



Support Funding for Children, Youth, and Families

April 22, 2025

The Honorable Robert Aderholt
Chair
House Appropriations Subcommittee
on Labor, Health and Human Services,
Education, and Related Agencies

The Honorable Shelly Moore Capito
Chair
Senate Appropriations Subcommittee on
Labor, Health and Human Services,
Education, and Related Agencies

The Honorable Rosa DeLauro
Ranking Member
House Appropriations Subcommittee on
Labor, Health and Human Services,
Education, and Related Agencies

The Honorable Tammy Baldwin
Ranking Member
Senate Appropriations Subcommittee on
Labor, Health and Human Services,
Education, and Related Agencies

Dear Representative Aderholt, Representative DeLauro, Senator Capito, and Senator Baldwin,

The *Child Partnership* is a growing coalition that supports a results-driven approach to U.S. foreign assistance that includes children and youth in smart, efficient investments. On behalf of the Partnership, we respectfully request level funding in the Fiscal Year 2026 (FY26) Labor, Health and Human Services, Education, and Related Agencies Appropriations bill to address three urgent and interconnected threats to children: violence, preventable illness, and forced labor and trafficking.

Specifically, we ask for strong funding for the following accounts: the **Violence Against Children and Youth Surveys (VACS)** at the **Centers for Disease Control and Prevention (CDC)**; the **CDC Global Health Center**, which supports immunization, disease prevention, and global health security; and the **Bureau of International Labor Affairs (ILAB)** at the **U.S. Department of Labor**, which leads U.S. efforts to eliminate child labor and trafficking.

These investments advance national security, economic prosperity, and global leadership by strengthening global child protection and health systems. We urge you to maintain the FY24 enacted funding for the following accounts:

Department of Labor

- International Labor Affairs Bureau: \$118,000,000

Department of Health and Human Services

- Center for Disease Control’s Violence Against Children and Youth Surveys: \$10,000,000
- Center for Disease Control and Prevention’s Global Health Center: \$692,840,000

\$118 million for the Bureau of International Labor Affairs (ILAB)

ILAB is the only U.S. agency dedicated to ending exploitative child labor. Its engagement and technical cooperation initiatives have removed or prevented nearly 2 million children from hazardous labor since 1995 and supported over 185,000 families through education and livelihood assistance. These programs provide education and life skills for children and youth while supporting families with decent work alternatives to keep children in school and out of labor. ILAB also strengthens government and stakeholder capacity to combat child labor and forced labor globally. Its List of Goods Produced by Child Labor or Forced Labor has enabled companies such as Nestlé and Mars to improve supply chain oversight and meet rising investor and consumer demands for ethical sourcing. ILAB supports labor compliance in countries with U.S. trade agreements, reducing the risk of forced labor in American supply chains.

Justification

An estimated 160 million children are engaged in child labor—nearly 1 in 10 children globally. Many are subjected to hazardous conditions, trafficking, and forced labor, particularly in conflict-affected and economically fragile regions. In countries like Afghanistan, Haiti, and parts of West Africa, economic insecurity and social breakdown are driving families to send children to work in unsafe environments—or into early marriage or exploitative labor arrangements. These conditions deepen poverty, fracture communities, and contribute to transnational crime and irregular migration.

ILAB accounts for the largest allocation of all U.S. Government spending on efforts to prevent and address violence against children. Continued investment in ILAB safeguards children, strengthens labor markets, and protects the integrity of global trade. The requested funding would maintain current program levels, robustly fund technical assistance for worker rights in countries with U.S. trade agreements or preference programs, ensure alignment with expanding U.S. trade commitments, and sustain strong program evaluations.

\$10 million to support the CDC’s Violence Against Children and Youth Surveys (VACS)

VACS are nationally representative, population-based surveys that measure the prevalence, nature, and consequences of physical, emotional, and sexual violence against children, adolescents, and youth. Conducted in partnership with national governments, VACS are the first step in preventing violence by generating high-quality, disaggregated data essential for designing evidence-based child protection systems.

The U.S. Centers for Disease Control and Prevention (CDC) provides technical and financial support for these surveys, which have been implemented in countries such as Uganda, Haiti, and the Philippines. VACS data have led to expanded social services, new legal protections, and national action plans to prevent violence and support survivors. Each VACS costs approximately \$3 million, and CDC currently supports two to three surveys per fiscal year.

The \$10 million request would support the implementation of additional surveys, ongoing technical assistance, and capacity building. It would also strengthen local prevention and response systems and enable repeat surveys to evaluate program impact. Funding would provide a dedicated budget line for VACS within the CDC, allowing for consistent, scalable support beyond existing funding from PEPFAR and USAID (e.g., APCCA, CARSI). Although VACS are primarily used internationally, a pilot VACS is currently underway in a U.S. city to explore the domestic application of the methodology.

Justification

Violence against children is a global crisis affecting nearly one billion children, half the world's child population, each year. It causes lifelong harm, limits education and economic opportunity, damages physical and mental health, and perpetuates cycles of poverty and displacement. In fragile and conflict-affected settings like Afghanistan, economic collapse and governance breakdowns expose children to heightened risks, including early marriage and exploitative labor.

VACS data equips countries to develop and monitor national action plans, allocate resources efficiently, and implement targeted violence prevention and response programs. These surveys help governments and development partners identify service gaps and track progress toward safer, more stable societies. A 2023 CDC report documented measurable reductions in violence and stronger national child protection systems in VACS countries.

Investments in VACS also advance U.S. foreign policy goals by contributing to long-term peace, security, and development. According to the World Bank, secondary education reduces the risk of conflict by 50%, and children exposed to violence are significantly more likely to be recruited into criminal or extremist groups.

Report Language Request: Violence Against Children Surveys, Reports (VACS)

The Committee directs that, not later than 90 days after enactment of this Act, the Secretary of Health and Human Services, in consultation with the Secretary of State and the USAID Administrator, shall submit a report to the Committee on the implementation and delivery of VACS in countries that completed survey implementation during the fiscal year and are engaged in the data-to-action process. The report should detail prevention and response efforts by implementing countries; technical support from the U.S. government (CDC, State/PEPFAR, and USAID); and progress in research, global leadership, and programmatic innovation based on VACS findings.

Justification:

The Violence Against Children and Youth Surveys (VACS) measure the prevalence, nature, and consequences of violence against children, adolescents, and young people. The disaggregated data collected and analyzed from the surveys is detailed enough to help identify the potential risks and protective factors in individual communities, which can guide specific policy and programmatic actions to prevent and respond to violence against children and assess the impact and effectiveness of services. The surveys also help identify existing gaps in the continuum of prevention and response to violence against children. The survey information informs each country's evidence-based policy and

programmatic response, including through cooperation with bilateral and multilateral development partners. A report capturing the experiences of VACS-implementing countries and U.S. technical support for VACS implementation will better inform Congress on the impact of the VACS and help identify gaps and areas of improvement.

\$692,840,000 for the Centers for Disease Control and Prevention’s (CDC) Global Health Center

This funding level, consistent with the FY24 and FY25 enacted levels, would support CDC global health programs and cover operational expenses essential to responsible stewardship of U.S. taxpayer dollars. The CDC Global Health Center leads international efforts in disease surveillance, capacity building, outbreak response, and research and development of critical public health tools and technologies.

Key initiatives include support for immunization programs that have reduced measles deaths by 83% since 2000 and decreased new polio cases by more than 99% since 1988. CDC-led efforts in polio eradication alone have prevented millions of cases of paralysis and saved an estimated \$27 billion in global healthcare costs.

In addition, the Center’s Field Epidemiology Training Program has trained over 22,000 “disease detectives” in 90 countries, enabling partner governments to detect and contain disease outbreaks at their source before they escalate into epidemics. These investments enhance global epidemic intelligence and improve response times, protecting American lives and global health security.

We urge continued support and oversight of CDC global health programs, which not only combat global health threats like Ebola, Marburg, and the bubonic plague but also safeguard U.S. national and economic security by stopping infectious diseases before they cross borders.

Justification

Millions of children around the world remain unprotected against preventable illnesses such as measles, polio, and diphtheria. In low-resource and crisis-affected settings, children are particularly vulnerable due to weak health systems, malnutrition, and unsafe living conditions. CDC’s Global Health Center is pivotal in building the public health infrastructure needed to address these threats.

Failure to invest is costly: Containing a single measles outbreak in Washington State in 2019 cost \$2.3 million, while the labor costs to respond to a single polio case in New York in 2022 reached \$139,000. In contrast, vaccines for these diseases cost just a few dollars per child, demonstrating that prevention is vastly more cost-effective than response.

The Global Health Center supports CDC’s divisions focused on HIV/AIDS, tuberculosis, malaria, parasitic diseases, immunization, and global health protection. These divisions not only address today’s most pressing health threats but also monitor, evaluate, and strengthen the impact of U.S. global health investments in places with limited local surveillance capacity.

CDC’s global surveillance network has proven instrumental in containing outbreaks before they reach the U.S. For example, early detection and containment of Ebola outbreaks in West Africa and Uganda

prevented international spread. A RAND Corporation study found that **every \$1 invested in global health security yields \$10 in savings by averting pandemics and trade disruptions.**

Investments in CDC global programs are among the most cost-effective in the federal budget: every \$1 spent on immunization generates an estimated \$54 in return through increased productivity, reduced mortality, and stronger local systems. These modest investments—less than one-tenth of one percent of the federal budget—not only promote global goodwill and public health but also directly benefit the health, security, and economy of the United States

Advancing U.S. Safety, Stability, and Global Leadership

These three investments— ILAB, VACS, and the CDC Global Health Center—represent a strategic opportunity to advance core U.S. interests in a rapidly shifting global landscape. By protecting the world’s most vulnerable children from violence, disease, and exploitation, these programs help prevent future crises, promote resilience, and create enabling conditions for long-term peace, prosperity, and cooperation.

Child-focused foreign assistance is a powerful lever for diplomacy and development in an era marked by geopolitical instability and global health threats. Children are often the first to suffer during emergencies, and the last to recover without sustained support. When children are protected and equipped to thrive, families, communities, and entire nations grow stronger, more stable, and more aligned with shared democratic values.

These investments advance U.S. leadership and global influence in four key ways:

- **Strengthening political stability and reducing conflict**
- **Mitigating health and economic shocks**
- **Improving global supply chain security and trade integrity**
- **Building goodwill and partnerships with allied governments**

These investments also strengthen partnerships with foreign governments, build goodwill, and promote a stable international order—key goals of the U.S. National Security Strategy.

We are also writing to Chairman Diaz-Balart and Ranking Member Frankel of the National Security, Department of State, and Related Programs Subcommittee to support the Vulnerable Children account, the Department of State Child Protection Compacts, and efforts to end child marriage.

We urge the subcommittee to maintain U.S. leadership in global child health and protection through sustained support for the CDC’s Global Health Center and related efforts. These programs represent a strategic investment in children’s futures and represent American values and global responsibility. Furthermore, we value the impact made by global efforts to end all forms of violence against children and urge the subcommittee to fully fund these critical programs in the Fiscal Year 2026 Labor, Health and Human Services, Education, and Related Agencies Appropriations bill.

Thank you for your time and leadership on this critical issue. We look forward to speaking with your office about investing in young people. If you have any questions, please reach out to Leila Milani, lmilani@futureswithoutviolence.org, or Suzanne Berman, Sberman@ChildFund.org. We will contact your staff to schedule a meeting.

Sincerely,
The Child Partnership

ANNEX I: Account-level requests and historical funding

Labor, Health and Human Services, and Education, and Related

<u>Account</u>	<u>FY 2024 enacted and FY25 CR</u>	<u>FY 2026 ask</u>
Centers for Disease Control and Prevention’s (CDC) Global Health Center	\$692.840 million	\$692.840 million
Violence Against Children and Youth Surveys (VACS)	Funding varies and is sourced from PEPFAR and USAID (APCCA, CARSI) budgets	\$10 million dedicated budget line to ensure consistent, reliable funding and strengthen implementation across foreign assistance priorities
International Labor Affairs (Child Labor)	\$30.17 million	\$30.17 million