Most people would agree that children are our future. But advocates for children also know another painful truth: policymakers responsible for funding children’s health and education programs are not walking the walk.

By failing to adequately invest in children’s programs, our society is risking the future of the next generation. We should be doing more to address threats that are in plain view and are so often reflected in a drumbeat of recent headlines.

Center for Child Advocacy
Here are just a few:

**Mental health problems rise significantly among young Americans**
The Washington Post (March 16, 2019).

**CDC: Childhood trauma is a public health issue and we can do more to prevent it** – NPR (Nov. 5, 2019).

**Nation’s youngest children lose health coverage at an alarming rate**
Georgetown University Health Policy Institute (Dec. 9, 2019).

**We know we can cut child poverty in half, so why aren’t we?**
First Focus on Children (Sept. 10, 2019).

These headlines all relate in some way to what we know as the social determinants of health. We hear a lot about the social determinants of health these days, and for good reason. This phrase refers to the social, economic and environmental conditions that can drive as much as 80% of health outcomes. The threats affecting our children include:

- Poverty
- Unsafe housing and neighborhoods
- Food insecurity
- Adverse childhood events, including abuse and neglect
- Inadequate funding for education
- Growing rates of illiteracy
- Fewer children covered by health insurance
- Discrimination and inequality

Many people in health care, academia and child advocacy are well aware of the importance of the social determinants of health. But the message has not gotten through sufficiently to policymakers or the public. People often think that good health is only about medical care, genes and lifestyle. We know it’s much more complicated than that. Despite all the progress we’ve made in pediatric medicine, we know that early life experiences and conditions have a profound effect on long-term physical and mental health.
Economic, environmental and social conditions affect a broad range of health issues and life expectancy. Some years ago, PBS broadcast a documentary series called “Unnatural Causes” that raised awareness about how closely health and life expectancy correlate people’s incomes and where they live and work.

A summary of this excellent series puts it succinctly: “The social, economic and physical environments in which we are born, live and work profoundly affect our longevity and health – as much as smoking, diet and exercise.”

Along the same lines, the Center for Community Solutions in Cleveland has a new report showing Ohioans living in poor neighborhoods and in areas where the population is mostly black have shorter life expectancies. The headline reads, “The poorer your neighborhood, the shorter your life.”

The fact that overall U.S. life expectancy declined during the three-year period from 2015 to 2017 is a flashing warning sign that something has gone wrong in our society.

We must focus in the 2020s on addressing the mounting threats to children’s health, increasing public awareness and seeking solutions. In 2019, we launched the Akron Children’s Hospital Center for Child Advocacy with a goal of creating a policy action plan. As I said then, the United States needs a comprehensive investment strategy in children’s health care to meet the challenges ahead.

I propose making the 2020s the Decade of the Child. We must continue pushing for a transformational plan to promote initiatives that address the societal threats affecting our children. This plan has to bridge all segments of society. We applaud progress at the state level, as exemplified by Ohio Gov. Mike DeWine’s 2020 budget, which included new funding for children’s programs. But there remains much work to do across the country.

Poverty

Many adverse conditions related to the social determinants of health can be tied to poverty. About one in six children live in poverty in our country, and children of color accounted for three-fourths of all poor children in 2018, according to the Children's Defense Fund.

Impoverished children are more likely to lack nutrition, health care, safe homes and the ability to read by third grade. Based on data collected by Akron Children’s Hospital’s Population Health department, patient families reporting housing instability had a no-show rate for doctor visits that was nearly 50% higher than similar families matched on their child’s age, zip code and insurance. The top needs for many of these families are securing adequate food and housing.
How important is housing to health? A study published in December 2019 by the Journal of the American Medical Association adds to our understanding. The study of 4,604 families by the Johns Hopkins University School of Medicine found that children who moved out of high-poverty neighborhoods had significantly fewer hospital admissions.

Take a look at the Healthy People 2020 objectives from the U.S Department of Health and Human Services. You will see how virtually all the key areas are tied to poverty: economic stability, literacy, early childhood education, discrimination, crime, environmental conditions and access to health care.

We are slipping behind or failing to make progress in so many areas. The number of uninsured children in the United States increased by 425,000 in 2018, according to U.S. Census data. This is an alarming trend. We were making good progress increasing insurance coverage and improving access to health care. The Affordable Care Act helped decrease the rate of uninsured children to a historic low near 5%. But now we face renewed threats to the ACA and Medicaid. It’s important to note that Medicaid and CHIP (Children’s Health Insurance Program) provide health care coverage for half of the nation’s 74 million children.

Continued advocacy for Medicaid and the ACA is a high priority as we head into this year’s election. Our children deserve more comprehensive, preventive, accessible and affordable health care coverage, not less.

Mental health challenges

Our children and teens are beset by increasing levels of anxiety and depression. In our 2019 Community Health Needs Assessment, Akron Children’s Hospital identified mental health/adverse childhood experiences as a top public health priority for children in our region, along with infant mortality and asthma.

Suicide is now the second-leading cause of death among adolescents. In 2017, there were 47% more suicides among teens 15-19 years of age as there were in 2000.

In some children, behavioral health issues are linked to adverse childhood experiences. These experiences may include abuse, neglect, household instability, food insecurity, parental substance abuse or parental imprisonment.

We are constantly learning more about the long-term impact of childhood trauma. New evidence emerged in a November 2019 U.S. Centers for Disease Control and Prevention report that associated adverse childhood experiences with 14 negative outcomes. Based on data from more than 144,000 adults, the analysis estimates that preventing adverse
experiences could reduce up to 21 million cases of depression and 1.9 million cases of heart disease. Adults reporting the highest level of adverse childhood experiences had increased odds for smoking, heavy drinking, chronic health problems and depression.

We need look no further than our southern border to get a real-time sense of the effect of trauma on vulnerable children. The words and images we have seen in news reports are chilling. This passage from a Washington Post story (June 18, 2018) describes what happens to a child forcibly separated from a parent:

Their heart rate goes up. Their body releases a flood of stress hormones such as cortisol and adrenaline. Those stress hormones can start killing off dendrites — the little branches in brain cells that transmit messages. In time, the stress can start killing off neurons and — especially in young children — wreaking dramatic and long-term damage, both psychologically and to the physical structure of the brain.

“The effect is catastrophic,” said Charles Nelson, a pediatrics professor at Harvard Medical School. “There’s so much research on this that if people paid attention at all to the science, they would never do this.”

While most children in the country are not forcibly separated from their parents, the situation at our border is a poignant reminder of what can happen to children when they are subjected to ongoing traumatic stress.

Solutions will not be easy, but health care providers, schools and all of us who care about children must make it a priority to identify those at risk. We need schools, counselors, providers and family services to help these children so they can fulfill their potential and grow into the healthy, productive adults we need to carry our nation forward.

Getting our message across

As child advocates, we must work together to address these problems. We need to pay attention to how we talk about these issues, and it’s important for us to get our messaging right and speak with a unified voice.

By that, I mean we must make the social determinants of health relatable. The Robert Wood Johnson Foundation conducted extensive communications research on this phrase and found it doesn't resonate with people. A more effective framing is to simply state that,
“good health begins in the places we live, learn, work and play.” The foundation’s report – “A New Way to Talk About the Social Determinants of Health” – came out a decade ago and is still highly relevant.

We also need to make it personal. Let’s show the human stories behind these issues. We have at our disposal an abundance of statistics reflecting society’s failure to make children’s health a priority. Storytelling is a powerful way to illustrate these points – to show the problem in human terms rather than just stating the facts. The truth is, people forget facts, but they remember stories.

How we communicate the needs of children is critical to making an impact so we can reverse these troubling trends in public funding. The share of our federal budget devoted to children has fallen, and this dangerous slide is projected to continue. As I’ve shared before, the percentage of our federal dollars spent on children has declined to an all-time low of 7.2%, according to First Focus on Children, a bipartisan advocacy organization. Under the proposed 2020 White House budget, it would fall further to just 6.45%. We are facing a funding crisis as a growing share of the budget goes to paying interest on the national debt, mandatory spending for Social Security, Medicare and Medicaid, and other discretionary spending.

Military spending represents about 17% of the overall budget, according to the Congressional Budget Office. As the key to our nation’s future, we should place a similar priority on spending for children’s programs. In fact, the investment needed for children’s programs would be a small fraction of the military budget, but the return would be significant.

So, please join with me to make 2020 the start of the Decade of the Child and let’s work together to secure their future. What would be your dream for our children in the coming decade?

As I was thinking about that question, the Celine Dion song, “The Power of the Dream,” came to mind. These lyrics speak about the power of the human spirit.

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*Deep within each heart*
*There lies a magic spark*
*That lights the fire of our imagination*
*And since the dawn of man*
*The strength of just “I can”*
*Has brought together people of all nations.*
We, as people who care about children, can ignite that magic spark and embrace a “we can” attitude to support them. That attitude must lead to specific, child-focused policies that address the social determinants of health.

Eleanor Roosevelt once said, “To handle yourself, use your head; to handle others, use your heart.” It’s time for us to use our hearts and minds to craft public policies dedicated to furthering the best interests of our children and then follow through to ensure their implementation.

If 2020 is to be the start of the Decade of the Child, what will you do to make a difference?

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Resources:


