caps for children.
- **Pass the Fair Drug Prices for Kids Act.** This legislation would give states the option to extend the Medicaid drug rebate program to CHIP. The rebate option ensures that children and their families enrolled in a state CHIP program have access to prescription drugs at the lowest price offered. Sens. Mark Warner (D-VA) and Cory Booker (D-NJ) and Reps. Susan Wild (D-PA) and Brian Fitzpatrick (R-NY) sponsored the legislation (S. 2531/H.R. 5576) in the 117th Congress.

Social Determinants of Health

Social determinants of health (SDOH), also called "social drivers of health" are the non-medical factors that influence health outcomes. SDOH — such as nutrition, housing, poverty, access to transportation — can account for as much as 50% of health outcomes. Addressing these disparities can improve health of the overall population, reduce health care costs and improve quality of life. We support the waivers that the Centers for Medicare and Medicaid (CMS) approved for states to experiment with health-related social needs such as transportation, nutrition, food, and housing assistance (which now includes rental assistance). Reliable data provide a critical tool in addressing health care disparities.

6.7 Require government agencies to collect data on social determinants of health (SDOH) and encourage SDOH innovation in Medicaid to reduce health equity disparities

- **Pass the Social Determinants of Health Data Analysis Act.** This bill (H.R. 4026), sponsored by Reps. Lisa Blunt Rochester (D-DE) and Michael Burgess (R-TX) in the 117th Congress, would require the Government Accountability Office (GAO) to report on actions taken by the Department of Health and Human Services to address social determinants of health.
- **Pass the Collecting and Analyzing Resources Integral and Necessary for Guidance (CARING) for SDOH Act.** This legislation (H.R. 3894) in the 117th Congress, sponsored by Rep. Lisa Blunt Rochester (D-DE), requires the Centers for Medicare & Medicaid Services to periodically update guidance to help states address social determinants of health under Medicaid and CHIP.
- **Pass the Kickstarting Innovative Demonstrations Support (KIDS) Health Act.** Experimentation within Medicaid can offer solutions to health care disparities, especially for children. Approximately 40 million children are enrolled nationally in Medicaid and CHIP. These programs must be allowed to focus on those who fall through the cracks, and experience higher levels of poverty and poor health outcomes. This legislation would allow states to continue experimenting with Medicaid waivers and think creatively with their partners (health insurance companies, health providers and community partners) to develop and improve services. The legislation was introduced in the 117th Congress by Reps. Lisa Blunt Rochester (D-DE) and Gus Bilirakis (R-FL) and Sens. Tom Carper (D-DE) and Dan Sullivan (R-AK) (H.R. 9037/S. 5011).

Pediatric Health Care System

During the COVID-19 pandemic, hospitals around the country weakened the pediatric health care infrastructure by reassigning children's beds to sick adults. In treating adults, hospitals received higher reimbursement rates through Medicare. To retain this extra income, hospitals have kept these beds for adults, sending children to hospitals hours away from their homes or even to other states. Pediatric ICU beds are in short supply.

6.8 Require Congress to devise short- and long-term plans to fix our broken pediatric health care system

- **Call for a General Accounting Office report to assess the nation's shortage of pediatric beds.** We urge the House and Senate to call on the General Accounting Office (GAO) for a report to identify where shortages are most extreme, review the data through a racial disparity lens and review the causes of the shortage. We urge Congress to review the data in House and Senate hearings and discuss immediate and long-term solutions.
- **Hold hearings on our nation's broken pediatric health care system.** While the COVID-19 pandemic exposed cracks in the pediatric health care infrastructure, problems have existed for many years. During the past several autumn and winter seasons, RSV, flu and COVID-19 have overwhelmed the system. Pediatric beds are in short supply at both children's hospitals, where teens with mental health issues are often "boarding" due to a lack of community resources, and in private and public hospitals, where pediatric beds were transferred to adult care during the pandemic. Workforce shortages continue to strain an already overwhelmed care system. Reimbursement rates are too low. And Medicaid unwinding threatens to compound these problems by increasing the number of uninsured children. We urge the House and Senate to hold hearings to assess the severity of problems plaguing the pediatric health care system, determine how to ensure access for all children and recommend immediate and long-term solutions.

Maternal Health

The United States has long held some of the worst and most racially disparate maternal mortality rates in the world, far outstripping the rates in 10 similar high-income countries. U.S. women of reproductive age also are significantly more likely to go without medical care because of cost than in any of those countries.¹⁹ U.S. maternal mortality rates rose even higher during the COVID-19 pandemic. In 2020, more than 860 women in the U.S. died as a result of pregnancy or delivery, a 14% increase over the previous year. The maternal mortality rate for Black women was nearly three times the rate for white women during that time.²⁰

Medicaid coverage is an important piece of reducing maternal mortality rates, and that coverage varies greatly between states. Pregnant and postpartum women have higher coverage and lower uninsured rates in states that have expanded Medicaid coverage.²¹ In these states, postpartum hospitalizations during the first 60 days after giving birth also have declined by 17%.²² The decline of infant mortality in Medicaid expansion states also is 50% greater than in non-expansion states, and includes a significant reduction in racial disparities.²³

6.9 Eliminate racial disparities in maternal health and dramatically improve maternal mortality rates

- **Require 12 months of Postpartum Coverage in Medicaid and CHIP.** Medicaid and CHIP cover approximately 43% of births each year.²⁴ Postpartum coverage is currently only required for 60 days in both programs. The American Rescue Plan Act of 2021²⁵ gave states the time-limited option to provide 12 months of postpartum coverage in Medicaid and CHIP. More than 30 states have taken up the option with several more expected to do so in 2023. Language making this coverage mandatory was included in the failed Build Back Better Act but the 117th Congress did take a step forward in the CAA, 2023²⁶ by making the option permanent. However, keeping the 12 months postpartum coverage optional in Medicaid/CHIP leaves many mothers behind as the United States faces a maternal mortality crisis, which disproportionately affects women of color.
- **Provide comprehensive supports for all birthing people.** Reps. Lauren Underwood (D-IL) and Alma Adams (D-NC) and Sen. Cory Booker (D-NJ) introduced the Black Maternal Health Momnibus Act of 2021 in the 117th Congress (H.R. 959/S. 346), which includes 12 important bills to improve the health and well-being of birthing people and their families. The following 12 bills are included in the Momnibus Act introduced in the 117th Congress and should be passed:
 1. Social Determinants for Moms Act (H.R. 943) introduced by Rep. Lucy McBath (D-GA) would make critical investments in housing, transportation, nutrition and other social determinants of health that influence maternal health outcomes.
 2. The Kira Johnson Act (H.R. 1212) introduced by Rep. Adams, would provide funding to community-based organizations that work to improve maternal health outcomes and promote equity.
 3. Protecting Moms Who Served Act (H.R. 958) introduced by Rep. Underwood and Sen. Tammy Duckworth (D-IL), would comprehensively study the unique maternal health risks facing pregnant and postpartum veterans and support maternity care coordination programs at the Veterans Administration.
 4. Perinatal Workforce Act (H.R. 495/S. 287) led by Wisconsin Democrats Rep. Gwen Moore and Sen. Tammy Baldwin, would grow and diversify the perinatal workforce to ensure that every mom in America receives culturally congruent maternity care and support.
 5. Data to Save Moms Act (H.R. 925/S. 347) introduced by Reps. Sharice Davids (D-KS) and Sen. Tina Smith (D-MN), would improve data collection processes and quality measures to better understand the causes of the maternal health crisis in the United States and inform solutions to address it.
 6. Moms Matter Act (H.R. 909/S. 484) introduced by Rep. Lisa Blunt Rochester (D-DE) and Sen. Kirsten Gillibrand (D-NY), would support moms with maternal mental health conditions and substance use disorders.

7. Justice for Incarcerated Moms Act (H.R. 948/S. 341) introduced by Rep. Ayanna Pressley (D-MA) and Sen. Booker, would improve maternal health care and support for incarcerated moms.
8. Tech to Save Moms Act (H.R. 937) introduced by Rep. Eddie Bernice Johnson (D-TX) and Sen. Bob Menendez (D-NJ), would invest in digital tools such as telehealth to improve maternal health outcomes in underserved areas.
9. IMPACT to Save Moms Act (H.R. 950/S. 334) introduced by Rep. Jan Schakowsky (D-IL) and Sen. Bob Casey (D-PA), would promote innovative payment models to incentivize high-quality maternity care and non-clinical perinatal support.
10. Maternal Health Pandemic Response Act (H.R. 8027/S. 4769) introduced by Rep. Underwood and Sen. Elizabeth Warren (D-MA) in the 116th Congress, would invest in federal programs to address the unique risks of COVID-19 during and after pregnancy and to advance respectful maternity care in future public health emergencies.
11. Protecting Moms and Babies Against Climate Change Act (H.R. 957) introduced by Rep. Underwood and Sen. Ed Markey (D-MA), would invest in community-based initiatives to reduce levels of and exposure to climate change-related risks for moms and babies.
12. Maternal Vaccination Act (H.R. 951/S. 345) introduced by Rep. Terri Sewell (D-AL) and Sen. Tim Kaine (D-VA), would promote maternal vaccinations to protect the health and safety of moms and babies.

Vaccines

Vaccines represent an area of great concern for children and equity in public health. The politicization of the COVID-19 vaccine has contributed to declining immunization rates for routine childhood vaccines. Nationwide, 28% of adults said in 2022 that parents should not have to vaccinate their children in order to attend public school, even if this poses health risks to other children, an increase from 16% in 2019.²⁷ Just 71% of adults say that children should be vaccinated against measles, mumps, and rubella in order to attend public school, down from 82% in 2019. COVID-19 vaccination rates for children, especially our youngest children, continue to lag.²⁸ Preventable diseases such as measles recently have broken out among mostly unvaccinated groups of children. Vaccination rates for nearly all childhood vaccines fell during the COVID-19 pandemic as children missed routine health visits, but misinformation about the COVID-19 vaccine and distrust of government and public health measures have kept these numbers from recovering.

6.10 Ensure that vaccines are available to all children, that availability is equitable, and that caregivers have accurate information

- **Pass the Strengthening the Vaccines for Children Program Act.** Rep. Kim Schrier (D-WA) and Sen. Jack Reed (D-RI) introduced the Strengthening the Vaccines for Children Program Act (H.R. 2347/S. 2691) in the 117th Congress that would expand eligibility of the Vaccines for Children Program, expand reimbursement for vaccine counseling and education in order to address vaccine hesitancy, track immunization disparities, and improve outreach on facts about the benefits of vaccination.
- **Work to improve immunization rates and counter anti-vaccine disinformation by:**
 - Expanding funds for the Centers for Disease Control and Prevention's vaccine programs, school-based health clinics and community health centers
 - Improving the infrastructure needed to interrupt and counter anti-vax disinformation
 - Funding local community clinics, public health and community-based organizations, and trusted messengers like community health workers to continue enabling equitable access to information about vaccines and preventive health measures for children
 - Establishing a point person for childhood vaccination to oversee a national communication effort and set ambitious goals, including getting all school-aged children up-to-date on their immunizations.
 - Providing incentives such as gift cards, badges, and other simple bonuses wherever adults get vaccinated to encourage conversation about the benefits of pediatric vaccinations

Behavioral Health

The behavioral health of a child is as integral to their overall well-being as their physical health. Prevention, early diagnosis, and treatment of mental health issues are critical to ensuring that a child remains healthy through childhood and also grows into a healthy adult. Half of all mental health disorders show first signs before a person turns 14 years old, and 79% of mental health disorders begin before age 24.²⁹ Typically, 11 years pass between the onset of symptoms in a child and when they first receive treatment.³⁰ As in many areas of child well-being, disparities based on race, sexual orientation, and gender identity also exist in behavioral health. More than 40% of youth who identify as LGBTQ, including more than half of all transgender and nonbinary youth, say they have seriously considered suicide in the last year.³¹ Between 2007 and 2017, the suicide rate for Black children rose from 2.55 per 100,000 to 4.82 per 100,000, and suicide attempts are rising faster among Black youth than any other racial or ethnic group.³² As two of our authors noted in *First Focus on Children's Big Ideas 2023*, “Pervasive inequities such as lack of access to high-quality, culturally sensitive mental health care; provider bias; and deficit-focused institutional practices harm children and families of color and deepen intergenerational and community trauma.”³³

A mental health crisis among children and adolescents had been brewing before the outbreak of COVID-19, and it escalated during the pandemic. In the fall of 2021, many groups, including First Focus on Children, joined the Sound the Alarm Campaign to call attention to the severity of the crisis and demand new investments in prevention, diagnosis, and treatment. The movement gained traction when U.S. Surgeon General Vivek Murthy released a December 2021 report titled “Protecting Youth Mental Health.”³⁴ Almost immediately, Congress held bipartisan, bicameral committee hearings on a variety of mental health topics including workforce, parity, the new 988 crisis lifeline, school mental health programs, and telehealth. The President's FY 2023 budget offered significant funding increases for the behavioral health workforce, the 988 hotline, and mental health services in schools.

After a series of mass shootings in 2022, including the elementary school shooting in Uvalde, Texas, Congress came together on a bipartisan basis and addressed gun violence and mental health for the first time in decades. The Bipartisan Safer Communities Act, signed into law by President Biden in June 2022, provides support for school-based mental health programs, Medicaid mental health services in schools, Medicaid and CHIP telehealth services and the new 988 crisis lifeline. But to build a comprehensive pediatric behavioral health system, more must be done on these issues as well as on workforce, parity, payment, integration, and other areas. Policy makers also must address the underlying contributors to mental health issues in children, including poverty, homelessness and health insurance coverage, while still providing the prevention, diagnoses, and acute services children need.

6.11 Grow and strengthen the workforce so that all children, teens and young adults have access to appropriate mental health and behavioral health services in a timely fashion

- **Rebalance the allocation of federal workforce dollars spent on health care vs. behavioral health.** The U.S. spends approximately \$16.2 billion a year on developing the Graduate Medical Education (GME) workforce.³⁵ Of all the GME medical health care specialties, fewer than 5% of students are pursuing psychiatry; of those students, well under 1% — just 0.11% are pursuing child and adolescent psychiatry.³⁶ Within the \$1.7 billion Health Resources and Service Administration (HRSA) health care workforce budget, only 9.4% is allocated to the behavioral health workforce; of that amount, just 4% goes to child and adolescent health.³⁷ We acknowledge that the health care workforce is not fully funded but given the size and severity of the national mental health crisis, our investment in behavioral health workforce development is woefully insufficient to provide enough mental health professionals for our nation — particularly for the children, teens and young adults who are experiencing a serious crisis.
- **Rebalance the allocation of mental health workforce dollars spent on child and adolescent mental health.** Nationally, 60% of youth who experience a severe depressive episode do not receive treatment.³⁸ As noted in the recommendation above, “Rebalance the allocation of federal workforce dollars spent on health care vs. behavioral

health,” the U.S. does not spend enough on developing the child and adolescent mental health workforce. Priorities must change if we expect to help our nation’s children through this crisis. We urge Congress to hold hearings on this topic and rebalance funding and/or allocate more resources (through the authorization and appropriations process) to build a workforce that can meet the emotional needs of our nation’s children, teens and young adults.

- **Pass the Health Care Capacity for Pediatric Behavioral Health Act.** This legislation establishes programs to support the provision of pediatric mental, emotional, behavioral, and substance use disorder services, particularly in underserved and high-need areas. In the 117th Congress, bill S. 4472 was sponsored by Sens. Bob Casey (D-PA) and Bill Cassidy (R-LA).
- **Support the Supporting Children’s Mental Health Care Access Act.** This bill reauthorizes pediatric mental health care access grants through FY 2027 and makes changes to grants to promote the integration of behavioral health into pediatric primary care through statewide or regional telehealth access programs. Grants may be used to support schools and emergency departments. In the 117th Congress, S. 3864 was introduced by Sens. Chris Murphy (D-CT) and Bill Cassidy (R-LA). Reps. Kim Schrier (D-WA) and Mariannette Miller-Meeks (R-IA) sponsored the House companion bill, H.R. 7076.
- **Support and Expand Peer-to-Peer Networks.** The need for professional behavioral health services far outweighs the capacity of our current workforce to provide care. Recruitment, pipeline, and funding issues inhibit the quick expansion of the professional workforce. Experts acknowledge that teens are more likely to initially talk with their peers about behavioral health issues than with an adult. The peer-to-peer model uses untapped resources to address the teen mental health crisis. Peer-to-peer networks offer a simpler and more immediate way to provide support to teens and young adults. We urge Congress to build upon the success of existing peer networks to offer teens and young adults someone to talk with when they are upset or in a crisis. Whether in-person, via text or through a telephone hotline, there are many ways for peers (who have received training) to provide support to other teens and young adults so they know they are not alone and can be directed to professional services if necessary.

6.12 Remove barriers that prevent or delay children, teens and young adults from receiving mental health and behavioral health care in a timely fashion as compared with physical health care

- **Enforce and Strengthen the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA).** Mental health is a critical component of overall health and well-being. Congress must ensure that children, youth and young adults have access to behavioral health services. With the crisis in mental health for America’s children and youth, there has been a sharp increase in demand for services. Unfortunately, millions of children are unable to access appropriate services in a timely manner, even if they have health insurance. More than 8% of children had private insurance in 2020 that did not cover mental health services, totaling 950,000 children.³⁹ Roadblocks that children and their families experience related to parity include:
 - Network adequacy
 - Low reimbursement rates for behavioral health providers
 - Limits on the number of visits
 - Higher co-pays for behavioral health
 - Prior authorization for in-patient care

The 2022 MHPAEA Report to Congress from the Department of Labor, the Department of Health and Human Services and the Department of the Treasury outlined serious compliance issues by group health plans and the health insurance coverage they offer.⁴⁰ While the Senate Finance Committee white paper issued in December 2022 made valuable recommendations for parity in plans under Medicare and Medicaid, it did not offer recommendations for commercial health care plans in the private market. Since roughly half of American children have health insurance

coverage through an employer (as a dependent on their parent's coverage), Congress must enforce the MHPAEA law and ensure compliance by insurance plans so that children have equal and timely access to behavioral health care services. Congress also must provide additional funding to states to ensure adequate oversight.

- **Support The Behavioral Health Coverage Transparency Act.** Introduced by Sen. Elizabeth Warren (D-MA) in the 117th Congress, S. 4616 requires the Secretaries of Health and Human Services, the Department of Labor and the Treasury Department to audit group health plans and insurers to determine compliance with federal laws. We support the review of reimbursement rates of services for in-network and out-of-network claims. Finally, children and the people who care for them will benefit from having a proper office (Consumer Parity Unit) to file consumer complaints about denials of services and/or network adequacy issues and to know that their complaints will be reviewed.
- **Support The Behavioral Health Network and Directory Improvement Act.** Introduced by Sens. Tina Smith (D-MN) and Ron Wyden (D-OR) in the 117th Congress, S. 5093 outlines a consumer rights bill to improve transparency for consumers when seeking a behavioral health provider in-network for their children or when provider directories are inaccurate or not current. The legislation aims to protect children and their families from “ghosting parity,” which occurs when parents are given directories of providers only to find out that these providers no longer are in the network, no longer accept new patients or have waiting lists that are months long. Children and teens seeking access to services need clear and current provider directories.
- **Rebalance the allocation of federal workforce dollars spent on health care vs. behavioral health.** The U.S. spends approximately \$16.2 billion a year on developing the Graduate Medical Education (GME) workforce.⁴¹ Of all the GME medical health care specialties, fewer than 5% of students are pursuing psychiatry; of those students, well under 1% — just 0.11% are pursuing child and adolescent psychiatry.⁴² Within the \$1.7 billion Health Resources and Service Administration (HRSA) health care workforce budget, only 9.4% is allocated to the behavioral health workforce; of that amount, just 4% goes to child and adolescent health.⁴³ We acknowledge that the health care workforce is not fully funded but given the size and severity of the national mental health crisis, our investment in behavioral health workforce development is woefully insufficient to provide enough mental health professionals for our nation — particularly for the children, teens and young adults who are experiencing a serious crisis.

6.13 Rebalance mental health funding to ensure that adequate resources are being spent to serve children, teens and young adults in their homes and communities

- **Rebalance the allocation of mental health workforce dollars spent on child and adolescent mental health.** Nationally, 60% of youth who experience a severe depressive episode do not receive treatment.⁴⁴ As noted in the recommendation above, “Rebalance the allocation of federal workforce dollars spent on health care vs. behavioral health,” the U.S. does not spend enough on developing the child and adolescent mental health workforce. Priorities must change if we expect to help our nation's children through this crisis. We urge Congress to hold hearings on this topic and rebalance funding and/or allocate more resources (through the authorization and appropriations process) to build a workforce that can meet the emotional needs of our nation's children, teens and young adults.
- **Request a Government Accountability Office (GAO) report to review the way states are spending Medicaid dollars for behavioral health and substance use disorder services for children, teens and young adults ages 0 to 26, disaggregated by race and ethnicity.** Are more dollars being spent to place children in residential care or to serve them in their homes and communities? What percentages of Medicaid dollars do states spend on in-patient care within their states? What percentages do they spend on in-patient care provided outside of their states? How much is being spent on home and community-based care? Which states have successfully rebalanced their Medicaid behavioral health funding? Is there an overutilization of psychotropic drugs with little behavioral health support to achieve successful outcomes? All of this data must be disaggregated by race and ethnicity to ensure equitable access and use of care.

- **Review the allocation of resources for children and youth in the Certified Community Behavioral Health Clinics (CCBHCs) program.** CCBHCs are a valuable resource for children and families who might not otherwise receive behavioral health care. The government has put more federal funding toward this program to help alleviate the country's mental health crisis, particularly among our nation's youth. Through the appropriations process, Congress must request a report from the Department of Health and Human Services to determine what percentage of children, teens and young adults (ages 0 to 26) are receiving services at CCBHCs compared to the adult population. Is demand for services by children, teens and young adults greater than the supply of services? What type of support is HHS offering these clinics to appropriately serve this population?

6.14 Better integrate behavioral and physical health to allow health care providers to work together to connect children, teens and young adults with behavioral health services

- **Support the Children's Mental Health Care Access Act.** This bill reauthorizes pediatric mental health care access grants through FY 2027 and amends grants to integrate behavioral health into pediatric primary care through statewide or regional telehealth access programs. Grants may be used to support schools and emergency departments. In the 117th Congress, S. 3864 was introduced by Sens. Chris Murphy (D-CT) and Bill Cassidy (R-LA). The House companion bill, H.R. 7076 was sponsored by Reps. Kim Schrier (D-WA) and Mariannette Miller-Meeks (R-IA).
- **Request that HHS collect and share data on the integration of behavioral health services in the Medicaid and CHIP programs for children, teens and young adults.** New guidelines by the Center for Medicare and Medicaid Services (CMS) (as of 1/5/23) clarify that states can integrate behavioral health care with Medicaid and CHIP. Through the appropriations process, Congress must request that HHS collect and share data showing how often the pediatric setting integrates behavioral health for children and youth ages 0 to 26. CMS also should be required to share best practices with other states.
- **Encourage the co-location of pediatric health care and behavioral health services through payment incentives and reduced administrative burdens.** The easiest way to ensure that children and teens get the services they need is to co-locate services. However, financial and administrative barriers hamper these efforts. CMS has issued guidance and funded several demonstration models of integrated care (both for early childhood and for older children). We urge Congress to continue this course of action to better meet the behavioral health crisis for our nation's children.⁴⁵

6.15 Provide mental health supports, services, referrals, and community resource connections in schools, where prevention and early intervention can be effective

- **Track regulations and implementation of the Bipartisan Safer Communities Act.** The Bipartisan Safer Communities Act (BSCA) passed Congress and was signed into law in July 2022. This legislation, written in the aftermath of the Uvalde, Texas elementary school shooting, included \$500 million for the School-Based Mental Health Services Grant Program and \$500 million for the Mental Health Service Professional Demonstration Grant Program, which would increase the number of qualified mental health providers in schools. The legislation also funded school-based programs such as Project Advancing Wellness and Resilience Education (AWARE) and the Stronger Connections grant program, as well as efforts to improve school-based mental health services through Medicaid, Mental Health Awareness Training grants for schools, School-Based Trauma-Informed Support Services and Mental Health Care for Children and Youth grants. The government already has begun implementing the BSCA, and tracking the progress of these efforts will help guide future programming.

- **Ensure the Department of Health and Human Services and the Department of Education coordinate mental health efforts.** Under the BSCA, both the Department of Health and Human Services and the Department of Education distribute mental health funding. These two departments must coordinate as they release these significant resources. Congress must ensure this coordination by requesting regular updates from these departments on their activities and disbursement of funds, and by requiring that applications for state grants are submitted by a team of agencies that includes Medicaid, education, public health, and behavioral health.
- **Adopt the Mental Health Services for Students Act.** This bill (H.R. 721/S. 1841), introduced by Rep. Grace Napolitano (D-CA) and Sen. Tina Smith (D-MN) in the 117th Congress, would expand the scope and funding of Project AWARE to provide on-site mental health professionals in schools and support for family members of children with mental health concerns. Project AWARE, operated by the Substance Abuse and Mental Health Services Administration (SAMHSA), has successfully increased mental health awareness in schools across the country, and lawmakers must support and expand it to reach more students, families, and schools.
- **Enact the Advancing Student Services in Schools Today Act (ASSIST).** This bill (H.R. 7672/S. 3704), introduced by Rep. Kathy Castor (D-FL) and Sens. Raphael Warnock (D-GA) and Maggie Hassan (D-NH) in the 117th Congress, would create a new grant program at the Department of Health and Human Services to hire and retain mental health and substance use disorder professionals in schools. The bill would increase the Medicaid matching funds to pay for services in schools by 90%, which would allow states to increase pay for providers of these services.
- **Improve data on racial disparities in access to mental health care in schools.** Most public schools have an unacceptable student-to-school-based mental health personnel ratio. High-poverty schools and those with more non-white students often have armed school resource officers on-site, but few counselors, psychologists, or social workers. Data that identifies where the disparities exist would fuel a better allocation of resources. Through the appropriations process, Congress must require the Department of Education to conduct a detailed analysis of student-to-school-based mental health personnel ratios in all school districts, with data disaggregated by students' race and ethnicity and their access to mental health services.
- **Invest in evidence-based prevention programs at the earliest ages in schools.** Numerous early intervention mental health strategies and programs have proven effective for young students. Congress must fund and prioritize these interventions as a way to prevent mental illness in children at the earliest stages. Programs such as these are and can be further funded through several federal agencies, including the Departments of Health and Human Services, Justice, and Education. Grantmakers should identify programs that have shown success and can be used in a variety of communities.⁴⁶

6.16 Specifically include children, youth, and their families in the design and planning of crisis response systems and suicide prevention

- **Design the 988 Suicide and Crisis Lifelines to address the specific needs of children and families.** States are currently implementing their 988 Suicide and Crisis Lifelines. Children's needs can be very different from adults', and states — with assistance from the federal government — must design and create these systems to meet the specific needs of children, youth, and families from the beginning.⁴⁷ To date, 16 states have enacted legislation to implement 988. Of these, only four have included one or more child- or youth-specific planning provisions. Congress must continue to robustly fund 988, require the Department of Health and Human Services to provide states with technical assistance on designing their systems to prioritize children's needs, and require a regular report from HHS detailing how states are addressing children's needs in their 988 systems.
- **Require the Centers for Medicare & Medicaid (CMS) to report on how state mobile crisis intervention services support children and families.** The needs of children in a behavioral health crisis can be very different from those of adults. Mobile crisis response tailored to a child's needs can help them avoid dangerous contact with law enforcement, potential removal from their home, and exclusion of their families and caregivers during the response.⁴⁸

The American Rescue Plan Act enhanced the match rate for mobile crisis response in states, and CMS has shared guidance with states on implementing this policy. Congress must require CMS to report on state efforts to create mobile crisis response systems that specifically address children's needs to ensure that states are not using a system designed for adults to respond to children.

- **Enact the Stop Online Suicide Assistance Forums Act.** Youth suicide rates continue to rise at alarming rates, and they are significantly worse for children and youth in racial and ethnic minority groups as well as for LGBTQ youth. Early intervention, diagnosis, and treatment can help slow the pace of youth suicide and must be done, but the Stop Online Suicide Assistance Forums Act would address external factors. The bill (H.R. 9260), introduced by Reps. Lori Trahan (D-MA), Mike Carey (R-OH), Katie Porter (D-CA), and Chris Stewart (R-UT) in the 117th Congress, would make it a felony offense for anyone to use online forums or other interstate communications to assist in another person's attempt to die by suicide. Young people frequently use these sites. The bill does not criminalize attempts to die by suicide or state-sanctioned physician-assisted end of life care.

6.17 Support and expand youth peer-to-peer networks

- **Fund and provide Medicaid reimbursement for youth peer-to-peer work.** The need for professional behavioral health services far outweighs the capacity of our current workforce to provide care. Recruitment, pipeline, and funding issues inhibit the quick expansion of the professional workforce. Experts acknowledge that teens are more likely to initially talk with their peers about behavioral health issues than with an adult. The peer-to-peer model uses untapped resources to address the teen mental health crisis. Peer-to-peer networks, such as Oregon's YouthLine, offer a simpler and more immediate way to provide support to teens and young adults. We urge Congress to build upon the success of existing peer networks to offer teens and young adults someone to talk with when they are upset or in a crisis. Whether in-person, via text or through a telephone hotline, there are many ways for trained peers to support other teens and young adults so they know they are not alone and can be directed to professional services if necessary. This work can be supported through direct and grant funding as well as Medicaid reimbursement.
- **Adopt the Peer-to-Peer Suicide Prevention Act.** The Peer-to-Peer Suicide Prevention Act (H.R. 9036), introduced by Rep. Don Beyer (D-VA) in the 117th Congress, would establish a middle- and high-school grant program to facilitate student-led suicide prevention programs. This approach also could be expanded to focus on earlier prevention and younger students. Congress must consider implementing this and other programs that harness the lived experience of youth and the ways they can help their peers.

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1. U.S. Census Bureau, American Community survey (ACS), Table HIC-5, Health Insurance Coverage Status and Type of Coverage by State - Children Under 19: 2008 to 2021, Health Insurance Historical Tables. <https://www.census.gov/data/tables/time-series/demo/health-insurance/historical-series/hic.html>.
2. Ibid.
3. Pub. L. 117-328
4. Ibid.
5. Ibid.
6. Centers for Medicare & Medicaid Services (CMS), Medicaid and CHIP Enrollment Trend Snapshot: September 2022. <https://www.medicare.gov/medicaid-program-information/medicaid-chip-enrollment-data/medicaid-and-chip-enrollment-trend-snapshot/index.html>.
7. Kaiser Family Foundation, Health Insurance Coverage of Children 0-18 (2021). <https://www.kff.org/other/state-indicator/children-0-18/?currentTimeframe=0&sortModel=%7B%22colld%22%22Medicaid%22%22sort%22%22desc%22%7D>.
8. CMS Medicaid and CHIP Enrollment Trend Snapshot: September 2022.
9. Ibid.
10. Medicaid and CHIP Payment Access Commission (MACPAC), Medicaid's Role in Financing Maternity Care. <https://www.macpac.gov/wp-content/uploads/2020/01/Medicaid%E2%80%99s-Role-in-Financing-Maternity-Care.pdf>.
11. Pub. L. 117-2.
12. Pub. L. 117-328.
13. U.S. Census Bureau, Health Insurance Coverage in the United States: 2021 (Sept. 2022). <https://www.census.gov/content/dam/Census/library/publications/2022/demo/p60-278.pdf>.
14. U.S. Census Bureau, Table HIC-5.
15. U.S. Census Bureau, Table HIC-5.
16. National Health Law Program (NHeLP), Children's Health Under Medicaid: A National Review of Early and Periodic Screening, Diagnostic and Treatment Services 2015-2019 (July 2021). <https://healthlaw.org/wp-content/uploads/2021/06/2021.07-EPSDT-Chart-Book.pdf>.
17. Pub. L. 117-159.
18. Ibid.
19. Gunja, Munira, Seerval, Shanoor, Williams II, Reginald, and Zephyrin, Laurie, "Health and Health Care for Women of Reproductive Age," The Commonwealth Fund, April 5, 2022, <https://www.commonwealthfund.org/publications/issue-briefs/2022/apr/health-and-health-care-women-reproductive-age>
20. Hoyert DL. Maternal mortality rates in the United States, 2020. NCHS Health E-Stats. 2022. DOI: <https://dx.doi.org/10.15620/cdc.113967>
21. Ranji, Usha, Ivette Gomez, and Alina Salganicoff, "Expanding Postpartum Medicaid Coverage," KFF, March 9, 2021. <https://www.kff.org/womens-health-policy/issue-brief/expanding-postpartum-medicare-coverage/>
22. Maria W. Steenland and Laura R. Wherry. "Medicaid Expansion Led to Postpartum Reductions in Hospitalizations." Health Affairs Volume 42 Number 1, January 2023. <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2022.00819>
23. Searing, Adam and Donna Cohen Ross, "Medicaid Expansion Fills Gaps in Maternal Health Coverage Leading to Healthier Mothers and Babies," Georgetown University Center for Children and Families, May 2019. <https://ccf.georgetown.edu/wp-content/uploads/2019/05/Maternal-Health-3a.pdf>
24. Medicaid and CHIP Payment Access Commission (MACPAC), Medicaid's Role in Financing Maternity Care. <https://www.macpac.gov/wp-content/uploads/2020/01/Medicaid%E2%80%99s-Role-in-Financing-Maternity-Care.pdf>.
25. Pub. L. 117-2.
26. Pub. L. 117-328.
27. Lunna Lopes et. al. "KFF COVID-19 Vaccine Monitor: December 2022," Kaiser Family Foundation, December 2022. <https://www.kff.org/coronavirus-covid-19/poll-finding/kff-covid-19-vaccine-monitor-december-2022/>.
28. American Academy of Pediatrics. "Children and COVID-19 Vaccination Trends," January 4, 2023. https://downloads.aap.org/AAP/PDF/Child%20Vaccinations%20Report%20US%20Cumulative%20and%20Weekly%201.4.2023%20edits.pdf?_ga=2.183763695.836397581.1673629309-747119007.1673629308.
29. Mental Health By the Numbers. National Alliance on Mental Illness. June 2022. <https://nami.org/mhstats>.
30. Youth Ranking 2022. Mental Health America. <https://www.mhanational.org/issues/2022/mental-health-america-youth-data>
31. Josh Weaver, "Mental Health Disparities Faced by Diverse LGBTQ Youth Amid COVID-19 & Beyond," Trevor Project, May 19, 2021, https://www.thetrevorproject.org/trvr_press/new-research-underscores-mental-health-disparities-faced-by-diverse-lgbtq-youth-amid-covid-19-beyond/. See also H. Rhoades, J.A. Rusow, D. Bond, A. Lanteigne, A. Fulginiti, and J.T. Goldbach, "Homelessness, Mental Health and Suicidality among LGBTQ Youth Accessing Crisis Services," Child Psychiatry & Human Development 49 (2018): 643–651, <https://doi.org/10.1007/s10578-018-0780-1>.
32. Michelle Zabel and Melissa Schobel. "An Urgent Response for Urgent Needs: Building and Sustaining a Children's Behavioral Health Crisis Continuum," First Focus on Children Big Ideas 2023: 118-134. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
33. Ibid, 30
34. U.S. Surgeon General Issues Advisory on youth mental Health Crisis Further Exposed by COVID-19 Pandemic, HHS.com, December 7, 2021. <https://www.hhs.gov/about/news/2021/12/07/us-surgeon-general-issues-advisory-on-youth-mental-health-crisis-further-exposed-by-covid-19-pandemic.html>.
35. "Medicare Graduate Medical Education Payments: An Overview." Congressional Research Service. September 29, 2022. <https://crsreports.congress.gov/product/pdf/IF/IF10960>.
36. "Number of Active Residents, by Type of Medical School, GME Specialty, and Sex." American Association of Medical Colleges. 2018. <https://www.aamc.org/data-reports/students-residents/interactive-data/table-b3-number-active-residents-type-medical-school-gme-specialty-and-sex>.
37. "Budget in Brief, Fiscal Year 2023." U.S. Department of Health and Human Services. Accessed on January 18, 2023. <https://www.hhs.gov/sites/default/files/fy-2023-budget-in-brief.pdf>.
38. Reinert, M, Fritze, D. & Nguyen, T. (October 2021). "The State of Mental Health in America 2022" Mental Health America, Alexandria VA. <https://mhanational.org/sites/default/files/2022%20State%20of%20Mental%20Health%20in%20America.pdf>.
39. Reinert, M, Fritze, D. & Nguyen, T. (October 2021). "The State of Mental Health in America 2022" Mental Health America, Alexandria VA. <https://mhanational.org/sites/default/files/2022%20State%20of%20Mental%20Health%20in%20America.pdf>
40. Department of Treasury, Department of Labor, Department of Health and Human Services. 2022. "2022 MHPAEA Report to Congress: Realizing Parity, Reducing Stigma, and Raising Awareness" <https://www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/mental-health-parity/report-to-congress-2022-realizing-parity-reducing-stigma-and-raising-awareness.pdf>
41. "Medicare Graduate Medical Education Payments: An Overview," Congressional Research Service, September 29, 2022. Medicare Graduate Medical Education Payments: An Overview
42. "Number of Active Residents, by Type of Medical School, GME Specialty, and Sex." American Association of Medical Colleges. 2018. <https://www.aamc.org/data-reports/students-residents/interactive-data/table-b3-number-active-residents-type-medical-school-gme-specialty-and-sex>.
43. "Budget in Brief, Fiscal Year 2023." U.S. Department of Health and Human Services. Accessed on January 18, 2023. <https://www.hhs.gov/sites/default/files/fy-2023-budget-in-brief.pdf>.
44. Reinert, M, Fritze, D. & Nguyen, T. (October 2021). "The State of Mental Health in America 2022." Mental Health America. Alexandria VA. <https://mhanational.org/sites/default/files/2022%20State%20of%20Mental%20Health%20in%20America.pdf>
45. Frank, Richard G, Vikki Wachino, and Karina Aguilar. "White Paper Making Progress on Integration of Behavioral Health Care ..." Brookings. Accessed January 11, 2023. https://www.brookings.edu/wp-content/uploads/2022/12/20221212_SIHP_IntegrationWhitePaperFinal.pdf.
46. Richard G. Frank, Vikki Wachino, and Karina Aguilar. "Meeting the Moment on Children's Mental Health: Recommendations for Federal Policy." USC Schaeffer Brookings, 2022: 10. https://www.brookings.edu/wp-content/uploads/2022/12/20221212_SIHP_ChildrensMHWWhitePaperFinal-I.pdf.
47. First Focus on Children, "Issue Brief: The Need to Incorporate Children, Youth, and Adolescents into State 988 Systems." July 14, 2022. <https://firstfocus.org/resources/fact-sheet/issue-brief-the-need-to-incorporate-children-youth-and-adolescents-into-state-988-systems>.
48. Ibid, 30.



SECTION 7

Protect Our Environment to Improve Health Outcomes for Children

Every child, regardless of race, income or location, deserves to live in an environment free from hazards. Unfortunately, millions of children in the U.S. and abroad do not enjoy this basic right. Air pollution accounted for 20% of newborn deaths worldwide in 2019.¹ In the U.S., 1.2 million children between 1999 and 2010 had elevated lead levels in their blood.² Nearly half of the world's children are at extremely high risk for the impacts of climate change.³

Exposure to environmental toxins affects children differently, and often more harshly, than adults. Children's physiology and behavior make them uniquely susceptible to environmental threats, such as air pollution, water pollution, and toxic substances. Environmental hazards put children's bodies — and their futures — in jeopardy. Climate change threatens more and more children as natural disasters and extreme weather events increase in frequency and intensity around the globe.

Compounding an already complicated issue, children of color, children in low-income communities, and other marginalized children are even more likely to be exposed to environmental pollution, the effects of climate change, poor air and water quality, toxic pollutants, and the subsequent health outcomes.⁴

Legislation to improve oversight of pollution or upgrade infrastructure in communities would help ensure that every child lives free from environmental hazards.

To do this, we urge Congress to:

7.1 Protect children from harmful toxins and pesticides

Harmful toxins and pesticides pose a particular risk to children, and can do major damage to their growth and development. Therefore, we urge Congress to strengthen the Toxic Substance Control Act and to enact other legislation that shields children from exposure. The Protect America's Children from Toxic Pesticides Act (S. 3283) of the 117th Congress, led by Sen. Cory Booker (D-NJ), would ban some of the most harmful pesticides and create new regulations that ensure safe pesticide registration practices. The Get Toxic Substances Out of Schools Act of 2020 (S. 2660/H.R. 5020) led by Sen. Ed Markey (D-MA) and Rep. Andy Levin (D-MI) in the 117th Congress would provide support to schools and child care centers so they can adequately address environmental problems, contaminants, hazardous substances and pollutant emissions, and protect the health of students.

7.2 Protect children from lead exposure

Lead is an extremely dangerous toxin that can cause developmental issues in children and the Centers for Disease Control and Prevention maintains that any level of exposure is dangerous. Yet thousands of children remain exposed to lead in their drinking water and within their homes. The Keep Children and Families Safe from Lead Hazards Act (S. 2746/H.R. 6110) led by Sen. Marco Rubio (R-FL) and former Rep. Al Lawson (D-FL) in the 117th Congress would direct the federal government to do what's necessary to prevent lead poisoning in low-income housing. The Preventing Lead Poisoning Act of 2021 (S. 1826/H.R. 3511) of the 117th Congress, led by Sens. Bob Menendez (D-NJ), Rob Portman (R-OH) and Sherrod Brown (D-OH) and Reps. John Katko (R-NY) and David Cicilline (D-RI) would require the Children's Health Insurance Program (CHIP), which insures more than 9 million children, to cover screening tests for lead.

7.3 Promote environmental justice for marginalized communities

Children from low-income families and communities of color are usually at higher risk of exposure to toxic substances, pollution and the resulting negative health outcomes such as asthma and learning disabilities. The Environmental Justice for All Act (S. 872/H.R. 2021) in the 117th Congress, led by Sen. Tammy Duckworth (D-IL) and Rep. Raul Grijalva (D-AZ) would require federal agencies and large corporations to consider the health consequences of their actions and would ensure compliance and enforcement to reduce health disparities in disadvantaged communities.

7.4 Invest in programs that tackle climate change and its health outcomes

Climate change is altering our planet at an alarming rate. Temperatures continue to rise, weather patterns are shifting to create stronger storms and longer droughts, and food- and water-borne diseases are afflicting even more people. Unfortunately, women and children — who make up nearly 70% of the world's poorest populations — will bear the brunt of the climate emergency. The Women and Climate Change Act of 2021 (H.R. 260/S. 3774) led by Rep. Barbara Lee (D-CA) and Sen. Mazie Hirono (D-HI) would direct federal agencies, such as the Department of State and the Centers for Disease Control and Prevention, to develop coordinated and comprehensive strategies that can lead the global effort to mitigate the impacts of climate change on women and girls. Pregnant women and their infants run a particularly high risk of climate-induced health hazards, which can cause low birth weight and even death. We would urge Congress to support The Protecting Moms and Babies Against Climate Change Act (H.R. 957/S. 423) led by Rep. Lauren Underwood (D-IL) and Senator Ed Markey (D-MA) from the 117th Congress, which would invest in community-based programs to identify and mitigate this population's exposure to climate-related health risks.

7.5 Improve school infrastructure to protect child health

Students and teachers deserve to learn and work in a building free from environmental and occupational hazards. Yet nearly 50 million students and 3 million teachers are put at risk by crumbling school infrastructure, which can expose them to toxins such as asbestos, lead, copper, and mold. This exposure can impair cognitive function and damage lungs, affecting children for the rest of their lives. The Clean Air Sharp Minds Act (S. 3364/H.R. 6025, 116th Congress) led by Sen. Cory Booker (D-NJ) and Rep. Katherine Clark (D-MA) would work to improve the air quality in schools so that children can thrive while learning. The Reopen and Rebuild America's Schools Act of 2021 (S. 96/H.R. 604) led by Sen. Jack Reed (D-RI) and Rep. Bobby Scott (D-VA) in the 117th Congress would invest \$100 billion to transform school infrastructure and would provide \$30 billion in bond authority to support high-poverty schools. Congress also should support the Breath of Fresh Air Act (H.R. 136) led by Rep. Sheila Jackson Lee (D-TX) in the 117th Congress, which would provide schools with grants to allocate nebulizers, which help children suffering from asthma, a condition exacerbated by air pollution.

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1. "State of Global Air 2020: A Special Report on Global Exposure to Air Pollution and its Health Impacts," Health Effects Institute, 2020. <https://www.stateofglobalair.org/>
2. Roberts, Eric M., et al. "Assessing child lead poisoning case ascertainment in the US, 1999–2010." *Pediatrics* 139.5 (2017). <https://publications.aap.org/pediatrics/article-abstract/139/5/e20164266/38761/Assessing-Child-Lead-Poisoning-Case-Ascertainment?redirectedFrom=fulltext>
3. The Climate Crisis is a Child Rights Crisis:: Introducing the Children's Climate Risk Index. New York: United Nations Children's Fund (UNICEF), 2021. <https://www.unicef.org/media/105376/file/UNICEF-climate-crisis-child-rights-crisis.pdf>
4. Perera, F., & Nadeau, K. (2022). Climate change, fossil-fuel pollution, and children's health. *New England Journal of Medicine*, 386(24), 2303–2314. <https://doi.org/10.1056/nejmra2117706>



SECTION 8

Build on Lessons of the Pandemic to End Child Hunger and Improve Nutrition

As our nation continues to recover from the pandemic, millions of families are still struggling to put food on the table and children continue to go hungry.¹ Pandemic aid, such as increased benefits in the Supplemental Nutrition Assistance Program (SNAP) and the Pandemic EBT program, provided a lifeline to millions of families and significantly improved child hunger and child poverty.² In fact, nearly half (47%) of respondents to the U.S. Census Household Pulse Survey said they used their first child tax credit payment to buy food.³ Now, much of that pandemic aid has expired, just as families face record high inflation, a looming recession, and skyrocketing food prices. Children need consistent and equitable access to food now more than ever.

Pandemic policies have shown that government investment in federal food assistance programs, such as SNAP, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and the National School Lunch Program, positively impacts the lives of low-income families, especially those with children.⁴ But addressing the long-term problem of child hunger in this country — especially for children of color, who are twice as likely to be food insecure — will require long-term investment.⁵

Consistent access to enough healthy food is critically important for the development, learning, health, and well-being of children. Food insecurity inflicts long-term damage on children and often compounds and exacerbates the problems associated with child poverty. Federal food assistance programs are critically important supports that help children get the food they need. Congress can and should take steps to strengthen and expand these programs to fight child food insecurity and ensure better child nutrition.

To do this, we urge Congress to:

8.1 Strengthen and protect the Supplemental Nutrition Assistance Program (SNAP) in the 2023 Farm Bill

The Supplemental Nutrition Assistance Program (SNAP) provides the first line of defense against child food insecurity, and has lifted millions of children out of poverty. During the 118th Congress, policymakers have a chance to improve and modernize the SNAP program through the Farm Bill. Any changes to the SNAP program should reflect the needs of low-income families; harmful and unnecessary policies, such as work requirements or benefit cuts, should not be included.

We urge Congress to review or include in the Farm Bill various pieces of legislation that aim to improve SNAP. In particular, the Expanding SNAP Options Act of 2021 (H.R. 1413/S. 313) led by Rep. Robin Kelly (D-IL) and Sen. Dick Durbin (D-IL) in the 117th Congress would increase access to online SNAP purchasing and delivery, providing flexibility to working families to purchase food online. The Improving Access to Nutrition Act of 2021 (H.R. 1753) led by Rep. Barbara Lee (D-CA) in the 117th Congress would repeal certain unnecessary and harmful work requirements for SNAP. Bills such as the Opportunity to Address College Hunger Act (H.R. 3362) led by Rep. Suzanne Bonamici (D-OR) and the Student Food Security Act of 2021 (H.R. 3100/S. 1569) led by Rep. Jahana Hayes (D-CT) and Sen. Elizabeth Warren (D-MA) in the 117th Congress would increase access to SNAP for college students, a population with high levels of food insecurity.

In addition, theft of SNAP benefits has been rising at an alarming rate.⁶ Families who lose their SNAP benefits to theft are typically not reimbursed. EBT accounts lack consumer protections. While provisions included in the Consolidated Appropriations Act, 2023 at the end of 2022 will reimburse victims of benefit theft and provide EBT cardholders with more protections, we urge Congress to go further and enact long-term protections for SNAP recipients. The SNAP Theft Protection Act of 2023 (H.R. 205) led by Rep. C.A. Dutch Ruppersberger (D-MD) would create a permanent solution by allowing states to use their federal SNAP allocations to reissue stolen benefits.

8.2 Modernize and streamline enrollment in federal nutrition programs

Modernizing and streamlining enrollment in federal benefit programs is critical if they are to reach the people who need them, and Congress has multiple mechanisms to reduce barriers to enrollment and administrative “red tape,” and to reach more eligible children. While we fully respect how complicated this process can be, we urge Congress to invest in a system that ensures families can seamlessly enroll in nutrition, health, and other benefit programs at the same time. Only some states have these integrated benefit systems. Therefore, we call on Congress to introduce and pass legislation such as the WIC Enrollment Collaboration Act of 2020 (S. 3357) led by Sen. Sherrod Brown (D-OH) in the 116th Congress, which would increase WIC enrollment by tracking unenrolled children under 5 and pregnant women who receive SNAP and Medicaid benefits. The bill also directs states to develop annual cross-enrollment plans and referral practices.

8.3 Prioritize child nutrition reauthorization

Every five years, Congress has the opportunity to improve and strengthen child nutrition and school meal programs. However, important programs like the National School Lunch Program, the School Breakfast Program, and WIC, which provide meals to millions of children, have not been reauthorized since 2010 and instead are operating on funding provided by appropriations acts. While Congress came close to passing a child nutrition reauthorization in 2022, it is beyond time for Congress to use its authority to improve these programs and ensure that as many children as possible are receiving healthy

meals. We would urge Congress to include certain provisions from the 2022 child nutrition reauthorization bill introduced by the House of Representatives (H.R. 8450) in the 117th Congress in any upcoming child nutrition reauthorization. Provisions include expanding access to and streamlining eligibility for free and reduced-price school meals (e.g. expansion of the Community Eligibility Provision) and modernization of the WIC program, among others.

8.4 Strengthen and modernize the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is very important for providing healthy food and quality nutrition services and breastfeeding support for expectant mothers and young children. Congress has made permanent the increased cash benefit for fruit and vegetables enacted in 2022 and the Department of Agriculture is working to improve the food options available through the program, but more improvements are needed. Congress must enact policies that ensure the program effectively serves its more than 6 million participants and that will reverse the program's progressive decline in participation. The Wise Investment in Children (WIC) Act of 2021 (S. 853/H.R. 2011), led by Sens. Bob Casey (D-PA) and Susan Collins (R-ME) and Rep. Rosa DeLauro (D-CT) in the 117th Congress would extend: postpartum WIC eligibility for two years, WIC eligibility for children from age 5 to age 6, the WIC certification period to two years, and would support the transition to an electronic benefits service delivery. The MODERN WIC Act (S. 3226) led by Sens. Kirsten Gillibrand (D-NY) and Roger Marshall (R-KS) in the 117th Congress would allow remote certifications online and make technology investments that ensure the program is better able to meet the needs of recipients.

8.5 Invest in school nutrition programs

When schools shut down at the onset of the pandemic, their role as lifelines for millions of children and their families was made even clearer. School nutrition programs stepped up in creative ways to ensure that children were continuing to be fed. However, school nutrition programs are facing a multitude of problems including staffing shortages, record high inflation, and rising food costs and the reimbursement they receive from the federal government to subsidize meals falls short of covering costs. Therefore, Congress should invest in the capacity of educational institutions to serve healthy meals by increasing reimbursement rates, technical assistance grants, and school meal equipment grants. The School Food Modernization Act (S. 876/H.R. 4379) led by Sen. Susan Collins (R-ME) and Rep. Mark DeSaulnier (D-CA) in the 117th Congress would help schools serve healthier meals to students by establishing a grant, loan guarantee and technical assistance program.

8.6 Support universal school meals

School meals are an incredibly effective way to get nutritious food to students who are growing and developing, a time when proper nutrition is of utmost importance. Nearly 30 million children qualify for free and reduced-price school meals, and millions of children were able to receive free school meals regardless of income due to pandemic flexibilities. Unfortunately, these flexibilities have expired, leaving many families and schools struggling. The Universal School Meals Program Act (S. 1530/H.R. 3115) led by Sens. Bernie Sanders (I-VT) and Kirsten Gillibrand (D-NY), and Rep. Ilhan Omar (D-MN) in the 117th Congress would provide free school meals to every student regardless of income. Such a program would remove the stigma associated with free school meals, reduce the administrative burden on school nutrition programs, and would ensure that every single student would receive nutritious meals while they are at school.

8.7 Improve access to nutrition programs for immigrant families

Many immigrant families do not use public benefit programs, even when they are eligible. Policies such as the five-year waiting period on public benefits for immigrants with legal permanent residency and public charge, which caused many immigrant families to withdraw from using public benefits (including SNAP and WIC) because they feared it would affect their immigration status, have reduced enrollment in these important programs for immigrant families and their children. Even though the Biden Administration has taken steps to reverse such policies (specifically public charge), Congress must act to ensure immigrant families use the public nutrition benefits for which they are eligible. We suggest providing funding to community-based organizations within immigrant communities for outreach and education programs that alert more families to their eligibility and can help them sign up for programs such as SNAP and WIC. We also urge Congress to abolish the five-year bar and waiting periods to use these programs and to eliminate questions about immigrant status when signing up for nutrition programs.

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1. "Survey Reveals Families in Serious Financial Crisis With Rising Prices and No Monthly Child Tax Credit Payments in Sight," ParentsTogether Action, May 2022. <https://parentstogetheraction.org/2022/05/10/survey-reveals-families-in-serious-financial-crisis-with-rising-prices-and-no-monthly-child-tax-credit-payments-in-sight/>
2. "Robust COVID Relief Achieved Historic Gains Against Poverty and Hardship, Bolstered Economy," Center on Budget and Policy Priorities, Feb. 2022. <https://www.cbpp.org/research/poverty-and-inequality/robust-covid-relief-achieved-historic-gains-against-poverty-and>
3. Perez-Lopez, Daniel J., "Economic Hardship Declined in Households with Children as Child Tax Credit Payments Arrived," U.S. Census Bureau, 11 August 2021. <https://www.census.gov/library/stories/2021/08/economic-hardship-declined-in-households-with-children-as-child-tax-credit-payments-arrived.html>
4. Reiley, Laura, "Census data suggests America's hunger problem may be waning, but food assistance continues to top pre-pandemic levels," The Washington Post, 23 August 2021. <https://www.washingtonpost.com/business/2021/08/23/hunger-pandemic-food-stamps/>
5. Alisha Coleman-Jensen, Matthew P. Rabbitt, Christian A. Gregory, and Anita Singh, "Household Food Security in the United States in 2020," ERR-298, U.S. Department of Agriculture, Economic Research Service, 2021. <https://www.ers.usda.gov/publications/pub-details/?pubid=102075>
6. Picchi, Aimee. "Amid surge in food-stamp theft, low-income victims are left on the hook, lawsuit claims," CBS News, Nov. 21, 2022. <https://www.cbsnews.com/news/food-stamps-skimming-lawsuit-alleges-hardship-over-stolen-benefits/>



SECTION 9

Invest in Our Youngest Children

The enormous positive impact that early learning programs exert on children and their families, early learning professionals and employers, and the U.S. economy became crystal clear during the COVID-19 pandemic, as did our need to significantly improve the way we operate and fund these programs. High-quality early learning programs foster positive, on-time post-secondary educational outcomes for children; improved cognitive development, emotional development, and academic achievement; and less involvement with the criminal justice system.^{1,2,3} The return on investment of high-quality early learning programs ranges from \$4-to-\$13 for each \$1 spent.⁴ Early learning programs allow parents to work, receive training, and attend school, and the COVID-19 pandemic unequivocally proved that our country cannot function without it.

However, current systems lack the structure and funding necessary to best meet the needs of children, their families, and early learning professionals. Although some early childhood programs have seen funding increases in recent years, the United States invests fewer public dollars in these programs relative to Gross Domestic Product (GDP) than almost all other developed nations, ranking 35th out of 37 countries tracked by the Organisation for Economic Cooperation and Development.⁵ The cost to a family of child care for two children in a center was more than annual mortgage payments in 44 states and the District of Columbia, and the cost of child care for an infant at a center was more than in-state tuition at a public university in 34 states and D.C.⁶ Child care is least affordable and accessible for Black, Hispanic, and low-income working parents.⁷ Nearly 60% of Hispanic families live in a child care desert, meaning that an area has more than three young children for every licensed child care slot.⁸ Child care workers, who are overwhelmingly women and disproportionately women of color, in 2020 earned an average of \$12.24 per hour, and 46% rely on one or more public programs such as Medicaid, food stamps, and Temporary Assistance for Needy Families each year.^{9,10} Home visiting programs, which produce positive results in a long list of areas important for children and their families, are currently able to serve fewer than 5% of eligible families. Nearly a quarter of the U.S. workforce does not have access to paid family and medical leave or sick days, putting their health and the health and well-being of their families at risk. We must do better.

To build an early learning system that meets the needs of children, families, and employees, Congress must:

- Significantly increase federal investments in child care and treat the sector like the public good it is.
- Improve child care data to better reflect care being used and received.
- Increase equity in the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program by improving language access, creating viable funding pathways for additional home visiting models that serve underserved populations, and requiring Medicaid coverage of home visiting.
- Establish a national paid family and medical leave program and provide workers with paid sick days.

Child Care

The COVID-19 pandemic exposed the fragility of our child care sector, which currently fails many people: Children who cannot access a setting that works best for them, families who cannot afford the high prices of high-quality care, and employees whose work is devalued by low pay and few benefits.

9.1 Improve the affordability, access, and quality of child care

Stabilize the Child Care Sector. Congress should consider several of the large child care bills already before them, including the Child Care for Working Families Act, introduced in the 117th Congress by Sen. Patty Murray (D-WA) and Rep. Bobby Scott (D-VA), and the Universal Child Care and Early Learning Act introduced in the 117th Congress by Sen. Elizabeth Warren (D-MA) and Rep. Mondaire Jones (D-NY). The Child Care for Working Families Act would limit families' out-of-pocket costs; expand pre-K programs in states; improve care options for children with disabilities, dual language learners, children experiencing homelessness, and children in foster care; provide funding for new child care providers; ensure that child care workers' pay is commensurate with that of public elementary school teachers; and increase Head Start funding. The Universal Child Care and Early Learning Act would require universal access to child care for every family; provide free child care for families under 200% of the federal poverty limit, and limit other families to paying 7% of their income; provide pre-K; and expand Head Start.

9.2 Apply child care policies in a variety of settings

Child care looks different for different families based on their needs. Some families need care during non-traditional hours such as overnight, some prefer classroom settings like pre-K, and others want their children in an in-home care setting. Congress must think creatively about how to tailor care to families' needs. For instance, Rep. Suzanne Bonamici's (D-OR) Build Housing with Care Act, also referenced in our chapter on homelessness policy, would provide funding to build child care centers and support home-based care providers connected with affordable housing locations.

9.3 Update child care data collection to reflect current care settings

To better evaluate child care gaps and demand levels, lawmakers must understand the variety of care settings that families currently use, such as center-based, home-based, family/friend/neighbor, unlicensed, licensed, and other options. The U.S. Census Bureau's last comprehensive survey — “Who’s Minding the Kids? Child Care Arrangements” — was published more than a decade ago, in Spring 2011. Whether through legislation or appropriations language, Congress must require the Census Bureau to update this report.¹¹

Home Visiting

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program is a federal grant program to states, territories, and tribes that supports early childhood home visiting programs with documented, evidence-based success, for families from pregnancy through a child’s entry into kindergarten. MIECHV shows positive results in six benchmark areas critical to strengthening at-risk families:

1. Improved maternal and newborn health
2. Prevention of child injuries, child abuse, neglect or maltreatment, and reduction of emergency department visits
3. Improved school readiness and achievement
4. Reduced crime and domestic violence
5. Improved family economic self-sufficiency
6. Improved the coordination of and referrals to other community resources and supports.

The government saves more than \$32,000 per child served through home visiting, and over an individual’s lifetime, benefits exceed costs by at least 20% and up to more than 200%.^{12,13}

The Fiscal Year 2023 Omnibus Appropriations bill reauthorized MIECHV for five years and delivered the first funding increase in the program’s history. The reauthorization included a doubling of the tribal set-aside funding, the continuation of virtual home visits, and new data disaggregation requirements based on race and ethnicity. Congress and the administration must continue to work to improve equity in MIECHV and home visiting while the reauthorization is being implemented.

9.4 Improve data collection, program reporting, and evaluation of Dual Language Learners’ access to and use of MIECHV programs

One-third of children in the United States ages 0-5 are Dual Language Learners, defined as children with at least one parent who speaks a language other than English at home.¹⁴ All federally funded programs are required to offer people with limited English proficiency meaningful access to services, and research has found that MIECHV has not adequately done this.¹⁵ Congress must encourage and/or require the Department of Health and Human Services and the Health Resources and Services Administration (HRSA) to gather data showing the level of state compliance with language access requirements and establish regular reporting and planning for language access in MIECHV services.

9.5 Provide meaningful access to federal funding for community-based home visiting models

The MIECHV statute allows states to spend up to 25% of their allotment on “promising practices”, which are home visiting models that do not currently receive MIECHV funding and do not yet meet the evidence standard required. However, only three states currently take advantage of this opportunity. Sometimes called community-based models, these models can target specific populations, such as refugees or dual language learners, and others that larger models often miss. Increased funding in MIECHV reauthorization may provide more opportunities for states to fund community-based models, but Congress must also encourage and/or require HRSA to define pathways for them to access federal resources.

9.6 Collect data around current funding sources for home visiting and require Medicaid to cover home visiting services

- Currently, Medicaid pays for some home visiting in some states, depending on the model, state interest, and capacity for obtaining reimbursement. As discussed, home visiting shows benefits in numerous areas, including maternal and child health and social determinants of health. Congress must require HRSA to track Medicaid and other sources of funding for home visiting in states, including through MIECHV, to better understand how Medicaid is currently being used and what other funding streams help pay for home visiting services.
- Congress ultimately must require states to make home visiting a Medicaid benefit, with a ramp-up period for states to adopt new models and build new home visiting capacity as well as funding to execute their plans.

Paid Family and Medical Leave

As also detailed in the End Child Poverty chapter, the lack of earned family leave for millions of U.S. workers forces parents to choose between forfeiting income and caring for their newborn, a sick child or family member, or themselves. Paid family leave promotes healthy child development, family economic security, and labor force retention by allowing parents and caregivers to maintain steady employment and income without sacrificing their family obligations.

The Bureau of Labor Statistics shows that only about 1-in-4 private sector employees have access to paid family leave. Hispanic and Black workers are much less likely to have access to paid leave compared to their white counterparts.^{16,17}

9.7 Establish a national family and medical leave program

Following the outbreak of COVID-19, Congress passed a temporary paid family and medical leave program through the Families First Coronavirus Response Act and required some employers to provide paid leave for employees to care for themselves or their children. This provision also covered the need to care for children whose schools or child care centers were closed due to COVID-19.¹⁸ Lawmakers signaled with this program that they understand the pressing need for parents and caregivers to have access to paid leave. We strongly urge Congress to establish a permanent paid family and medical leave program as outlined in the FAMILY Act (H.R. 804/S. 248), led by Rep. Rosa DeLauro (D-CT) and Sen. Kirsten Gillibrand (D-NY) in the 117th Congress.

Paid Sick Days

As also detailed in the End Child Poverty chapter, parents and caregivers must have paid sick days to care for a child without risk of losing their job or forfeiting income. Parents without sick leave are twice as likely to send a sick child to school or child care as a parent who has sick leave.¹⁹ And this problem is growing worse. In October 2022, 104,000 employees missed work to care for their children, a number that far exceeds any time in the past, including at the height of the COVID-19 pandemic. Increased child illness, driven, for instance, by the “tripledemic” of COVID, RSV and flu, combined with child care closures caused these absences, and added to the urgent need for a national paid sick leave policy.²⁰ Nearly 1-in-4 U.S. workers, or 23% of the workforce, does not have even a single paid sick day.²¹ Low-wage and part-time workers, the majority of whom are marginalized workers of color, are the least likely to have paid sick days.

9.8 Provide workers access to paid sick days

Following the outbreak of COVID-19, Congress passed a temporary sick leave program through the Families First Coronavirus Response Act, and required some employers to provide sick time to employees impacted by COVID-19 so they could care for themselves or their children.²² As with paid family leave, Lawmakers signaled with this temporary program that they understand the need for parents and caregivers to have access to paid sick days, and so we urge Congress to permanently guarantee America’s workers access to paid sick days as proposed in the Healthy Families Act (H.R. 2465/S. 1195), led by Rep. Rosa DeLauro (D-CT) and Sen. Patty Murray (D-WA) in the 117th Congress.

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1. U.S. Department of the Treasury, "The Economics of Child Care Supply in the United States," <https://home.treasury.gov/system/files/136/The-Economics-of-Childcare-Supply-09-14-final.pdf>.
2. "Early Childhood Education," Centers for Disease Control and Prevention, <https://www.cdc.gov/policy/hst/hi5/earlychildhoodeducation/index.html>.
3. Jorge Luis Garcia, James J. Heckman, and Anna L. Ziff, "Early Childhood Education and Crime." *Infant Mental Health Journal*. 2019 January, 40(1): 141-151 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6344026/>.
4. Heckman, J. J., Moon, S. H., Pinto, R., Savelyev, P. A., & Yavitz, A. (2010). The Rate of Return to the High/Scope Perry Preschool Program. *Journal of Public Economics*, 94(1-2), 114–128 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3145373/>.
5. Ibid 1
6. "The US and the High Price of Child Care," Child Care Aware of America, 2019. <https://info.childcareaware.org/hubfs/2019%20Price%20of%20Care%20State%20Sheets/Final-TheUSandtheHighPriceofChildCare-AnExaminationofaBrokenSystem.pdf>
7. Maura Baldiga, Pamela Joshi, Erin Hardy, Dolores Acevedo-Garcia. "Data-for-Equity Research Brief: Child Care Affordability for Working Parents." Institute for Child, Youth, and Family Policy, Brandeis University. November 2018 https://www.diversitydatakids.org/sites/default/files/2020-02/child-care_update.pdf
8. Rasheed Malik, Katie Hamm, and Leila Schochet. "America's Child Care Deserts in 2018." Center for American Progress, December 2018. <https://www.americanprogress.org/article/americas-child-care-deserts-2018/>
9. "Demanding Change: Repairing Our Child Care System," Child Care Aware of America, Fall 2022, [https://info.childcareaware.org/hubfs/2022-03-FallReport-FINAL%20\(1\).pdf?utm_campaign=Budget%20Reconciliation%20Fall%202021&utm_source=website&utm_content=22_demandedchange_pdf_update332022](https://info.childcareaware.org/hubfs/2022-03-FallReport-FINAL%20(1).pdf?utm_campaign=Budget%20Reconciliation%20Fall%202021&utm_source=website&utm_content=22_demandedchange_pdf_update332022)
10. McLean, C., Austin, L.J.E., Whitebook, M., & Olson, K.L., "Early Childhood Workforce Index – 2020," Center for the Study of Child Care Employment, University of California, Berkeley, 2021. <https://csce.berkeley.edu/workforce-index-2020/report-pdf/>
11. Lynda Laughlin. "Who's Minding the Children? Child Care Arrangements: Spring 2011." United States Census Bureau, April 2013. <https://www.census.gov/library/publications/2013/demo/p70-135.html>
12. "The Business Case For Home Visiting," Pew Charitable Trusts, October 2011, https://www.pewtrusts.org/~media/legacy/uploadedfiles/pes_assets/2012/hvbusinessleadersbrieffinalpdf.pdf.
13. Michalopoulos, Charles, Kristen Faucetta, Anne Warren, and Robert Mitchell. Evidence on the Long-Term Effects of Home Visiting Programs: Laying the Groundwork for Long-Term Follow-Up in the Mother and Infant Home Visiting Program Evaluation (MIHOPE). OPRE Report 2017- 73. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, <https://files.eric.ed.gov/fulltext/ED579153.pdf>.
14. Migration Policy Institute (MPI), National Center on Immigrant Integration Policy (NCIIP), "U.S. Young Children (ages 0 to 5) by Dual Language Learner Status: National and State Sociodemographic and Family Profiles" (data tables, MPI, Washington, DC, 2021).
15. Maki Park, Jacob Hofstetter, and Ivana Tu Nhi Giang. "Overlooked but Essential: Language Access in Early Childhood Programs." Migration Policy Institute, October 2022. https://www.migrationpolicy.org/sites/default/files/publications/mpi_ecec-language-access-2022_final.pdf.
16. U.S. Bureau of Labor Statistics. "Table 7. Leave benefits by average wage category, private industry workers, March 2022." National Compensation Survey: Employee Benefits in the United States, March 2022. September 2022. <https://www.bls.gov/ncs/ebs/benefits/2022/home.htm>.
17. "Racial and ethnic disparities in access to and use of paid family and medical leave: evidence from four nationally representative datasets." U.S. Bureau of Labor Statistics, Monthly Labor Review, January 2019. <https://www.bls.gov/opub/mlr/2019/article/racial-and-ethnic-disparities-in-access-to-and-use-of-paid-family-and-medical-leave.htm>.
18. "Families First Coronavirus Response Act: Employee Paid Leave Rights." U.S. Department of Labor, Wage and Hour Division. Last visited January 5, 2023. <https://www.dol.gov/agencies/whd/pandemic/ffcr-employee-paid-leave>.
19. Smith, T. W., & Kim, J., "Paid Sick Days: Attitudes and Experiences (Table 23)". National Opinion Research Center at the University of Chicago for the Public Welfare Foundation, June 2010. <http://www.issuelab.org/resources/10518/10518.pdf> (Unpublished calculation)
20. U.S. Bureau of Labor Statistics. "Labor Force Statistics from the Current Population Survey." Last visited January 2023. <https://data.bls.gov/timeseries/LNU02096055>.
21. U.S. Bureau of Labor Statistics. "Table 7. Leave benefits by average wage category, private industry workers, March 2022." National Compensation Survey: Employee Benefits in the United States, March 2022." September 2022. Excel file. ("private-average-wage-category-2022") <https://www.bls.gov/ncs/ebs/benefits/2022/home.htm>.
22. Ibid. 18



SECTION 10

Invest in Our Nation's Students and in Education Equity and Supports

Education is a children's issue.

Unfortunately, policymakers often fail to put the needs, concerns, and well-being of children first when it comes to public policy — even in education. For example, far too often, lawmakers have promoted and encouraged inequality and chronic underfunding of our nation's public schools.

Instead, the federal government should ensure that all children, regardless of age, race, ethnicity, gender, disability, income, or zip code receive a quality education. The following K-12 federal education agenda outlines policies and programs that First Focus Campaign for Children believes are essential to achieving that goal.

10.1 Increase funding and equity in K-12 education

Increased funding is one of the most critical components of improving K-12 education. The federal government should increase funding for Title I, which provides funds to schools with high percentages of students from low-income families.

The disparities in funding to our nation's students is disturbing. A 2016 report found that majority-white school districts receive \$23 billion more in funding than their non-white counterparts.¹ The funding formulas also must be improved. The National Center for Education Statistics (NCES) found that aspects of the Title I formula provide less funding to children in poor school districts than wealthier ones.²

Additionally, we recommend the federal government create a new program to fund school infrastructure improvements, such as modernizing school buildings and upgrading technology.

10.2 Support students with disabilities

Students with disabilities face unique challenges in the education system, and it is critical that they receive the supports and services they need to succeed. First Focus Campaign for Children supports policies that:

- Ensure that students with disabilities have access to the same high-quality education as their peers
- Provide schools with additional resources to support the needs of students with disabilities
- Provide increased funding for the Individuals with Disabilities Education Act (IDEA) to ensure that schools have the resources they need to meet the needs of students with disabilities

To reach these goals, First Focus Campaign for Children supports the IDEA Full Funding Act (S. 3213/ H.R. 5984), sponsored by Sen. Chris Van Hollen and Rep. Jared Huffman (D-CA) in the 117th Congress.

10.3 Ensure safe and healthy schools

Ensuring that schools are safe and healthy is essential to promoting positive learning outcomes for all students. When students feel safe and secure in their school environment, they are more likely to attend school, participate in class, and succeed academically. To ensure that schools are safe and healthy, we recommend that lawmakers:

- **Implement school safety measures.** Ensuring that schools are safe and secure should be a top priority for lawmakers at all levels of government. The federal government should provide funding to improve school safety measures and provide training for personnel to respond to emergencies.
- **Provide access to health care.** Many students do not have access to health care services, which can greatly impact their ability to succeed academically. Schools should provide access to health care services, such as dental and vision screenings, immunizations, and basic medical care. The federal government should increase funding for school-based health services and streamline the ability for schools to access funding from Medicaid to provide services to low-income students.
- **Implement comprehensive mental health services.** Many students struggle with mental health issues, including anxiety, depression, and trauma. Schools must have the resources to provide comprehensive mental health services to all students who need them. Schools must have counselors, social workers, and psychologists on staff, and must train teachers and staff to recognize the signs of mental health issues and provide appropriate support.
- **Address substance misuse and addiction.** Many students struggle with substance misuse and addiction and schools should work with their communities to improve access to prevention and treatment services.
- **Ensure access to healthy food.** Good nutrition is essential for student success, both academically and in terms of overall health. Unfortunately, many students in low-income communities do not have access to healthy food. The federal government should assist states and local education agencies (LEAs) with funding to ensure that all students have access to healthy meals, including breakfast and lunch.
- **Promote physical activity.** Physical activity is important not only for physical health, but also for mental health and academic success. Schools should provide opportunities for physical activity during the school day, such as recess, physical education classes, and after-school sports programs. The federal government should provide funding for schools to improve their physical education facilities and equipment.
- **Implement bullying prevention programs.** Bullying is a significant problem in many schools, and it can have a detrimental impact on students' mental health and academic success. Schools should implement evidence-based bullying prevention programs that teach students and staff how to recognize and prevent bullying behaviors. First Focus Campaign for Children supports the Safe Schools Improvement Act (S. 2410/H.R. 4332), sponsored by Sen. Bob Casey (D-PA) and Rep. Linda Sánchez (D-CA) in the 117th Congress.

- **Address environmental hazards.** Schools should be free from environmental hazards that can impact student health, such as mold, air pollution and lead in water. The federal government should provide funding for schools to address these hazards and ensure that all school facilities are safe and healthy for students and staff.
- **Support students who have experienced trauma.** Many students have experienced trauma, such as domestic violence, child abuse, natural disasters or community violence. Schools should provide trauma-informed care and support services to help these students cope and succeed academically.

10.4 Support English language learners (ELLs)

The federal government should increase funding for programs that support English language learners and ensure that they have access to high-quality education. The increased funds should support teacher training and professional development, as well as programs that support language acquisition and academic achievement.

ELLs represent a growing segment of the student population in the United States. According to the National Center for Education Statistics (NCES), the number of ELLs in public school has increased by more than 1 million since 2000. Given this increase, it is important to ensure that ELLs receive the support and resources they need to succeed in school.

To meet this goal, the federal government should increase funding for programs that support ELLs. These programs should provide high-quality instruction tailored to the needs of ELLs. Additionally, the federal government should ensure that states and LEAs are providing equitable resources and opportunities for ELLs, particularly those who are economically disadvantaged or have disabilities.

ELLs must be supported with access to qualified teachers who are trained in bilingual education or in teaching English as a second language (ESL). The federal government should work with states to provide professional development opportunities for teachers working with ELLs, including training on effective instructional strategies, cultural competency, and strategies for building positive relationships with families and communities.

ELLs also must have access to appropriate assessments and accommodations. Standardized testing can be particularly challenging for ELLs, who may struggle with language barriers and cultural differences.

Finally, it is essential that all states and schools respect and affirm the Supreme Court decision in *Plyer v. Doe*. This landmark decision held that all students, regardless of their immigration status, have the right to a free public education. Schools must not discriminate against students based on their immigration status or require them to provide proof of citizenship or immigration status in order to enroll. These supports are crucial not only for ELLs, but for all students who may be undocumented or have family members who are undocumented. All students have a right to a safe, supportive and inclusive learning environment, and the federal government must ensure that this right is upheld.

10.5 Address teacher shortages

The federal government should provide grants to states to address teacher shortages in high-need areas and to recruit and retain diverse teachers. The grants should cover incentives to teachers who commit to teaching in high-need areas for a certain number of years, as well as loan forgiveness and increased salaries for teachers who commit to teaching in these areas.

10.6 Support students experiencing homelessness

The federal McKinney-Vento Act requires schools to address needs of students experiencing homelessness, including transportation costs. The federal government fails to adequately fund this program. See *“End Child, Youth, and Family Homelessness” on page 81 for more information on supporting children experiencing homelessness.*

10.7 Promote parent and family engagement and community partnerships

Parents and families play a crucial role in the education of their children. Research has shown that when parents and families are actively engaged in their child's education, students have higher grades, better attendance, and higher rates of graduation.

The federal government should expand its support for partnerships between schools and parents, caregivers, and community organizations, including businesses, nonprofits, and local governments. This support should include:

- **Promoting family-friendly policies in schools.** Schools should provide flexible scheduling and accommodations — including interpretation services, childcare, and virtual attendance options — for parents to attend parent-teacher conferences, school events, and meetings.
- **Providing resources and support for parent and family engagement.** Schools should receive funding and resources to develop and implement programs that support parent and family engagement, such as parent-teacher associations, parent networks, and workshops on topics such as navigating the school system, supporting student learning at home, and college readiness.
- **Expanding community partnerships.** Schools should work with community organizations, including businesses, community centers, nonprofit organizations, and local governments to provide resources and support for families. These partnerships can provide students with access to a wide range of resources and opportunities, including internships, mentoring programs, and community service opportunities.
- **Supporting the work of community schools.** Community schools, such as those supported by the Communities in Schools program, provide a range of services and supports to students and families, including health services, mental health services, tutoring, and mentoring. The federal government should fund and support the expansion of community schools across the country.

As an example, First Focus Campaign for Children strongly supports the Full-Service Community School Expansion Act of 2021 (S. 385), sponsored by Sens. Sherrod Brown (D-OH) and Chris Van Hollen (D-MD).

10.8 Promote civic education

Civic education is essential for preparing students to be active and engaged citizens who are informed about their rights and responsibilities, understand the structures and functions of government, and have the skills needed to participate in democratic processes.

As President Franklin D. Roosevelt said:

Democracy cannot succeed unless those who express their choice are prepared to choose wisely. The real safeguard of democracy, therefore, is education.

The federal government could promote civic education by:

- **Funding civic education programs.** The federal government can play an important role in promoting and supporting civic education in K-12 schools by providing funding to help schools develop and implement effective civic education programs.
- **Encouraging student participation in the democratic process.** Programs that provide students with opportunities to meet elected officials, participate in community service projects, or engage in simulated democratic processes, such as mock elections or model congresses, will encourage them to engage in democratic processes and develop their civic skills.
- **Promoting media literacy.** Schools should be encouraged to develop media literacy programs that help students understand how to navigate and critically evaluate the media, including social media. These efforts could include programs that teach students how to identify bias in news coverage, distinguish between fact and opinion, and evaluate the credibility of sources and information.
- **Encouraging youth voting.** States should promote voting by its youngest citizens at all levels of democracy. Schools should encourage students to register to vote as soon as they are allowed and provide them with information about the voting process and issues at stake.

10.9 Invest in school infrastructure

The federal government should provide funding and support for school infrastructure, including repairs and upgrades to school buildings, technology infrastructure, and transportation infrastructure. These efforts should include funding for low-income school districts that may not have the resources to invest in these areas and to address problems with respect to environmental hazards.

10.10 Address the digital divide and access to technology

The federal government should provide additional funding and support for programs that address the digital divide and ensure that all students have access to high-speed internet and technology. While technology has the potential to enhance and expand learning opportunities, students who lack access to technology or a reliable internet connection are at a disadvantage.

These efforts should include programs that provide funding for schools to purchase technology, as well as programs that provide internet access to low-income families. To meet these goals, the federal government could assist students by:

- **Providing funding for technology infrastructure.** The federal government should support efforts by schools to invest in improving technology infrastructure in schools, particularly in low-income areas. This funding should be used to upgrade existing technology, provide internet access, and ensure that all students have access to reliable devices.
- **Ensuring broadband access.** Reliable and affordable broadband access is critical to ensuring that students can access online learning resources. The federal government must ensure that all families have access to broadband internet, particularly in rural and low-income areas.
- **Supporting digital literacy.** Students need to be taught digital literacy skills to navigate the digital world effectively and safely. The federal government should provide funding to support digital literacy programs in schools to ensure that students are prepared to live and learn in our digital world.
- **Bridging the digital divide.** The federal government should help bridge the digital divide by providing funding to schools and communities to purchase devices for students who do not have access to technology. These efforts will ensure that all students, including students who are low-income, homeless, or in foster care, have access to the tools they need to succeed in school and beyond.

10.11 Reject culture wars and related legislation

The federal agenda for K-12 education should reject H.R. 5, the so-called “Parents’ Bill of Rights,” and the associated culture wars. While parental engagement is critically important, the particular approach adopted in H.R. 5, sponsored by Rep. Julia Letlow (R-LA), is misguided and would have harmful consequences for students.

Specifically, H.R. 5 harms children in six ways. The bill:

1. Fails to recognize that children have rights and a role to play in education
2. Creates significant new bureaucracy, red tape, and reporting requirements for every single public school in this country, which results in funding, time, attention, and services being diverted away from educating and serving children
3. Promotes and facilitates book bans and censorship rather than greater access to books, reading, and learning
4. Threatens access to health care, privacy, and confidentiality of students
5. Promotes division and animosity between parents and educators rather than helping facilitate partnerships and greater civility between parents and educators
6. Urges the reporting of “violence” in schools after the fact rather than the protection and prevention of violence against students, teachers, other educators, and school board members

H.R. 5 and state-level bills like it limit the ability of teachers and schools to provide a well-rounded education that includes a diversity of perspectives and experiences. Students benefit from exposure to different ideas and viewpoints, and limiting the scope of education to a narrow set of beliefs through book bans, speech codes, and censorship can be detrimental to their development.

In fact, these bills infringe upon the rights of students to a safe and inclusive learning environment. For example, some of these bills promote an unsafe and unwelcoming environment for students of color and LGBTQ students.

Every child deserves the opportunity to fulfill their potential, regardless of their race, ethnicity, gender, religion, income, disability, zip code, sexual orientation, immigration status, or place of birth. Our society should reject the attempts of some parents to discriminate against or harm children who are not their own.

Unfortunately, these bills often target certain groups of students and foster an antagonistic relationship between parents, teachers, and administrators that fails students. Again, although there is no doubt about the importance of parental engagement in schools, parents must serve as partners to rather than authoritarians over teachers, schools, and students in public education. These partnerships demand civility and forbearance.

Education is a complex and nuanced field, and educators must be able to make decisions based on their professional expertise and experience and respond to the special needs, concerns, and questions of students without micromanagement by politicians. Limiting educators’ ability to teach disrespects them as professionals and negatively impacts students.

Instead of advancing bills such as H.R. 5 and the associated culture wars that some adults wish to play out in our schools, the federal agenda for K-12 education should prioritize policies that promote a well-rounded education, inclusive learning environments, and the efforts of educators and parents working together toward the success of all students. This approach will better serve the needs of all students in our country and prepare them to be active and engaged citizens in our democracy.

10.12 Reject school privatization efforts

Public education is critically important for children themselves but also our country. Education enables citizens to develop their full potential, which allows our democracy to flourish. Public education is about both helping individuals learn and grow and creating a successful and prosperous society.

As President Thomas Jefferson wrote:

The object is to bring into action that mass of talents which lies buried in poverty in every country, for want of the means of development, and thus give activity to a mass of mind, which, in proportion to our population, shall be double or treble of what it is in most countries.

President Jefferson is right. Our nation has become a leading voice for democracy in the world and one of the world's wealthiest nations in large part because of public education. The vast majority of people in the United States, including doctors, scientists, business leaders, and religious leaders, owe their teachers and public schools a great deal of gratitude for all that they have become.

As author Benjamin R. Barber wrote³ in 2004:

There is a deep sense in which the phrase "public education" is redundant: Education is public, above all in a democracy. To think of it any other way is to rob it of its essential meaning.

For education is an essential public good addressed to young citizens-to-be as members of a community. Education not only speaks to the public, it is the means by which a public is forged. It is how individuals are transformed into responsible participants in the communities of the classroom, the neighborhood, the town, the nation and (in schools that recognize the new interdependence of our times) the world to which they belong.

Some seem to have forgotten this. As Barber adds:

...there is something deeply disturbing, even perverse, about current political rhetoric that has seized on privatizing (de-publicizing) America's schools. For to take the public out of education is to take the common out of the commonwealth.

School privatization efforts would lead to the Balkanization of our nation's schools and create a new version of "separate and unequal." Barber concludes:

We cannot do without public schools. A nation of fractious individuals schooled in avoidance ceases to be a nation. A democracy of consumers focused on their private interests ceases to be a democracy. A community of multicultural fragments celebrating only difference ceases to be a community. A republic of privately schooled narcissists blind to what they share ceases to have res public and hence is no longer a republic.

Public education is redundant: To be civilized is to understand the nature of commonality, to be learned is to grasp the rights and responsibilities of liberty, to be educated is to comprehend the meaning of citizenship. If liberal education is education in the arts of liberty, then there can be no liberal education without public education.

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1. EdBuild, "23 Billion, February 2019, <https://ed.build.org/content/23-billion>.
2. Snyder, Thomas D., Rachel Dinkes, William Sonnelberg, and Stephen Cornman, *Study of the Title I, Part A Grant Program Mathematical Formulas*, National Center for Education Statistics, May 2019, <https://nces.ed.gov/pubs2019/2019016.pdf>.
3. Barber, Benjamin R., "Taking the Public Out of Education," Mike McMahon AUSD, April 30, 2004, <https://mikemcmahon.info/demopublic.htm>.



SECTION 11

End Child, Youth, and Family Homelessness

The reverberations of the COVID-19 pandemic continue to be strongest for families with children who were already struggling. Rising rents and the high cost of food — combined with the expiration of the expanded Child Tax Credit and other pandemic aid — are driving our high rate of child and youth homelessness even higher.

More than 1 million school-age children were identified as homeless in the 2020-2021 school year,¹ and 5% of all children under 6 were experiencing homelessness even before the start of the pandemic.² Homelessness is even more prevalent among children of color — Black, Hispanic, Native American, Native Hawaiian, and Alaskan high school students disproportionately experience homelessness compared to their white or Asian peers.³

These numbers are staggering, yet still greatly underestimate the problem. Federal data has long underestimated the prevalence of child, youth, and family homelessness in the United States.⁴ The closure of schools and other institutions during COVID-19 made it even harder to identify children and youth experiencing homelessness, masking the pandemic's exacerbating impact.⁵ Point-in-time counts have always undercounted the number of homeless children and youth since most of them do not experience the visible homelessness these counts capture. The pandemic only exacerbated this problem by resulting in fewer trained willing and able volunteers to conduct these annual counts.

Homeless children, youth, and families have to stay where they can due to a lack of alternatives and/or fear of authorities and are often forced to bounce around. Many communities do not have family or youth shelters, and even when they do, shelters are often full. Shelter policies may also prevent families from staying together or may restrict the length of stay. As a result, homeless children and youth often end up staying in motel rooms or temporarily staying with friends or others, hiding them from the community and disconnecting them from assistance. The temporary nature of these situations creates frequent upheaval, volatility, and a loss of stability for children, disrupting their education, healthcare, and more.

The U.S. Department of Housing and Urban Development (HUD) uses a very narrow definition of “homelessness” that excludes the majority of children and youth experiencing homelessness from receiving or even being assessed for HUD Homeless Assistance, despite extensive evidence that homelessness has grave consequences for children and youth regardless of where they find a place to sleep on a given night.⁶

Many times these families are not even eligible or prioritized for aid intended for households “at-risk of homelessness,” such as emergency rental assistance or eviction moratoriums that were implemented during the outbreak of COVID-19. Homeless families living in hotel rooms or staying with others lack formal leases and often do not legally qualify as “tenants,” making it very difficult for them to access rental assistance or eviction protection.⁷ Children experiencing homelessness with their families or young people on their own therefore fall through the cracks of both the homeless and housing-assistance systems.⁸

Congress must reform these systems to better serve children, youth, and families, and must prevent further instances of homelessness through eviction prevention and other efforts.

To truly address homelessness, lawmakers must adopt a holistic and coordinated approach. Poverty is inextricably linked to homelessness, yet policy makers often discuss and address these issues in different silos, as if children experiencing poverty and children experiencing homelessness are two completely separate populations.

While increasing access to affordable housing is critical to fighting homelessness, so is improving access to affordable child care, physical and mental health care, educational support for children, and other services.⁹ Families with children and young people on their own often become homeless due to traumatic experiences such as job loss, substance abuse, mental health issues, and domestic violence. Homelessness is both a symptom and a cause of trauma for children, youth, and families and access to trauma-informed services are critical to ensure that homeless children do not grow up to become homeless adults.

To do this, we urge Congress to:

11.1 Establish a new program within HHS to combat child, youth, and family homelessness

We recommend that the U.S. Department of Health and Human Services (HHS) create a new grant program to combat child, youth, and family homelessness. HHS oversees programs on early childhood, runaway and homeless youth, and other providers with a long history of working together at the intersection of these issues, making the agency a natural place to command and coordinate assistance to end the cycle of homelessness. This new program should:

- Establish a new funding stream through the agency’s Administration for Children and Families (ACF) to allocate funds directly to local agencies, housing authorities, education programs, legal service providers, and others who directly serve homeless children, youth, and families.
- Allow funds to be spent on support and prevention services that stabilize families and youth experiencing or at risk of homelessness, such as civil legal aid, housing assistance services, education support, and behavioral health and other services.
- Prioritize the allocation of funds to programs serving historically marginalized families of color, pregnant and parenting youth experiencing homelessness, children under age 6, and children with disabilities.

11.2 Reform federal homeless assistance

Most homeless children, youth, and families do not meet HUD’s narrow definition of homelessness and as a result, are not eligible to receive or even be assessed for HUD Homeless Assistance. This discrepancy forces millions of homeless children and youth to remain in dangerous living situations, and creates communities of hidden homeless children, youth, and families that are not competitive for public or private funding for assistance.

At the same time, these same children, youth, and families may be identified as homeless and highly vulnerable by other federal agencies, such as the Department of Education or HHS.

Congress must reform federal HUD homeless assistance and improve federal data as proposed in the bicameral, bipartisan Homeless Children and Youth Act (H.R. 6287/S. 1469), in the 117th Congress led Rep. Mikie Sherrill (D-NJ) and Sens. Dianne Feinstein (D-CA) and Tammy Baldwin (D-WI) and former Sen. Rob Portman (R-OH).

11.3 Establish a national renters tax credit

Median household rent increased 15% from 2021 to 2022 in the United States and that increase was even higher in many metro areas.¹⁰ Yet despite the great need for rental assistance, only 1-in-4 families who are eligible for rent assistance receive it.¹¹ Families with children represent a decreasing share of federal housing assistance beneficiaries¹² even though the majority of households on the waitlist (60%) are families with children.¹³ Even when families do obtain vouchers, they struggle to find landlords who will accept them. Voucher discrimination is compounded by racial discrimination.¹⁴

Creating a national renters tax credit, if properly designed and implemented, could help meet the need for housing assistance by delivering resources directly to the families who need them most. A renters tax credit should:

- Target low-income renter households
- Support families with children by adjusting for family size and inflation
- Reach families who lack a formal lease but are still paying rent or a motel bill
- Be large enough to relieve low-income families' housing cost burden
- Be delivered monthly as rent is due, and include the option for the credit to be adjusted quarterly to respond to fluctuations in household income or rent

Lawmakers should look to the lessons learned from the Internal Revenue Service's delivery of monthly Child Tax Credit payments in 2021 and build upon this effort. The Rent Relief Act (H.R. 8357/S. 4728), led by Rep. Danny Davis (D-IL) and Sen. Raphael Warnock (D-GA) in the 117th Congress, provides one design approach.

11.4 Establish national policy to prevent evictions

While pandemic-era moratoriums and emergency rental assistance likely helped to prevent millions of evictions in 2021,¹⁵ they also missed many families and their expiration — combined with rising rents — has led to increased evictions in many parts of the country.¹⁶ Evictions are particularly harmful for children, causing upheaval that negatively affects their health, education, and overall development.¹⁷ Households with children are evicted at much higher rates than those without children.

Relieving economic hardship for families would keep them from falling behind on rent, but more is needed to prevent evictions, including:

- Expanding access for civil legal services for tenants facing eviction through increased funding for the Legal Services Corporation and other measures
- Creating a permanent pot of emergency rental assistance that is available to families without formal leases
- Improving data on formal and informal evictions in the U.S. and creating more transparency around tenant screening reports

Lawmakers should look to the Eviction Crisis Act (S. 2182) from the 117th Congress, led by Sens. Michael Bennet (D-CO), Rob Portman (R-OH), Sherrod Brown (D-OH), and Todd Young (R-IN) and the Stable Families Act (H.R. 8327), led by Reps. Ritchie Torres (D-NY) and Jimmy Gomez (D-CA).

11.5 Increase funding for the Education for Homeless Children and Youth (EHCY) program

Additional funding for students experiencing homelessness has proven effective. The American Rescue Plan Act in 2021 included \$800 million for emergency education assistance for homeless students, which helped school districts identify, enroll, and support homeless students. Homeless student liaisons have used these flexible funds to provide wrap-around services to students and their families, covering expenses such as transportation to school, motel stays, and tutoring and other services.¹⁸ As student homelessness continues to rise, Congress must allocate another round of funding in Fiscal Year 2024 as well as a significant increase for Runaway and Homeless Youth Act programs.

11.6 Improve partnerships between housing authorities and other systems serving children

We urge Congress to improve collaboration between public housing authorities and other institutions serving children such as public schools, child care centers, and other facilities in order to support the healthy development of children in subsidized housing. Lawmakers must pass bills that incentivize these partnerships, such as the Build Housing with Care Act (H.R. 9375) led by Rep. Suzanne Bonamici (D-OR) in the 117th Congress and the Affordable Housing for Educational Achievement Demonstration (AHEAD) Act (S. 3011 in the 116th Congress) led by Sen. Patty Murray (D-WA).

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1. National Center for Homeless Education. "National Overview." Last visited January 11, 2023. <https://profiles.nche.seiservices.com/ConsolidatedStateProfile.aspx>.
2. "Early Childhood Homelessness State Profiles," U.S. Department of Education, 2021, <https://www2.ed.gov/rschstat/eval/disadv/homeless/earlychildhood-homelessness-state-profiles-2021.pdf>.
3. "Student Homelessness: Lessons from the Youth Risk Behavior Survey." SchoolHouse Connection. October 2021. <https://schoolhouseconnection.org/student-homelessness-lessons-from-the-youth-risk-behavior-survey-yrbs/>.
4. Beiner, Camila. "Homeless children and youth are wildly undercounted, advocates say." NPR WAMU 88.5. February 15, 2022. <https://www.npr.org/2022/02/15/1073791409/homeless-youth-and-children-are-wildly-undercounted-advocates-say>.
5. "Lost in the Masked Shuffle & Virtual Void: Children and Youth Experiencing Homelessness Amidst the Pandemic." SchoolHouse Connection & Poverty Solutions at the University of Michigan. November 2020. <https://schoolhouseconnection.org/lost-in-the-masked-shuffle-and-virtual-void/>.
6. Beiner, Camila. <https://www.npr.org/2022/02/15/1073791409/homeless-youth-and-children-are-wildly-undercounted-advocates-say>.
7. Wiltz, Teresa. "Coronavirus Eviction Rules Don't Always Help People in Motels." Pew Trusts Stateline. April 15, 2020. <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2020/04/15/coronavirus-eviction-rules-dont-always-help-people-in-motels>.
8. Ali, Safia Samee. "Homeless but Hidden, Some American Families are Disqualified from Crucial Aid." NBC News. December 18, 2020. <https://www.nbcnews.com/news/us-news/homeless-doubled-families-living-other-households-may-fall-aid-blind-n1251446>.
9. Bradshaw, Cara. "Establish a New Program within HHS to Combat Child, Youth, and Family Homelessness." First Focus on Children: Big Ideas 2023. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
10. Ellis, Tim. "Rental Market Tracker: Typical U.S. Rent Surpassed \$2,000 for First Time in May." Redfin News, June 9, 2022. <https://www.redfin.com/news/redfin-rental-report-may-2022/>.
11. "Policy Basics: Federal Rental Assistance." Center on Budget and Policy Priorities. Updated January 11, 2022. <https://www.cbpp.org/research/housing/federal-rental-assistance>.
12. Kingsley, G. Thomas. "Trends in Housing Problems and Federal Housing Assistance." Urban Institute. October 2017. <https://www.urban.org/sites/default/files/publication/94146/trends-in-housing-problems-and-federal-housing-assistance.pdf>.
13. "The Long Wait for a Home." National Low Income Housing Coalition, Housing Spotlight 6. no. 1, (Fall 2016). <https://nlihc.org/resource/housing-spotlight-volume-6-issue-1>.
14. Lindsay, Jay. "Discrimination, flawed search process hurting housing assistance recipients." Federal Reserve Bank of Boston. August 2019. <https://www.bostonfed.org/news-and-events/news/2019/08/housing-assistance-vouchers.aspx>.
15. Hepburn, Peter, Jin, Olivia, Fish, Joe, Lemmerman, Emily, Alexander, Anne Kat, and Desmond, Matthew. "Preliminary Analysis: Eviction Filing Patterns in 2021." Eviction Lab at Princeton University. March 8, 2022. <https://evictionlab.org/us-eviction-filing-patterns-2021/>.
16. Eviction Lab at Princeton University. "Tracking the Eviction Crisis." Last visited January 11, 2023. <https://evictionlab.org/eviction-tracking/>.
17. Desmond, Matthew, An, Weihua, Winkler, Richelle, and Ferriss, Thomas. "Evicting Children." Social Forces Volume 92, Issue 1. September 2013. https://scholar.harvard.edu/files/mdesmond/files/social_forces-2013-desmond-303-27.pdf.
18. "Progress and Promise: An Early Look at COVID Relief Funds for Children and Youth Experiencing Homelessness." SchoolHouse Connection. August 2022. <https://schoolhouseconnection.org/progress-and-promise-an-early-look-at-covid-relief-funds-for-children-and-youth-experiencing-homelessness/>.



SECTION 12

Make the Child Welfare System More Efficient, Equitable, and Safe

In 2020, the government took on a parental role for the 206,812 children and youth who entered foster care because a court found they were abused or neglected. In total, 631,686 children experienced at least one day in the government's care and custody in 2020.¹ The most common reasons for children entering foster care were neglect, substance abuse (parent), caretaker inability to cope, physical abuse, and inadequate housing. The express purpose of foster care is to provide the environment and services that children need to develop and heal while their parents address the issues that led to the placement. Once parents complete this task the children are supposed to reunify with their parents. Recent statistics indicate that approximately half of children who leave foster care are reunited with their parents or previous caregivers.² If parents do not make sufficient progress toward addressing the issues that led to the children being placed in foster care, then the child welfare agency is tasked with finding another permanent family for the children. In 2019 and 2020, one-in-four children were adopted out of foster care, and approximately one-in-six children were placed with a relative or guardian.³

The outcomes and experiences of children in foster care vary but it is clear that government agencies across the country struggle to provide the care that the children in their custody need. For example, in Washington state during Fiscal Year 2020, 220 youth in foster care spent a cumulative 1,863 nights in hotels or offices — an average of more than 8 nights per child — because the state could not provide a better placement.⁴ In July 2021, more than 400 children in foster care in Texas slept in hotels, offices, and other unlicensed settings for weeks at a time.⁵ In the fall of 2022, Maryland experienced a spike in foster youth overstaying their psychiatric visits resulting in foster youth being housed in unlicensed facilities. These experiences suggest that states are not living up to a basic standard. Foster children were placed in hotels, a commercial office building in downtown Baltimore and in some cases were left in emergency departments and other sections of hospitals even though they had no medical reason for being there. Each year 80-100 children in state custody in Maryland stay in medical facilities longer than needed, due to lack of placement options.⁶ Nationally, about 20,000 young people exit foster care each year without establishing a permanent legal relationship with an adult who can help them transition into adulthood. Only 70% of children who age out of foster care graduate high school in comparison to 85% of the general population.⁷ The impacts of the child welfare system and foster care are not doled out equitably. Child abuse and neglect investigations, foster care entrance rates and aging-out rates are higher for children of color or

children in families who live in poverty. Many of these statistics are better than in years past, but the outcomes are still unacceptable. Bipartisan leadership from the 118th Congress is needed to accelerate the positive transformation of the child welfare system.

Address the Conflation of Neglect and Poverty

One way that Congress can help make the child welfare system more efficient, equitable, and safe is by addressing the frequent conflation of neglect and poverty. Many people who notify authorities of possible abuse and neglect, possibly due to a lack of understanding or bias, report “neglect” when the root cause is poverty and a family’s lack of material resources. According to the research organization Child Trends, many states lack a specific exemption for poverty-induced deprivation in their definitions of child maltreatment, which leads to a higher probability that children from low-income families in these states will be reported, investigated, and substantiated for neglect. The presence of child poverty should not create a presumption that parents are neglectful and child welfare agencies should be able to connect families to material resources when it appears that a child is in need.⁸

Native American and Black children and families are particularly vulnerable to the conflation of poverty and neglect. They are disproportionately more likely to be reported to child protection services and to be investigated compared to white children and families. They are overrepresented in the child welfare system, and not necessarily because of a higher rate of abuse and neglect. Addressing the root causes of poverty and systemic socioeconomic inequities can help to ensure fairness for all children and families as well as the efficient use of child welfare resources.

In 2021, significant progress was made in reducing child poverty in the United States through the Child Tax Credit (CTC) enhancements made by the American Rescue Plan Act (ARPA). The CTC helped to decrease child poverty by more than 40% and prevented 3.7 million children from falling into poverty.⁹ The CTC had a significant impact on reducing poverty among Black and Hispanic children, many of whom previously did not receive the full credit.

The ARPA also included important landmark improvements to the Earned Income Tax Credit (EITC). The temporary EITC expansion nearly tripled the amount of the credit for low-income workers and broadened the eligibility age from 25 to 18 for foster youth and youth experiencing homelessness even while these young people are full-time students. These improvements likely benefited many transition-age youth and prevented millions of low-wage, childless workers from being taxed into poverty. The enhanced CTC reached nearly 40 million households with more than 65 million children, and the EITC improvements potentially benefited more than 17 million workers,¹⁰ including an estimated 380,000 to 500,000 former foster youth. The CTC and the EITC are among the most successful existing policies to reduce child poverty, and according to the 2021 Supplemental Poverty Measure (SPM), refundable tax credits (EITC, CTC and the Child and Dependent Care Tax Credit) lifted nearly 5 million children out of poverty.

Recent studies have shown that increasing EITC benefits leads to a decrease in child neglect reports. Many families investigated for child abuse or neglect earn less than 200% of the federal poverty line, highlighting the importance of programs like EITC in maltreatment reports.¹¹ However, the temporary nature of the tax credit enhancements caused nearly 4 million children to return to poverty in January 2022. Congress should continue the ARPA improvements of both the CTC and EITC to address child poverty and to reduce incidents of abuse and neglect.¹² See [*“Improve the Tax Code With Measures That Meet All Children’s Needs” on page 29 for more information.*](#)

Support the Foster Opportunity EITC Act

Foster youth aging out of the system lose access to services and support and often have poor outcomes. These young adults are more likely to experience behavioral, mental, and physical health issues, housing problems and homelessness, employment and academic difficulties, early parenthood, incarceration, and other potential lifelong adversities. Congress must build on the EITC’s success in bringing recipients into the labor market and reducing poverty by making permanent changes such as those in the Foster Opportunity EITC Act (H.R. 4954/S. 2790), introduced by Rep. Danny Davis (D-IL) and Sen. Bob Casey (D-PA) in the 116th Congress. The American Rescue Plan Act temporarily authorized similar provisions. The bill would expand eligibility to youth experiencing the foster care system and homelessness at age 18 (rather than age 25 under current law), even if they are full-time students. Making these EITC expansions permanent for childless workers and qualifying foster and homeless youth could benefit as many as a half-million youth who experience the foster care system.

Shed Light on the Hidden Foster Care System

The foster care system in many states also suffers from a lack of transparency, creating what is known as the “hidden foster care system.” The hidden foster care system refers to the practice of a child protection agency facilitating the change of physical and sometimes legal custody of a child to a relative or family friend (who is called a “kinship caregiver”) via suggestion, threat, or coercion toward the child’s parent or legal caregiver after the agency has received a report of allegations of child abuse or neglect. This practice does not involve child abuse court oversight or adherence to federal regulations or requirements, and families and caregivers in the hidden foster care system do not receive the same essential services or financial support as those in the formal foster care process.

The hidden foster care system poses no small challenge. Experts estimate that hundreds of thousands of children are in the U.S. hidden foster care system.¹³ These children and youth are forced to separate from their household after their parents or legal guardians are subjected to coercion, unregulated influence or pressure from local child protection agencies. They do not receive on-going safety visits from social workers. They are not guaranteed access to state medical insurance that offers coverage for trauma-responsive treatments. They are not assigned advocates to protect their rights and interests.

Many child protection workers have the best intentions when they tell parents to transfer their children’s custody to other relatives who might have a greater capacity to provide for or supervise their children. Workers likely believe they are sparing families involvement in a sub-functional child welfare system and that they are helping to keep their agencies’ caseload numbers lower. Data shows that the number of families in the formal foster care system have been decreasing for years. But what we don’t know and what no one has been deputized to examine is whether children are safer in hidden foster care than they were in their households of origin.

Numerous articles suggest that the children in hidden foster care are not alright. A 2022 investigation by *ProPublica* and *The New York Times*¹⁴ found that the scope of unjust family separation is even greater than any government agency has the data to comprehensively understand.¹⁵ The sudden role transition can place financial and emotional stress on the kinship provider, without the benefit of government aid and services.

An article in the *Stanford Law Review* found that “A key reason that the federal government has not implemented safeguards for concealed foster care is the disagreement among state child welfare agencies on whether the practice is driven by family decisions or facilitated by caseworkers.”¹⁶ Child welfare experts argue that if hidden foster care is a family issue, caseworkers should not be involved, but if it is a government placement, the agencies must fulfill their responsibilities such as providing payment to caregivers, ensuring safety, providing healthcare, and planning for the children’s return home, as with traditional foster care.

“In my case, the atmosphere of distrust created by CPS’s threat to remove the girls to foster care weakened the network that we had built in order to endure crises. Instead of being a part of the family’s safety net, I was seen as part of a surveillance system. Instead of being positioned to help reunite the children with their mother, the agency instructed me to not let the girls go home until she did what the agency said. As a new mother who is Black and aware that structural racism and individual bias have resulted in 53% of Black families being investigated by CPS and Black children being removed into foster care at an alarming and disproportionate rate, I felt pressured to follow CPS orders.”¹⁷

— Aubrey Edwards-Luce, VP of Child Welfare and Youth Justice, First Focus Campaign for Children

The means and responsibility to monitor and respond to the impact of this custodial change on the child’s physical, social, emotional, and educational well-being is splintered across the parents, the caregivers, and the government. No one is empowered, equipped, or consistently held accountable for meeting the child’s needs and our government has no process in place to ensure that the practice of hidden foster care is, at the very least, not causing more harm to children, youth, and families.

Identifying the challenges posed by hidden foster care will first require collecting data about how states have applied the practice, which will require partnerships with children, youth, and families to co-create information gathering processes and goals. A necessary first step will be to define kin caregivers. Most of the information currently available on the outcomes for children separated from their parents comes from broad subgroups of nonparental care, such as “foster care,” “kinship care,” “formal kinship care,” and “informal kinship care,” rather than from specific and clearly defined

groups.¹⁸ It is important to track and understand the characteristics of children who are disproportionately separated from their parents into nonparental care. This includes data on the number of children who can stay in their homes versus those who are physically separated and ensuring equitable access to resources for children in nonparental care as for children in other situations.

This information should all be made publicly available.¹⁹ Meaningful research on the different types of nonparental care families requires accurate data on subpopulations. This data will help identify the specific needs of each subpopulation and inform policies and practices that support the well-being and stability of these families.²⁰

Only after experts gather this data can the really hard work of establishing standards and accountability for hidden foster care begin. Advocates across multiple specialty areas have worked to identify some principles that could inform these standards.²¹ Most importantly, these standards must account for the variety of perspectives and experiences of children, caregivers, and parents. The standards must ensure that parents have input about their children's care and custody, and provide community-based support for kinship caregivers without fear of surveillance.

What the child welfare system needs from the 118th Congress:

12.1 Holistically educate the child's entire care team

To improve the child welfare system and create positive outcomes for foster youth, a personalized approach is necessary. Resources should be provided to educate caseworkers, foster parents, and community-based organizations on how to support foster youth and ensure their safety and well-being, including how to keep children in school, provide medical care, and maintain connections with family.

12.2 Improve mental health services and reduce reliance on congregate care

Youth with foster care experience have an expertise that policy makers must integrate into solutions to the problems that plague our child welfare system. Young people have done the hard work of educating Congress and advocates about the difficulty of obtaining the mental health care and healing that they needed while in foster care and the multifaceted harms they experienced in congregate care.

Advocates from the Congressional Coalition on Adoption Institute (CCAI) such as Angulina Wilson emphasize the risk of trauma and negative implications of foster care on the mental health and well-being of young people, even in high-quality foster care placements.²² Research supports the importance of nurturing guardians for children's well-being. Wilson recommends that caseworkers regularly conduct mental health and wellness check-ins and develop a rapid response plan to address the needs of all youth in foster care. They also suggest using Title IV-E training funds to train professionals, foster parents, prospective adoptive families, and legal guardians on trauma-informed support and helping youth connect with mental health resources.²³

Additionally, CCAI advocates urge increased investment in kinship care using Title IV-E foster care dollars to fund services and supports. The investment would aim to reduce reliance on congregate care. The advocates also call on states to ensure that all kinship families understand the full range of options and services available through the child welfare agency and in the community. The ultimate goal of the foster care system should be family reunification, not extension of foster care stays.²⁴

Solutions could include placing children with kin, recruiting foster families that match the child's needs, involving children and families in decisionmaking and providing them with adequate and accessible support during the decision-making

process, offering mental health education resources for foster parents, and offering rehabilitation therapy to families or kin caregivers. Many of these options could help reduce congregate care and give children the resources they need to return to a safe and stable home with their family.

12.3 Support the Indian Child Welfare Act

The bipartisan Strengthening Tribal Families Act of 2022 (H.R. 8954), led by Reps. Judy Chu (D-CA) and Don Bacon (R-NE) in the 117th Congress, would support the Indian Child Welfare Act (ICWA) and reduce the disproportionate representation of Native American children in the child welfare system. H.R. 8954 builds on the efforts of ICWA to keep or reunite Native American children with their families. Before ICWA, 25-35% of Native American children were removed from their homes and placed with adoptive families, foster care or institutions. However, despite ICWA, Native American young people and children are still disproportionately represented in the child welfare system at every stage.²⁵

Congress must pass the Strengthening Tribal Families Act and promote racial and cultural equity in the child welfare system and minimize trauma for native children removed from their homes. This legislation incorporates guidance and leadership from individuals with personal experience in the system and aims to enhance educational and occupational outcomes and strengthen community-based relationships. As the U.S. Supreme Court considers a challenge to ICWA, it is more important than ever to protect and strengthen ICWA, which has long been considered the gold standard for protecting the best interests of the child in custody cases.

12.4 Support youth transitioning to adulthood

For the past 20 years, states have been able to access federal funds through the John H. Chafee Program for Successful Transition to Adulthood to support young adults leaving foster care up to their 21st birthday. However, young people who have been in foster care continue to face challenges beyond that age. The Family First Prevention Services Act (FFPSA) of 2018 addresses this issue by allowing states to extend Chafee-funded services to age 23.²⁶

As detailed previously, foster youth aging out of the system often have poor outcomes and lose access to services and support offered through the foster care system. The pandemic had an acutely stressful impact on young adults with foster care experience, particularly in terms of employment, food security, and housing stability. Many of these young people reported losing their jobs, with a lack of unemployment benefits, and struggling to afford necessities such as food. They also reported difficulty accessing government stimulus, and many were forced to move or feared eviction. Many young people reported being on their own without any support from adults, and 15% reported difficulties accessing health care and obtaining medication.²⁷

Despite these vulnerabilities, older and former foster youth also have the potential to experience lifelong benefits from support and interventions during this period. For example, workforce skill development leads to career success as adults. Young people who are transitioning out of foster care need tailored policy responses to the numerous challenges that threaten their future success. They deserve programs that are supportive, youth accessible, rooted in community-involvement, and help them gain economic stability.²⁸

The Family First Prevention Services Act (FFPSA) amended Title IV-E programs to provide optional funding for time-limited prevention services aimed at mental health, substance use, and in-home parenting skills for children and youth at risk of entering foster care, pregnant or parenting youth in foster care, and their parents and kin caregivers. The Children's Bureau reviewed Title IV-E Prevention Services Plans submitted by interested states and Title IV-E-eligible tribes to ensure compliance with FFPSA requirements. As of January 12, 2023, 50 five-year plans for Title IV-E prevention programs have been submitted, with 39 plans approved.²⁹

First Focus Campaign for Children strongly urges Congressional leaders to reauthorize the Family First Prevention Services Act (FFPSA).³⁰ Priorities for reauthorization should include extending the Chafee Foster Care Independence Program, implementing developmental services for youth, and improving data collection on the outcomes of foster youth aging out of the system to enhance support for these individuals. These steps will offer deeper insight into the difficulties and hurdles faced by foster youth before transitioning to adulthood, and aid in addressing the most pressing concerns.

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1. U.S. Department of Health and Human Services, Administration for Children and Families "AFCARS." FY 2021. June 28, 2022. <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcars-report-29.pdf>.
2. "U.S. Adoption and Foster Care Statistics." Congressional Coalition on Adoption Institute. <https://www.ccaainstitute.org/resources/fact-sheets#:~:text=U.S.%20ADOPTION%20%26%20FOSTER%20CARE%20STATISTICS&text=Over%20113%2C000%20of%20these%20children,relative%3B%2025%25%20were%20adopted.>
3. "Foster Care Explained: What It Is, How It Can Be Improved." Annie E. Casey Foundation. Updated May 20, 2022. <https://www.aecf.org/blog/what-is-foster-care>.
4. Amon, Elizabeth. "Homeless and in Foster Care: Hundreds of Washington Youth Sleeping in Offices, Hotel Rooms and Even Cars." The Imprint. Oct. 1, 2020. <https://imprintnews.org/youth-homelessness/homeless-foster-care-washington-youth-sleeping-offices-hotels-cars/47889>.
5. Tiano, Sara. "Outside Experts Give Texas Roadmap to Decrease Sky-high Rates of Foster Kids Sleeping in Offices, Hotels." The Imprint. Jan. 12, 2022. <https://imprintnews.org/top-stories/texas-to-decrease-rate-of-foster-kids-sleeping-in-offices-hotels/61961>.
6. Umunna, Nonso. "Maryland Must Commit to Providing Safety and Stability for All Children in Foster Care." Maryland Center on Economic Policy: Maryland's Money Matters. November 1, 2022. <https://www.mdeconomy.org/maryland-must-commit-to-providing-safety-and-stability-for-all-children-in-foster-care/>
7. "Child Welfare and Foster Care Statistics." Annie E Casey Foundation: Fact Sheet. September 26, 2022. <https://www.aecf.org/blog/child-welfare-and-foster-care-statistics>; Kerr, Emma, and Kowarski, Ilana. "See High School Graduation Rates By State." U.S. News. April 26, 2022. <https://www.usnews.com/education/best-high-schools/articles/see-high-school-graduation-rates-by-state>.
8. Williams, Sarah Catherine, Dalela, Reva and Vandivere, Sharon. "In Defining Maltreatment, Nearly Half of States Do Not Specifically Exempt Families' Financial Inability to Provide." Child Trends. February 24, 2022. <https://www.childtrends.org/blog/in-defining-maltreatment-nearly-half-of-states-do-not-specifically-exempt-families-financial-inability-to-provide>.
9. Curran, Megan A. "Research Roundup of the Expanded Child Tax Credit (One Year On)." Center on Poverty and Social Policy at Columbia University. November 12, 2022. <https://static1.squarespace.com/static/610831a16c95260dbd68934a/t/63732dd8efcf0e5c76aea26e/1668492763484/Child-Tax-Credit-Research-Roundup-One-Year-On-CPSP-2022.pdf>.
10. "Fact Sheet: State-by-State Analysis of American Rescue Plan Tax Credits for Families and Workers." The White House. March 8, 2022. <https://www.whitehouse.gov/briefing-room/statements-releases/2022/03/08/fact-sheet-state-by-state-analysis-of-american-rescue-plan-tax-credits-for-families-and-workers/>.
11. Edwards-Luce, Aubrey and Baldari, Cara. "How Congress can reduce economic hardship & stabilize families now; Child Maltreatment and Poverty are Too Often Conflated." First Focus on Children. October 19, 2022. <https://firstfocus.org/blog/how-congress-can-reduce-economic-hardship-stabilize-families-now>
12. Edwards-Luce, Aubrey, Baldari, Cara, and Dallafior, Michelle. "One year ago, we proved that we know how to end child poverty — we can't stop now." First Focus Campaign for Children. March 24, 2022. <https://firstfocus.org/blog/one-year-ago-we-proved-that-we-know-how-to-end-child-poverty-we-cant-stop-now>.
13. Gupta Kagan, Josh. "America's Hidden Foster Care System." Stanford Law Review. Volume 72. April 2020. <https://review.law.stanford.edu/wp-content/uploads/sites/3/2020/04/Gupta-Kagan-72-Stan.-L.-Rev.-841.pdf>.
14. Presser, Lizzie. They Took Us Away From Each Other": Lost Inside America's Shadow Foster System." ProPublica. Dec 1, 2021. <https://www.propublica.org/article/they-took-us-away-from-each-other-lost-inside-americas-shadow-foster-system>.
15. Ibid.
16. Gupta Kagan, Josh. <https://review.law.stanford.edu/wp-content/uploads/sites/3/2020/04/Gupta-Kagan-72-Stan.-L.-Rev.-841.pdf>.
17. Edwards-Luce, Aubrey. "How Hidden Foster Care Harms Children and Parents of Color." The Imprint. July 7, 2022. <https://imprintnews.org/opinion/how-hidden-foster-care-harms-children-and-parents-of-color/66286>.
18. Calidendo, Ali. "Preventing Foster Care or Shifting the Burden?" Big Ideas 2023, pg. 60. January 27, 2023. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
19. Malm, Karin, Sepulveda, Kristin, and Abbott, Sam. "Variations in the use of kinship diversion among child welfare agencies." Child Trends. 2019. <https://www.childtrends.org/wp-content/uploads/2019/06/Variations-in-the-use-of-kinship-diversion-among-child-welfare-agencies.pdf>.
20. Calidendo, Ali. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>.
21. "Hidden Foster Care: Compelled Family Shadow Separations." United Family Advocates. Accessed January 25, 2022. <https://www.unitedfamilyadvocates.org/hidden-foster-care>.
22. Wilson, Angulina. "Foster Youth Internship Policy Report." Congressional Coalition on Adoption Institute. July 2022. <https://www.ccaainstitute.org/programs/view/foster-youth-internship-congressional-report>.
23. Ibid
24. Jones, Cortney. "Ensuring Children's Well-Being by Supporting Kinship Caregivers." Congressional Coalition on Adoption Institute. pg.17. July 2018. https://s3.amazonaws.com/ccai-website/CCAI_Report_2018_Web.pdf.
25. Fonesca, Felicia and Sherman, Mark. "Native child welfare law faces major Supreme Court challenge." AP News. November 7, 2022. <https://apnews.com/article/us-supreme-court-texas-race-and-ethnicity-africa-319ff13d4d5b45ee648aab2bb8ec361f>.
26. Brewsaugh, Katrina, Richardson, Audrey, and Loveless, Annelise. "State Approaches to Extending Chafee Services to Age 23." Urban Institute. September 14, 2021. <https://www.urban.org/research/publication/state-approaches-extending-chafee-services-age-23>.
27. Edwards-Luce, Aubrey. <https://imprintnews.org/opinion/how-hidden-foster-care-harms-children-and-parents-of-color/66286>.
28. Edwards-Luce, Aubrey. "Issue Brief: How Tax Credits Could Provide Transition-Age Youth Greater Financial Stability." First Focus on Children. January 21, 2022. <https://firstfocus.org/resources/fact-sheet-issue-brief-how-tax-credits-could-provide-transition-age-youth-greater-financial-stability>.
29. "Family First Prevention Services Act Celebrates 5 Years." U.S. Department of Health and Human Services, Office of the Administration for Children and Families, Children's Bureau Express. February 2023. Vol.24 <https://cbexpress.acf.hhs.gov/article/2023/february/-family-first-prevention-services-act-celebrates-5-years---/3bee65681b9465509e7ba97ae54bcb2a>.
30. "Title IV-E Prevention Program." U.S. Department of Health and Human Services, Office of the Administration for Children and Families. Last updated November 22, 2022. <https://www.acf.hhs.gov/cb/title-iv-e-prevention-program>.



SECTION 13

Advance Youth Justice with Trauma-Informed Responses

Throughout 2022, misinformation threatened youth justice reforms and fueled the public misperception that violent juvenile crime is on the rise. The nation's top juvenile justice official, Administrator Liz Ryan of the Department of Justice's Office of Juvenile Justice and Delinquency Prevention, has countered this narrative by urging the public and policy makers to examine the data, which shows that during the first year of the pandemic juvenile crimes such as murder, robbery, and aggravated assault all dropped the lowest levels ever recorded.¹

The myth of an uptick in juvenile crime has jeopardized bipartisan reforms already achieved and has added to the challenge of securing additional reforms. Instead of focusing political will on closing unsafe and ineffective youth prisons or making sure that kindergartners and first graders don't end up in zip-tie handcuffs in the back of squad cars, youth justice advocates are forced to spend time and resources fighting a battle they won years ago to protect children from being locked up in adult facilities.

The burden of the justice system's developmentally inappropriate responses does not weigh equally on all youth. Black youth, Hispanic youth, and youth with disabilities are disproportionately subjected to arrest, formal processing, detention, and confinement in comparison to white, non-Hispanic youth. Despite representing 14% of U.S. youth between the ages of 10 and 17, in 2020² Black youth accounted for 32% of the young people arrested that year.³ While the annual number of young people detained for delinquency offenses dropped by 40% between 2010 and 2019, the rate increased by 11.5% for Black youth, 14.3% for Latinx youth, and nearly 24% for Asian/Native Hawaiian/Pacific Islander youth.⁴

A two-year time lag in federal data on youth crime makes it impossible to speak definitively on youth violent crime trends in 2021 and 2022, but research has consistently shown that harsher punishments, pre-adjudication detention and longer sentences do not decrease youth criminal behavior. A growing body of research suggests most young people grow out of delinquent behavior.⁵ Culturally responsive, trauma-informed responses to youth delinquency and its associated risk factors are the tried-and-true measures that improve youth outcomes and public safety.

13.1 Prioritize youth in anti-trafficking efforts

In early 2023, Congress reauthorized the Trafficking Victims Protection Act, which funds programs to combat human trafficking both in the United States and abroad, through passage of the Trafficking Victims Prevention and Protection Reauthorization Act (S. 3949), led by Sens. Chuck Grassley (R-IA) and Dianne Feinstein (D-CA), and the Abolish Trafficking Reauthorization Act (S. 3946), led by Sens. John Cornyn (R-TX) and Amy Klobuchar (D-MN).⁶

First Focus Campaign for Children applauds the continuation of these critical anti-trafficking programs and efforts that prioritize assistance to youth trafficking victims, such as arming child welfare providers with funding and tools to combat the trafficking of foster youth.

We urge Congressional leaders to build on these efforts by passing “Sara’s Law,” as included in H.R. 5150 in the 117th Congress and to work to protect youth and young adults from trafficking and exploitation, and equip survivors with the necessary resources to rebuild their lives.

13.2 Pass the First Step Implementation Act

Trying children as adults does not enhance public safety and instead creates a pipeline for further incarceration. Research also indicates that as youth mature, they are significantly less likely to re-offend. Incarcerating children for long periods of time extends their imprisonment beyond the time required for rehabilitation, and it is not the best approach to help them reintegrate into society.⁷ Instead, policy makers must consider evidence-based alternatives such as diversion programs, restorative justice, and rehabilitation-focused youth facilities.

Sentencing youth as adults limits their opportunities to change their behavior and turn their lives around before reaching adulthood. Often, youth lack access to resources such as mentors, developmental programs, or therapeutic assistance before they reach adulthood, resulting in unnecessary long-term incarceration. To address this problem, it is essential that communities provide youth with early interventions and support services that can help them overcome the underlying issues that led to their involvement in the criminal justice system. This approach reduces recidivism and increases the chances of successful reintegration into society.

The First Step Act, enacted in 2018, seeks to improve the federal criminal justice system and prison conditions for federal inmates. However, the law’s implementation remains incomplete and it is facing challenges that threaten its operations.⁸ The bipartisan, bicameral First Step Implementation Act of 2021 (H.R. 3510/S. 1014) led by Reps. Hakeem Jeffries (D-NY), Don Bacon (R-NE), Jerry Nadler (D-NY), and Nancy Mace (R-SC) and Sens. Dick Durbin (D-IL) and Chuck Grassley (R-IA) in the 117th Congress, aims to address mandatory minimum sentences for youth by providing judges with more discretion in sentencing. The bill would also implement major reforms for people sentenced as youth, including the opportunity to have lengthy sentences reconsidered. It will allow courts to reduce sentences imposed for offenses committed under the age of 18 if the court determines that the person has served at least 20 years, is not a danger to anyone, and the interests of justice warrant a sentence modification.

Furthermore, the bill would be retroactive and would apply to people currently in prison as well as those sentenced in the future. Additionally, it would allow officials to seal juvenile delinquency adjudications, closing them from public viewing, and to expunge juvenile criminal records. This bill is a step in the right direction toward reducing the negative impact of mandatory minimum sentences on youth and giving them a chance to turn their lives around.⁹

13.3 Reauthorize and enhance the Juvenile Justice and Delinquency Prevention Act (JJDP A)

The United States does not have a centralized youth justice system, instead it has more than 56 separate systems operated by states, territories, the District of Columbia, and local governments. This situation leads to a wide range of policies and procedures, resulting in inconsistent outcomes for youth, families, and communities, including physical, mental, and emotional harm to youth. The Juvenile Justice and Delinquency Prevention Act (JJDP A) was reauthorized in 2018 with bipartisan support and it aims to protect children, youth, and families involved in the juvenile and criminal courts through federal standards for care and custody, while also ensuring community safety and preventing victimization. The JJDP A creates a federal-state partnership for the administration of juvenile justice and delinquency prevention through funding and support.¹⁰

JJDP A is once again up for reauthorization. Research has consistently shown that the juvenile justice system disproportionately affects youth of color. They are significantly more likely to be involved with the system at every decision point, from arrest to incarceration. Minority youth represented the majority of youth in placement between 1997 and 2017, with a range of 60% to 69% of the total. Black youth represented the highest proportion, accounting for 38% to 42% of the youth placement population.¹¹ This disparity highlights the need to address systemic racial bias and discrimination within the juvenile justice system and to implement policies and practices that tackle the root causes of this disproportionate impact on youth of color.¹²

To address the racial and ethnic disparities within the youth justice system, it is crucial to strengthen the core protections provided by the Juvenile Justice and Delinquency Prevention Act (JJDP A). The 2018 reauthorization of the JJDP A enhanced the states' requirements to address racial disparities, but the need still remains for Congress to pass the Reducing Racial and Ethnic Disparities in the Juvenile Justice System Act (H.R. 9579/S. 4398), led by Reps. Jason Crow (D-CO) and Frederica Wilson (D-FL) and Sens. Sheldon Whitehouse (D-RI), Elizabeth Warren (D-MA), Ed Markey (D-MA), Sherrod Brown (D-OH), Bernie Sanders (I-VT), Amy Klobuchar (D-MN), and Bob Casey (D-PA) in the 117th Congress.

This bill provides states with the necessary resources to improve data collection and analysis, promote authentic collaboration between different stakeholders, and develop community-based alternatives to detention. These steps can help reduce racial and ethnic disparities within the system and ensure that all youth have access to fair and equitable justice.

13.4 Encourage work opportunities for justice-involved youth

The Creating Pathways for Youth Employment Act (H.R. 3016/S. 1562), introduced in the 117th Congress by Rep. Robin Kelly (D-IL) and Sens. Dick Durbin (D-IL) and Tammy Duckworth (D-IL), aims to create grant programs for local governments and organizations to start or improve summer and year-round youth employment programs for disadvantaged youth ages 14-24, including those who are homeless, in foster care, involved in the youth or criminal justice system, or at risk of dropping out of school, and who live in underserved communities affected by trauma.¹³

We strongly support expanding the Work Opportunity Tax Credit (WOTC)¹⁴ to include hiring qualified foster care transition-age youth. The WOTC permits employers hiring individuals who are members of a targeted group to claim a tax credit equal to a portion of the wages paid to those individuals. Modeled on H.R. 3986, sponsored by Rep. Danny Davis (D-IL) in the 117th Congress, the WOTC would be expanded to employers who hire “qualified foster care transition youth.”

13.5 Improve conditions for confined youth and end restraints and seclusion

The use of restraints and seclusion in schools and congregate care settings, particularly against students with disabilities, children of color, and those in the child welfare system, harms their mental health and is ineffective in changing behavior. Congregate care refers to a type of living arrangement where individuals, often children and youth, live in a group setting such as a residential treatment center or group home. These practices in both school and congregate care settings can cause lasting traumatic experiences and lead to feelings of loss of dignity, degradation, fear, anxiety, disempowerment, decreased self-esteem, powerlessness, and hopelessness. The psychological trauma caused by these practices can result in negative behaviors and perpetuate a cycle of incarceration.

The moral tragedy is compounded when children, deemed at risk of harming themselves or others, become victims of institutional abuse in both schools and congregate care facilities. These places, meant to keep these children safe, instead expose them to further trauma and violence. This is a devastating outcome and underscores the critical need for reform in the way schools and congregate care facilities address problem behaviors. To mitigate these negative consequences, it is important for Congress to act.¹⁵

Congress can take a step toward positive change by passing the Keeping All Students Safe Act (H.R. 3474/S. 1858) in the 117th Congress, led by Rep. Don Beyer (D-VA) and Sen. Chris Murphy (D-CT) with a long list of co-sponsors in both chambers. This bill prohibits the use of seclusion, mechanical restraint, chemical restraint, and dangerous restraints that restrict breathing in schools, and aims to reduce the use of physical restraint. It is the duty of Congressional leaders and lawmakers to support this bill, which will protect children and students who are dealing with harsh environments, trauma-rooted behaviors, learning difficulties, confined settings, and past instances of abuse or neglect. The bill will help prevent further trauma for these children and ensure that they are able to learn and grow in a safe and supportive environment.

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1. Puzzanchera, Charles. "Trends in Youth Arrests for Violent Crimes." U.S. Department of Justice Office of Justice Programs. August 2022. <https://ojjdp.ojp.gov/publications/trends-in-youth-arrests.pdf>.
2. "Child population by race in the United States." Annie E. Casey Kids Count Data Center. <https://datacenter.kidscount.org/data/tables/103-child-population-by-race?loc=1&loc=2#detailed/1/any/false/574/68,69,67,12,70,66,71,72/423,424>.
3. "Arrests of Youth Declined Through 2020." U.S. Department of Justice Office of Juvenile Justice and Delinquency Prevention. https://www.ojjdp.gov/ojstatbb/snapshots/DataSnapshot_UCR2020.pdf.
4. Rovner, Joshua. "Too Many Locked Doors: the scope of youth confinement is vastly understated." The Sentencing Project. March 15 2022. <https://www.sentencingproject.org/reports/too-many-locked-doors-the-scope-of-youth-confinement-is-vastly-understated/>.
5. Steinberg, Laurence. "Adolescent Development and Juvenile Justice." Annual Review of Clinical Psychology, 2009, 5:1, 459-485. <https://www.annualreviews.org/doi/full/10.1146/annurev.clinpsy.032408.153603>.
6. McCoy, Sidney. "Fact Sheet: Trafficking Victims Prevention and Protection Reauthorization Acts (TVPPRA)." Shared Hope International. June 13, 2022. <https://sharedhope.org/2022/06/13/fact-sheet-trafficking-victims-prevention-and-protection-reauthorization-acts-tvppra/>.
7. "Youth Tried as Adults." Juvenile Law Center. Accessed February 27, 2023. <https://jlc.org/issues/youth-tried-adults>.
8. Grawert, Ames, Brooke-Eisen, Lauren, Wylie, Stephanie, and Kim, Noah. "Criminal Justice Reform Halfway Through the Biden Administration." Brennan Center for Justice. January 10, 2023. <https://www.brennancenter.org/our-work/analysis-opinion/criminal-justice-reform-halfway-through-biden-administration>.
9. "Bill Summary: First Step Implementation Act". Families Against Mandatory Minimums. Accessed January 27, 2023. <https://fammm.org/wp-content/uploads/First-Step-Implementation-Act-Summary.pdf>.
10. "What is the JJDP?" Act 4 Juvenile Justice. Accessed January 26, 2023. <http://www.act4jj.org/what-jjdp>.
11. Hockenberry, Sarah. "Juveniles in Residential Placement, 2017." U.S. Department of Justice Office of Justice Programs, Juvenile Justice Statistics: National Report Series Bulletin. June 2020. <https://ojjdp.ojp.gov/sites/g/files/xyckuh176/files/media/document/juveniles-in-residential-placement-2017.pdf>.
12. Wong, Anna. "How JJDP helps to Improve Outcomes for Youth of Color." National PTA. May 9, 2014. <https://onevoice.pta.org/how-the-jjdp-helps-to-improve-outcomes-for-youth-of-color/>.
13. "Durbin, Duckworth, Kelly, Introduce Bills to Increase Youth Employment Opportunities." Office of Senator Dick Durbin (D-IL), Press Statement. May 11, 2021. <https://www.durbin.senate.gov/newsroom/press-releases/durbin-duckworth-kelly-introduce-bills-to-increase-youth-employment-opportunities>.
14. "Work Opportunity Tax Credit." Internal Revenue Service. Last Accessed February 27, 2023. <https://www.irs.gov/businesses/small-businesses-self-employed/work-opportunity-tax-credit>.
15. Edwards-Luce, Aubrey. "Why Paris Hilton and I were at the Capitol yesterday." First Focus Campaign for Children. October 21, 2021. <https://firstfocus.org/blog/why-paris-hilton-and-i-were-at-the-capitol-yesterday>.



SECTION 14

Consider the “Best Interests of the Child” for All Immigration Policies

Children of immigrants and immigrant children represent the fastest growing group of American children,¹ and should have the same opportunities as their peers to live safe, healthy lives and reach their potential. Unfortunately, few circumstances for these children improved during the last Congress. Some families who experienced separation have been reunited and the Biden Administration has issued a new public charge rule that ensures children and families can access health care, nutrition assistance, education and other supports for which they are eligible without fear, but overall immigration policy remains very much the same. Nearly three years since the start of the COVID-19 pandemic, the U.S. government continues to expel children without an opportunity to seek protection at the border. Border policies continue to focus on deterrence through mistreatment and detention rather than on a welcome, orderly reception and due process. Children continue to experience family separation.² Children in immigrant families continue to have worse outcomes than their peers because of disparate access to federal benefits and instability where they or their parents lack immigration status. Although U.S. courts are likely to end the Deferred Action for Childhood Arrivals (DACA) program, the 117th Congress failed to protect Dreamers by offering a pathway to citizenship.

The United States must make the “best interest of the child” a mandatory consideration in immigration, both for individual decisions and in policy making.³ On the policy level, a “best interest” standard would demand legislation that ensures:

1. All children and families seeking protection from persecution and torture have access to a fair asylum system, family- and community-based placements, and comprehensive case management while they go through their immigration case
2. All children have due process for their immigration claim in the form of guaranteed legal representation and non-adversarial adjudication of their case
3. All children who need it are able to seek safe haven in the United States without fear that they will be returned to harm⁴
4. All children have access to health care, food assistance, housing assistance, and income support regardless of immigration status. Legislation should also eliminate the public charge test for those seeking to enter or remain in the United States.
5. All children of immigrants have family unity and stability that is ensured by a shift away from detention and deportation toward a child-focused approach to immigration and a fair and dignified pathway to citizenship for these children and their families.

14.1 Push the Biden Administration to prioritize children in Department of Homeland Security policy

In May 2022, Congress passed and President Biden signed the Homeland Security for Children Act, which requires the Department of Homeland Security (DHS) to consider the needs of children in policy planning and execution. We urge members of Congress to oversee the Administration's implementation of this legislation, and to insist on its timely submission of the one-year progress report required under the statute.⁵

14.2 Put children first in addressing the root causes of migration

The situations leading children and families to flee to the U.S. southern border start in their home countries and communities. Violence, extreme poverty, natural disasters, and discrimination against Indigenous, Afro-descendant, and other populations threaten the safety and well-being of children around the world, and particularly in the Western Hemisphere.⁶ Congress should ensure that the U.S. government makes child well-being a key priority and benchmark in its root causes strategy. This can be achieved through appropriations bills and report language.

14.3 Promote humane reception of children and families at the border

As a first step to ensuring a humane welcome for children and families seeking protection, the government must make sure that its consultation processes incorporate child well-being standards and that its workforce has expertise in child welfare and development. The Children's Safe Welcome Act of 2022 (H.R. 8349/S. 4529), sponsored by Sens. Jeff Merkley (D-OR), Kirsten Gillibrand (D-NY) and Dick Durbin (D-IL) and Rep. Karen Bass (D-CA) in the 117th Congress, outlines standards of care for the short-term custody of children and families by U.S. Customs and Border Protection (CBP) and ensures that qualified medical, mental health, and child welfare professionals are available at border facilities as first points of contact and consulted during the development of CBP policies. We urge Congress to mandate these requirements through appropriations bills. Congress also should ensure that legislation does not prolong the policy of expulsions under Title 42 or mandate any other policy that limits meaningful access to our asylum system.

14.4 Promote children's placement with families and in communities

The Biden Administration has ended the use of family detention as a policy. However, Congress still must enshrine in law this step forward to protect children from trauma and the negative developmental impacts of detention. The Freedom for Families Act of 2021 (H.R. 2925/S. 1517), sponsored by Sen. Jeff Merkley (D-OR) and Rep. Pramila Jayapal (D-WA) in the 117th Congress, prohibits family detention and ensures that experienced non-profit organizations operate case management programs. Case management programs for asylum-seeking children and families should be housed within the Department of Health and Human Services (HHS), which has expertise in similar programs for refugees.

The Biden Administration has indicated its intent to put forward regulations that would implement the 1997 Flores Settlement Agreement (FSA), which set national standards for the care and treatment of children in government custody. The Flores Settlement sets a presumption of release and requires children to be in the least restrictive setting in their best interests.⁷ We urge members of Congress to advance children's rights to liberty, family unity, and child-appropriate care

by commenting on the regulations, using the Children's Safe Welcome Act (which preserves and expands the protections granted to children in the FSA) as a template. Additionally, the PROKID Act of 2021 (H.R. 1238/S. 382), sponsored by Rep. Jayapal (D-WA) and Sen. Gillibrand (D-NY), establishes an independent ombudsperson within HHS to provide independent oversight to improve monitoring and compliance regarding children's care in government custody. We urge Congress to adopt and fund elements of both bills through appropriations processes. Congress should also increase funding for child advocate and post-release services for unaccompanied children to ensure children's best interests in and upon release from government custody.

14.5 Advance fair immigration proceedings for children

The Biden Administration's Fiscal Year (FY) 2023 Budget announced a mandatory program to provide legal representation for all unaccompanied children by FY 2027.⁸ Congress should pass authorizing legislation to advance that program. The Fair Day in Court for Kids Act of 2021 (S. 3108), sponsored by Sen. Mazie Hirono (D-HI) and the FAIR Proceedings Act (H.R. 9304/S. 901), introduced in the last Congress by Reps. Donald McEachin (D-VA) and Zoe Lofgren (D-CA) and Sen. Kirsten Gillibrand (D-NY), ensure that unaccompanied children seeking protection in the United States are guaranteed legal counsel in their immigration proceedings. The bills also provide government-funded legal representation for children in families. To support these goals, we urge Congress to increase funding for legal representation through HHS and the Department of Justice Executive Office of Immigration Review (EOIR).

14.6 Strengthen access to legal protections for children

As a step toward ensuring all children who have experienced harm in their home country have access to protection, Congress should reform Special Immigrant Juvenile Status. The Protect Vulnerable Immigrant Youth Act (H.R. 7867), introduced by Reps. Jimmy Gomez (D-CA), Zoe Lofgren (D-CA), and Adriano Espaillat (D-NY) in the 117th Congress, would expand access to Special Immigrant Juvenile Status for children who have experienced abuse, neglect or abandonment by exempting the status from worldwide and employment-based numerical limits on visas.

14.7 Keep families together

There is strong bipartisan support for maintaining the unity of immigrant families, particularly in response to the Trump Administration's family separation policy. The Families Belong Together Act (H.R. 2766/S. 1375), sponsored by Rep. Joaquin Castro (D-TX) and Sen. Richard Blumenthal (D-CT) during the 117th Congress, provides a path to permanent legal status and thus, stability, for families intentionally separated at the border under the Zero Tolerance policy. The Children's Safe Welcome Act would prohibit the removal of children from their parents at the border unless there is documentation by a child protection professional that continued custody poses a serious risk of harm to the child. The legislation also ensures that children are kept together with other loving adult caregivers while retaining their "unaccompanied" designation.

Additionally, legislation should codify the long-standing policy of U.S. Immigration and Customs Enforcement (ICE)⁹ to ensure family unity where a caregiver faces immigration enforcement. Together, the Humane Enforcement and Legal Protections (HELP) for Separated Children Act of 2019 (H.R. 3451) and the Help Separated Families Act of 2019 (H.R. 3452), introduced by Rep. Lucille Roybal-Allard (D-CA) in the 116th Congress, would ensure that ICE and state child welfare agencies consider children's best interests in all decisions regarding their parent's detention, release, and deportation, and in all family court proceedings. Legislation should also ensure that immigration judges consider the best interest of children when adjudicating the possible removal of parents or caregivers.

14.8 Expand access to benefits for children's health and well-being

As a step toward ensuring that all children have access to health care, food assistance, education, and income supports regardless of their immigration status, Congress should pass the LIFT the BAR Act (H.R. 5227/S. 4311), introduced in the last Congress by Rep. Pramila Jayapal (D-WA) and Sen. Mazie Hirono (D-HI). The bill expands the definition of “qualified” immigrants for the purposes of federal benefits and eliminates the five-year waiting period for lawfully present immigrants to access federal benefits like Medicaid, the Children's Health Insurance Program, the Supplemental Nutrition Assistance Program, and housing assistance. Similarly, the HEAL for Immigrant Families Act of 2021 (H.R. 3149/S. 1660), introduced by Reps. Jayapal and Nanette Barragán (D-CA) and Sen. Cory Booker (D-NJ), would provide immigrants access to health coverage under the Affordable Care Act regardless of their status. Additionally, legislation should restore the long-standing access to the Child Tax Credit for holders of Individual Taxpayer Identification Numbers (ITIN).

See “Recommendation 5.1: Establish a national child poverty reduction target” on page 38; “Recommendation 6.5: Invest in comprehensive solutions that ensure equitable health care for communities that have been historically excluded and neglected” on page 48; “Build on Lessons of the Pandemic to End Child Hunger and Improve Nutrition” on page 63; and “Improve the Tax Code With Measures That Meet All Children's Needs” on page 29 for more information.

14.9 Advance immigration relief for children and their families

Several bills grant a pathway to citizenship for various populations of undocumented immigrants, and all of them have bipartisan support. The American Dream and Promise Act of 2021 (H.R. 6), sponsored by Reps. Yvette Clarke (D-NY), Lucille Roybal-Allard (D-CA), Rep. Nydia Velázquez (D-NY) and which provides a pathway to citizenship for Dreamers and recipients of Temporary Protected Status (TPS), passed the House in the 117th Congress with bipartisan support, and is particularly important in light of ongoing litigation threatening to end the DACA program.¹⁰ The Farm Workforce Modernization Act of 2021 (H.R. 1603), sponsored by Reps. Zoe Lofgren (D-CA) and Dan Newhouse (R-WA) also passed the House in the 117th Congress, and would provide a pathway to citizenship to immigrant farmworkers. Members of Congress should also encourage the Biden Administration to use the statutory authority of TPS for countries that meet the criteria and where children, families, and individuals are likely to experience harm.

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1. “Children in U.S. immigrant Families.” Migration Policy Institute. <https://www.migrationpolicy.org/programs/data-hub/charts/children-immigrant-families?width=1000&height=850&iframe=true>. Accessed Apr. 19, 2021.
2. Washington, John and Brigida, Anna-Catherine, “Biden is Still Separating Immigrant Kids from Their Families.” Texas Observer: November 21, 2022. <https://www.texasobserver.org/the-biden-administration-is-still-separating-kids-from-their-families/>.
3. Nagda, Jennifer and Woltjen, Maria. “Best Interests of the Child Standard: Bringing Common Sense to Immigration Decisions,” Big Ideas 2015 – Pioneering Change: Innovative Ideas for Children and Families. March, 11, 2015. <https://firstfocus.org/wp-content/uploads/2015/04/Best-Interests-of-the-Child-Standard.pdf>.
4. “Reimagining Children's Immigration Proceedings: A Roadmap for an Entirely New System Centered Around Children.” Young Center for Immigrant Children's Rights. Oct. 2020. <https://www.theyoungcenter.org/reimagining-childrens-immigration-proceedings>.
5. “Joint Letter: DHS, Implement the Homeland Security for Children Act.” First Focus on Children. June 21, 2022. <https://firstfocus.org/resources/letters-and-correspondence/joint-letter-dhs-implement-the-homeland-security-for-children-act>.
6. “Central American Migration: Root Causes and U.S. Policy.” Congressional Research Service. December 12, 2022. <https://crsreports.congress.gov/product/pdf/IF/IF11151>.
7. “Unaccompanied Children Program Foundational Rule.” Office of Information and Regulatory Affairs, Office of Management and Budget. Last accessed November 30, 2022. <https://www.reginfo.gov/public/do/eAgendaViewRule?publd=202204&RIN=0970-AC93>.
8. “FY2023 Justification of Estimates for Appropriations Committees.” Administration for Children and Families, Department of Health and Human Services. Last accessed November 30, 2022. <https://www.acf.hhs.gov/sites/default/files/documents/olab/fy-2023-congressional-justification.pdf>.
9. “ICE Detained Parents Directive.” U.S. Immigration and Customs Enforcement. October 13, 2022. <https://www.ice.gov/detain/parental-interest>.
10. “Kids and Families Need a Pathway to Citizenship for DACA Recipients and Undocumented Youth.” Children Thrive Action Network. November 2022. <https://secureservercdn.net/45.40.150.109/kpc.cec.myftpupload.com/wp-content/uploads/2022/11/DACA-Factsheet-2.pdf>.



SECTION 15

Address the “Confluence of Challenges” Threatening Children Around the World

COVID. Conflict. Climate. These and other global crises have upended the lives of children and youth around the world, making it harder than ever for them to thrive and reach their full potential. In under-resourced parts of the world, this confluence of challenges is undermining decades of progress to improve children’s health and well-being.¹

- More than 10 million children have lost a parent or caregiver to COVID.²
- An estimated 128 million primary- and secondary-school-age children and youth do not attend school due to conflict or crisis.³
- 80% of the world’s children fear sexual abuse or exploitation online.⁴
- Approximately 1 billion children live in countries that are at extremely high risk for the impacts of climate change.⁵
- Worldwide, more than 2.2 million children in refugee-hosting countries need humanitarian assistance.⁶

The United States spent just 0.10% of its entire budget on children abroad in Fiscal Year 2022.⁷ The Consolidated Appropriations Act, 2023 includes some increases in the 24 foreign assistance accounts that benefit children and youth.⁸ This is good news. However, children still receive just a sliver of the U.S. budget. Congress must increase investments to counteract the many challenges young people around the world face.

Children make up one-third of the world’s population — and up to half the population in some countries — yet they remain an afterthought in U.S. foreign policy and assistance. Without a robust whole-of-government strategy and focus on children internationally, their health and well-being will continue to falter. In addition to increasing foreign assistance for children, we urge Congress to center children’s needs in foreign policy and program development by using child impact statements, ensuring leadership at the highest levels of internationally-focused federal agencies, and supporting regular cross-agency coordination.

To do this, we urge Congress to:

15.1 Improve mechanisms to track international funding and program outcomes

We were pleased to see report language in the Consolidated Appropriations Act, 2023 to track spending on international youth programs. We urge Congress to include this language in future appropriations bills and to clearly mandate tracking and data disaggregation across age, particularly for children and youth ages 0-18.

15.2 Reintroduce and pass legislation that addresses the holistic and developmental needs of children around the globe

Legislation includes but is not limited to:

- **Mental health:** MINDS Act (H.R. 3988/S. 2105, 117th Congress)
- **Education:** Global Learning Loss Assessment Act (H.R. 1500/S. 552, 117th Congress), Keeping Girls in School Act (H.R. 4134/S. 2276, 117th Congress), READ Act Reauthorization Act (S. 3938) which has been reintroduced in the 118th Congress by Sens. Dick Durbin (R-IL) and Marco Rubio (R-FL).
- **Equity:** The International Children with Disabilities Protection Act (S. 4982, 117th Congress)

15.3 Urgently reauthorize the President's Emergency Plan for AIDS Relief (PEPFAR)

In addition to reauthorizing PEPFAR, which expires this year, Congress must ensure that at least 10% of the investment be spent on orphans and vulnerable children.⁹

15.4 Fund education in emergency settings

This funding would aid the 36.5 million students who are displaced by crises and conflict around the world.¹⁰

15.5 Support and encourage renewal of the Advancing Protection and Care for Children in Adversity (APCCA) Strategy

The APCCA strategy has been instrumental in informing policies and programs for the world's most vulnerable children.¹¹

Congress has invested in programs and laws that have helped improve children's health, well-being, safety, and education around the world. Martin Luther King, Jr. said, "Now let us rededicate ourselves to the long and bitter, but beautiful, struggle for a new world." We urge Congress to rededicate its efforts to continue gains for children here and abroad.

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1. A Generation at Stake. Accessed January 10, 2023. <https://agenerationatstake.org>
2. COVID-19 Orphanhood. Imperial College of London. Accessed August 20, 2022. https://imperialcollegelondon.github.io/orphanhood_calculator/#/country/Global
3. Global Partnership for Education, "Education in Crisis Situations," 2022, <https://www.globalpartnership.org/what-we-do/education-crisis>
4. Sexual Exploitation Analysis. NCMEC. Accessed August 20, 2022. <https://www.missingkids.org/ourwork/ncmecdata#sexualexploitationanalysis>
5. The Climate Crisis is a Child Rights Crisis: Introducing the Children's Climate Risk Index. New York: United Nations Children's Fund (UNICEF), 2021. <https://www.unicef.org/media/105376/file/UNICEF-climate-crisis-child-rights-crisis.pdf>
6. Falk, Pamela. After Nearly 100 Days of war, two out of three children in Ukraine are displaced. CBS News. June 1, 2022. <https://www.cbsnews.com/news/ukraine-children-displaced-100-days-war/>
7. Children's Budget 2022. First Focus on Children. 2022. <https://firstfocus.org/resources/report/childrens-budget-2022>
8. "Consolidated Appropriations Act, 2023" Accessed January 20, 2023. <https://www.congress.gov/117/bills/hr2617/BILLS-117hr2617enr.pdf>
9. Moss, K and Kates, J. "PEPFAR Reauthorization: Side-by-Side of Legislation Over Time." August 18, 2022. <https://www.kff.org/global-health-policy/issue-brief/pepfar-reauthorization-side-by-side-of-existing-and-proposed-legislation/>
10. Anton Lopez, P., Loos, K., Peña, S. and Rigg, J. "Investing in Learners Every Step of the Way: Financing Education in Emergencies" Big Ideas. First Focus on Children. 2023. <https://firstfocus.org/wp-content/uploads/2022/12/BigIdeas2023.pdf>
11. "Advancing Protection and Care for Children in Adversity: A U.S. Government Strategy for International Assistance 2019-2023." Accessed January 15, 2023. <https://www.childreninadversity.gov/wp-content/uploads/2021/08/apcca-strategy-final-web.pdf>

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