Counting Children in the U.S. 2020 Census: Assure Our Future is Represented

Judith A. Seltzer, PhD, University of California, Los Angeles and Deborah Klein Walker, EdD, Global Alliance for Behavioral Health and Social Justice and Boston University School of Public Health

March 23, 2020

This year, the U.S. Census Bureau is attempting to count every person living in the United States. The government has conducted such a census every 10 years since 1790, as required by the Constitution. Census numbers determine how many representatives each state can send to Congress and influence congressional redistricting, state and local budgets, plans for public health crises, and billions of dollars of federal funding. The decennial census is a massive civic exercise, a unique moment in which the entire public participates in the same activity. Yet, despite its importance, the 2020 Census is at risk of overlooking a valuable population – the young children who are the future of our country. Doing so may deny them and their communities access to federal, state, and local services for children and their families that are essential for improving health and well-being in ways that last a lifetime.

Many people are surprised to learn that the undercounting of children in the U.S. census is a long-standing problem. The primary method for determining how many children have been omitted from the count is to compare the number counted with the number expected to be living in the country on the basis of reported births, deaths, and net migration. These data show that children under age 5 are much more likely to be missing from the census count than older children. In the 2010 Census, for example, the net undercount of children under age 5 was 4.6 percent, or nearly 1 million children. This represented the highest undercount rate for any age group. Although census accuracy for adults has increased in recent decades, the same cannot be said for children. In fact, the net undercount of children has more than tripled since the 1980 Census.

Experts attribute the undercount of young children to a variety of factors, rather than to a single factor. Young children are more likely to be living in poverty than other age groups, and low-income households are more likely to be missing from the census. Young children also are more likely to live in complex households, rather than with just their parents and siblings. Complex households include those in which more than one family lives together, households that include grandparents or other relatives, foster families, and households in which children live with non-relatives. The adults who complete census forms for these households may omit young children because they think that the census is only interested in their own children (versus grandchildren or unrelated children). Others may omit children because their housing rules prohibit children from living there. In addition, young children in large households are more likely to be missed than those in small households, perhaps because the paper census form limits the information it collects about individuals in large households.

Language barriers may contribute to the undercount as well. For example, in 2010, one quarter of young Hispanic children lived in a household where adults had difficulty speaking English, which can make responding to the census questionnaire more difficult. Census forms are available in multiple languages, but it can be hard for a household to get a form in their preferred language in areas where they are linguistically isolated,
that is, where there are few who speak that language. Finally, young children may be undercounted because members of households that include young children are less knowledgeable about the census, and this may reduce their willingness to participate in general [5].

The 2020 Census will face two additional challenges in counting young children. This is the first U.S. census that will routinely ask most people to respond to the census questionnaire online. The internet response option has both advantages and disadvantages for achieving an accurate count of young children. The online form may reduce language barriers by making the questions more easily accessible in multiple languages. The online form also may improve coverage of young children by providing more space to list all members of a household, compared with paper forms, which have more limited space for responses. However, because internet response is the Census Bureau’s preferred self-response mode in many locations and low-income households are less likely to have internet access, this could result in an even larger undercount of children than in 2010. The second novel challenge for this year’s count stems from the Trump administration’s 2018-2019 proposal to add a question about citizenship status to the 2020 Census. Even though the proposal did not move forward and the 2020 Census will not ask about citizenship, immigrant families, those less likely to be citizens, may be reluctant to respond to the census in the aftermath of the extensive media coverage about the question.

When children are not counted in the census, they, their families, and their communities lose access to important health and social services. In the 2010 Census, for example, the undercount of young children resulted in states collectively losing over a half-billion dollars per year in federal funding for five essential programs: Medicaid and State Children’s Health Insurance Program (CHIP) – $384 billion

Medicaid and CHIP provide free or low-cost health coverage to low-income individuals, families and children, pregnant women, and people with disabilities.

Supplemental Nutrition Assistance Program (SNAP) and Supplemental Nutrition Program for Women, Infants, and Children (WIC) – $74.2 billion

SNAP provides nutrition benefits to help needy families afford healthy food. WIC expands these benefits to pregnant women, new mothers, and children under age 5 who are low-income and nutritionally at risk.

Special Education Grants – $12 billion

The Individuals with Disabilities Education Act (IDEA) guarantees free appropriate public education and related services to children with disabilities.

Section 8 Housing Assistance Payments Program – $10.7 billion

Section 8 vouchers help low-income families, the elderly, and people with disabilities find safe and affordable rental housing in the private market.

Head Start – $9.4 billion

Head Start programs promote school readiness in children under age 5 from low-income families.

School Breakfast Program (SBP) and National School Lunch Program (NSLP) – $8.8 billion

SBP provides reimbursement to states to operate nonprofit breakfast programs in schools and residential childcare places. NSLP provides low-cost or free lunches to children in these same settings.

Federal Foster Care Program (FFCP) and Adoption Assistance Program (AAP) – $8.2 billion

The FFCP helps to provide safe, out-of-home care for children until they can be safely returned home or permanently placed in other arrangements. The AAP provides financial support to adoptive parents of children with special needs.

Child Care and Development Block Grant (CCBDG) – $2.9 billion

The CCBDG helps low-income families pay for child care so they can work or attend job training or education.
In addition to federal programmatic funding, the census is also a crucial component of community planning. When children are missing from the census, the communities in which they grow up miss out – not just in the census year but for the next 10 years – and 10 years are most of a childhood. State and local governments use census data to plan and allocate funds for schools, libraries, and other public services. Accurately counting children in the census – all children, from all races, ethnicities, and socioeconomic backgrounds – can help reduce classroom overcrowding and ensure that schools get resources they need to support their students. Census data also inform policymakers about which communities need child care for infants and toddlers. Furthermore, census counts affect how funds are distributed for maternal and child health programs, including services for children with special health care needs.

Federal programs, as well as local services, are essential for children’s healthy development. Research shows that programs that support families by providing necessary resources have positive effects on children’s well-being throughout their lives. For example, access to pre-kindergarten education is linked to improved academic performance and job productivity later in life. Nutritious meals support both physical and mental development. In other words, our nation’s children and youth rely on these programs to grow into healthy, productive, and thriving adults. [8]

It is therefore imperative that all children, including newborns and infants, be counted in this year’s census. To ensure that everyone is counted and no child is overlooked [1,9]:

- Count all children, no matter their age or relationship to the person completing the census. Biological children, stepchildren, adopted children, foster children, grandchildren, and children in joint custody arrangements should all be counted.
- Children should be counted where they live or sleep most of the time, even if their parents do not live there or the children are not related to the person completing the census.
- Children who split time between more than one home should be counted where they live or sleep most of the time. If time is split equally, children should be counted where they stay on April 1.
- For children who do not have a permanent place to live, count them where they are staying on April 1, even if they are only staying there temporarily.
- Count newborn babies at the home where they will live most often, regardless of whether they are still in the hospital on April 1.
- If a child has recently moved or will soon move to a new home, count the child where he or she lives on April 1.

The Census Bureau is working with partners in states and local communities to improve the count of young children in 2020. [10] Efforts such as The Census Project and the Count All Kids campaign are also providing information about how to ensure an accurate census count for families and communities. [11, 12] But achieving an accurate count requires everyone’s participation. The stakes are high.

Any child overlooked in the 2020 census will not be counted again until 2030 – all but guaranteeing a decade of underrepresentation and missed opportunities in federal, state, and local government program funding. As we recognize Census Day this April 1, it is vital that we do everything we can to ensure that all children are counted.

References
5. Walejko, G., Shia, L., Scheid, S., and Griffin, D. 2019. Researching the Attitudes of Households Reporting Young Children – A Summary of Results from the 2020 Census Barriers, Attitudes, and Motivators Study


DOI
https://doi.org/10.31478/202003d

Suggested Citation

Author Information
Judith Seltzer is research professor of sociology and past director of the California Center for Research Population at the University of California, Los Angeles. Deborah Walker is a past president of the Global Alliance for Behavioral Health and Social Justice, president of the Board of Directors of Family Voices, and adjunct professor at Boston University School of Public Health.

Judith Seltzer is a member of the Committee on National Statistics and Deborah Walker is a member of the Forum for Children's Well-Being at the National Academies of Sciences, Engineering, and Medicine.

Acknowledgments
The authors would like to thank Connie Citro, Senior Scholar in the Committee on National Statistics, and Daniel Cork, Senior Program Officer, Senior Program Officer for the Committee on National Statistics, for providing comments on early drafts of this paper. The authors would also like to thank Erin Kellogg, Associate Program Officer, for her valuable contributions to this paper.

Conflict-of-Interest Disclosures
None to disclose.

Correspondence
Questions or comments should be directed to Judith Seltzer at seltzerj@ucla.edu and Deborah Walker at debbie.walker@earthlink.net.

Disclaimer
The views expressed in this paper are those of the authors and not necessarily of the authors' organizations, the National Academy of Medicine (NAM), or the National Academies of Sciences, Engineering, and Medicine (the National Academies). The paper is intended to help inform and stimulate discussion. It is not a report of the NAM or the National Academies. Copyright by the National Academy of Sciences. All rights reserved.