Consistent with our longstanding values and mission, Children’s HealthWatch remains committed to improving the health and well-being of young children and their families in the United States regardless of immigration status, country of origin, or religion. This statement reflects our deep concerns about the Executive Orders regarding immigration to the US and immigrants’ status in our society.

As scientists, we have an obligation to document what is happening to children. Independent monitoring systems are critical for the people of the United States to provide credible facts for use in holding our leaders accountable for results of their policy actions.

Many of the caregivers from diverse urban families whom we interview—and their children—are threatened by recent policy developments.

Children of immigrants start life with many factors in their favor. Children’s HealthWatch research\(^1\) has shown that U.S. born children of immigrant mothers are more likely than children of U.S. born mothers to be breastfed, have a healthy birth weight, and live with two parents. However, despite this healthier start, young children of recent immigrants are more likely to be in poor health during preschool years and to live in households that are food insecure than their peers from U.S. born families. Food insecurity plays a significant role in increasing rates of fair or poor child health among children of immigrants.\(^1\)

Existing confusion surrounding the rules regarding eligibility to receive public assistance programs, like Medicaid and the Supplemental Nutrition Assistance Program (SNAP), already means that children of immigrant families are less likely than those of U.S.-born parents to receive important nutritional and health benefits.\(^2\) \(^3\) \(^4\) Children’s HealthWatch data also tell this story: forty-nine percent of children of U.S.-born parents in our sample received SNAP benefits compared to just 23 percent of U.S.-born children of immigrant parents. Yet our research shows that SNAP is particularly beneficial to young children, improving their health and keeping them developmentally on track.\(^5\) Early life lays the essential foundation for later health, academic achievement and workforce productivity – ensuring that all children in America have what they need to grow and thrive is in our country’s best interest.

As child health professionals, we are profoundly troubled by the harmful impacts of the recent executive actions regarding immigrants and refugees; and by the life-threatening repercussions for those forced to remain in, or return to, dangerous conditions here or in other countries. We are particularly concerned about potential consequences for child health and development of possible efforts to prevent immigrant families of whatever status from seeking nutrition and health care resources for their children for fear of being deemed a public charge and deported. Separation of families from their US citizen children would create a pediatric health disaster of a magnitude previously unknown in this country.

As scientists, we remain deeply committed to seeking the truth, particularly as it relates to the well-being of all families with young children facing economic hardships, especially those from marginalized groups and from groups suffering from discrimination and prejudice. We remain equally committed to supporting our staff, recognizing the strength that comes from our collective diversity.

Children thrive when we respond to their realities. We will continue to work toward the day when all children have the family resources and support they need to be healthy.

The Executive Council and Staff of Children’s HealthWatch