



## **COVID-19: Our Response Must Protect the Health and Well-Being of All Children, Youth, and Families**

### **March 16, 2020**

As the United States responds to the public health emergency and the looming economic crisis stemming from COVID-19, there has not been enough attention to the needs of children, youth, and families who are likely to suffer most during this crisis.

**We must protect low-paid workers and their families.** Child care workers, home care providers, front-line staff at social service organizations, home visitors, medical assistants, food service providers, and other service sector workers do work that is critical to the health and well-being of Americans and the day-to-day functioning of society, but are often low-paid and do not have paid leave or other workplace protections. Women, and [women of color](#) in particular, are over-represented in these positions. Because of the insecurity and instability of their jobs, if these workers get sick or need to stay home to care for a sick loved one, they must choose between going without much-needed wages and their own health and that of their families and the people with whom they work. Even if they or their families remain healthy, they will have a harder time making ends meet as schools close and they need to search for childcare and pick up more food at the grocery store because their children can no longer access school meals.

**We must protect immigrant families.** Immigrant families are already fearful of accessing health care and other critical supports because of this administration's anti-immigrant rhetoric and policies, including the [public charge](#) rule that went into effect February 24. Immigrant families are also more likely to lack health insurance and struggle to cover the costs of basic health care. If they are undocumented or live in mixed status families they may fear seeking care at hospitals or health clinics, where immigration enforcement is known to operate.

**We must protect children, youth, and families in institutional settings.** Across the country, millions of children, youth, and families are being held in institutional settings. There are children and youth in congregate care settings in the child welfare system, children and parents in immigration detention, youth in secure facilities in the juvenile justice system, and parents incarcerated in prisons. With large numbers of people living in close quarters, these are the very places where disease is likely to spread fastest, and yet in many of these facilities, access to basic health care, sanitary facilities, and food is already inadequate. Alcohol-based hand sanitizer is [banned](#) in prisons across the country.



**We must protect families involved in the child welfare system.** Families involved in the child welfare system have unique needs during public health emergencies. While children and youth in congregate care are at risk of disease, the outbreak can also interfere with parents' ability to keep children safely in their homes, to visit their children if they are in out-of-home placements, and ultimately to reunify with their children. For example, if a parent must attend a substance abuse class in order to reunify with a child, what does it mean for that family if the substance abuse classes are cancelled? For child welfare-involved youth who are in college, what does it mean if they are told to go home and take classes online if they do not have internet access at home, or do not have a home to return to? Jerry Milner, Associate Commissioner of the Children's Bureau, has urged the nation's child welfare agencies to immediately contact youth in foster care or formerly in foster care who live on college campuses, and to work with all colleges and universities to provide appropriate housing to meet their special needs or to arrange alternative housing so that no young adult is without housing at this precarious time.

**We must protect youth and families experiencing homelessness.** For youth and families experiencing homelessness, the challenges they may experience because of their low income are compounded by their housing instability. If they live in shelters, keeping their living quarters clean and sanitary can be difficult as disease spreads rapidly. Since many shelters close every morning and force all occupants to leave for the day, homeless families will face the additional challenge of where to go as schools close and other public institutions like public libraries and community centers limit access. Youth and families

who sleep in cars and on the couches of family and friends will face similar challenges. Moreover, more families will be at risk of homelessness as businesses and local governments lay off workers, and families have trouble making rent.

**We know the policy solutions to these problems.** At this very moment, public systems and local and state governments across the country are working to protect these children, youth, and families. They need a substantial infusion of federal funding so that they can take the steps that are necessary to support everyone. From research and experience, we know that at moments like these we need to significantly expand public benefits like food assistance and cash assistance that put resources directly in the hands of families with low incomes. We need to give public systems—including the health system, the child welfare system, and the system of supports for homeless families—the resources and flexibility they need to support families. One immediate solution is to temporarily but significantly enhance the Federal Medical Assistance Percentages (FMAP), which would increase the resources state health systems as well as state child welfare systems have to meet the needs of the families with whom they work. We need to halt immigration enforcement measures that instill fear in immigrant communities and make families reluctant to seek the care they need. We need to investigate the care available to children, youth, and families in institutional settings, and ensure that we are taking every action necessary to meet their health needs—including releasing or transferring them from such institutions if necessary. Finally, we must enact longer term reforms, establishing permanent federal paid family leave and other policies that will effectively respond in crises like the ones we are experiencing today.

