



January 12, 2018

Honorable Members of the United States House of Representatives and United States Senate,

As a nonpartisan network of pediatricians, public health researchers, and children's health and policy experts, we know that public policies, even when well intentioned, can put young children's health at risk. We write today urging you to ensure that long-term funding for the [Children's Health Insurance Program](#) (CHIP), and a permanent legislative solution for [Deferred Action for Childhood Arrivals](#) (DACA) - passing a clean Dream Act - are included in the January 19th continuing resolution.<sup>i,ii</sup>

An extensive body of scientific evidence, including research from Children's HealthWatch, shows that children's first years of life are a critical period of rapid brain and body growth. This is the time when infants and toddlers form the fundamental neurological architecture of the brain, which largely sets the trajectory for their health for the rest of their life. These young children and their caregivers can wait no longer; it is time for Congress to put politics aside and provide 9 million children access to affordable health care coverage. Further, many DACA recipients are parents of young children; they and their children need relief from deportation.

**Facts about CHIP:**

- CHIP is a successful, bipartisan program that provides 9 million U.S. children with comprehensive and affordable health care coverage.
- While Congress approved a roughly \$3 billion stopgap measure designed to last through the end of March, legislators have told [Kaiser Health News](#) "we are unable to say with certainty whether there is enough funding for every state to continue its CHIP program through March 31, 2018."<sup>iii</sup>
- Congress' failure to act has created an unnecessary and avoidable child health emergency. States are already notifying families they may not have a source of health coverage for their children, should Congress fail to enact a long-term extension of CHIP funding.
- [Children's HealthWatch research](#) shows that young children in families that had to forego medical care or prescriptions for the child due to cost were more likely to: be in poor health, have a history of hospitalizations, be at risk for developmental delays, and live in families that struggle to afford enough food.<sup>iv</sup>

**Facts about DACA:**

- There are approximately 200,000 children who are U.S. citizens with [parents that receive DACA protections](#).
- [Research by Children's HealthWatch](#) found that immigrant families with young children have many protective health characteristics. When compared to children of U.S. born mothers, children of immigrant mothers were more likely to live in a two-parent family, and have been born at a healthy weight.<sup>v</sup>
- Separating families does not help our young American children whose parents are DACA recipients live up to their full potential. A child's [risk of having mental health problems](#), like depression, anxiety, and severe psychological distress increases significantly following the detention and/or deportation of a parent.<sup>vi,vii</sup>

Long-term funding for CHIP and a just solution to DACA will improve children's opportunities for health and success now and throughout their lives. Based on our knowledge and expertise as pediatricians and public health researchers, and a large body of solid research evidence, we urge you to act now. Failing to do so will jeopardize the health and future prosperity of all Americans.

Sincerely,

[Children's HealthWatch](#)  
[The Center for Hunger-Free Communities](#)

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<sup>i</sup> Centers for Medicare & Medicaid Services. Children's Health Insurance Program (CHIP). Washington, DC. <https://www.medicaid.gov/CHIP/index.html>.

<sup>ii</sup> United States Citizenship and Immigration Services. Consideration of Deferred Action for Childhood Arrivals (DACA), Washington, DC. <https://www.uscis.gov/archive/consideration-deferred-action-childhood-arrivals-daca>.

<sup>iii</sup> Galewitz P. (2018). Running On Empty: CHIP Funding Could Run Out Jan. 19 For Some States. Kaiser Health News. [https://khn.org/news/running-on-empty-chip-funding-could-run-out-jan-19-for-some-states/?utm\\_source=newsletter&utm\\_medium=email&utm\\_campaign=&stream=top-stories](https://khn.org/news/running-on-empty-chip-funding-could-run-out-jan-19-for-some-states/?utm_source=newsletter&utm_medium=email&utm_campaign=&stream=top-stories).

<sup>iv</sup> Jeng K, Ettinger de Cuba S, March E, et al. (2009). Affordable Health Care Keeps Children and Families Healthy. Children's HealthWatch. [http://childrenshealthwatch.org/wp-content/uploads/AffordableHealthCare\\_brief\\_July2009.pdf](http://childrenshealthwatch.org/wp-content/uploads/AffordableHealthCare_brief_July2009.pdf).

<sup>v</sup> Ettinger de Cuba S, Jeng K, March E, et al. (2010). Children of Immigrants: Healthy Beginnings Derailed by Food Insecurity. Children's HealthWatch. [http://childrenshealthwatch.org/wp-content/uploads/ChildrenofImmigrants\\_brief\\_October2010.pdf](http://childrenshealthwatch.org/wp-content/uploads/ChildrenofImmigrants_brief_October2010.pdf).

<sup>vi</sup> Wong TK, et al. (2017). Results from Tom K. Wong et al., 2017 National DACA Study. Center for American Progress. [https://cdn.americanprogress.org/content/uploads/2017/11/02125251/2017\\_DACA\\_study\\_economic\\_report\\_updated.pdf](https://cdn.americanprogress.org/content/uploads/2017/11/02125251/2017_DACA_study_economic_report_updated.pdf).

<sup>vii</sup> Capps R, Koball H, Bachmeier JD, et al. (2016). Deferred Action for Unauthorized Immigrant Parents: Analysis of DAPA's Potential Effects on Families and Children. Migration Policy Institute. <https://www.migrationpolicy.org/research/deferred-action-unauthorized-immigrant-parents-analysis-dapas-potential-effects-families>.