

Live Long and Prosper

Local Policies for Improving Children's Health, Success and Happiness

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Every Child Matters

Children thrive in compact, mixed, multimodal, affordable and integrated communities.

Summary

This study uses new research to better understand how community design affects children's health, success and happiness, and identifies local policies to help achieve related goals. This is important and timely: American children currently have shorter life expectancies, less economic mobility, and less life satisfaction than at previous times and in most peer countries. This is surprising because the U.S. is affluent and technologically advanced, and spends more on healthcare and education per capita than most other countries. This study investigates these problems and potential solutions. It suggests that poor outcomes result in part from automobile dependency and sprawl which increase costs, risks, inefficiencies and inequities. This research indicates that community design affects children's health, success and happiness more than their family incomes. This analysis suggests that North American communities have more than optimal material wealth but insufficient social wealth. It recommends a shift from consumerist child-raising which imposes high costs on families, to community-oriented child-raising policies that reduce costs and increase benefits. This study identifies local policies that help create more compact, mixed multimodal, affordable, physically active and integrated communities. It offers decision makers practical guidance for improving children's welfare.

Key Words: Child Health, Economic Mobility, Sprawl, Smart Growth, Multimodalism, Community

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Introduction

Every child deserves to live in a healthy and supportive community where they can thrive. This study uses new research to better understand how community design factors affect children's health, economic success and happiness, and to identify local policies that can better achieve these goals. Although this research largely reflects North American conditions the findings have implications in most countries.

Sophisticated new analysis improves our understanding of how community design affects children's welfare (Ewing, et al. 2016; ITF 2021). This research indicates that children benefit from living in compact, mixed, multimodal, affordable and integrated communities. This challenges common assumptions. Popular culture tends to consider cities unhealthy, dangerous and unfriendly, leading to household decisions and public policies that favor sprawl over infill development, single-family over multimodal housing, and automobile travel over other travel modes. These decisions are often justified as, "better for the children."

This research suggests that approach is misguided. The suburban, automobile-dependent lifestyles commonly considered optimal increase child-raising costs beyond what most families can afford. This makes many parents feel inadequate and imposes financial stresses that force many to work more than optimal hours, reducing time for their families. In addition, suburban, auto-dependent lifestyles increase health risks. Community-oriented child-raising, which implements policies that benefit all families, can achieve better outcomes for children.

It is important to use comprehensive analysis when evaluating these impacts. For example, suburbs often seem safer and more successful than urban neighborhoods due to demographic sorting, that is, the tendency of affluent households to choose suburban single-family homes, and for poverty and associated social problems to concentrate in cities, but that does not mean that cities *cause* poverty, crime or mental illness. Similarly, active modes (walking, bicycling and variations such as wheelchairs and scooters) may seem more dangerous than driving when measured by distance (e.g., per billion kilometers), but per capita casualty rates tend to decline as active modes increases in an area because walking and bicycling impose less risk on others.

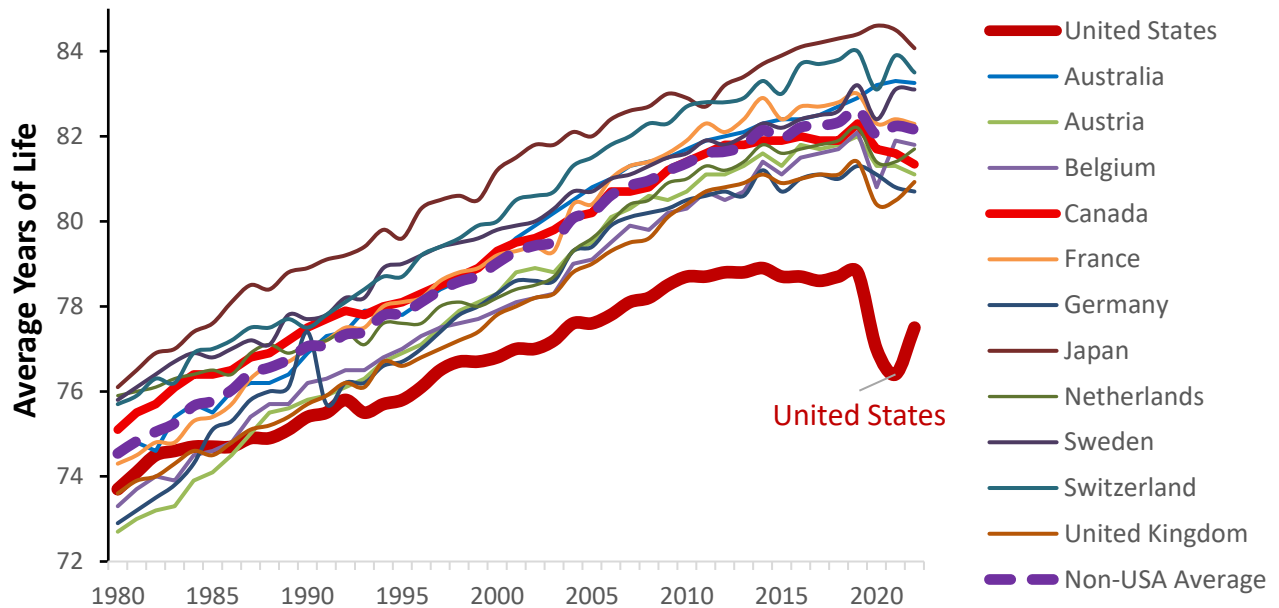
This is a timely issue. Many decision makers want practical guidance for improving children's health and opportunity. Existing resources, such as UN *Sustainable Development Goals* and UNICEF *Child Friendly Cities* program, are too general and global to address the challenges facing children in middle- and higher-income communities.

This study investigates how local and regional policies affect children's health, success and happiness. For example, if local policies favor expensive over lower-cost housing and transportation options, lower-income households will either be excluded or bear excessive costs, and if policies favor driving over other travel modes, households and communities will bear higher transportation costs, non-drivers will lack independent mobility, and residents will exercise less than if policies support more multimodal planning.

Evidence of Problems

This study investigates an anomaly; despite America's vast wealth and technical abilities its children have poor health and economic outcomes. In 1980 the U.S. has similar lifespans as peers, but it now lags as illustrated below. Although life expectancy tends to increase with incomes, this is no longer true for the U.S.: the *wealthiest* U.S. quartile now has similar lifespans as the *poorest* quartiles in western Europe (Machado, et al. 2025).

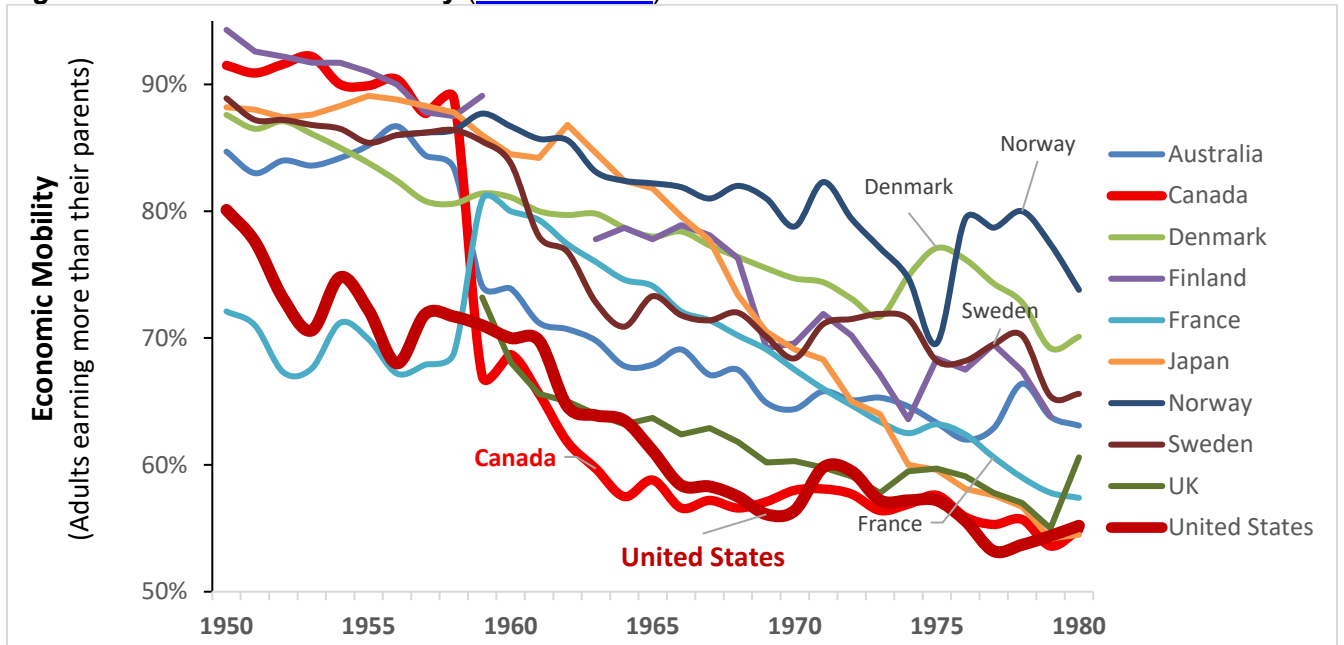
Figure 1 Life Expectancy at Birth (Based on [Rakshit, McGough and Amin 2024](#))



Americans have significantly lower life expectancies than peers. With current conditions, U.S. children are expected to live about five fewer years than in other affluent countries.

In recent decades, *economic mobility*, the chance that children become more financially successful than their parents, has declined in most developed countries, particularly in the U.S., as illustrated below (Manduca, et al. 2021; OECD 2018). This indicates that lower-income U.S. children now have less economic opportunities than other times and places.

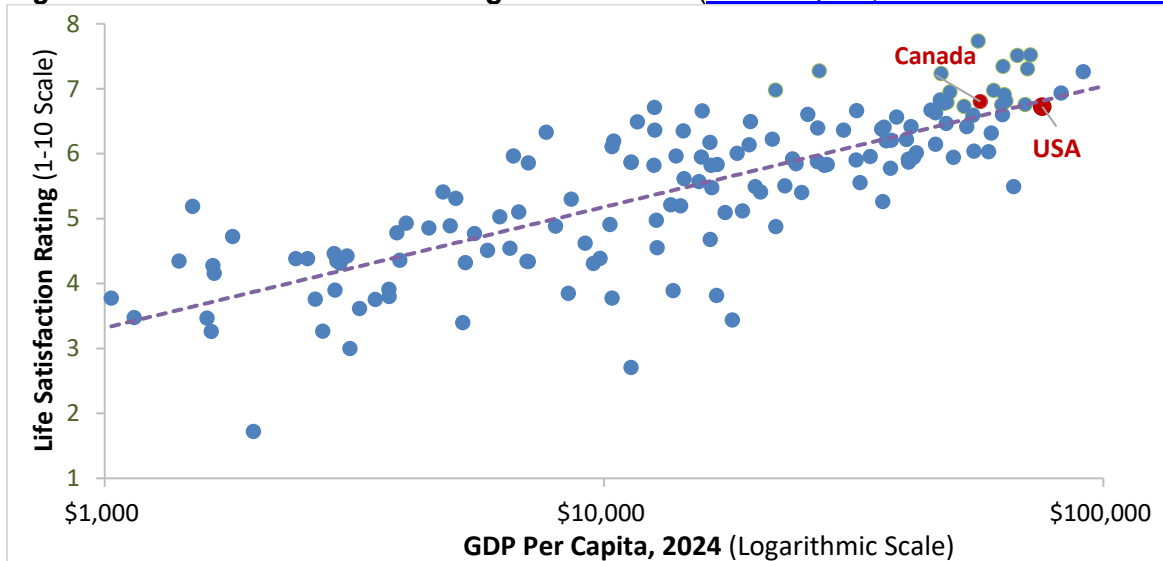
Figure 2 Economic Mobility ([Berman 2022](#))



The portion of adults who earn more inflation-adjusted incomes than their parents has declined and is lower in the U.S. than most peer countries.

Of course, wealth is not an end in itself, our ultimate goal is to maximize *happiness*, which can be measured using self-reported *life satisfaction*. The graph below shows that life satisfaction tends to increase with wealth, measured as Gross Domestic Product (GDP), but the GDP values are logarithmic, which exaggerates this relationship.

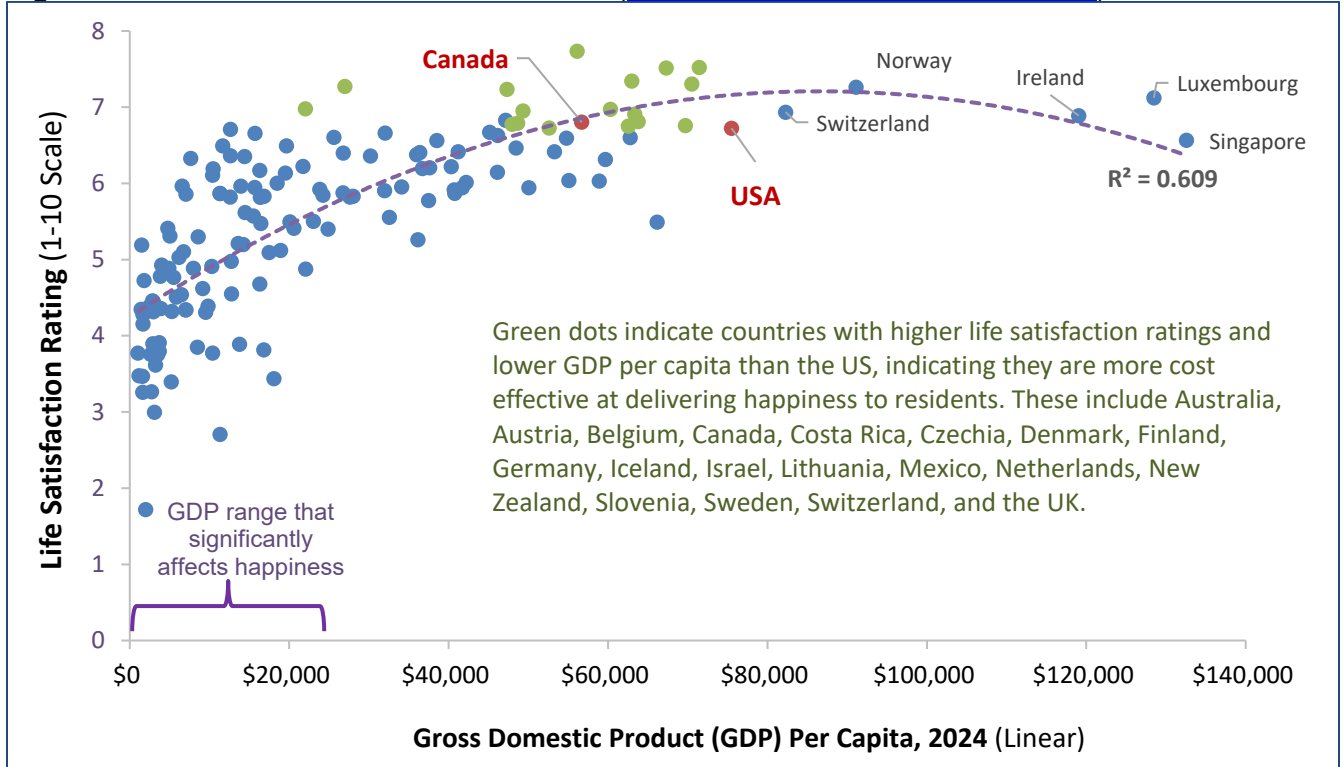
Figure 3 Life Satisfaction Vs. Logarithmic GDP ([Ortiz-Ospina, Acisu and Roser 2024](#))



Life satisfaction increases with economic productivity, but the GDP values are logarithmic which exaggerates this effect.

The figure below shows the same data using a linear scale. Life satisfaction tends to increase as economic productivity rises from low to moderate levels, but the relationship is weak above \$25,000 annual GDP, peaks about \$50,000, and becomes negative.

Figure 4 Life Satisfaction Vs. Linear GDP (Ortiz-Ospina, Acisu and Roser 2024)

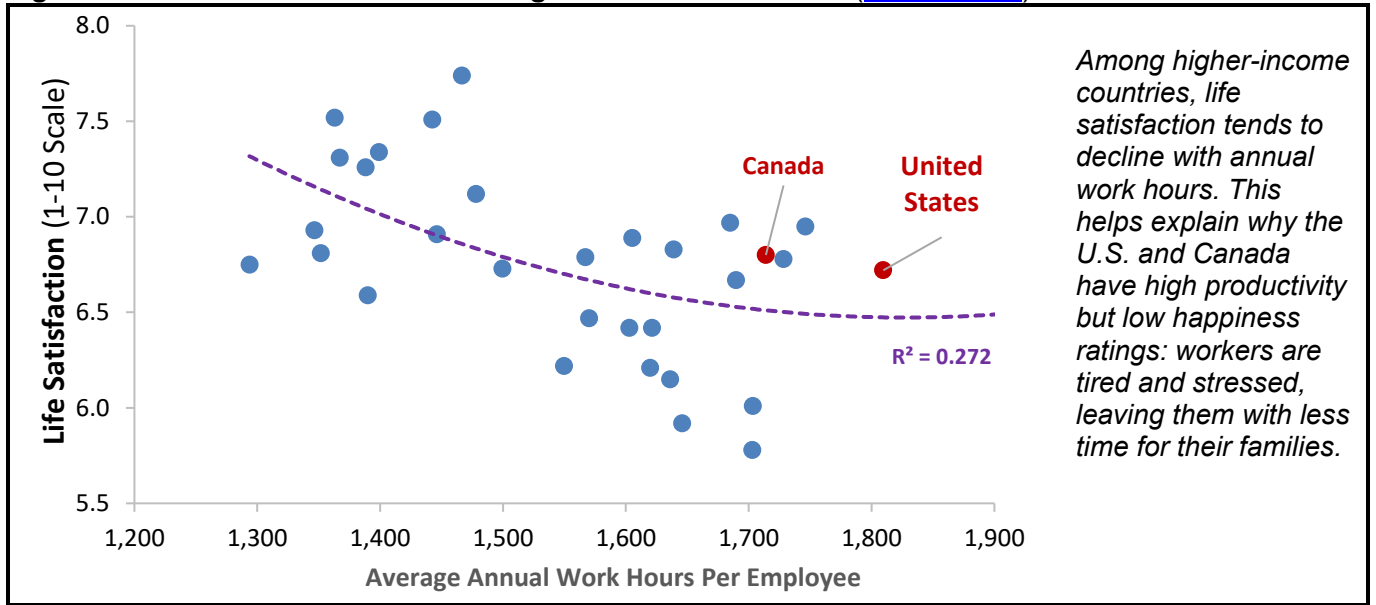


Life satisfaction increases up to about \$25,000 GDP per capita and tends to decline above \$50,000.

The lower life satisfaction at high GDP levels probably reflects a combination of declining marginal benefits (higher-income households benefit less from an additional dollar than lower-income households) and various problems that increase with economic productivity such as higher living costs, stress and longer working hours. The previous graph shows the negative relationship between annual work hours and life satisfaction; Americans tend to work more hours than in peer countries – one survey found that 37% of US workers have a “side hustle” in addition to their regular jobs (Gutierrez (2026) – which increases stress and reduces family time. In these ways, productivity-increasing factors can reduce happiness.

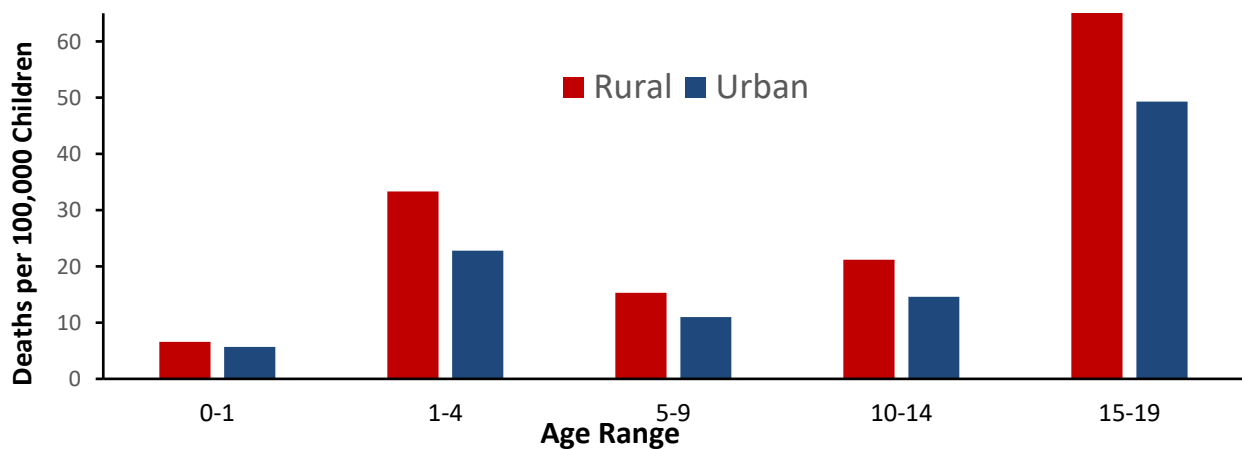
The *World Happiness Report* (Marquez, et al. 2024) finds that children and youths’ happiness is declining in affluent countries. Although globally, adolescents report higher life satisfaction than adults, this pattern recently reversed in North America. Researchers find a *negative* association between a country’s level of economic development and adolescent subjective well-being, suggesting that other factors affect children’s happiness more than income. This has long-term implications; according to the report, the best predictor for adult life satisfaction is subjective well-being and emotional health during childhood.

Figure 5 Life Satisfaction Vs. Average Annual Work Hours (OECD 2024)



Similar variations in health, success and happiness exist *within* countries. For example, children’s death rates tend to be lower and longevity higher in U.S. cities compared with rural areas (Walker and Brown 2022; Womack, Rossen and Hirai 2020), as illustrated below, and economic mobility also tends to be higher in compact, multimodal communities than in sprawled areas (Ewing, et al. 2016). This suggests that local conditions, and therefore local policies, significantly affect children’s welfare.

Figure 6 Rural Versus Urban Mortality Rates by Age (Zahnd and Probst 2019)



Rural areas have higher child death rates than urban areas.

The following section explores these relationships in more detail and provides guidance to better align public policies with strategic goals.

Key Findings and Recommendations

This section examines specific ways that community design affects children's health, success and happiness, and identifies local policies that support related goals.

Physical Activity and Fitness

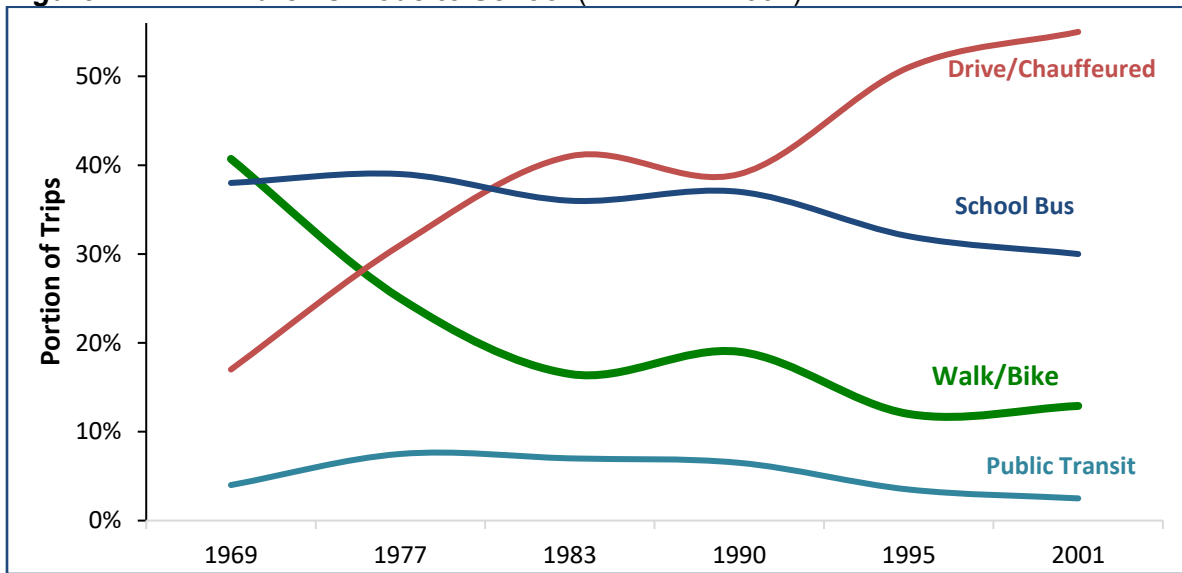
Physical activity is important for children's health and happiness. Experts recommend that adults spend at least 22 daily minutes and children at least 60 daily minutes engaged in moderate intense physical activity (CDC 2018). Although there are many ways to be physically active, including exercise programs and competitive sports, the most convenient and affordable approach for most people, particularly those who are currently sedentary, is to use active modes for recreational and utilitarian travel.

Many local policies can increase active travel (Agnello 2020; ITF 2023). It tends to increase with better walking and bicycling networks, slower vehicle traffic, compact and mixed development patterns, better public transit, and transportation demand management (TDM) incentives to reduce driving and increase non-auto travel (Fitch-Polse and Agarwal 2025). This type of development is called "Smart Growth" "new urbanism," or "15-minute neighborhoods." Residents of such communities tend to have healthier weights and better health outcomes, including less diabetes and cardiovascular disease, than in sprawled areas (Ewing, et al. 2014; Malambo, et al. 2016; Sallis, et al. 2016).

Children are influenced by their parents' behavior so healthy policies should support family physical activity (Sims and Bopp 2019). Walkability and bicycling indicators can be used to evaluate the quality of walking conditions and the feasibility of using active modes to access services and activities (Negm and El-Geneidy 2025). For example, Walk Score is a widely available rating and mapping system that indicates the portion of services and activities, such as shops, schools and parks, located within reasonable walking distances; a Walk Score over 70 indicates that most commonly-used services are easy to reach by walking. One recent U.S. study found that people significantly increase or reduce their physical activity after moving to a more or less walkable neighborhood (Althoff, et al. 2025). For example, moving from a neighborhood with a 25th percentile walkability rating to an area with a 75th percentile walkability rating increased walking by 1,100 daily steps.

Youths often prefer active travel over being chauffeured, and will use those modes if allowed (Buttazzoni, et al. 2023). During the Twentieth Century, active travel declined significantly, including by children travelling to school as indicated in the following figure. Currently only 11% of US elementary students and 26% of Canadian students walk or bike to school, far lower than most other countries (Kontou 2020). To increase children's autonomy and exercise some communities implement safe routes to school (SRTS) programs that improve and encourage non-auto travel. School travel patterns can have long-term effects. The study, "School Commute Shapes Sustainable Transportation Across Generations," (Jamme, et al. 2026) found that how children travel to school can have lifelong impacts: children who commute by sustainable modes -- walking, biking and transit -- are significantly more likely to use those modes as adults.

Figure 7 Children’s Mode to School (McDonald 2007)



Active travel to school declined significantly during the last half-century.

Access to neighborhood parks also affects residents’ physical activity and health. The study, “Where Matters: Health & Economic Impacts of Where We Live,” found the following impacts of neighborhood walkability or park proximity.

Table 1 Health Impacts of Walkability and Park Access (Frank, et al. 2019)

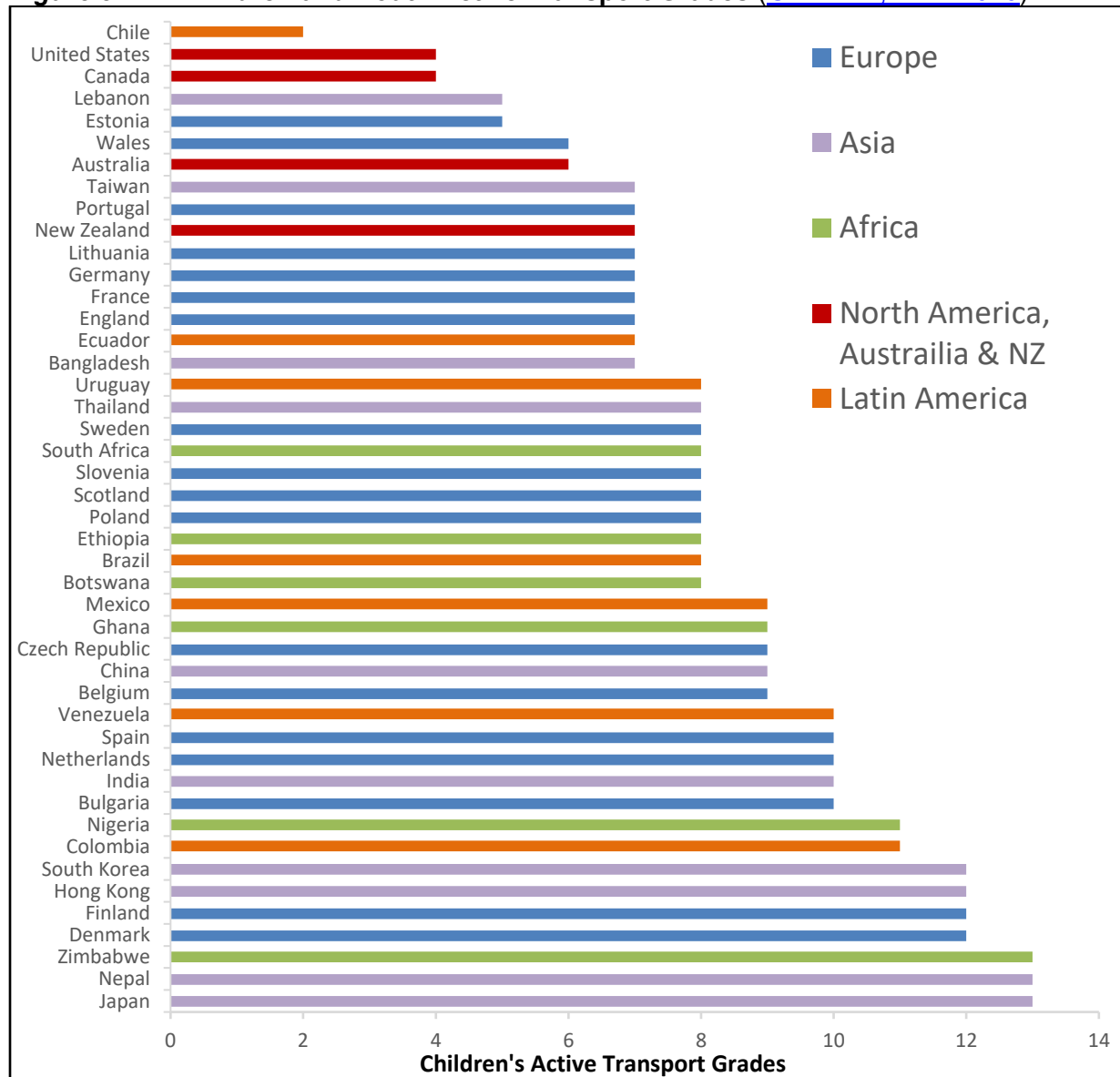
	Walkable Compared with Auto-Dependent	Many Parks Compared with No Parks
Physical Activity	45% more likely to walk for transportation and 17% more likely to meet physical activity targets.	20% more likely to walk for leisure or recreation and 33% more likely to meet the physical activity targets.
Obesity	42% less likely to be obese.	43% less likely to be obese.
Diabetes	39% less likely to have diabetes.	37% less likely to have diabetes.
Heart Disease	14% less likely to have heart disease.	39% less likely to have heart disease.
Stress	23% fewer stressful days.	19% fewer stressful days.
Sense of Community	47% more likely to have a strong sense of community and belonging.	23% more likely to have a strong sense of community and belonging.

Neighborhood Walkability and park access can significantly affect residents’ health.

This suggests that urban communities require sufficient greenspace, Experts recommend that urban neighborhoods should have suitable public parks within a 5-minute walk of homes, and maintain 30% to 40% tree canopy coverage to provide cooling, health and environmental benefits (WHO 2017; Konijnendijk 2023).

The following graph ranks countries on children’s active travel. Low ratings indicate that children have less independent mobility and physical exercise.

Figure 8 Children and Youth Active Transport Grades (González, et al. 2020)



This graph compares children's use of active modes for utilitarian trips (to school, parks, stores, etc.). Australia, Canada, New Zealand and the U.S. have low ratings.

Declines in active travel and increases in motorized travel result in part from automobile-oriented planning that prioritizes travel speed over other goals, and so favors driving over slower but more affordable, inclusive, safer and resource-efficient travel options (Kent and Harris 2024). More comprehensive analysis that considers additional goals, including health and affordability, supports more multimodal planning that reduces urban roadway expansions and parking subsidies, and invests more in sidewalks, bikeways, public transit, and transportation demand management programs.

Transportation planners use the term *complete streets* for roadways designed to accommodate all types of users, including active modes, plus activities such as sitting and playing on sidewalks and boulevards (FHWA 2024). *Universal design* refers to transportation systems that accommodate all users including people with disabilities (PwD), and caregivers with children in strollers or walking. This requires that walkways be sufficiently wide and smooth, with features such as ramps and lifts, plus policies to protect pedestrians' personal security. Complete streets and universal design policies are a practical way for local governments to implement multimodal planning. *Transportation demand management* (TDM) refers to various policies and programs that encourage travellers to choose the most efficient option for each trip, which usually reduces driving and increases active travel. *Safe routes to schools programs* provide targeted improvements to help children use non-auto modes when travelling to school (Pedroso 2017).

Some local streets can be designated and managed as "play streets" where games are allowed (Murray 2024). Play streets and neighborhood parks are particularly important for lower-income children whose homes lack private yards (Berto 2014).

As climate change increases ambient temperatures, care is needed to ensure that children can be active even in extreme heat (Litman 2023). Greenspace, particularly tree cover, reduces heat island effects. Parks and playgrounds should be designed to protect children's comfort with large shade trees and awnings, using materials that are not dangerously hot in sunlight, choosing reflective colors for structures and roofs, incorporating water play and misting, and in extreme climates developing climate-controlled play areas (Rouner 2024).

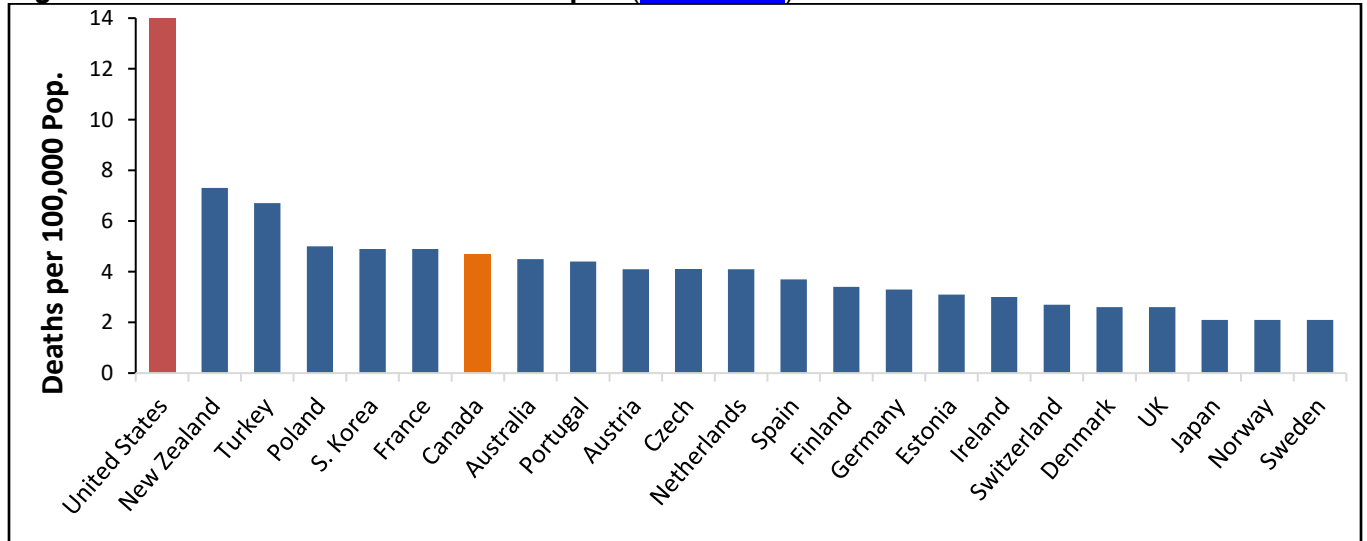
The following local policies can help increase children's physical activity.

- Improve active mode planning, so walking and bicycling receive a fair share of investments.
- Complete sidewalk and bikeway networks, with high design and maintenance standards.
- Apply complete streets policies so roads accommodate active modes.
- Apply universal design practices to accommodate all users, including families with children.
- Achieve safe traffic speeds, which is generally less than 20 mph (32 Km/hr) on local streets and less than 30 mph (48 km/hr) on arterials.
- Address pedestrian and bicyclists' safety and security concerns.
- Address conflicts between sidewalk and trail users.
- Design active travel facilities and parks to be comfortable in all weather, including extreme heat.
- Apply Smart Growth policies that create compact communities, indicated by 70+ Walk Scores.
- Provide local parks within 400 meters of most homes with children.
- Support local recreation and sports programs for children and families.
- Implement safe routes to schools programs that improve and encourage active travel.
- Implement TDM incentives that discourage driving and encourage non-auto travel.
- Support active travel encouragement programs.

Traffic Safety

Vehicle crashes are a leading cause of injury and death for children and their loved ones, and traffic risk discourages active travel, so improving traffic safety can increase children’s health, opportunity and independence (Tavakoli, et al. 2024). Despite large safety program investments, the U.S. has far higher traffic death rate than peers, as illustrated below.

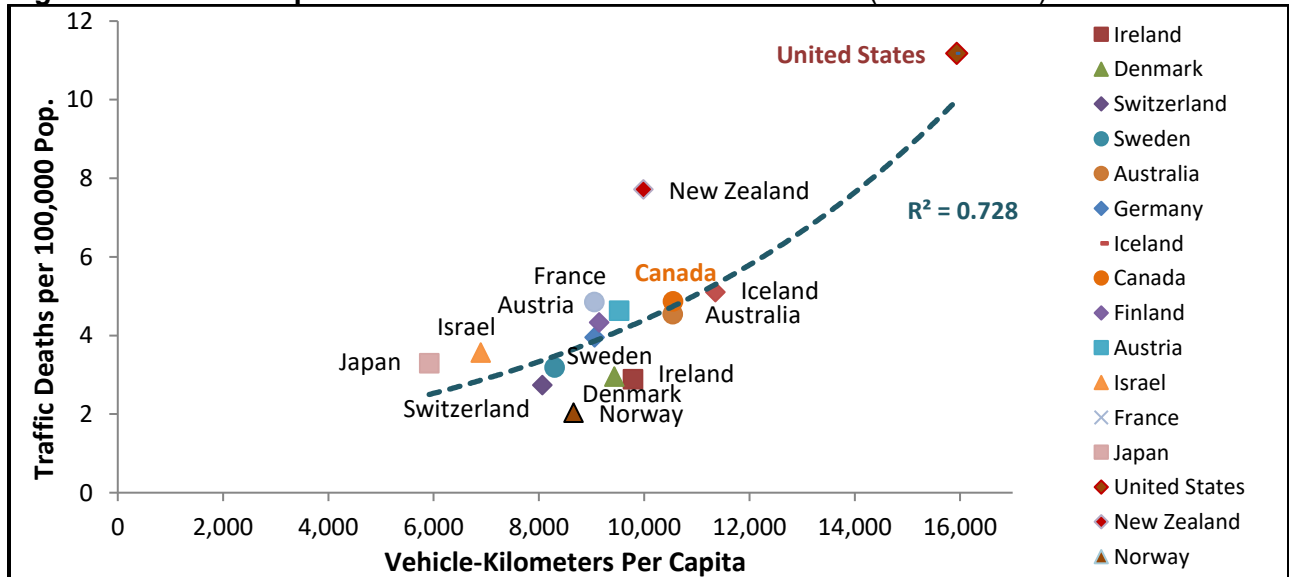
Figure 9 Traffic Death Rates Per Capita (WHO 2025)



The U.S. has the highest traffic fatality rate among peer countries.

What explains this? Although many factors affect traffic risks, all else being equal, that is, for a given group or area, per capita casualty rates tend to increase with vehicle travel, as illustrated below. The U.S. high traffic death rate reflects high rates of driving (Litman 2024).

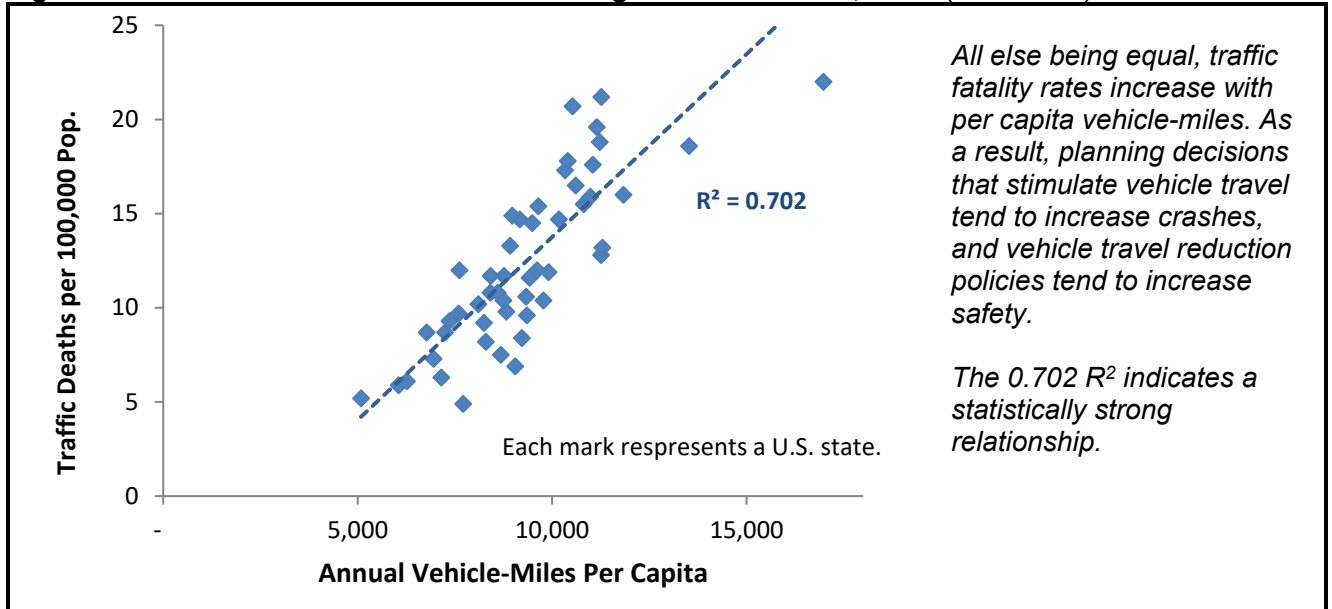
Figure 10 Per Capita Traffic Deaths versus Vehicle-Travel (BITRE 2018)



International data show that per capita traffic fatalities tend to increase with annual vehicle-kilometers.

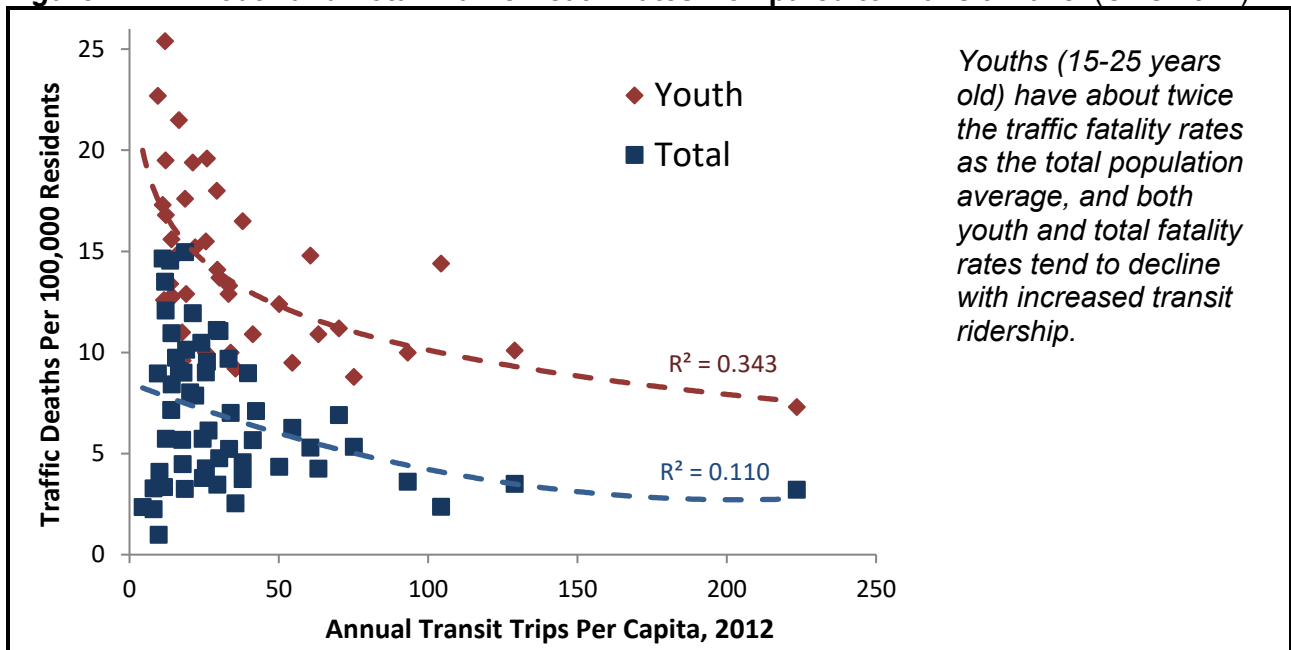
Similar patterns occur within countries and urban regions.

Figure 11 Traffic Fatalities Versus Mileage for U.S. States, 2022 (IIHS 2024)



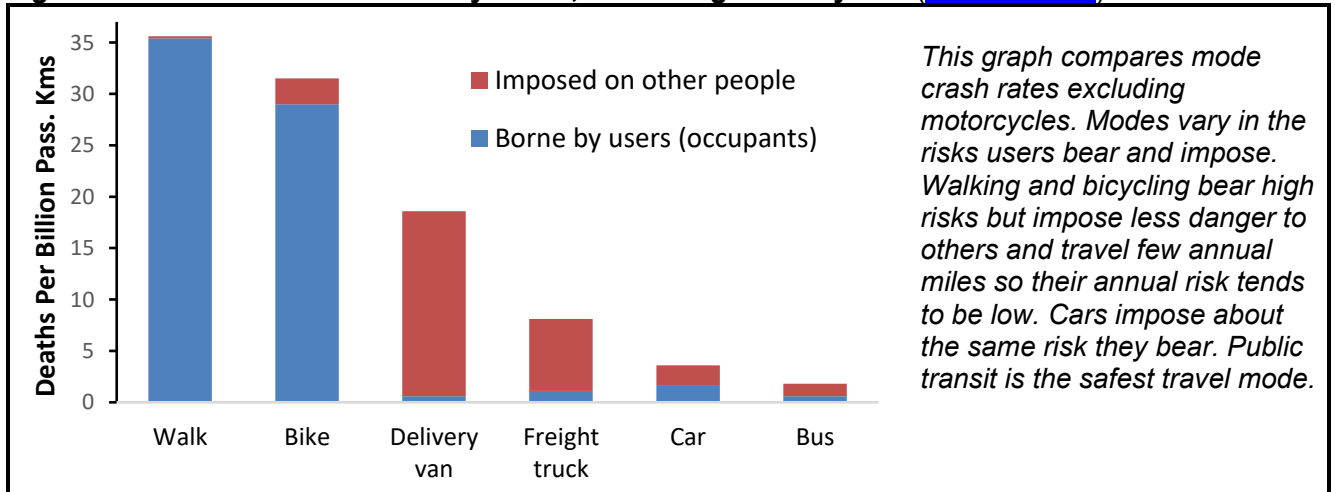
The figure below shows that youths (15-25 years old) have about twice the traffic death rate as the total population, and both youth and total fatality rates tend to decline with increased transit ridership. The statistical relationship is particularly strong for youths which suggests that many will reduce their risk exposure if given convenient alternatives to driving.

Figure 12 Youth and Total Traffic Death Rates Compared to Transit Travel (CDC 2012)



Care is needed when evaluating these risks. Considering just direct risks to users, active modes seem more dangerous than motorized modes and smaller vehicles seem more dangerous than larger vehicles, but they impose less risk on other people (Marshall 2024). As a result, total per capita traffic casualty rates tend to decline as active mode shares increase in a community, an effect called “safety in numbers” (Kehoe, et al. 2022).

Figure 13 U.K. Traffic Death by Mode, Excluding Motorcycles (PACTS 2020)

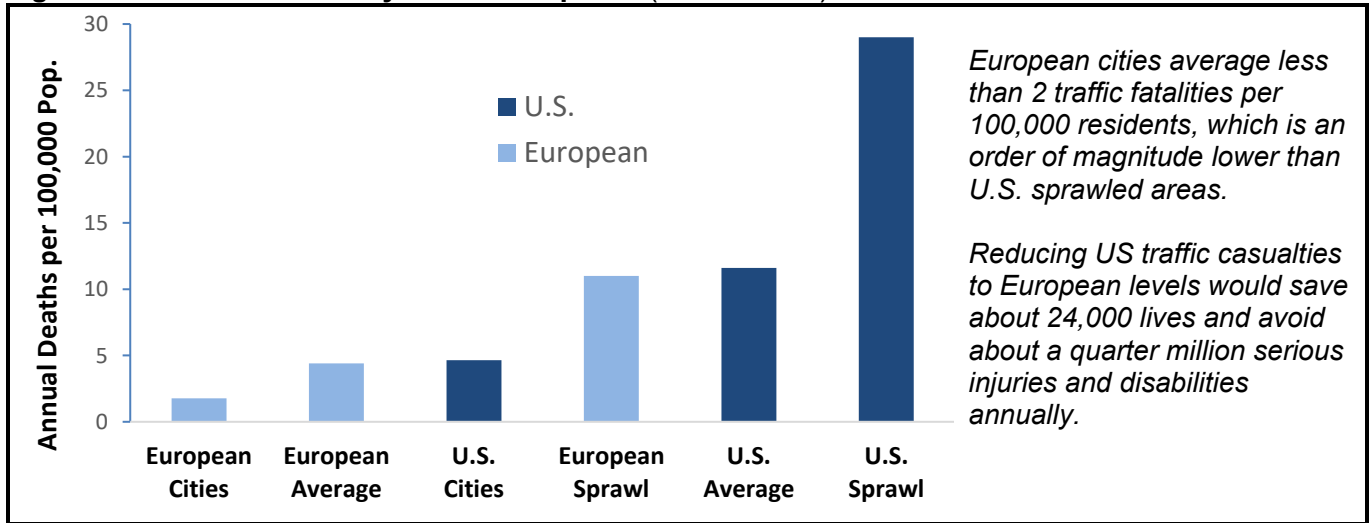


Local policies that affect how and how fast people travel significantly affect traffic risk. Lower traffic speeds increase safety by giving drivers more time to react to hazards and reducing crash severity, particularly for active modes (NACTO 2020). The risk of severe injury increases from 10% if a car hits a pedestrian at 16 mph up to 90% at 46 mph (Sanders, Judelman and Schooley 2019). A recent review found that reducing urban street speed limits to 30 km/h reduced crashes 23%, injuries 38% and fatalities 37% (Yannis and Michelaraki 2024).

This indicates that policies that improve non-auto modes, reduce total vehicle travel and reduce traffic speeds increase safety in addition to other benefits. However, U.S. traffic safety experts often argue that most driving has low risks, so safety programs should target special risks such as youth, senior, impaired and distracted driving (Litman 2024; Marshall 2024). As a result, U.S. traffic safety programs seldom support multimodal planning and vehicle travel reduction goals.

This helps explain the large national disparities in traffic death rates. Residents of sprawled communities common in the U.S. have order of magnitude higher traffic death rates than in the compact, multimodal neighborhoods common in Europe as illustrated below.

Figure 14 Traffic Fatality Rates Compared (Litman 2024)



The following local policies can help increase traffic safety for children and their families.

- Improve walking and bicycling facilities including sidewalks, crosswalks and bikeways.
- Achieve safe traffic speeds, typically less than 30 mph in urban areas.
- Implement pedestrian and bicycle safety training for children.
- Address conflicts between sidewalk and path users.
- Improve and encourage public transit travel and create transit-oriented communities.
- Implement TDM incentives that reduce driving and encourage shifts to non-auto modes.
- Implement Smart Growth policies that create compact and multimodal communities.
- Support school transport management programs.

Pollution Exposure

Pollution includes various harmful gases such as carbon monoxide, nitrous oxides, volatile organic compounds, air toxins, particulate matter, dust, plus noise. They can cause physical illnesses, and some harm mental development (Payne-Sturges, et al. 2019). Children are particularly vulnerable, and exposure during pregnancy can harm fetuses (Brumberg, et al. 2021). Excessive noise can increase stress and disrupt sleep (Newbury, et al. 2024).

Major emission sources include industrial and agricultural activities, and vehicle traffic. Traffic-related air pollution (TRAP) is the largest source in most residential communities (Khreis, et al. 2020). Areas within 500 feet (200 meters) of higher volume roads (more than 25,000 average daily vehicles) tend to have significant pollution, and emissions increase with higher traffic volumes and speeds, heavy diesel vehicles, and accelerations. Even electric vehicles produce pollution from tires and fossil fuel power plants.

Pollution exposure can be reduced by locating homes, schools and playgrounds away from busy highways, developing barriers and landscaping between roads and people, reducing total vehicle travel, and shifting to lower emission vehicles (Brown, Hayes, Barnes 2024). Many communities prohibit multifamily housing in residential neighborhoods, forcing lower-income

families to live near busy roads and industrial areas; allowing affordable housing in neighborhoods can reduce pollution exposure.

The following local policies can reduce children's exposure to harmful pollutants.

- Locate child-oriented facilities (family homes, schools, childcare, parks, etc.) away from major emission sources such as industrial areas and high-volume roadways.
- Allow multifamily housing in residential neighborhoods away from busy roadways.
- Reduce total vehicle travel with multimodal planning, Smart Growth and TDM incentives.
- Encourage shifts to cleaner (electric and hybrid) vehicles.
- Reduce heavy diesel vehicle travel, particularly in residential areas.
- Reduce traffic speeds.
- Improve and encourage active travel.

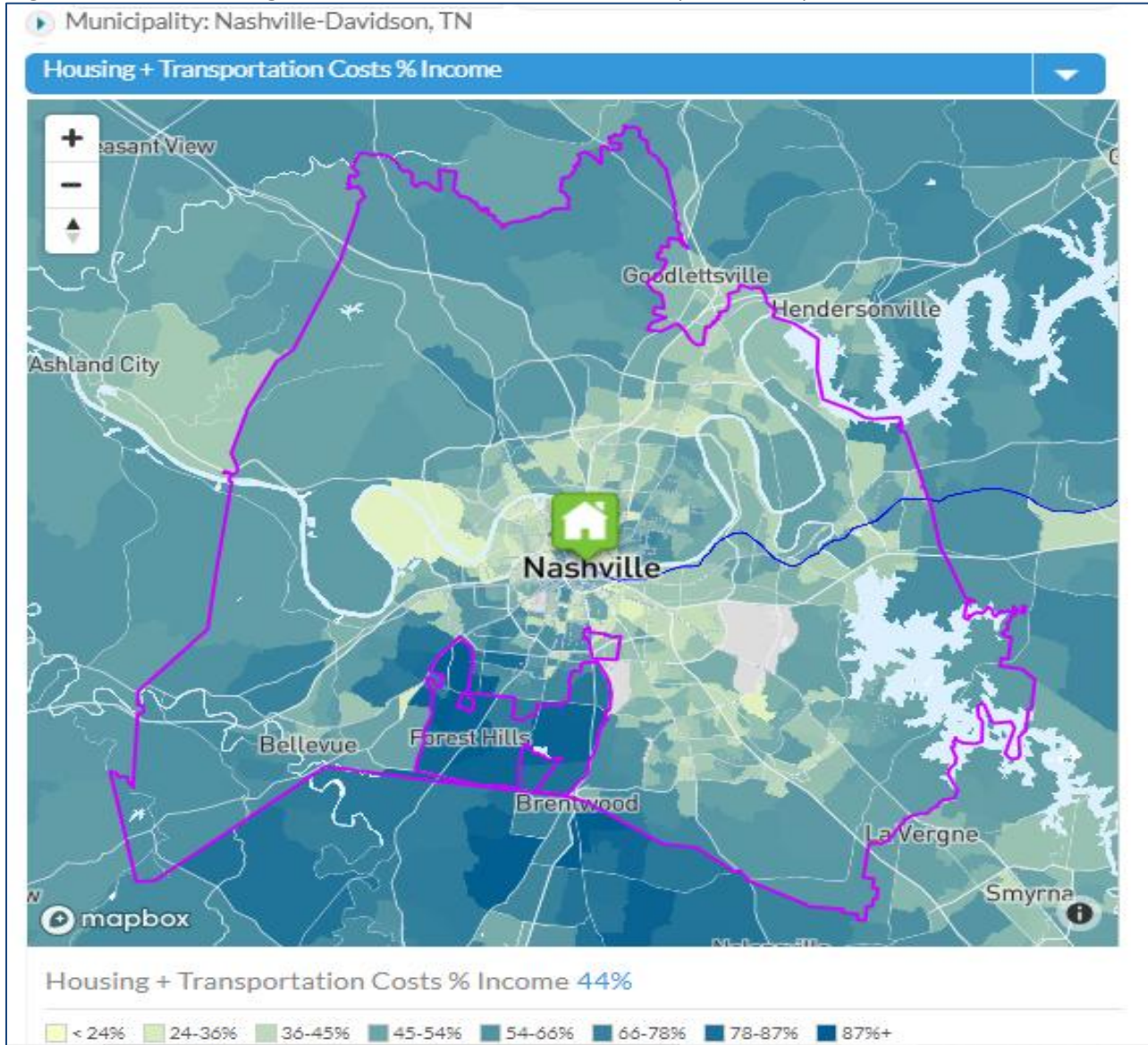
Affordability and Economic Resilience

Affordability refers to households' ability to purchase essential goods and services (Litman 2025). *Economic resilience* refers to households' ability to respond to economic shocks such as increased costs or reduced incomes. Since housing and transportation are most households' largest expenditure categories, their costs significantly affect overall affordability; when families cannot afford healthy food, healthcare or other essentials, the root cause is often high housing and vehicle costs.

Housing insecurity and homelessness harm children, causing developmental delays, poor health outcomes, and social problems (Gultekin, et al. 2020; Pierce, et al. 2024). Since motor vehicles sometimes impose large unpredictable costs due to mechanical failures, crashes or fuel price spikes, automobile dependency tends to reduce economic resilience, indicated by higher mortgage foreclosure rates for households located in auto-dependent areas (NRDC 2010). Unaffordable transportation can reduce children's ability to access healthcare services (NCMM 2020). One study found that 4% of children were unable to visit healthcare services due to transportation problems (Redlener, et al. 2006).

In the past, affordability was often defined as households being able to spend less than 30% of their budgets on total housing expenses, but experts now recognize that households often make trade-offs between housing and travel costs; a cheap house is not truly affordable if located in an isolated area that has high transportation costs, and low income households can rationally spend more for homes in accessible locations where travel costs can be reduced. As a result, many experts now define affordability as households spending less than 45% of their budgets on housing and transportation combined (CNT 2008). The following heatmap shows the portion of household budgets devoted to housing and transportation combined in Nashville, Tennessee, a typical U.S. urban region. Measured this way, central neighborhoods tend to be most affordable overall.

Figure 15 Housing and Transportation Costs Map (CNT 2024)

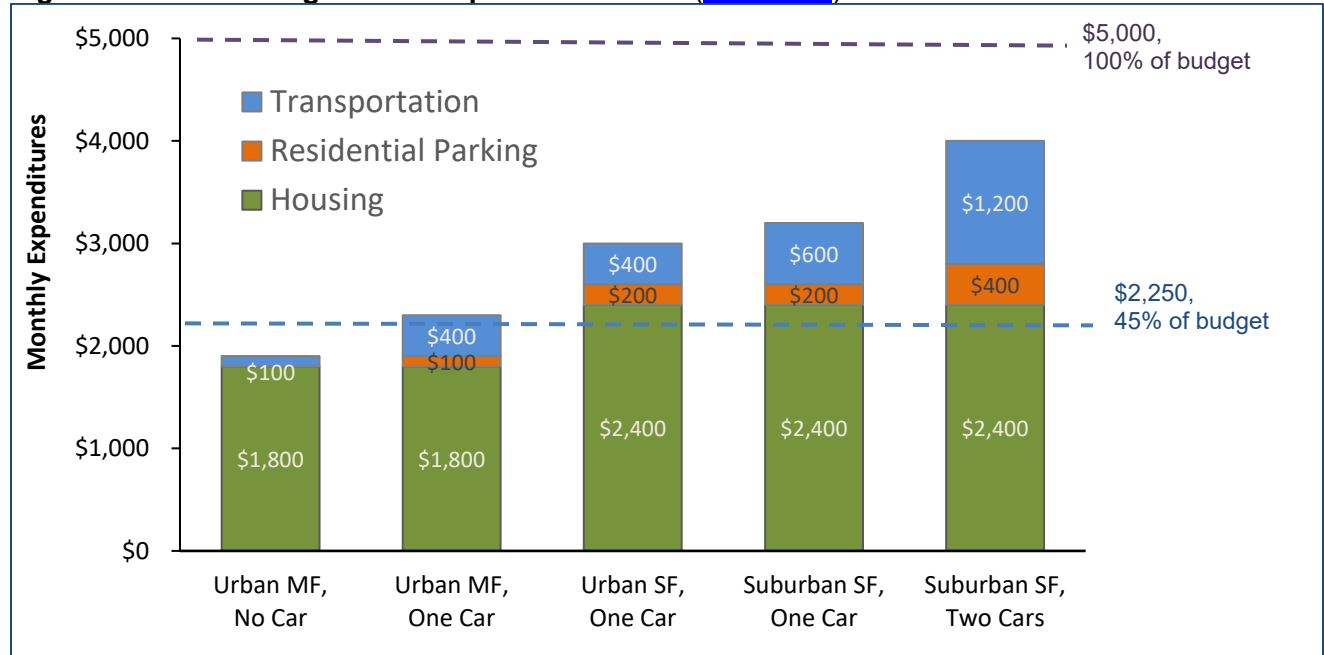


This map indicates the portion of household income devoted to total housing and transportation in Nashville, Tennessee, a typical U.S. city. Darker indicates higher cost burdens. In this and most other communities, central neighborhoods tend to be most affordable overall. Communities can increase affordability by providing lower cost housing in compact, multimodal neighborhoods where residents can minimize their vehicle travel and associated costs.

People sometimes assume that to be affordable housing must be subsidized, but in most communities the majority of lower-priced homes are *naturally occurring affordable housing* (NOAH): older apartments, townhouses and single-family homes that have depreciated. Cities such as Austin, Texas, Buffalo, New York and Montreal, Quebec are increasingly affordable because they encourage development of moderate-priced apartments, townhouse and small-lot single-family homes in multimodal neighborhoods (Clifford, Rodnyansky and Su 2026; Polèse 2020; Zillow 2026).

The figure below compares typical household housing and transportation costs. Single-family (SF) housing is more expensive than comparable quality multi-family (MF), and cars cost more than other travel modes. For a household with a \$5,000 monthly income, living car-free in a multifamily home with unbundled (rented separately) parking only requires an affordable 38% of its budget, leaving sufficient money to spend on children’s food, healthcare, education and recreation, but a single-family home with a garage and car increases cost to unaffordable levels, leaving families financially stressed and vulnerable. Not every household will take advantage of all potential savings, but having cheaper options provides financial flexibility.

Figure 16 Housing and Transportation Costs (BLS 2024)



This graph compares typical housing and transportation costs. The dashed blue line shows 45% of budgets for a moderate-income household that earns \$5,000 per month. Auto dependency and sprawl increase costs beyond what is affordable for typical low- and moderate-income families.

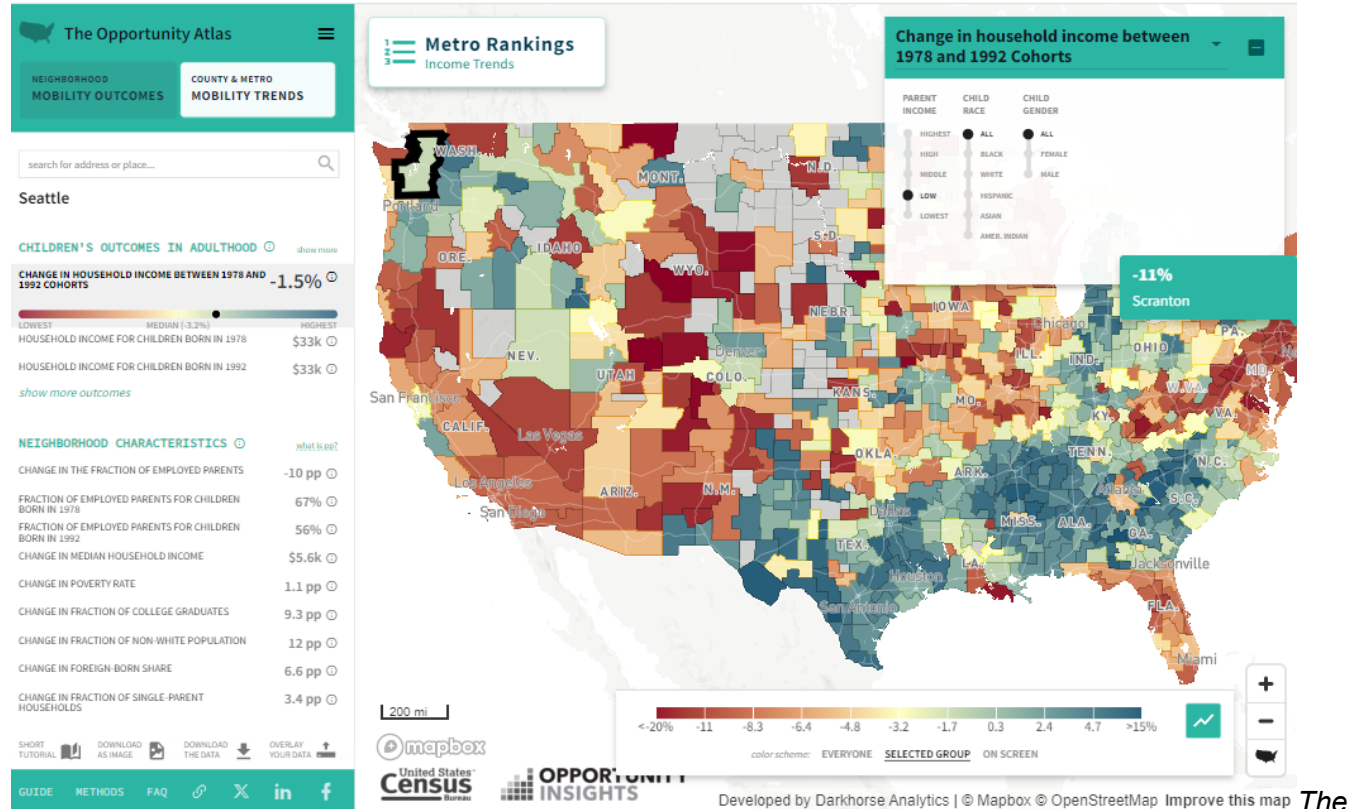
These local policies can increase affordability and resilience.

- Allow lower-cost housing types, such as attached and multifamily, in accessible neighborhoods.
- Improve affordable transportation options including walking, bicycling, public transit and telework (telecommunications that substitute for physical travel).
- Apply universal design standards so transportation facilities accommodate diverse users.
- Reduce or eliminate parking minimums and encourage parking unbundling so families are no longer forced to pay for costly parking facilities they don’t need.
- Support affordable housing development, including social housing and lower-cost market housing, in accessible neighborhoods.
- Encourage mixed development and improve local services such as schools and parks (a Walk Score over 70 is a good indicator of convenient non-auto accessibility).
- Develop eviction and homelessness prevention programs.

Economic Opportunity and Mobility

Economic opportunity refers to people's ability to access education, employment and essential goods such as affordable healthy food. *Economic mobility* refers to whether children become more economically successful than their parents (Smith and Blizard 2021). New research is improving our understanding of these effects. Harvard University's *Opportunity Insights* program and the Urban Institute's *Upward Mobility Initiative* investigate factors that affect children's economic outcomes. The *Opportunity Atlas*, illustrated below, shows economic mobility rates for specific communities.

Figure 17 Opportunity Atlas (US Census 2026)



The Opportunity Atlas shows rates of economic mobility, the degree that children are more economically successful than their parents.

This research helps identify local factors that affect economic success. Ewing, et al. (2016) found that economic mobility tends to increase with neighborhood density, mix and accessibility. Similarly, Wei, Xiong and Carlston (2023) found that economic mobility increases with Smart Growth conditions such as walkability, development mix and jobs-housing balance, and declines with sprawl, although these can be offset if neighborhoods have concentrated poverty and racial segregation. Talen and Koschinsky (2013) found that economic mobility increases with Walk Score, an indicator of density and mix. Oishi, Koo and Buttrick (2018) found that walkable cities have smaller employment and income disparities between drivers and non-drivers.

Chyn (2018) found that children who moved from impoverished to middle-income neighborhoods are 9% more likely to be employed and have 16% higher average earnings as adults compared with peers who remained. These benefits tend to be greatest for girls; lower-income minority boys often had difficulty integrating into more affluent communities. Chetty, et al. (2022) found that *economic connectedness*, the share of high socioeconomic status (SES) friends among low SES individuals, significantly affects upward mobility, which suggests that economically disadvantaged children benefit from living in income and racially integrated communities, attending integrated schools and participating in integrated social activities. Chetty, et al. (2026) found that children raised in mixed-income public housing are more successful – they earn more, are more likely to attend college and are less likely to be incarcerated – than peers in public housing with concentrated poverty. Similarly, Ding and Hwang (2016) found that economically disadvantaged residents who remain in gentrifying neighborhoods gain economically, indicated by their credit score improvements, while credit scores declined for those who moved away.

This suggests that the best way to reduce concentrated poverty is to attract middle-income families to disadvantaged neighborhoods with targeted improvements to public services, particularly schools, encouraging local economic development, and developing more moderate-priced family housing. This is sometimes criticized as causing gentrification that harms low-income residents, but that is not necessarily true. It is important to distinguish between *gentrification* (more affluent households moving into lower-income neighborhoods) and *displacement* (lower-income households forced out of their existing neighborhoods). Disadvantaged children can benefit from urban infill and redevelopment that attracts more middle-income families, and increases local services, business and jobs, provided that lower-income families are not displaced.

This suggests that economic opportunity and mobility tend to increase with density and mix, multimodal accessibility (particularly walkability), public school quality, affordability, income and racial integration, local employment and activities that enhance community cohesion (positive relationships among residents), and decline with concentrated poverty and associated social problems (UI 2021).

These local policies can increase economic opportunity and mobility.

- Encourage income and racial integration.
- Support affordable housing development, including social housing and moderate-priced market housing, in multimodal urban neighborhoods.
- Avoid poverty concentration (more than 20% of households in a neighborhood or students in a school being impoverished).
- Eliminate or significantly reduce parking minimums in multimodal urban neighborhoods.
- Improve public services, such as schools, parks, sidewalks and public transit, in disadvantaged communities.
- Encourage integration of local schools and family-oriented recreation activities, and other community programs.
- Support local business and employment opportunities.

Mental Health and Happiness

Many people assume that living in a city increases mental illness and unhappiness, but the evidence is mixed (Kwon 2016; Litman 2022). City residents tend to report higher rates of anxiety, mood disorders and schizophrenia than rural areas (Peen, et al. 2010; Vassos, et al. 2012), but that does not necessarily prove that may reflect confounding factors such as better reporting or social drift (Bell 2016; Gong, et al. 2016; Sariaslan, et al. 2016).

A major study, “Higher Depression Risks in Medium- Than on High-Density Urban Form Across Denmark” (Chen, et al. 2023), found that, adjusting for socioeconomic factors, the highest depression risks are in sprawling suburbs, and the lowest in rural areas and multistory urban buildings located near greenspaces such as public parks. A recent U.S. parenting stress study found that, accounting for socioeconomic factors, urban mothers demonstrated significantly more responsiveness and reciprocity than their rural counterparts, and rural mothers rated their infants significantly higher in negative affectivity and distress, which suggests that urban environments support mother and child mental health (Neumann, et al. 2020). A study of 1,287 Southern California adolescent twins found that, controlling for other factors, more local greenspace (parks, golf courses and fields) is associated with significant reductions on aggressive behaviors, equivalent of 2 to 2.5 years of behavioral maturation (Younan, et al. 2016). As described previously, suicide rates tend to be significantly higher in rural compared with urban areas, indicating that some rural residents experience severe mental stress and unhappiness.

As previously described, mental health and happiness tend to increase as incomes rise from low to medium levels, but plateau at higher levels. They tend to decline with illness, economic stress, and long work hours, and increase with exercise, including walk and bike commuting (Clark, et al. 2020). This suggests that communities can increase mental health and happiness by improving affordable housing and travel, particularly active modes.

Mental health and happiness tend to decline with loneliness and isolation, and increase with *community cohesion*, which refers to the quality of interactions people have with their neighbors (Murthy 2023). This suggests that *placemaking*, which creates attractive public spaces where residents frequently interact, can increase mental health and happiness (PPS 2022). Some studies indicate that greenspace improves residents' mental health and happiness (Berto 2014). Pets, particularly friendly dogs, can improve mental health, directly, and indirectly by encouraging walking and neighborhood interactions.

The following local policies can help improve children's mental health and happiness.

- Support placemaking (community design that encourages positive interactions among residents).
- Improve and encourage active travel (walking and bicycling).
- Support neighborhood activities and events (parks, shops, festivals, etc.).
- Provide neighborhood park and family-oriented recreation programs.
- Increase public greenspace.
- Develop pet-friendly housing, sidewalks and parks.
- Support community mental health programs, including those that target children and families.

Healthy Behaviors

Unhealth behaviors such as tobacco consumption, alcohol and drug abuse, unhealthy diets, criminal activity and violence, can harm children directly, and indirectly by affecting their families. They often function like contagions: people are more likely to engage in harmful behaviors if they are common and accepted (Christakis and Fowler 2013; Dean, Williams and Fenton 2013). Children who grow up in disadvantaged areas have fewer positive role models and social connections (Leonhardt, Cox and Miller 2015). This suggests that children can be harmed by living in neighborhoods where unhealthy behaviors are normalized. The following section examines how specific health behaviors vary by location.

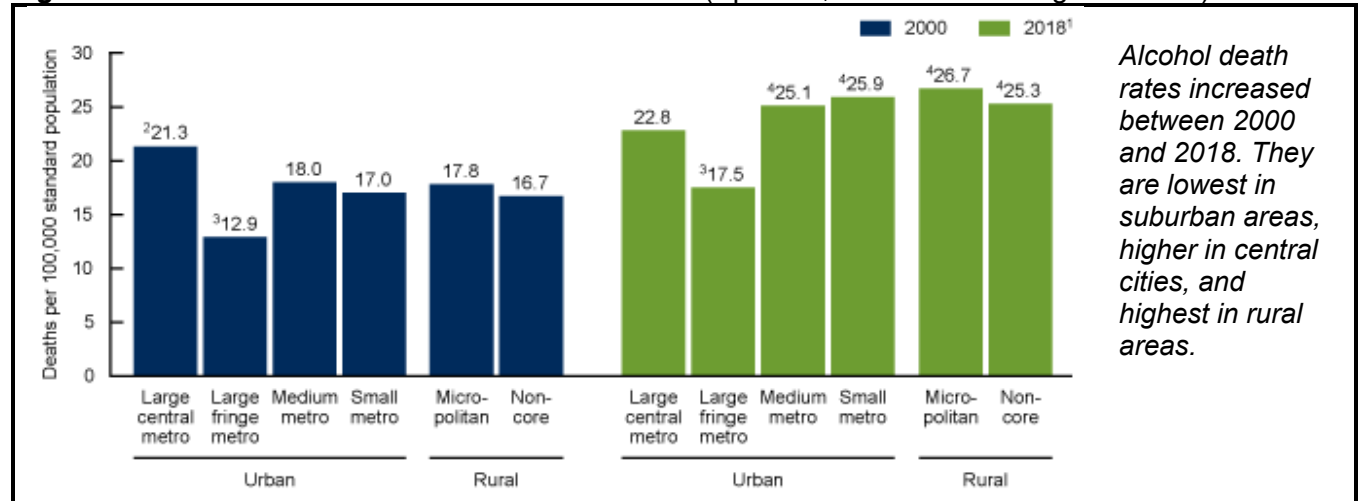
Tobacco Use

Tobacco use tends to decline with income and education (Doogan, et al. 2017). Rural areas have higher smoking rates; the portion of children who live with a smoker is about 35% in rural areas compared with 24% in urban areas (ALA 2012).

Alcohol Abuse

Although alcohol abuse and death rates were previously higher in central cities, between 2000 and 2018 they increased in rural areas; they are now lowest in suburbs, higher in central cities and highest in rural areas, as illustrated below. Rural youths are significantly more likely to abuse alcohol (drinking more than four drinks at one time) than suburban and urban youths (Monnat and Rigg 2015; McInnis, et al. 2015).

Figure 18 Adult Male Alcohol-induced Deaths (Spencer, Curtin and Hedegaard 2020)



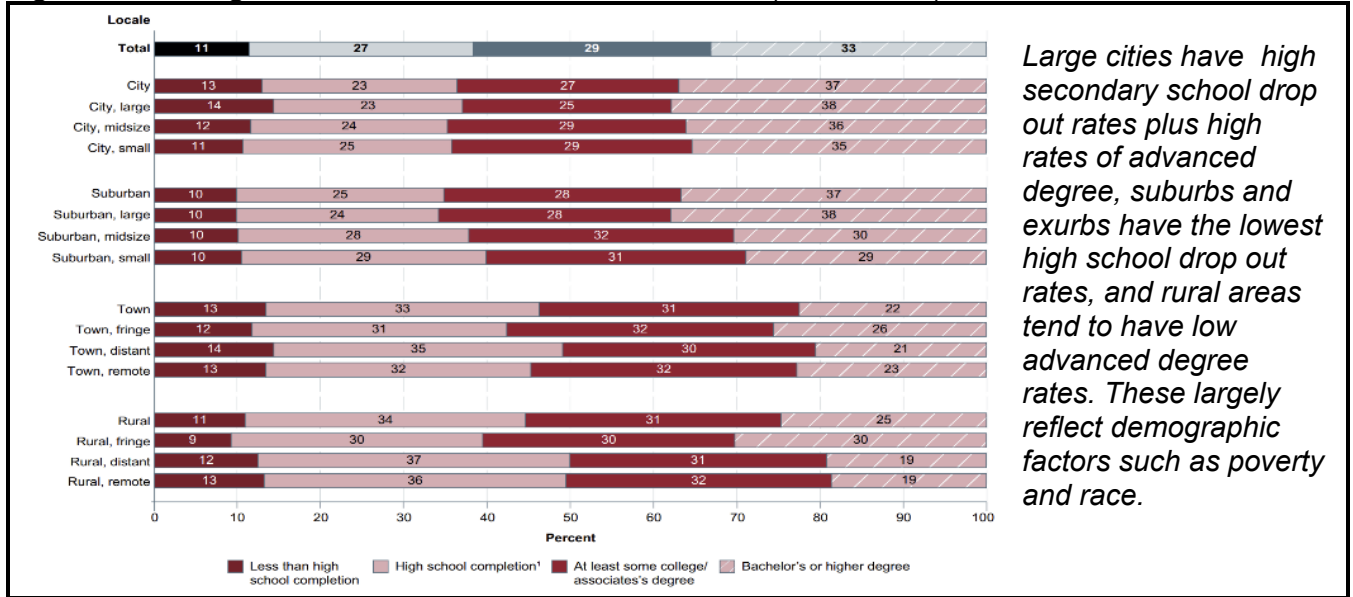
Drug Abuse

Drug abuse and casualty rates vary by demographics, location and type. Urban areas tend to have more cocaine and heroin abuse, while rural areas tend to have more prescription drug and synthetic opioid abuse (Spencer, Garnett and Miniño 2022). Drug overdose death rates increased significantly in recent years due to synthetic opioids and tend to be particularly high for Black, Hispanic and First Nations urban residents and rural males.

Education Attainment

Education attainment significantly affects children's health and economic success. Youths who do not complete high school are more likely to be poor, unemployed, incarcerated, require public assistance, and die at a younger age than high school graduates, and longevity and incomes tend to increase with higher education (Jordan, Kostandini and Mykerezi 2012). The following figure compares education attainment rates by location.

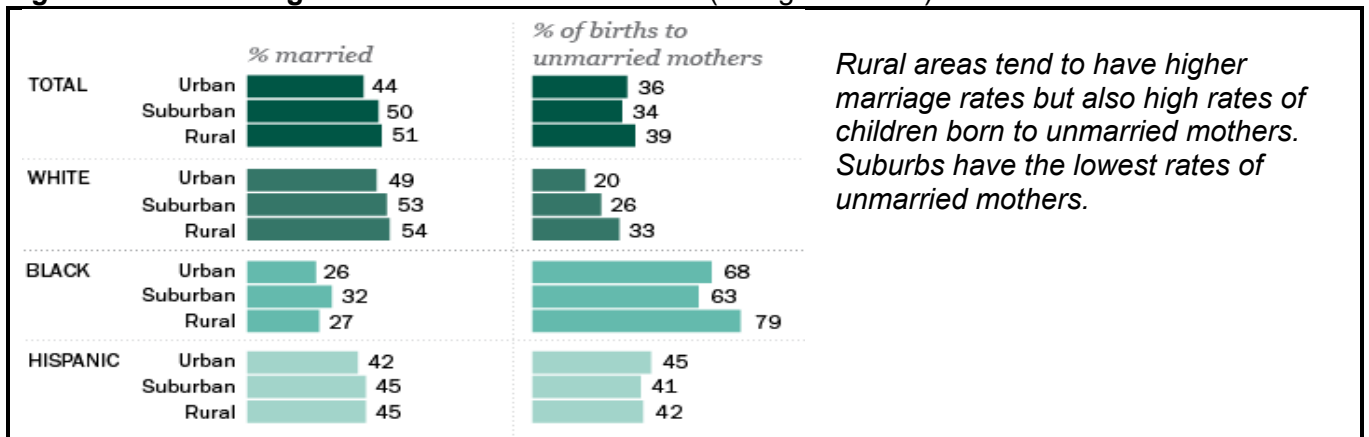
Figure 19 Highest Level of Educational Attainment (NCES 2022)



Family Stability

Children can thrive in many types of families but are more likely to succeed with two cohabiting parents. In the past, rural residents had the highest marriage rates and lowest rates of unmarried mothers, but now suburbs tend to have the most stable families and rural areas have high rates of single parents, as illustrated below.

Figure 20 Marriage and Unmarried Birth Rates (Livingston 2018)



Healthy Diet

Children’s diet quality tends to improve with family income and access to affordable grocery stores (Crouch 2023). Food insecurity (inadequate or inferior food) tends to be highest in low-income city neighborhoods (12%) and rural areas (11%), and lowest in suburbs (8.8%).

Healthy Weight

Excessive childhood weight tends to increase lifelong health problems including diabetes, sleep apnea and cardiovascular disease (Crouch 2023). Obesity rates tend to be higher in rural areas, and decline with neighborhood walkability and parks, as previously described.

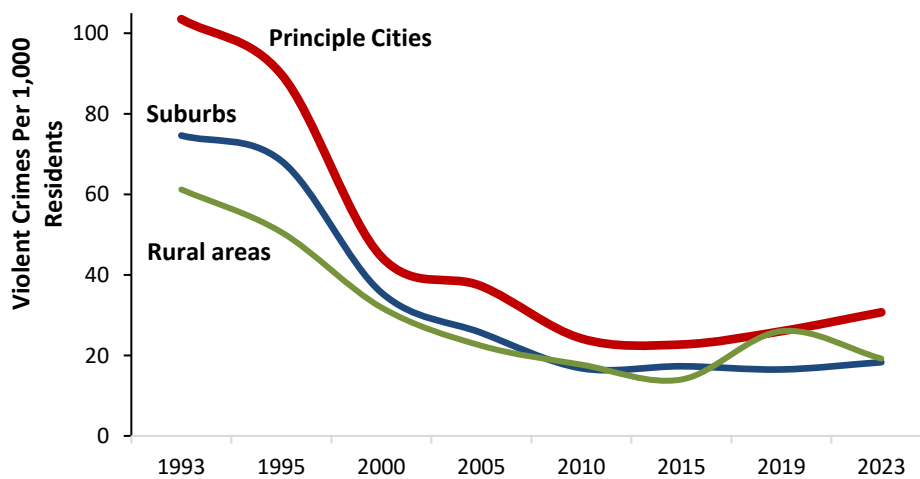
Domestic Violence

Domestic violence harms children. Geographic differences in domestic violence rates largely reflect variations in income, employment and substance abuse, but rural areas have special risks including high intimate partner homicide rates, plus poor psychosocial and physical health outcomes for domestic violence victims due to less access to social services and less public support for domestic violence prevention policies (Edwards 2015).

Crime

In the past, cities had significantly higher crime rates than suburbs and rural areas. This reflects special risks, such as commercial areas that attract robberies and entertainment districts that attract bar fights, plus concentrated poverty and weak social connections in some urban neighborhoods. However, after 1990 crime rates plummeted, particularly in cities, as illustrated below.

Figure 21 U.S. Crime Trends by Location ([NCVS 2025](#))



Crime rates declined significantly after 1990, particularly in large cities, nearly eliminating the crime risk disparities between cities, suburbs and rural areas.

Homicide

U.S. homicides, mostly caused by firearms, increased and are now a primary cause of children’s deaths (Wilson, et al. 2023). Rates are higher in impoverished neighborhoods and in jurisdictions with less restrictive gun policies (Kutsch 2021).

Suicide

Suicide rates are higher in rural compared with urban areas, males compared with females, adolescents and young adults compared with other age groups, and Whites and American Indians compared with Black and Latino (Casant and Helbich 2022; Smith, et al. 2026). Adolescent suicide rates increased significantly in the U.S. and are now about three times higher than in Europe; they tend to have a U-shaped relationship with income, with higher rates in low- and high-income areas (Okubo, et al. 2025). High adolescent suicide rates in some affluent communities are explained by perfectionist standards, permissive and absent parents, plus competitive and exclusionary social practices (Peterson and Smith-Morris 2024).

Summary

The table below summarizes how health behaviors vary by geographic location.

Table 2 Geographic Variations in Health Behaviors

Impact	Urban/Suburban/Rural Variations
Tobacco use	Declines with income and education, and is significantly higher in rural areas.
Alcohol abuse	Lowest in affluent suburbs, higher in central cities, and highest in rural areas.
Drug abuse	Varies by demographics, location and type. Highest in disadvantaged areas.
Education attainment	Increases with family income. High school dropout rates increase with poverty.
Family stability	Single-parents are more common in lower-income, minority and rural areas.
Healthy diet	Tends to improve with family income and access to affordable grocery stores.
Healthy weight	Obesity rates are higher in rural areas, and decline with walkability and local parks.
Domestic violence	Tends to increase with poverty, with special risks in rural areas.
Crime	Increases with poverty and is higher in urban than suburban and rural areas.
Homicide	Increases with poverty and is somewhat higher in urban than rural areas.
Suicide	Significantly higher in rural than urban areas.

Many but not all healthy behaviors tend to increase with income, education and community integration.

This indicates that healthy behaviors tend to increase with incomes, education and community cohesion, which tend to be highest in affluent suburbs, and declines with poverty which tends to occur isolated rural areas and some urban neighborhoods, but these conditions change as suburban poverty increases and cities gain middle-class households, and with more affluence-related social problems including depression, anxiety, suicides and substance abuse (Allard 2018; Graif, Gladfelter and Matthews 2014).

The following local policies can help improve healthy behaviors.

- Prevent income segregation and poverty concentration.
- Develop diverse housing types for diverse families in mixed-income neighborhoods.
- Limit the size of social housing facilities and integrate them into neighborhoods.
- Develop targeted policies to encourage income and racial integration.
- Support local schools, parks, recreation programs and other family-oriented public services.
- Develop targeted programs to support healthy behaviors.

Summary of Findings

The following table summarizes community design objectives and policies.

Table 3 Community Design Objectives and Policies

Goal	Objectives	Local Policies to Achieve Them
Physical activity	Achieve physical activity targets (at least 60 daily minutes for children and 22 daily minutes for adults).	Improve and encourage active travel. Provide parks and recreational programs, particularly in disadvantaged neighborhoods.
Traffic safety	Reduce traffic risks, particularly for active travel.	Reduce total vehicle travel and traffic speeds. Improve walking and bicycling conditions.
Healthy environment	Reduce children’s exposure to pollution. Reduce total pollution emissions.	Separate homes and child-oriented facilities from major pollution sources. Reduce motor vehicle travel.
Financial security	Reduce cost burdens. Prevent homelessness, particularly for families with children.	Improve affordable housing and transport. Allow lower-cost housing in compact, multimodal areas.
Economic mobility	Help children from disadvantaged families become more successful as adults.	Improve affordable access to economic opportunities (education, jobs, shops, etc.). Support local schools.
Mental health and happiness	Create communities that support mental health and happiness.	Achieve parks, greenspace and placemaking targets. Support local mental health programs.
Healthy behaviors	Discourage unhealthy behaviors such as smoking, alcohol/drug abuse and violence.	Prevent income segregation and poverty concentration.

Various local policies can increase children and parents’ health, economic opportunities and happiness.

This indicates that children benefit in many ways from living in compact, mixed, multimodal and integrated neighborhoods, reflecting the efficiencies of well-planned cities. This is not to say that cities are good and suburbs are bad, both have advantages as summarized below.

Table 4 Cities Versus Suburbs

Advantages of Cities	Advantages of Suburbs
<ul style="list-style-type: none"> • Better accessibility, which reduces transportation costs, particularly for non-drivers. • More efficient public infrastructure. • Improved safety and health. • Income integration, which improves economic mobility. • Increased economic opportunity and productivity. • Reduces pollution emissions and habitat displacement. 	<ul style="list-style-type: none"> • Excludes poverty and associated social problems. • More private greenspace (lawns and gardens). • Lower costs for single-family homes. • Better local schools. • Higher social status. • Perceived safety and health. • More convenient driving and parking.

Cities and suburbs both have advantages and disadvantages.

However, many advantages of suburbs are win/lose: they benefit residents but harm others. For example, by excluding poverty, suburbs concentrate social problems elsewhere, and although driving seems safer than walking and biking, it imposes risks to other road users which increase total crashes. As a result, more comprehensive analysis that considers all impacts tends to recognize more benefits of cities and less net benefits from suburbs. The following section considers two ways to evaluate these impacts.

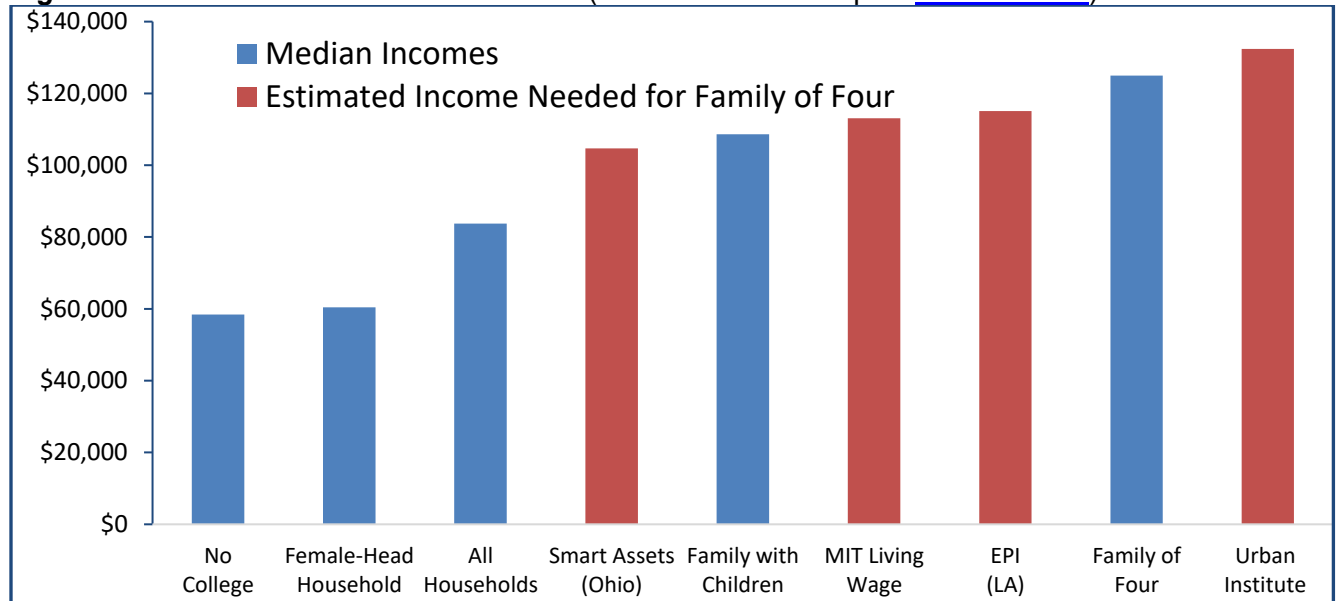
Consumerist- Versus Community-Oriented Child-raising

This section compares different perspectives for evaluating children’s needs.

Conventional child-raising advice reflects a consumerist perspective which assumes that children’s health, success and happiness require costly goods such as homes with private yards in desirable neighborhoods, family-size vehicles, childcare, healthcare, college savings, and sometimes private schooling. Suburban families are even expected to purchase cars for their teenagers (Eichelberger, Teoh and McCartt 2015). This assumes that family income is the most important factor affecting children’s wellbeing.

An internet search for “what does it cost to raise a child/family in America?” finds various estimates including \$18,000 annually by the US Department of Agriculture (Lino, et al. 2017); \$27,743 by the Smart Assets investment firm (DeJohn 2025); and \$30,825 by the MIT *Living Wage Calculator*, based on differences in annual costs between a one child family and a childless couple in the typical state of Ohio (MIT 2026). Estimates of the minimum costs of living for a family of four (parents and two children) include \$80,000 for a family to “get by” according to a Gallop survey (Evans 2023); \$113,101 by the Living Wage Calculator; \$132,400 by the Urban Institute report, *Measuring the True Cost of Economic Security* (Acs, et al. 2026), and \$115,000 in Los Angeles by the Economic Policy Institute (EPI) (Gould, Mokhiber and deCourcy 2024) The graph below compares incomes and estimated living costs for various household types. Many families, particularly low education attainment and female-head households, earn less than what experts claim they need. This can reduce birthrates (Buchholz 2025).

Figure 22 Annual Incomes and Costs (Sources Described plus [Census 2025](#))



This graph compares household incomes with estimated costs of living for a family with two children.

Similar assumptions apply to community design. An internet search for “best places to raise children/families” identifies websites ([Niche](#), [My Good Movers](#), [Washington Post](#), [Wallethub](#)) that rate communities on affordability, school quality, crime and local recreation opportunities,

while ignoring most costs and risks of automobile dependency and sprawl. As a result, they give the highest ratings to expensive, affluent, segregated, auto-dependent suburbs such as Naperville, IL, The Woodlands, TX, Arlington, VA and Irvine, CA. This encourages communities to compete for higher rankings by attracting higher-income families and excluding lower-income families who might drag down their education and security rankings. This leads to policies that favor expensive housing and transportation over more affordable and resource-efficient alternatives, which exacerbates many problems; they increase families’ financial burdens which causes many parents to work more than optimal hours; they cause income segregation which concentrates poverty and social problems in other communities; and they lead to auto-dependency and sprawl which increase traffic risk and health problems.

These sources tend to overvalue suburbs and undervalue the potential savings and benefits provided by compact, mixed and multimodal communities. For example, their affordability indicators focus on housing costs and fuel prices, and give low weights to the benefits of walkability, bikeways and public transit. They generally ignore safety and health costs of automobile travel and the harms of suburban isolation and segregation.

An alternative approach, *community-oriented child-raising*, emphasizes shared resources such as multifamily housing, multimodal transportation, public parks and schools instead of private yards and schools, and public safety strategies. This table below compares them.

Table 5 Consumerist Versus Community Child-raising

Factor	Consumerist-Oriented	Community-Oriented
Housing	Single-family with private yard	Compact types (attached and multifamily)
Transportation	Private automobiles	Multimodal
Greenspace and recreation	Private yards and clubs	Public parks and recreation programs
Schooling	Private or affluent suburban public.	Mixed income public
Childcare	Private services	Mix of private and public services
Healthcare	Private insurance	Income-based public and private insurance
Traffic safety	Large private vehicles	Multimodal traffic safety programs
Security	Gated communities with private security	Public safety strategies

Consumerist- and community-oriented child-raising differ in many ways. Community-oriented approaches tend to be more efficient, reducing total costs and increasing total benefits.

Community-based approaches tend to be more cost-efficient overall. For example, considering land, construction, operation and infrastructure costs, compact housing and multimodal transport generally cost less than auto-dependent sprawl. Improving non-auto modes reduces the time and money parents must spend chauffeuring children, and reduces road and parking facility costs. Similarly, public parks can provide greenspace and recreation at lower total costs than each household maintaining its own lawns and gardens, and high quality public schools increase economic opportunity more than a mix of inferior but free public schools and superior but expensive private schools. These efficiencies can benefit everybody, and are particularly helpful to physically, economically and socially disadvantaged families.

Community-oriented child-raising can increase some costs and conflicts. They require more investments in non-auto modes, public parks and public schools; although these expenditures are usually more than offset by savings on roads and parking, private yards and private schools, those are paid from different budgets, so the savings are often overlooked. Urban infill can also increase construction costs, and impose more congestion, noise and dust on nearby residents than greenfield development. Cities tend to have more visible social problems than suburbs, such as homelessness, mental illness, drug abuse, and some crime types, which can be dangerous and troubling, particularly for families with children.

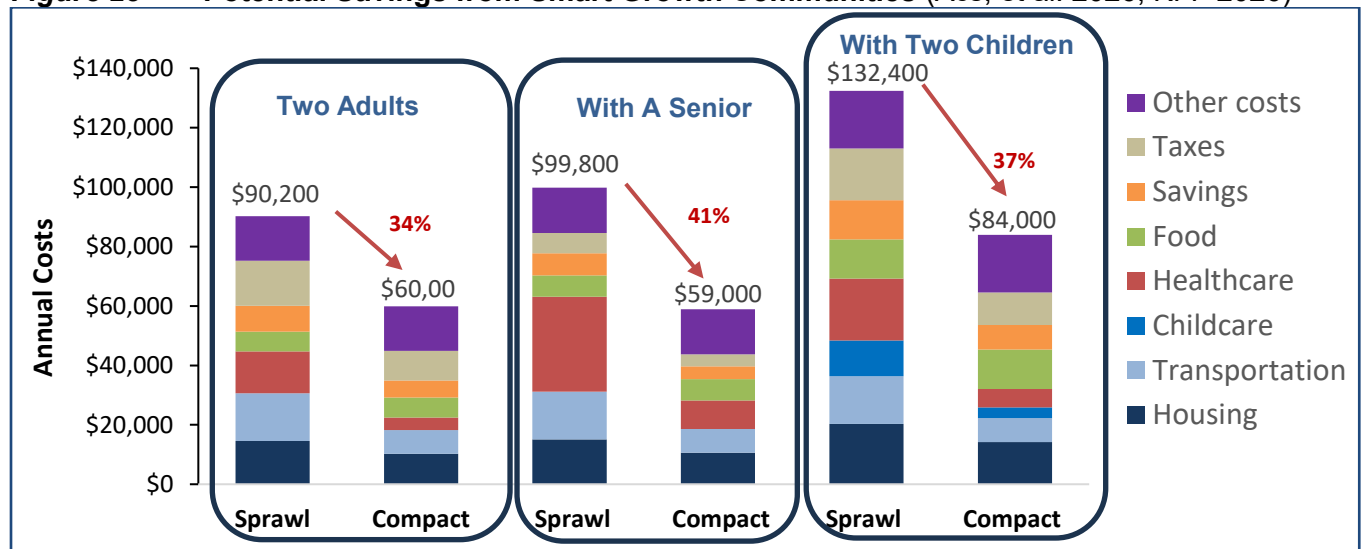
Many of the benefits provided by cities are true efficiency gains – they reduce total costs and increase total benefits – while many perceived benefits of suburbs are economic transfers, they benefit some people but harm others. For example, excluding low-income households may improve local school ratings but harm lower-income children, and automobile-oriented planning can benefit motorists but reduce the efficiency and safety of other modes. All these impacts should be considered when evaluating child-raising policies.

Economic Analysis

This section estimates potential savings and benefits from community-oriented child-raising.

Because it is more cost-efficient and inclusive, community-oriented child-raising can provide many savings and benefits. For example, multifamily housing with unbundled parking in compact, multimodal neighborhoods typically have 20-50% lower housing and transport costs than comparable single-family suburban homes. These savings allow parent to reduce their working hours, childcare costs and tax burdens, and qualify families for lower healthcare costs (families earning less than \$130,000 pay lower Affordable Care Act premiums and seniors earning less than \$120,000 pay less for Medicare).

Figure 23 Potential Savings from Smart Growth Communities (Acs, et al. 2026; KFF 2026)



Living in a compact, multimodal neighborhood typically saves 34-41% compared with conventional cost estimates in the Urban Institute study, “Measuring the True Cost of Economic Security.”

Figure 23 compares the Urban Institute study's conventional household cost estimates with the lower costs achievable with community-oriented policies. It assumes that compact, multimodal communities can reduce transportation costs 50% (from \$16,100 to \$8,050, by allowing families to own one rather than two cars), reduces housing costs 30% (from \$20,300 to \$13,195, by allowing compact housing types and reducing garage costs), income-based fees reduce healthcare costs 70% (from \$20,800 to \$6,240), these savings allow parents to work fewer hours which reduces childcare costs 70% (from \$12,000 to \$3,600), with proportional reductions in taxes and retirement savings requirements. It assumes no reduction in food or "other" costs.

This analysis does not include other potential savings provided by reduced working hours such as more home cooking instead of commercially prepared meals and more DIY home and garden maintenance. That parents can reduce childcare costs by working less does not require traditional domestic roles with full-time working fathers and stay-at-home mothers; it can involve working mothers and stay-at-home fathers, two part-time parents, and childcaring cooperatives in which parents pay with time rather than money.

Affordability can benefit households in other ways. It allows parents to accept lower paying but more satisfying jobs, to live in preferred but lower wage communities, or to save more money for other needs. Not all families will take advantage of all potential savings; some parents want personal vehicles and single-family homes with garages despite their high costs, but others can achieve even larger savings by becoming car-free or eliminating all paid childcare. Community-oriented child-raising gives families freedom to choose preferred lifestyles.

Improving affordability increases families' economic resilience, their ability to respond effectively to financial shocks such as higher expenses or lower incomes. For example, families in auto-dependent areas often face crises when their vehicles fail or a parent cannot drive, while those in compact, multimodal neighborhoods have convenient and affordable alternatives. Similarly, diverse and affordable housing options allow families that to remain in their neighborhood so their children can continue attending the same school, participate in community activities and maintain friendships if their incomes decline or parents experience disability, which is often infeasible in expensive and auto-dependent suburbs.

As previously discussed, compact, multimodal, integrated communities tend to increase disadvantaged parent's and children's economic opportunity and mobility. Policies that attract middle-income families (particularly those that participate in community activities and have children that attend local public schools), improve local services, and increase local business and jobs in a neighborhood can benefit local children in many ways. These are not simply economic transfers, they do not benefit lower-income families to the detriment of higher income families, by improving education and employment, and reducing social problems, they tend to reduce total costs and increase total economic productivity, benefiting everybody.

Community-oriented policies tend to provide other benefits:

- *Independent mobility and reduced chauffeuring burdens.* Compact, multimodal communities with good walking, bicycling and public transit allow youths and other non-drivers to travel independently. This is important for their mental development and reduces the time and financial costs parents must spend chauffeuring.

- *Physical fitness, health and fun.* Compact, multimodal communities with lower traffic speeds and sufficient parks tend to increase physical fitness for children and their families.
- *Traffic safety.* Compact, multimodal communities with lower traffic speeds have 40-80% lower per capita traffic casualty rates than in automobile-dependent, sprawled areas.
- *Environmental quality.* Community-oriented child-raising tends to reduce pavement, increase greenspace (particularly public parks), reduce automobile ownership and use and reduce sprawl, all of which provide direct and indirect environmental benefits.

These tend to benefit children directly and indirectly by improving their parent's health, opportunities and happiness.

Below are four possible ways to interpret this analysis.

1. **Child-raising is expensive (the consumerist narrative).** This perspective assumes that wealth is the most important factor affecting children's welfare so lower-income households should not have children or must earn more to be good parents. *This narrative can be harmful by imposing shame and stress on parents, leading to excessive work hours.*
2. **Common child-raising cost estimates are exaggerated.** Many estimates use *average* family spending to define *minimum* budget needs, ignoring potential savings. For example, on average households spend about \$1,000 per year on cigarettes and alcohol, and many could choose much cheaper home and vehicle if motivated (BLS 2024). Many child-raising cost estimates assume that all families need large homes, vehicles for each parent, and full-time childcare although only 40% of parents rely on it (US Census 2023). *This narrative is harmful if it reduces community efforts to increase affordability and inclusivity.*
3. **Parents need more government financial support.** Advocacy organizations such as the Economic Policy Institute, MIT and the Urban Institute report high child-raising costs to help justify public policies that increase financial support for families. *This narrative can be harmful if it overemphasizes national and state programs and undervalues local policy reforms.*
4. **Families with children need better local policies that create more child-friendly communities.** This recognizes the large effects of community design on children's welfare. It considers all impacts and options including costs of sprawl and auto-dependency, harms caused by income segregation, and potential savings from living in compact, multimodal neighborhoods. *This narrative offers important insights and guidance for addressing problems facing North American families.*

This analysis shows the importance of carefully framing narratives when defining problems and evaluating potential solutions. Many commonly-cited information sources only reflect one narrative and overlook other perspectives and impacts.

Correcting Common Biases

This research identifies common analysis biases that cause experts, policy makers and families to overrate the role of household income and underrate community design in children’s welfare, and therefore overvalue sprawl and undervalue urban neighborhoods when choosing homes and planning communities, as summarized below.

Table 6 Common Analysis Biases and Best Practices

Factor	Common Biases	Best Practices
Importance of household income.	Exaggerates child-raising costs and the influence of incomes on children’s welfare.	Use realistic child-raising cost estimates, and recognize the large impacts of community design on children’s welfare.
Costs of sprawl and auto dependency	Conventional analysis tends to overlook many costs of sprawl and auto dependency.	Account for costs of sprawl and benefits of compact, multimodal development.
Geographic scale of analysis.	Many sources compare states or cities, ignoring differences between neighborhoods.	Analyze differences between urban and suburban neighborhoods.
Harms of income segregation.	Assumes that children benefit from living in affluent suburbs, ignoring the harms of income segregation.	Account for the harms caused by segregation and the benefits provided by integrated urban communities.
Children’s safety and health.	Exaggerates urban risks and underestimates suburban risks.	Account for crash and health risks caused by auto-dependency and sprawl.
Housing and transportation needs.	Assumes that families need homes with private yards and vehicles for each adult.	Consider potential savings and benefits from compact housing and non-auto transport.
Affordability analysis.	Many cost studies overemphasize housing costs and underestimate transport costs.	Consider housing and transportation cost trade-offs and the potential savings from compact, multimodal neighborhoods
Gentrification analysis.	Assumes that gentrification harms disadvantaged communities.	Recognize the benefits of income integration, provided disadvantaged residents are not displaced and children receive support.
Transport planning methods.	Evaluates transport system using indicators of vehicle traffic speed and delay.	Use accessibility-based analysis that considers impacts on non-auto modes and the efficiencies of compact development.

Common assumptions and analysis practices exaggerate the importance of household income and underestimate the importance of community design in children’s health, success and happiness.

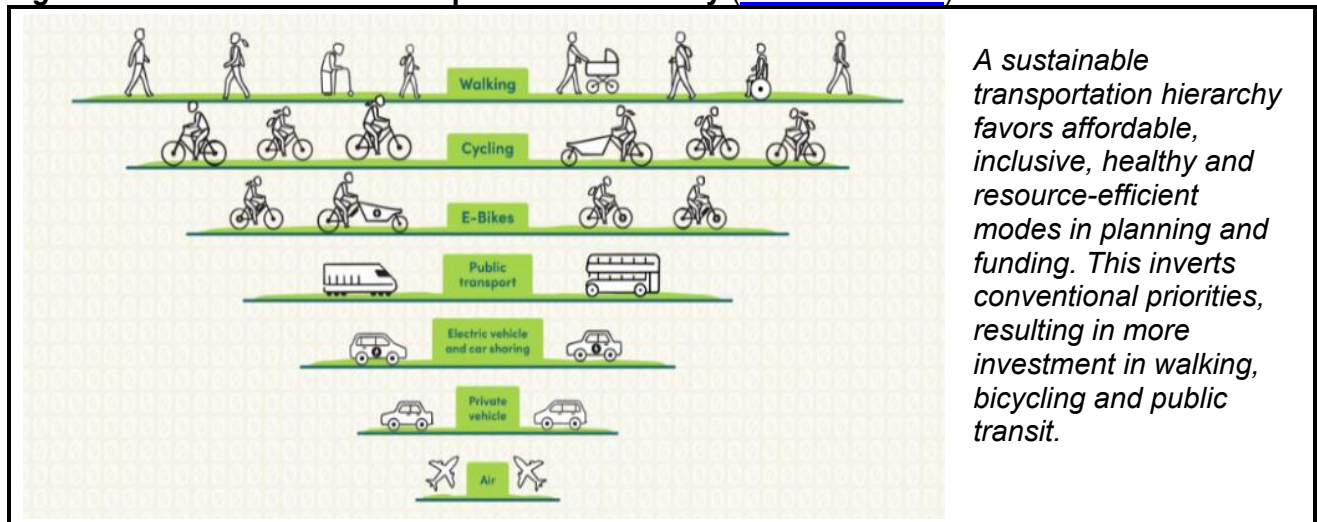
This indicates that more comprehensive analysis tends to reduce emphasis on material wealth and increase emphasis on social wealth such as positive neighborhood relationships and more quality family time. Comprehensive analysis tends to recognize more disadvantages of auto-dependent sprawl and more benefits from policies that allow households, particularly disadvantaged families, to find suitable homes in compact, mixed, affordable, multimodal and integrated neighborhoods. This suggests that once households achieve moderate levels of material wealth, additional income provides declining benefits. It suggests that many children would be better off overall if their families chose more affordable homes in multimodal urban neighborhoods to reduce sprawl-related costs and financial stress, and increase family time.

Policy Recommendations

This research identifies the following local policies for children's health, success and happiness.

- **Multimodal planning.** Apply a sustainable transportation hierarchy that prioritizes affordable, inclusive and resource-efficient modes in planning and funding. Establish complete streets policies so roads accommodate all modes. Implement TDM incentives that encourage travellers to use the best option for each trip.

Figure 24 Sustainable Transportation Hierarchy (Action Net Zero)



- **Reduce traffic speeds.** Achieve safe traffic speeds, which are generally less than 20 mph (32 km/hr) on local streets and less than 30 mph (48 km/hr) on urban arterials. Implement complete streets policies, traffic calming and traffic speed enforcement programs.
- **Support Smart Growth.** Allow compact and mixed development, including attached and multifamily housing, and social housing, in multimodal urban neighborhoods where it is easy to get around without driving. Strive for a Walk Score over 70.
- **Parking reforms.** Reduce or eliminate parking minimums, and encourage unbundling (parking rented separately from building space). Efficiently manage and price public parking.
- **Support local parks and greenspace.** Establish targets for parks, recreational programs, public greenspace and tree cover. Ensure that most households are located within a 5-minute walk of parks, and provide recreation facilities suitable for children and families.
- **Support local services.** Develop neighborhood commercial districts, activity centers and schools.
- **Placemaking.** Ensure the public realm, including sidewalks, parks and local shopping districts are safe, attractive and accessible. Support activities that attract and engage neighbors, particularly families with children.
- **Support integration.** Develop programs to help integrate diverse groups – including lower-income families, visible minorities, immigrants, and people with disabilities – into a community.

Conclusions

Nothing is more important than children's health, success and happiness; these determine the society that exists as we age, and the legacy left to the future generations.

This study uses new research to understand how community design affects children's welfare and how local policies can achieve related goals. It indicates that children, particularly those in disadvantaged families, fare best in compact, mixed, multimodal, affordable and integrated communities, with good parks and public schools.

This analysis suggests that most families have adequate material wealth but insufficient social wealth. Despite its wealth and technological progress, American children now have shorter life expectancies, lower economic success and less life satisfaction than previous times and most peer countries. This reflects problems associated with affluence including high living costs, long working hours, stress, and risks associated with auto-dependent sprawl.

This research finds that community design affects children's health, success and happiness more than their families' incomes. It challenges common assumptions. Experts often encourage families to choose single-family homes in affluent, segregated suburbs based on exaggerated fears of cities and underestimated costs of sprawl. Contrary to popular beliefs, children tend to be overall safer, healthier and more successful growing up in cities than in suburbs and rural areas. This article identifies local, practical policies that benefit children directly, and indirectly by improving their parents' health, opportunities and happiness.

This research highlights the importance of affordability. Common assumptions that children need homes with private yards and every parent needs an automobile increase the costs of living beyond many families' incomes, causing parents to feel inadequate and stressed. These assumptions encourage policy makers to favor expensive housing and transportation over more affordable alternatives, leading to auto-dependency, sprawl and social isolation, which are unhealthy, inefficient and unfair. Many children are better off with cheaper homes and transport that allow parents to work less and have more family time.

This research also highlights the importance of income integration. Segregation concentrates poverty which exacerbates social problems and reduces economic opportunities. Community integration allows children with diverse backgrounds and abilities to learn and play together, improving their economic opportunities. To be successful integration must be nurtured with an attractive public realm, such as safe sidewalks and local parks, plus successful public schools.

This research offers a positive message. It indicates that local policies that create compact, multimodal, affordable and integrated urban neighborhoods can give families more economic flexibility and provide other benefits. This should reassure potential parents that they can raise healthy, successful and happy children with lower incomes than experts recommend, provided that local policies support affordability, physical activity and integration.

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