

## Top Five Health Equity Priorities for Kids in 2018

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### **Safeguard Children’s Coverage Programs at the Federal and State Levels.**

Medicaid and CHIP [disproportionately serve](#) children and families of color. As we continue to work to close the Medicaid coverage gap in some states and protect the integrity of Medicaid in others, we must also be vigilant and monitor attempts at the federal level to sabotage coverage programs, which are key to advancing health equity.

### **Address Trauma at Every Level of Care.**

In our efforts to secure a child’s healthy development, research on adverse childhood events (ACEs) is a call to action to address trauma experienced by children, families and communities. For children of color, trauma in the form of racism results in [worse health outcomes](#) such as increased rates of chronic disease and early death. For health advocates, this means integrating a [trauma-informed lens](#) into our advocacy for robust public coverage and any efforts to contain health care costs and improve quality.

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### **Be counted.**

Children of color will be [the majority by 2020](#). Although the 2020 census may seem far away, work is already underway to ensure that people of color are counted—and our youngest people in particular. Accurate data is paramount for federal funding formulas for key programs that families rely on to support infant and child health and development. Health advocates should [lend their voice](#) and networks to demand that their cities, counties and communities actively participate in the census.

### **Meet Children Where they Learn, Live and Play.**

A child’s environment is the greatest determinant of their long-term health opportunity—in other words, where a child learns, lives, and plays as well as their caregivers’ economic stability is key to health equity. As health systems address the needs of children, advocates must demand that family voices drive [development of care models](#). These models must include community-based providers that families trust—whether a school, a doula, or childcare program.

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### **Follow the Science: Focus on Pregnancy, Infants and Family Supports.**

Brain science must [guide our programming and investment](#) in families along the life course from the prenatal period through a child’s first 1,000 days. This window of time is critical for brain development and family bonding. Advocates must support screenings and access to services for all family members, nurturing the parent/caregiver and infant bond. This work cements a path toward resilience and equity. We must protect and enhance the programs and systems that play these vital roles for families.