***Decade of the Child***

**An Action Plan to Improve Health and**

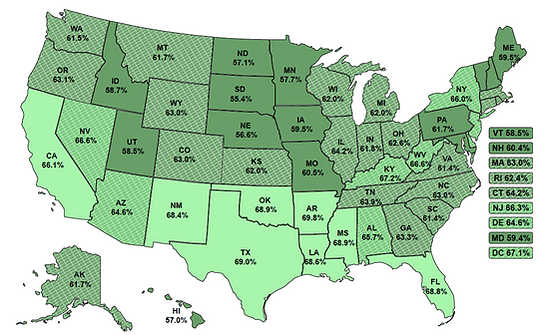
**Wellbeing of Our Nation's Children**

Child development experts, national and community organizations, federal and state agencies, foundations, research institutions, and individuals with lived experience request that Congress officially proclaim the next 10 years the [***Decade of the Child***](https://www.npscoalition.org/projects/decade-of-the-child). This proclamation is intended to impel a shift to a national strategy that prioritizes the health, safety, and wellbeingof our children.

***How Our Children Fare Today***

[Americans care](https://pmc.ncbi.nlm.nih.gov/articles/PMC11437383/) about the nation’s nearly 74 million children and youth. [They also recognize the urgent need](https://pubmed.ncbi.nlm.nih.gov/28919574) to address children's challenges to their [healthy development and wellbeing](https://pmc.ncbi.nlm.nih.gov/articles/PMC11437383/).

Yet, despite our collective commitment to children and vast array of available health and educational resources for children and families, statistics reflecting the state of their health and wellbeing are sobering. Nearly [two-thirds of America’s children and youth](https://www.academicpedsjnl.net/article/S1876-2859(21)00616-1/fulltext#:~:text=The%20Integrated%20Child%20Risk%20Index%20assesses%20the,equity%20and%20establish%20integrated%20systems%20of%20care) experience physical, mental, and/or social health problems and risks that threaten their daily functioning, development, and lifelong health. [Fewer than half of our young children](https://pmc.ncbi.nlm.nih.gov/articles/PMC10947794/) are ready for school, less than one-third of fourth graders are proficient in reading, nearly half of youth report feeling [hopeless about their future](https://pmc.ncbi.nlm.nih.gov/articles/PMC9955315/), and firearm-related violence, suicides, and accidents are now the [number one killer of children](https://publichealth.jhu.edu/2024/guns-remain-leading-cause-of-death-for-children-and-teens).



State Specific Prevalence of US Children Aged 0-17 Years Who Experience One or More Complex Physical, Mental, Development or Social Health Conditions and/or Risks. Data source: 2022-2023 National Survey of Children’s Health. Analysis by the Child and Adolescent Health Measurement Initiative, Johns Hopkins University

These problems are not new. The U.S. has persistently [ranked at the bottom of developed countries](https://pmc.ncbi.nlm.nih.gov/articles/PMC7654125/) across many measures of child wellbeing, as well as high rates of infant mortality, mental and physical illnesses, obesity, asthma, unmet needs for healthy food, and unsafe environments. These troubling trends diminish our greatness as a nation – a nation that is inescapably dependent upon the wellbeing, resilience, creativity, and positive engagement of our children and the adults they will become. Alarmingly, gaps in youth wellbeing also diminish the nation’s ability to establish a robust workforce and [military](https://prod-media.asvabprogram.com/CEP_PDF_Contents/Qualified_Military_Available.pdf).

The good news is that we already know what children need to thrive and, fortunately, [solutions are at hand](https://nap.nationalacademies.org/catalog/25201/fostering-healthy-mental-emotional-and-behavioral-development-in-children-and-youth). Decades of scientific research have informed [sound recommendations](https://nap.nationalacademies.org/catalog/27835/launching-lifelong-health-by-improving-health-care-for-children-youth-and-families) for advancing evidence-based policies and practices that promote health and prevent many of the problems children and youth currently experience. Solutions require transformational change in how we think about and invest in strategies that work by building strong families and communities capable of supporting the many vital needs children enter the world with—such as physical growth, meeting developmental milestones, quality childcare and education, and healthy relationships with supportive adults— known as “[whole child health](https://www.nemours.org/content/dam/nemours/nemours-org/en/documents/whole-child-health-alliance-key-elements.pdf).”

***Scientific Foundations for this Proclamation: Decade of the Brain 1990-1999***

President George Bush declared the 1990s the Decade of the Brain. The declaration stated, “…to enhance public awareness of the benefits to be derived from brain research” and to encourage discussions across disciplines and with the public about the knowledge gained to benefit the public’s health (<https://www.loc.gov/loc/brain/>).

The proclamation was followed by the B.R.A.I.N. (Brain Research through Advancing Innovative Neurotechnologies) Initiative launched by President Obama. Advances that resulted included the development of artificial intelligence, enhanced research tools to improve our understanding of brain functioning, and a greater number of neuroscientists working to develop more effective treatments of brain disorders,

such as Alzheimer’s and Parkinson’s diseases (Goldstein, 1994; Laws, 2000).

**The Decade of the Brain established the scientific foundation for the *Decade of the Child*, which, with congressional endorsement, will ensure our nation’s health, prosperity, and welfare.**The state of the nation’s children—our greatest natural resource—must become a national priority. Making our children the nation’s number 1 priority into civic goals and public policies is vital to improving population health, gaining greater value for health care expenditures, reducing health disparities, and strengthening our workforce.Our social and economic progress depends on investments that ensure all children can have good health, wellbeing, and successful lives.

***Advancing the Decade of the Child***

The ***Decade of the Child*** supporters implore congress to evaluate their policy priorities and identify opportunities to advance a child-supportive policy agenda. To assist key decision-makers in effectuating these priorities, the National Academies of Science, Engineering, and Medicine (NASEM) has documented the research background and formulated a blueprint to guide needed change in legislation, agency practices, supportive programs, and environments in their 2019 and 2024 reports: [Fostering Health Mental, Emotional, and Behavioral Development in Children and Youth](https://nap.nationalacademies.org/catalog/25201/fostering-healthy-mental-emotional-and-behavioral-development-in-children-and-youth) and [Launching Lifetime Health](https://nap.nationalacademies.org/catalog/27835/launching-lifelong-health-by-improving-health-care-for-children-youth-and-families), respectively. For children to flourish, key principles and elements essential to their health and wellbeing must be in place across all settings in which they are born, grow, learn, and play.

***The Imperative***

**The time for this initiative is now** given the substantial body of knowledge that has accumulated regarding the detrimental effects of adverse social conditions (e.g., poverty, trauma, maltreatment, community violence) on brain and body development in infants, children, adolescents, and young adults that increase risk for mental and behavioral health problems, and their cascading impacts on chronic disease. Importantly, there is convincing evidence that positive experiences in childhood can prevent, mitigate, and even reverse the effects of these adversities.

The existence of thousands of studies showing the benefits of family, school, and community environments, interventions, and public policies on whole child health and wellbeing suggest these conditions are amenable to intentional change and that development and health can be improved with greater investments in whole child health promotion and the wellbeing of all children. Population-level benefits can be derived from research that builds on these advances by developing, evaluating, broadly implementing and sustaining evidence-based programs and policies for clinical application, prevention practices, and public health policies.

It is imperative that we protect effective child- and family-focused programs (not eliminate) already in place, shown to exact [significant returns on investment](https://www.wsipp.wa.gov/BenefitCost). And that policy strategies enacted by congress strive to remediate the root causes of poor child health and wellbeing and promote conditions that foster healthy development. Then the blueprint mentioned above can become a reality in the form of a comprehensive national plan that supports children’s needs, through legislation, agency-level practices, and proximal environmental change in households, schools, health care settings, and communities.

Implementation of evidence-based strategies at scale also has enormous [economic benefits](https://www.nemours.org/content/dam/nemours/wwwv2/childrens-health-system/media/whitepaper-children-economy.pdf) for individuals, families, communities, businesses, and government, including reduced healthcare costs, increased productivity, better physical and mental health, reduced absenteeism, reduced need for child welfare intervention, and improved long-term earnings.

Our team of experts is working to increase the public’s awareness of the vital need for investments in whole child health and wellbeing to create demand for a legislative imperative that elevates a **child-supportive policy agenda** and molds consensus to formulate a national plan.

***Next Steps***

We ask Congress to consider taking the following actions to meet the needs of our children:

1. To evaluate policy priorities and identify opportunities to advance a child-supportive policy agenda.
2. To invest in any one or more specific areas of concern for children in your districts that you can accommodate in your policy agenda. A menu of policies for your consideration can be found below.
3. To encourage your congressional colleagues to prioritize children in their policy agendas.
4. To explicitly state your child-supportive policy concerns on your website and other informational materials.
5. To inform your constituents of these issues and your commitment to tackle those that fit within your larger portfolio.

If the ***Decade of the Child*** becomes part of the congressional policy agenda, a true transformation in this country will be felt for generations to come. Congressional and state legislators will mobilize to elevate this issue area in their policy portfolios, and the public will embrace a much-needed strategy that prioritizes the health and social security of our children.

Living by the principles outlined by the ***Decade of the Child*** initiative and installing community-based systems outlined in the above NASEM reports ensures that these principles are realized through proven practices, programs, and policies. Importantly, they are considerably more effective than reacting to problems after they have escalated and become entrenched. **There are no better ways to increase government efficiency while improving lives.**

***APPENDIX***

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| ***Examples of Child-Focused Evidence-Based Policies*** | | | | |
| **Prevent Homelessness and Hunger** | **Prevent Child Abuse and Trauma** | **Improve Physical and Mental Health** | **Reduce Child Poverty** | **Increase School Readiness and Performance** |
| Expand Free and Reduced Lunch Program for all schools | Parenting support programs1,2 | Paid Family and Medical Leave | Child tax credit | Increased funding for Title 1 |
| Affordable housing | Child maltreatment prevention program funding | Comprehensive child health promotion services | SNAP | Preschool grants and free high-quality preschool |
| Safety nets for homeless children | Home visiting programs | Youth Mental Health and Suicide Prevention Act | Earned Income Tax Credit | School-based prevention including school behavior health |
| Homeless Child and Youth Act | Policies for gun safety in the home | Substantial increase in mental health providers and salary levels | Child Poverty Reduction Act | Increased pay for teachers |
| McKinney-Vento Homeless Assistance Act | Community-based youth services | Contracting with health systems | Raise minimum wage | Improving Head Start for School Readiness Act |
| Assistance for higher education for homeless youth | Trauma-informed training for childcare workers, parents, child welfare agencies, etc. | Integrated responses across child-serving systems | Increase job opportunities coupled with child-care support | Every Student Succeeds Act |
| Supplemental Nutrition Program for Women, Infants and Children (WIC) | Childcare subsidies | Helping Kids Cope Act | Childcare subsidies | Childcare subsidies |
| Eliminate “food deserts” | RISE from Trauma Act | [Fetal Alcohol Syndrome Disorder Prevention Programs](https://www.niaaa.nih.gov/research/fetal-alcohol-spectrum-disorders) |  |  |

1. Leslie LK, Mehus CJ, Hawkins JD, et al. Primary health care: Potential home for family-focused preventive interventions. *American Journal of Preventive Medicine*. 2016/10/01/ 2016;51(4):S106-S118. doi:<http://dx.doi.org/10.1016/j.amepre.2016.05.014>
2. Biglan A, Elfner K, Garbacz SA, et al. A Strategic Plan for Strengthening America’s Families: A Brief from the Coalition of Behavioral Science Organizations. *Clinical Child and Family Psychology Review*. 2020/04/28 2020;doi:10.1007/s10567-020-00318-0