

Death rate for US children surges 25 percent in 10 years

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The death rate for US children has surged by 25 percent over the past decade, according to a study published last month by pediatrician Dr. Christopher Forrest and colleagues in the *Journal of the American Medical Association*. Even as the child mortality rate has slowly fallen in other developed countries, it has surged in the US, along with every other indicator of chronic illness.

The research underscores the American ruling elites' complete disregard for children's well-being and safety, especially for the children of the working class.

In 2014, US children were about 1.6 times more likely to die than their counterparts in peer countries. By 2022, that gap had widened dramatically: American children were now 2.3 times as likely to die.

The authors estimated that between 2007 and 2022, an additional 316,000 US child deaths were attributable to the gap in mortality compared to other developed countries. This is equivalent to a staggering 54 excess child deaths per day in the US.

From 2011 to 2023, the prevalence of children aged three to 17 with chronic conditions rose from 39.9 percent to 45.7 percent within the healthcare systems studied. US children aged 1 to 19 were 15.3 times more likely to die from firearms compared to their peers in other developed nations, with these rates steadily rising over the study period. In 2020, firearm mortality overtook motor vehicle crashes as the leading cause of death in US youth.

The study also documented alarming trends in mental health and chronic conditions. Major depression among children increased by 230 percent from 2010 to 2023, while sleep apnea tripled, eating disorders increased by 220 percent, and childhood obesity rates rose from 17 percent in 2007-2008 to 20.9 percent in 2021-2023.

For infants under age one, respiratory infections, prematurity, congenital anomalies and sudden unexpected infant deaths were common factors in their demise, speaking to the broader issue of maternal healthcare and medical issues surrounding childbirth in the US. The US mortality disadvantage was driven largely by sudden unexpected infant death and prematurity—conditions directly linked to inadequate prenatal care, maternal health disparities and poverty. US infants were

2.2 times more likely to die from prematurity and 2.4 times more likely to die from sudden unexpected infant death compared to peer countries.

These statistics reflect the systematic destruction of the social infrastructure necessary to support child development and health.

In a companion editorial to the study, titled "How we are failing US children," Dr. Elizabeth Wolf of Virginia Commonwealth University and colleagues explained that these systemic problems creating disastrous conditions are all preventable and arise from negligence in addressing the welfare and well-being of the US population.

Five percent of US children lack insurance, while 40 percent of children with public insurance have limited access to primary and specialty care simply because the insurance system is rigged against reimbursement and primary care. There is a suffocating deficit of pediatric mental health professionals that cannot keep pace with demands, placing additional burdens on primary care clinics and emergency departments.

The editorial accompanying the study points to five domains that explain the US health disadvantage: healthcare, behaviors, socioeconomic conditions, the environment and public policies.

The US differs fundamentally from peer countries in each domain. The fragmented health insurance landscape provides little help for lower-middle class families and impedes continuous enrollment, while the US has among the highest child poverty rates and income inequality in the OECD.

Environmental factors compound these problems. Persistent underinvestment in childhood health programs limits youth access to health-promoting resources and increases exposure to health hazards. Low-income children have greater exposure to airborne pollutants that trigger asthma and are more likely to live near environmental hazards and high-speed roads without pedestrian safety features.

Much of the increase has occurred since the onset of the COVID-19 pandemic, underscoring not only the deadly nature of the pandemic but also the failed social and political response that has steadily eviscerated public health and healthcare.

The pandemic itself continues unabated, with more than 350 Americans still dying weekly from COVID-19 as of May 2025,

and the US is now in the grips of its 11th wave of mass infection. Since the start of the pandemic, there have now been over 1.38 million excess deaths in the US, with the working class disproportionately affected.

Among children, an estimated 4 percent have now developed Long COVID, according to recent RECOVER Initiative research, translating to approximately 6 million children in the US alone. This condition, which can cause lasting damage to multiple organ systems and dramatically reduce life expectancy, represents a generational health catastrophe that will burden these children throughout their lives.

The Trump administration's "Make America Healthy Again" (MAHA) initiative, led by the anti-vaccine fanatic Robert F. Kennedy Jr., represents not a solution but an acceleration of this crisis. MAHA is a smokescreen designed to mask eugenicist policies that will dramatically worsen child mortality.

Since taking office, Kennedy has canceled \$500 million in mRNA vaccine research funding, eliminated injury prevention and maternal health programs, and launched "research" initiatives designed to fuel vaccine hesitancy among parents. These policies will further lower life expectancy and set the stage for another catastrophic pandemic.

As Karl Marx and Friedrich Engels observed nearly two centuries ago, class divisions shape every aspect of childhood, and children of the poor suffer the harshest fates in capitalist society. The founders of scientific socialism correctly saw genuine child welfare as impossible under capitalist social relations and advocated for a proletarian revolution to end the exploitation of the working class and social inequality, thereby securing the well-being of future generations.

Objectively, the means exist to ensure that every neighborhood is safe from violence, crime and pollution. Access to nutritious foods, high quality healthcare and public education could be readily available. However, as the Trump administration's recent and ongoing cuts to healthcare and scientific funding demonstrate, the ruling elites are instead clawing back every gain made by workers through past struggles against the capitalist system.

As the 2024 Oxfam report noted, net profits for 200 of the largest US corporations soared to \$1.25 trillion in 2022, a 63 percent increase from 2018, of which 90 percent was paid out to wealthy shareholders. While CEO payouts continue to climb at historic rates, wages remain stagnant, falling behind inflation. Meanwhile, cuts to workplace safety continue to accumulate, endangering the lives of workers without any support from union bureaucrats, who defend corporate attacks on the lives and well-being of the working class.

The connection between this crisis and the broader assault on working class life is exemplified by the International Workers Alliance of Rank-and-File Committees (IWA-RFC) investigation into the death of Stellantis worker Ronald Adams Sr.

Adams, a 63-year-old skilled tradesman known as the "protector of the plant" for his dedication to safety, was crushed to death by a gantry crane on April 7, 2025, because the company cut corners on safety to meet production quotas. Those children who survive into adulthood under these conditions are thrust into similar deadly work environments where their lives and health continue to be subordinated to private profit.

The capitalist system treats human life as expendable from birth to death, and the same social relations that produce 54 excess child deaths per day continue to operate throughout workers' lives. According to the AFL-CIO itself, over 140,000 workers die each year in the US from hazardous working conditions, including traumatic injuries and occupational diseases like cancer, respiratory illness and heart failure. Globally, the International Labour Organization (ILO) estimates that nearly 3 million workers die worldwide each year from work-related injuries and diseases.

The change that is necessary to stop these cycles of premature death will not come from any section of the political establishment, which serves the interests of corporate America rather than working families. The health crisis facing American children is a direct product of the capitalist system's prioritization of profit over human needs.

The solution requires a fundamental restructuring of society based on social need rather than private profit. This means universal healthcare, massive public investment in education and social services, elimination of child poverty through income redistribution, democratic control over the resources necessary to ensure every child's healthy development, and workers' control over production to guarantee safe working conditions.

The more than 54 children who die unnecessarily each day in America represent not mere statistics, but an indictment of a social system that has failed in its most basic obligation—protecting its most vulnerable members. Their deaths, like those of workers such as Ronald Adams, demand nothing less than the complete transformation of American society. Only through the establishment of a workers' government committed to socialist principles can the social murder of children and workers under capitalism finally be brought to an end.



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