



Putting children at risk

EBHEAD]ISN'T IT AMAZING how quickly babies and toddlers grow? From month to month, the changes are remarkable - just ask any proud grandma or grandpa.

But the rapid development that so delights families everywhere can make very young children in low-income families vulnerable to injuries caused by the stresses of poverty: hunger, crowded housing, lack of heat. So much is happening in their brains during the time between birth to 3 years old that the effects of "material hardships" can become biologically embedded in their bodies, limiting their future abilities to do well in school or in the working world.

This is what's happening right now, right here in Philadelphia. The future of the city's next generation could be at risk.

The evidence: A study of children under 3 in five cities - including Philadelphia - that documented that problems with food, housing and energy insecurity act together to decrease a small child's chance of what the researchers called "well-being": good health and normal growth and development.

The Children's HealthWatch study, in which

caregivers were interviewed in the emergency rooms and clinics of five urban hospitals, also included Boston, Minneapolis, Little Rock and Baltimore. The findings were published last month in the journal *Pediatrics*.

The researchers created a "cumulative hardship index" to measure the effects on infants and toddlers of not having enough nutritious food to be healthy, and the stresses from energy insecurity - not being warm enough in the winter or cool enough in summer. Also included were the physical and emotional traumas related to inadequate housing: moving a lot or living in shelters or being exposed to infectious disease and noise in crowded households.

Here's what they found: The more severe the "cumulative hardship index," the lower the infants and toddlers scored on the assessment of "well-being."

Mariana Chilton, a professor in Drexel University's School of Public Health, headed the Philadelphia part of the four-year study. About 3,500 caregivers who brought their children to the emergency room at St. Christopher's Hospital for Children in North Philadelphia were interviewed: 53.8 percent of the kids were experiencing "moderate" cumulative hardship, while 5.4 percent were rated "severe." So nearly 60 percent of the kids seen at this one hospital were being hurt in ways that could stay with them their whole lives. And which could be prevented with sufficient access to programs like food stamps and WIC, as well as help for housing and energy.

But given the current, fear-based hostility to anti-poverty - government! - programs, we agree with Chilton when she says that helping these kids will take a new and radical approach. It will require focusing public policy on the "newest" poor - the children being born into low-income families - and not on fact-free notions of whether their parents are "worthy" of help or whether government assistance makes adults lazy.

If we recognized the alleged "safety net" programs as the child-health programs that they are, would we underfund them the way we have? Would we use them to make political points? Would we make applicants navigate mazes of bureaucracy?

The economic downturn has made more apparent what has been true for years: The so-called "safety net" isn't working anymore. And by refusing to fix it, we risk throwing away a generation of children whose life chances are being threatened right now. Right here.