

Contexts of Childhood Health and Wellbeing

*A cross-cultural and historical perspective
 of childhoods across time and place*

How we think about childhood matters. It can affect child development and influence the way policies are designed to address children's health and wellbeing.

In the United States, we view childhood as a time of vulnerability. We see child policies as "investments" in the future and children as "belonging" to their parents or caregivers. These ideas contribute to our collective understanding of what childhood is, but, in reality, they are our cultural interpretations of children's biological development.

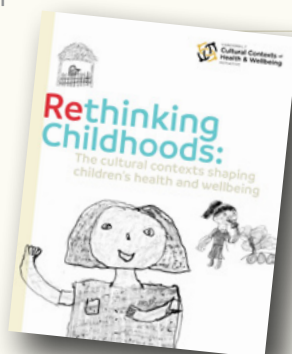
Childhood is more than biology, though; it is a social construct that varies across cultures and history. In other words, a person's experience of childhood depends on where and when they grow up. Yet, definitions of childhood used in policy and clinical settings today rely on a Western, biologically based norm that undermines the role that culture plays in defining and shaping how children experience their lives.

Comparing how childhoods are understood globally across space and time allows us to see how social constructs of childhood can influence children's autonomy, dependency, and risk. This report aims to put our cultural assumptions and biases of childhood into perspective and introduce new possibilities for health practice and policy in the United States.

To improve our approach to children's wellbeing, we must:

- **Rethink and expand our understandings of childhood(s).** Recognize the limitations of universal metrics and benchmarks based on Western norms and develop multidimensional approaches to child wellbeing.
- **Embrace autonomy and interdependence.** Acknowledge how contradictions in policies and practices can unwittingly marginalize children based on race, gender, and class. Address child-centered policies through the lens of interdependence.
- **Care for all voices.** Children's voices should be incorporated into all policies that impact children.

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In the report, we detail six key findings and their implications for policymakers:

Key Findings

Implications for Policymakers

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| 1 | Western narratives of childhood derive from legacies of colonial subjugation and racial domination, with children viewed as unformed and irrational and needing guidance, protection, and control. | See children as human beings with intrinsic worth, rather than just as investments in the future. |
| 2 | Children's growth and wellbeing emerge from the physiological processes of "growing up" interacting with cultural, political, socio-economic, and environmental factors –and, as such, will not be the same for everyone. | Be skeptical of universal metrics and developmental benchmarks based on Western norms and recognize that children's health emerges from the interplay of many biological and social factors. |
| 3 | People experience childhood through racial and gender identities, economic status, and location; this can result in bias when deciding who is deserving of care and protection. | Acknowledge the ways that assumptions rooted in colonialism influence policies that can marginalize children based on race, gender, and class. |
| 4 | Children are often framed as dependents who "belong" to their caregivers; in fact, they are interdependent members of families and social networks that define "belonging" in various ways. | Recognize children as part of diverse, interdependent networks of care and develop child-centered policies that highlight wellbeing and care as a collective endeavor. |
| 5 | Children's experience of vulnerability and autonomy depends on their social and economic environments and is not a "natural" condition of their body or life stage. | Make public commitments to and create criteria for including children's direct participation in all stages of policy and infrastructure design. |
| 6 | The stigma against children as decisionmakers denies their active role in caring for themselves and others and ignores their needs and preferences in healthcare decisionmaking. | Engage children's voices in healthcare policy and practice, as their insights can lead to greater creativity, innovation, and inclusion. |

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