

RESOLUTION

Subject: Proposal for the Kentucky Medical Association to Support Universal Pre-K and Comprehensive Early Childhood Education Investment in Kentucky

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Referred to: Reference Committee

WHEREAS, early childhood education, including universal pre-kindergarten, is a powerful public health intervention shown to improve developmental outcomes, mental health, educational attainment, and long-term wellness in children, especially those from underserved communities; and

WHEREAS, socioeconomic status is a critical determinant of health, and investment in accessible, high-quality preschool programs for all Kentucky families can promote upward mobility and reduce intergenerational health disparities; and

WHEREAS, preschool-aged children's brains grow very quickly and are about 90 percent of the size of an adult's brain by age 6¹; and

WHEREAS, studies show preschool participation was independently linked to higher educational attainment, income, socioeconomic status (SES), and health insurance coverage, as well as lower rates of justice-system involvement and substance abuse²; and

WHEREAS, the CDC states that early childhood education (ECE) interventions can improve child development and act as a protective factor against the future onset of adult disease and disability¹; and

WHEREAS, in 2019, over half (54%) of low-income preschoolers in the United States did not attend any program that provided early childhood education¹; and

WHEREAS, physicians have a responsibility to advocate for public policies that address the social determinants of health, including early education access, that shape lifelong outcomes and community wellness; now, therefore, be it

RESOLVED, that KMA supports the implementation and continued funding of universal pre-kindergarten for all 4-year-olds in Kentucky and full-day kindergarten as a statewide strategy to improve population health, education, and economic stability; and be it further

RESOLVED, that KMA advocates for ongoing collaboration between healthcare professionals, public education systems, and policymakers to promote early learning as a foundational element of Kentucky's public health framework, and encourages future funding to prioritize underserved populations across the Commonwealth.

References:

1. Centers for Disease Control and Prevention. (2016). Early childhood education | Health impact in 5 years (HI-5). https://archive.cdc.gov/www_cdc_gov/policy/hi5/earlychildhoodeducation/index.htmlarchive.cdc.gov
2. Reynolds, A. J., Temple, J. A., Ou, S. R., Arteaga, I. A., & White, B. A. (2011). School-based early childhood education and age-28 well-being: Effects by timing, dosage, and subgroups. *Science*, 333(6040), 360–364. <https://doi.org/10.1126/science.1203618>