Federal Policy Priorities – 118th Congress

Children’s HealthWatch is a network of pediatricians, public health researchers, and children’s health and policy experts committed to advancing health equity for young children and families by advancing research to transform policy. We do this by conducting research on family economic hardships, health, and public policies from frontlines of pediatric care in Boston, Minneapolis, Philadelphia, and Little Rock. We use our research to inform policies that can give all children and their families equal opportunities for healthy, successful lives.

Promote racial health equity by closing income and wealth gaps

Racial health inequities rooted in income and wealth inequality persist and were exacerbated during the COVID-19 pandemic. Children’s HealthWatch research consistently shows that when families are unable to afford basic needs, the health of children and parents suffer. Policies that reduce inequities and promote financial stability for families with children – particularly families of color and immigrant families – are urgently needed to promote health equity. The Earned Income Tax Credit (EITC) and Child Tax Credit (CTC) are two of our country’s most effective poverty alleviation tools and have been shown to improve health. Improvements to EITC and CTC, along with efforts to establish guaranteed minimum income, increase the minimum wage, and examine reparation policies will increase racial equity and improve health among families and children across the U.S. Critical improvements include:

An inclusive, permanent, and accessible expansion of the Child Tax Credit (CTC)
The temporary expansion of the Child Tax Credit in the American Rescue Plan cut child poverty nearly in half, reduced food insufficiency, helped families catch up on rent, and improved health. Building upon this evidence-based solution, Congress should enact the following changes to the CTC:

1. Permanent, full refundability and boosted credit amounts to at least the amounts enacted in the American Rescue Plan.
2. Inclusive eligibility so the CTC reaches all children regardless of immigration status or involvement in the child welfare system. Re-instating CTC eligibility for the 1 million children with Individual Tax Identification Numbers (ITINs) whose eligibility was revoked in 2017 is critical for ensuring a fair tax system that supports all children.
3. Accessibility for all families regardless of tax filing obligation and whether or not they have a formal bank account.
4. Monthly payments that work for families while ensuring families are held harmless for overpayment and that the credit is not subject to garnishment, all of which are critical for boosting family income throughout the year while reducing unintended consequences.

An expanded and inclusive Earned Income Tax Credit that broadens the definition of “work”
The American Rescue Plan expanded the Earned Income Tax Credit (EITC) for workers not raising children and extended age eligibility to include workers 19-24 years old and workers over age 65 for one year. These changes provide critical relief for workers with low and moderate incomes – many working essential jobs during the pandemic. Making these changes permanent and further improving the EITC is necessary for long-term advancements in racial equity. These include:

1. Permanent expansion of the changes made in the American Rescue Plan will promote health and financial stability for workers not raising children, which include adults preparing for families and non-custodial parents.
2. Broadening the definition of “work” to include family caregiving recognizes the important role caregivers play in our society and would ensure they receive tax credits currently available to other workers.
3. Extending eligibility for the EITC to include immigrants and their families who work and pay taxes, yet are barred from tax credits, would ensure a fair tax system that promote the health of all workers and their families.

Establishment of Baby Bonds that reduce the racial wealth gap

For more information, please contact Charlotte Bruce, Senior Research and Policy Analyst: charlotte.bruce@bmc.org
Wealth inequality in the United States is closely linked with health inequality. An evidence-based strategy for reducing wealth inequality is through the establishment of Baby Bonds, which would provide an investment in children at birth for their future regardless of the wealth of the family they are born into. Creating accounts managed by the Treasury Department that are available to every child born in the US and seeded with at least $1,000 and providing a contribution of up to $2,000 annually based on a family’s income until a child turns 18 would not only reduce wealth inequality, but improve health for generations to come.

**A minimum wage that ensures working families are able to afford basic needs**
Increasing the federal minimum wage to at least $15 per hour is necessary for supporting working families to make ends meet and improving health. Boosting the minimum wage while simultaneously ensuring smoothing off-ramps in federal assistance program as families increase their income would not only promote economic mobility, but also improve health across the life span.

**A commission to study reparations**
For more than 400 years in the U.S., Black people have been subjected to slavery, lynching, state-sanctioned violence, marginalization, and discrimination. Establishing a commission to examine reparations, educate the public of its findings, and advance proposals including what form of compensation should be awarded in order to mitigate some of the harm perpetuated by the government is a critical step toward recognizing the long-term impacts of structural racism and implementing solutions that advance racial health equity.

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**Improve the health and well-being of immigrant families by removing barriers to assistance**
Eligibility for federal nutrition, housing, and health insurance programs are complex and vary widely for immigrants across immigration statuses. These barriers to programs are rooted in systemic racism and xenophobia and impact the health of children in immigrant families. Removing barriers, including the 5-year bar on immigrants, to assistance programs and increasing access to health insurance are critical for promoting health equity among children and families.

In addition to swiftly passing legislation that increases access to public programs, members of Congress must work with the Administration to reverse the harm done to immigrants under previous administrations that – through hateful rhetoric and policy-making and enhanced immigration enforcement measures – increased fear among immigrant communities and threatened the health.

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**Improve Black maternal health through comprehensive policies that reduce disparities**
Adverse health outcomes among Black birthing and postpartum people – including mortality rates – are staggeringly prevalent. Reducing racial maternal health inequities is urgently necessary. Given the ways in which systemic racism across policies and structures impacts these persistent disparities, a comprehensive approach that addresses multiple dimensions of this crisis is necessary for promoting equity. The Black Maternal Health Momnibus Act seeks to achieve this goal through twelve standalone bills that together respond to drivers of maternal health disparities including addressing social determinants of health, health care coverage gaps, climate change, incarceration, and medical bias. Swift passage of this comprehensive package will promote the health for Black birthing and postpartum people.

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**Increase access to stable, affordable homes that promote family health**
Our research consistently shows that a stable home is the foundation for child and family health. That is why we are honored to partner with national organizations from across sectors as a member of the Opportunity Starts at Home Campaign Steering Committee. Through a multi-pronged policy approach that promotes equity, the campaign seeks to advance policies that increase housing stability and reduce homelessness across the country. Congress must take bold
steps to reduce housing instability, racial segregation, and discrimination in housing in order to further promote health. These policies include:

**Universal access to rental assistance for all eligible households**
Today, only one in four households eligible for rental assistance receive it. Ensuring that all families who are eligible for [rental assistance](#) receive support is critical for promoting health. Specifically, supporting families with young children to access housing vouchers and live in neighborhoods connected to opportunities for thriving is important for ensuring children are able to reach their fullest potential.

**Expansion and preservation of affordable housing stock that is equitably distributed across communities**
An analysis by the National Low Income Housing Coalition shows a lack of affordable, available homes in every state across the country. Significant investment in [building and preserving homes that are affordable to people with the lowest incomes](#) and distributed across communities in order to reverse residential segregation is necessary for promoting housing stability and health equity for families and children.

**A national housing stabilization fund to provide emergency assistance to families in crisis**
Economic shocks such as a job loss or health-related emergencies often place families at risk of eviction, which is strongly associated with poor health outcomes. The creation of a [national housing stabilization fund](#) would buffer families from eviction by providing financial resources to avoid eviction and potentially support access to legal aid and other critical services.

**Strong renter protections and anti-discrimination laws**
Our nation’s long history of discriminatory policies in housing have resulted in an increased risk of eviction, housing instability, and homelessness for families of color and families with low-incomes. Enacting policies that strengthen protections for renters, eliminate discrimination of housing voucher holders, and expand fair housing laws are necessary for undoing longstanding harm created and perpetuated by housing systems.

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**Provide high-quality, affordable child care so all children thrive**
High-quality, nurturing, and affordable child care is essential to support children and their parents. Unfortunately, many families across the country face significant barriers to accessing child care, which impacts their [financial stability and the health of children](#). By enacting comprehensive legislation that responds to the realities of families and making robust investments in the child care system, Congress can ensure every family has access to high-quality, affordable child care starting at birth and universal pre-K for 3 and 4 year-olds.

**Universal access to affordable child care**
Currently, less than one in five families who qualify for child care assistance receive it. Federal investment to establish universal access to high-quality and affordable child care beginning in infancy is critical to [support child health and to parental participation in education or work](#).

**Protect and provide funding increases for the Child Care and Development Block Grant (CCDBG)**
Funding for early child care programs has failed to meet need, limiting families’ ability to access affordable, high-quality, and appropriate care that meets their needs and preferences. Adequate investment in CCDBG — the major federal funding stream for child care assistance and quality improvement — supports states in increasing the supply, affordability, and quality of child care programs, in turn enabling greater access for families.

**Base reimbursement rates on the true cost-of-care and increase compensation for child care providers**

*For more information, please contact Charlotte Bruce, Senior Research and Policy Analyst: charlotte.bruce@bmc.org*
Updated child care subsidies that match the true cost of care will help to alleviate cost burden of the provider, and may enable them to more sustainably meet quality and licensing standards while providing competitive and adequate pay to workers. This approach may also expand the capacity of providers to accept more subsidies, and thus increase availability of care, providing more options for families to fit their needs and preferences.

**Strengthen nutrition assistance programs to address hunger and improve health**

Decades of research, including from Children’s HealthWatch, shows food insecurity negatively impacts health across the lifespan. High-quality nutrition in the first years of life is critical for nourishing a child’s rapidly developing brain and body. Programs like the Supplemental Nutrition Assistance Program (SNAP), and the Special Supplemental Program for Women Infants and Children (WIC), and the Child and Adult Care Food Program are evidence-based policies that support healthy growth among children. Strengthening these programs is critical for promoting health among young children during a critical window of development. These include:

**Increased SNAP benefits and updated eligibility to adequately reflect the cost of living**

While SNAP is our nation’s largest and most effective program for reducing food insecurity, key changes to the program are necessary to improve its ability to meet the nutritional needs of families. Children’s HealthWatch research shows SNAP promotes health, but the benefits are too low to afford a healthy diet and many families lose benefits or have benefits cut before they are financially stable. To address these issues, Congress should:

1. Increase SNAP benefits by adopting at least the Low Cost Food Plan as the basis of benefit calculations
2. Increase income eligibility limits to reflect real costs of living and remove asset tests
3. Create a more gradual decline in benefits across assistance programs that avoid an abrupt reduction or loss of SNAP and provide a smooth off-ramp for families in the workforce.

For further evidence-based ways to improve SNAP, please see the Children’s HealthWatch Farm Bill priorities.

**Expansion of WIC to ensure all eligible post-partum people, infants, toddlers, and preschoolers access nutritious foods**

WIC provides nutrition assistance and counseling, breastfeeding support, and health care referrals to pregnant and postpartum people and young children under age 5. Congress should strengthen WIC through efforts to:

1. Extend child age eligibility of WIC to age 6 (instead of current age 5) to ensure continuous nutrition support for children transitioning from WIC to school meals;
2. Extend post-partum eligibility to two years in order to support new parents; and
3. Extend infant certification periods to two years in order ensure continuous WIC eligibility during infancy.

**Improvements in CACFP to meet the nutritional needs of young children in child care settings**

Every day approximately 4.2 million children in Early Head Start, Head Start, afterschool and child care programs are provided nutritious meals through CACFP. Congress should enable key improvements to CACFP including:

1. Provide an additional meal or snack for children in full-day child care
2. Evaluate the per meal cost necessary to meet USDA dietary guidelines and the degree of current shortfall for CACFP providers
3. Streamline administrative barriers including reducing the area eligibility requirement from 50% to 40% of children in the area qualifying for free or reduced-price school meals, encouraging bulk purchasing, and reducing administrative burden

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