

AAP Strategic Priority Poverty and Child Health

In response to the growing number of children living in poor and low-income households in the United States, the AAP added “**Poverty and Child Health**” to the Agenda for Children in 2013.

The AAP formed a **Poverty and Child Health Leadership Work Group** to develop a strategic plan that will help address the health effects of poverty and ensure the healthy development of all children within a medical home.



Why Focus on Poverty?

Poverty Affects Child Health

Poverty is a significant determinant of child health. Children living in poverty have worse health outcomes for infant mortality, developmental delays, asthma, ear infections, obesity, nutrition, and child abuse and neglect. Child poverty also adversely impacts health across the life course and into adulthood.

Nearly Half of All Children Live in Poor/Low-income Households

Families in poor and low-income households have difficulty accessing health care and meeting basic needs that are crucial for healthy child development. In the United States in 2012:

- 22% of all children under 18 lived in poverty (16 million children)
- 45% of all children under 18 lived in low-income households (32.7 million children)

Most Pediatricians Will Care for Low-income/Poor Families

Economic insecurity impacts a diverse child population, including children in suburban, urban, and rural communities. Since 2008, suburbs have experienced the largest and fastest increase of poor populations.

We Have a Strong Foundation of Community Pediatrics

Many pediatricians have introduced practice innovations to address family and community needs. These innovations provide a platform to address poverty.

How Can the AAP Help Address Poverty and Child Health?

The AAP **Poverty and Child Health Leadership Work Group** is developing a strategic plan that will help address the health effects of poverty and ensure the healthy development of all children within a medical home.

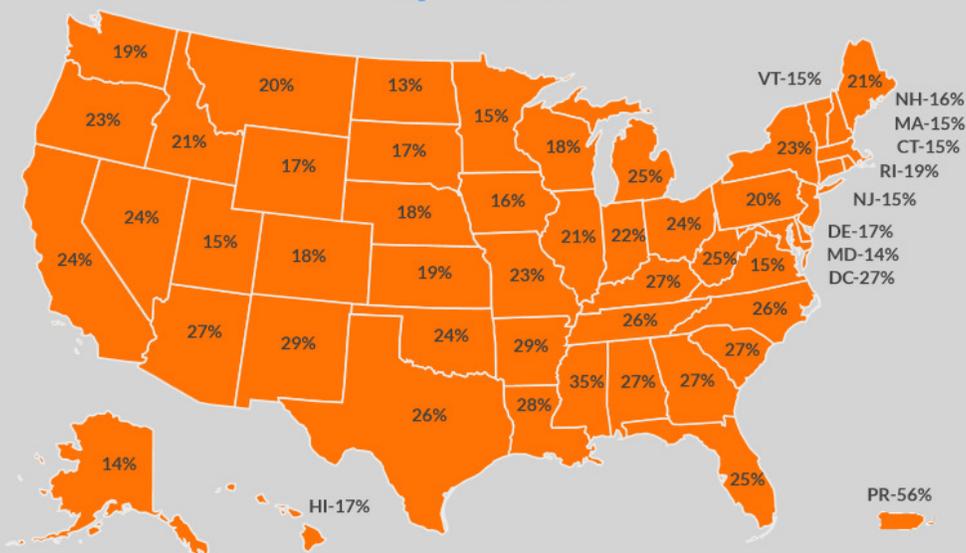
The work group will **identify what works** to help low-income families, children, and the pediatricians who provide their care. The work group plan will:

- **Raise awareness** about the impact of poverty on child health and strategies that work to mitigate the health effects of poverty.
- **Support pediatricians** to address poverty within their practices and communities including screening for basic needs and linking to community resources.
- **Advocate for policies at the national, state, and local levels** that help lift families out of poverty including quality early education, tax credits, and a living minimum wage.
- **Engage AAP chapters** to work on state level programs and policies.
- **Partner** with parents and families, and across sectors including business, education, community development, and public health.
- **Promote training of medical students and residents** in the social determinants of health.

For more information, visit: www.aap.org/poverty

CHILD POVERTY

How many children live in poverty in my state?



More than
16 million

children younger than 18 live in poverty in the US



26% of these children are younger than 5

22% of all children live in a household that is food insecure at some point during the year



66%

of all children ages 6 to 12 have at least 1 available parent in the labor force

63%

of low-income 3 and 4 year olds do not attend a preschool program compared to 45% of their more affluent peers

47%

of all children live in households with parent(s) who have at least a high school diploma or GED

38%

of all children live in households that spend more than 30% of their monthly income on housing

Source: 2013 KIDS COUNT Data Center

American Academy of Pediatrics 
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