As a society we are doing remarkably little to address the vulnerable status of children. Our poverty programs typically keep children alive, but very poor. Our parenting supports are infrequent, intermittent, sporadic, and isolated. Children no longer have a network of caring adults they can turn to, and rely on for guidance, instruction, discipline, and love. The days of the extended family with three or more related adults living in the family home, or at least within a block or two, ended with World War II. The days of growing up as part of a neighborhood, playing in your own front yard, or triking around the block, and knowing that someone who knew you would notice if you misbehaved or got hurt are also gone.

No group is as powerless and vulnerable, and yet as important to our future, as our children. We know of the negative effects of poverty, uncaring adults, inadequate education, and marginal nutrition on physical, social, emotional, mental, and vocational development. Yet many of us believe that if we just take care of our own, that’s as much as we can be expected to do. In reality, to the extent that we fail to meet the basic developmental needs of each of our children, all of us will pay the price. We will continue to live in a society with persons whose potential to be productive, caring, and invested members of society has been permanently limited or
damaged. We will continue to live in a society where injustice and inequality create rage, frustration, antisocial behavior, and poorer health status for the entire community.

Yet, there are so many ways in which the children of today are vulnerable to forces that interfere with their healthy growth and development.

First, and probably foremost, are poverty and its wide-ranging ramifications. We know that children are the poorest population in our culture. For a family of four, typically with two adults and two children, the current poverty level is $16,000 per year. By this standard, fourteen million children in America are poor; and almost 50 percent of children in single parent homes are poor. Poverty has a huge impact on every aspect of a child’s life. Before the child is born, if a mother has inadequate health insurance, she may receive inadequate prenatal care. An inadequate diet, especially, a diet lacking elements we know are key to the early development process, impairs growth and limits the child’s potential for full intellectual and physical development.

There is also substantial research confirming that without access to mental, physical, and emotional stimulation; caring relationships with nurturing adults; and adequate nutrition, children enter their unique work environment (school) with deficits in their ability to concentrate and learn. This often establishes a pattern of vulnerability that extends throughout their lifetime, making them more susceptible to adult poverty, as well.

Where do we begin? Midwest Bioethics is starting by shifting its focus on end-of-life issues to a focus on the just needs of vulnerable populations. I am reminded of a quote that I heard recently, paraphrased: To die is not the tragedy; what is a tragedy is to die with commitments unmade, convictions unexpressed, and service unfulfilled. Our commitment to promote respect for human persons will be inadequate and our efforts unsuccessful unless we focus on the youngest and most vulnerable among us, our children.