



**UNDER EMBARGO Until August 8, 2022 at 12:01 a.m. ET**

Contact: Anne Discher at [adischer@commongoodiowa.org](mailto:adischer@commongoodiowa.org) or 612-730-9617

**Iowa ranks ninth in the well-being of children; too many children still suffering from mental health pandemic**

*Data show 76,000 Iowa kids with anxiety or depression, as effects of coronavirus crisis linger, Annie E. Casey Foundation finds*

**Des Moines** — Overall, Iowa ranks among the top tier of states in child well-being, according to the **2022 KIDS COUNT® Data Book**, a 50-state report of recent household data developed by the Annie E. Casey Foundation analyzing how children and families are faring.

However, Iowa children, like their peers across the country, are in the midst of a mental health crisis, struggling with anxiety and depression at unprecedented levels. The annual report focuses this year on youth mental health, concurring with a recent assessment by the U.S. surgeon general that conditions amount to a youth mental health pandemic. The report sheds light on the health, economic and other challenges affecting American children.

In 2020, 13% of Iowa children ages 3-17 were experiencing anxiety or depression, compared with approximately 12% nationwide.

Iowa has traditionally ranked highly in the *Data Book*, which each year presents national and state data from 16 indicators in four domains — economic well-being, education, health, and family and community factors — and ranks the states according to how children are faring. Data in this year's report are a mix of pre-pandemic and more recent figures and are the latest available.

Iowa's overall ninth place position this year demonstrates areas where Iowa continues to do well relative to other states. But there are also indicators of concern.

Take education indicators. Iowa ranks first — best — among the states in the share of students not graduating from high school on time. That's an indicator where the state has traditionally led. But Iowa only ranks in the middle of the pack on other education indicators: 21st on the share of young children not attending preschool, 22nd on the share of fourth graders not reading proficiently and 25th on the share of eighth graders not proficient in math.

It's a similar pattern across health indicators. Iowa did well on the share of children with health insurance (tied for fourth place with 12 other states) and the percentage of low birthweight babies (ranked sixth), but, again, fell in the middle of the pack on others. Iowa ranks 25th on

child and teen death rate and 33rd on the percentage of teens ages 10 to 17 who are overweight or obese.

“Iowans are at a decision point,” said Anne Discher, executive director of Common Good Iowa, Iowa’s member of the KIDS COUNT network. “Our education rankings are perhaps the clearest example of our flagging commitment to the well-being of our children. After years of underinvesting in our public schools, we’re seeing warning signs. We’re not the clear leaders we once were.”

Here are Iowa’s rankings across the four domains in the report:

- Economic well-being: 5
- Education: 11
- Family and community context: 11
- Health: 17

If we don’t act, we’re facing even worse results in the future, said Discher. “The draconian tax cuts Iowa lawmakers passed this year are going to erode our ability to meet the needs of children and their families, even as they shower benefits on the wealthiest Iowans. We’re going to face terrible pressures to slash services for children, including the children’s mental health system lawmakers established but did not fully fund.”

The *Data Book* reports that children across America, and in more than 40 states and the District of Columbia, were more likely to encounter anxiety or depression during the first year of the COVID-19 crisis than previously, with the national figure jumping 26%, from 9.4% of children ages 3-17 (5.8 million kids) to 11.8% (7.3 million) between 2016 and 2020, the year COVID-19 swept across the United States. This increase represents 1.5 million more children who are struggling to make it through the day.

Racial and ethnic disparities contribute to disproportionately troubling mental health and wellness conditions among children of color. Nine percent of high schoolers overall but 12% of Black students, 13% of students of two or more races and 26% of American Indian or Native Alaskan high schoolers attempted suicide in the year before the pandemic hit, according to the most recent federal survey. Further, many LGBTQ young people are encountering challenges as they seek mental health support. Among heterosexual high school students of all races and ethnicities, 6% attempted suicide; the share was 23% for gay, lesbian or bisexual students.

“Mental health is just as important as physical health in a child’s ability to thrive,” said Lisa Hamilton, president and CEO of the Annie E. Casey Foundation. “As our nation continues to navigate the fallout from the COVID crisis, policymakers must do more to ensure all kids have access to the care and support they need to cope and live full lives.”

The Annie E. Casey Foundation calls for lawmakers to heed the surgeon general's warning and respond by developing programs and policies to ease mental health burdens on children and their families. They urge policymakers to:

- **Prioritize meeting kids' basic needs.** Youth who grow up in poverty are two to three times more likely to develop mental health conditions than their peers. Children need a solid foundation of nutritious food, stable housing and safe neighborhoods — and their families need financial stability — to foster positive mental health and wellness.
- **Ensure every child has access to the mental health care they need, when and where they need it.** Schools should increase the presence of social workers, psychologists and other mental health professionals on staff and strive to meet the 250-to-1 ratio of students to counselors recommended by the American School Counselor Association, and they can work with local health care providers and local and state governments to make additional federal resources available and coordinate treatment.
- **Bolster mental health care that takes into account young people's experiences and identities.** It should be trauma-informed — designed to promote a child's healing and emotional security — and culturally relevant to the child's life. It should be informed by the latest evidence and research and should be geared toward early intervention, which can be especially important in the absence of a formal diagnosis of mental illness.

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#### **RELEASE INFORMATION**

The *2022 KIDS COUNT® Data Book* will be available at [www.aecf.org](http://www.aecf.org). Additional information is available at [www.aecf.org/databook](http://www.aecf.org/databook). Journalists interested in creating maps, graphs and rankings in stories about the *Data Book* can use the KIDS COUNT Data Center at <http://datacenter.kidscount.org>.

#### **ABOUT COMMON GOOD IOWA**

Common Good Iowa is built on a collective 50 years of experience of two respected Iowa organizations — the Child and Family Policy Center and Iowa Policy Project. Common Good Iowa's team of policy advocates and researchers leverage reliable data, solid analysis and collaborative relationships to craft people-centered policy solutions for our state's most pressing issues. Learn more at [www.commongoodiowa.org](http://www.commongoodiowa.org).

#### **ABOUT THE ANNIE E. CASEY FOUNDATION**

The Annie E. Casey Foundation creates a brighter future for the nation's young children, youth and young adults by developing solutions to strengthen families, build paths to economic opportunity and transform struggling communities into safer and healthier places to live, work and grow. For more information, visit [www.aecf.org](http://www.aecf.org). KIDS COUNT® is a registered trademark of the Annie E. Casey Foundation.

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