

PARENT NATION

• AUTHOR'S NOTE •

Throughout this book, I use the word “parent” many times. Sometimes for variety and sometimes because the distinctions matter, I also refer to mothers, fathers, grandparents, caregivers, childcare providers, and other adults. I would like to emphasize that parents come in many forms and that what I mean by “parent” encompasses the broadest possible interpretation: a caring adult entrusted with the raising of a child. A parent nation, as I see it, is a society that cherishes and supports the love and labor that go into nurturing, raising, and educating future generations.

The parents you will meet in these pages are real, but I have taken some steps to protect their privacy. I have used only first names for the families I met through the TMW Center for Early Learning + Public Health. I did the same for the other parents I interviewed with a few exceptions, whose full names are included because their professional affiliations make them easily identifiable and are relevant. The names of Jade and her family, Justin, Katherine, and Ellen Clarke’s friends are pseudonyms.

• PART ONE •

FOUNDATIONS

TOWARD A NEW NORTH STAR

“There can be no keener revelation of a society’s soul than the way in which it treats its children.”

—NELSON MANDELA¹

As we near the “red line,” the demarcation between the hospital’s pre-op area and its collection of operating rooms, a mother and father hand me their baby. Their eyes are filled with tears as they look at me with a combination of hope and fear. The little boy is just eight months old and was born deaf. He is here to receive his cochlear implant. When I surgically implant the small device that will give him access to sound, I am replicating what I did for his father many years earlier when he was a teenager. As the baby melts into my arms, I reassure his nervous parents, “I promise to care for your baby like he’s my own.”

The parents settle in for a long, anxious wait, while I carry their son to the operating room. In OR4, where I spend each Tuesday morning, we are greeted by the team of medical professionals I rely on for every surgery, and by the cacophony of monitor beeps that I find so comforting every time I hear it. My two OR nurses are circulating. Gary Rogers makes sure the cochlear implant is present

and that my favorite drill and facial nerve monitor are working properly. Nelson Floresco checks out the operating room microscope, which is the size of a Smart Car and gives me a remarkably clear, precise view of the ear's tiny, delicate interior spaces. Robin Mills, the OR tech, is scrubbed in and organizing the array of sterile microscopic ear instruments on the surgical table. The pediatric anesthesiologist gently places a face mask filled with colorless gases on the squirming baby. Very quickly, the baby is fast asleep.

Before I start the operation, we double-check that everything is in order. Do we have the right patient? Check. Do we have the correct implant with all the right instruments? Check. Do we know if the patient has any medical allergies? Check. Are the pre-operative antibiotics in? Check. This routine ensures the accuracy and safety of what we're doing. Each person in the operating room plays an essential role. No one forgets why we are here: to help a child.

As a surgeon performing delicate work just millimeters from the brain, I have no room for error. It's critical that I have the necessary tools and, even more importantly, my A-team by my side. If any part of this carefully crafted system falls away, no matter my skill or good intentions, my job will be infinitely more difficult, if not impossible. Some obstacles can be overcome—a few missing instruments, for instance. But what if the power went out in the hospital and I suddenly had to operate without light or oxygen? Or what if Robin, Gary, and Nelson suddenly walked out the door, leaving me alone? The odds would be stacked against me, and the job would seem impossible.

The challenge of successfully rearing children is not so different. To raise a child into a happy, healthy adult capable of achieving their full potential, you need a plan, and you need an appropriate, safe environment, one that provides backup as required. But far too many parents are not operating—that is, parenting—in an optimal environment. For too many parents, in our country and throughout the world, it is as if they are trying to function in the midst of an

endless power failure, asked to achieve a critical goal without the necessary tools or any backup.

Twenty years ago, I started my own life as a parent with what I thought were all the necessary tools in place. But, in one painful day, it all changed, when my husband, Don, drowned while trying to rescue two boys, leaving me a young widow and my three children with no father. While we still had a roof over our heads and food on the table, advantages that many families lack, Don's death left a vast hole in our lives.

For a long time after he died, I would wake at night, jolted by the same terrifying nightmare, which went something like this: I'm standing on a foggy riverbank. Splinters of moonlight stream through the clouds and illuminate a small wooden boat next to me at the water's edge. Three small, terrified faces—my young children, Genevieve, Asher, and Amelie—peer from the boat, staring at the foreboding river. Its fierce currents resemble the waters of Lake Michigan, whose undertow claimed Don's life. I feel the intense pull of the water, the same pull that Don must have faced when he left the protective shoreline to swim toward the cries of the two struggling boys. Like Don, I have a desperate need to ensure young children are safe. In my dream, I have to get my kids across the river. I believe that if I can just do that, they will be okay . . . It will all be okay. But the torrent is too rough, the boat too flimsy, the opposite riverbank too far away. I wake sobbing, helpless, alone.

It was not hard to grasp the significance of my dream. I wanted what all parents want: to ferry my children into healthy, stable, and productive adult lives—that is what awaited on the far shore. I wanted to give them every opportunity. But it would take some time before I saw how fully all the elements of my dream—the turbulent water, the inadequate boat, the fact that there was no one standing next to me on that riverbank—symbolized the hurdles that so many parents face in the effort to successfully rear their children.

How could I navigate that torrent on my own, with no support, no

help? How can anyone? Although I had been a surgeon for years and thought I had a deep familiarity with the lives of the families whose children I cared for, my struggles as a grieving, single parent gave me a new window of understanding into the challenges facing families.

Thirty Million Words . . . and Beyond

I became a surgeon because I thought I could change lives, one child at a time. By giving deaf children cochlear implants, I give them access to sound, to hearing, and to spoken language. I want there to be no barriers to their success, and I believe restoring their access to sound accomplishes that. Sign language can provide a rich, early language environment when provided by fluent signers. The baby whose surgery I just described is now fluent in two languages—American Sign Language and English. But the reality is that more than 90 percent of deaf children are born to hearing parents who don't sign. And early in my practice, I noticed profound differences in my patients' progress after surgery. Some children excelled developmentally, others not at all. Some learned to talk, others did not. The ability to hear, it turned out, did not always unlock their full capacity to learn and thrive intellectually. I could neither accept nor ignore the disturbing disparities I saw among my patients, but I didn't understand them. Compelled to discover their cause and to find solutions, I began a journey far outside the operating room and into the world of social science.

Initially, I was inspired by pioneering research that found a stark difference in the amount of language—the actual number of words—that children were exposed to early in life.² That difference often, although not always, fell along socioeconomic lines, with more language occurring in more affluent homes and less language in homes where families have been denied access to educational

opportunities, often for generations. Researchers calculated that by the time children reached their fourth birthday, there was a gap of roughly thirty million words between those who heard a lot of language and those who heard very little. Although the research was done in hearing children, it explained what I was observing in my patients. In order to fully benefit from their new cochlear implants, they needed to hear a lively stream of words every day, they needed to practice listening. The quantity and quality of the words children hear stimulate the brain. Regions that are learning to process grammar and meaning will be critical to the ability to speak and later to read. Exposure to words also affects areas of the brain that handle feelings and reason, which will help children regulate their emotions and behavior as they grow older. The more language a child hears in those early years, the more securely the foundational connections are built in that child's brain.³

Some of my patients were getting that kind of essential experience with language, others were not. As I learned more, I realized that what I was seeing in my deaf patients mirrored the population at large and that this phenomenon was the basis of what is called the educational opportunity gap. In all children, the difference in early language exposure correlates with later differences in achievement. Too often that opportunity gap results in disparities between rich and poor children.⁴

The research was inspiring because it was based on the idea that parents are their children's first brain architects—that every parent, through the power of their words, has the ability to build their child's brain—and that we, therefore, have to make sure that parents have the resources they need to do that. The research also accentuated the urgency of actively building the brain during the first three years of life. Those early studies weren't perfect, and their limitations became clearer over time, but I think of them now as the first sentence in what has become an extensive body of literature.⁵

The work gave me and my colleagues a relatively simple explanation of the underlying disparities to target. It gave me a critical place to start. And it was persuasive enough to pull me out of the operating room for much of each week and into the world of research and social science.

In 2010, when I launched the Thirty Million Words Initiative, now the TMW Center for Early Learning + Public Health, my primary goal was to help ensure healthy development in all children and to give every child the ability to reach his or her potential, intellectually and emotionally.⁶ Brain science pointed the way. Everything we designed and did was based on the fact that nurturing talk and interaction between caregivers and infants lay the foundations for brain development. My team and I developed evidence-based strategies to show parents the importance of talking to babies and young children. Those strategies became the theme of TMW: *Tune In, Talk More, and Take Turns*, or what we call the 3Ts. Our work is centered on the knowledge that rich conversation is what unlocks a child's potential and on the belief that parents as well as other loving caregivers hold the key during those early years. All adults—no matter their level of education, wealth, or work—can master the essential techniques for optimally building a child's brain.

The idea, a straightforward approach to a complex problem, was intuitively appealing and a great success. It was the “magic bullet” that people were looking for and it took me to the nation's capital, where I convened the first Washington, DC, conference on closing the word gap in 2013. Soon after, in 2015, I wrote a book called *Thirty Million Words: Building a Child's Brain*, which explained what research has revealed about the role of early language exposure in the development of children's brains. It was never just about the sheer number of words; but the difference between the effects of a lot of language exposure and a little served as a memorable representation of the brain-building strength of talk and interaction. The book caught on around the world. Everyone seemed to get its

message. No matter the nuances of culture, vocabulary, or socio-economic status, people had an almost instinctive understanding of language as the key to developing the brain to its maximum potential.

Yet the more deeply I engaged in this new work, the more troubled I became. Or, to put it more honestly, the more I came to realize how naive my ideas were, limited by my own comfortable life circumstances. I had thought the answers lay in the actions and beliefs of individual parents, in their knowledge and behavior. (I still believe those elements are critical!) And it followed that the goal should be to ensure, as I put it in *Thirty Million Words*, that “all parents, everywhere, understood that a word spoken to a young child is not simply a word but a building block for that child’s brain, nurturing a stable, empathetic, intelligent adult.”⁷ To that end, we were testing early language programs in randomized controlled trials—the scientific gold standard for determining what works and what doesn’t. We found that, indeed, our strategies worked and the science that supports them is solid. The programs we promote at TMW can—and often do—improve the lives of children.⁸

But there was more to it than that. For our studies we recruited families, most of them low-income, from all over Chicago and later in other parts of the country. Our research followed children from their first day of life into kindergarten, and our programs took us into families’ homes and into their lives. I was getting to know people up close and over time. The parents’ enthusiasm was thrilling. They embraced the 3Ts with gusto, tuning in to their children, talking more as they went about their daily lives, and taking turns, encouraging their children to join the conversation. They wanted what we all want: to help their children get off to the best possible start. The problem was that the 3Ts took parents only so far. Real life would intrude, again and again and again.

There was Randy, who was excited to discover that talking about his love of baseball (Cubs only, never White Sox!) could help his son

learn math but who had to work two jobs and, most days, had less than thirty minutes to spend with his kids. There was Sabrina, who gave up a well-paying job to care for her husband when he got sick and whose family ended up spending over two years in a homeless shelter, where she raised her two children, the youngest still a baby, in a stressful and chaotic environment. Most searing of all was the story of Michael and Keyonna, whose son, Mikeyon, missed out on all his father had to teach him for the first five years of his life because Michael spent that time in prison waiting to be tried for a crime he didn't commit—not appealing or serving a sentence, mind you, just waiting for his case to be heard.

Parenting is not done in a vacuum. Our research could not be, either. The circumstances varied, but everywhere I looked I saw the hurdles looming in front of mothers and fathers. At TMW, we can share with parents the knowledge and skills that build their children's brains; but our programs do not substantially change the day-to-day lives of the parents who participate. The larger realities of a family's circumstances—their work constraints, economic stresses, and mental health as well as the injustices and bad luck they are subject to—all matter as much as the 3Ts for healthy brain development. They either allow for the brain-building power of talk to occur or, if they limit the opportunities for engaging in the 3Ts, they stifle it like weeds choking the growth of a garden. When I saw just how difficult parenting is in a country that does so little to support the ability of parents to facilitate healthy brain development, I knew I had to learn more. I hoped I could *do* more.

Mirroring a Larger Problem

Reflecting on what I was seeing, I began to look beyond my patients and families at TMW to the entirety of the more than sixty million parents in the United States who have children under eighteen.⁹

And I saw how, regardless of income level, parents are being sidelined by our country's lack of family-friendly policies. I don't mean to minimize the herculean struggles of poor families or to suggest that more affluent families face equivalent challenges but to point out that society has abdicated its responsibility for *all* families. With the exception of the top 1 percent, our society makes raising children hard for everyone—and impossible for some. Some problems are obvious, others are more insidious. How is it that we spend less money on early childhood care and education than any other developed nation? By the end of 2021, why was the United States still the only one of the thirty-eight countries within the Organisation for Economic Co-operation and Development (OECD), an international body that seeks both to measure and to stimulate economic progress among its members, not to mandate paid parental leave?¹⁰ The fact is that the great majority of parents have to work. Yet we have a fragmented and overwhelmingly low-quality childcare system; approximately half of Americans live in so-called childcare deserts and fewer than 10 percent of existing programs were judged high quality in a National Institute of Child Health and Human Development study.¹¹ Given that roughly twenty million working Americans have children under the age of six and that more than 70 percent of mothers were in the workforce in 2020, this means that many millions of parents do not have adequately nurturing childcare for their children during the formative early years.¹² For this we can thank our economy. Wages for the middle and lower classes have been stagnant for decades. “Innovative” disruption has affected everything from bookstores to taxicabs and has created employment practices directly antithetical to the needs of parents and their children. The net effect is to place a heavy hand on the scales toward what benefits employers and their shareholders and away from what benefits families. In the process, and as a direct result, inequality has dramatically increased.¹³

To stay afloat, some parents have to take on multiple minimum-

wage jobs that leave them little time for their children; others have the kind of job that requires constant contact with the workplace, via phone and computer, days, nights, and weekends. Everyone ends up overworked, stressed, and disconnected from family life.

As I talked to more people—you'll hear many of their stories—I saw how thoroughly all of this limits parents' choices. No matter their political or religious orientation, employment, or educational status, they all seemed to be struggling. I met Kimberly, a pediatrician at a community health center whose daughter was born prematurely at twenty-seven weeks. Kimberly had to leave her new baby in the neonatal intensive care unit just two weeks after her birth in order to go back to work. Imagine the pain of that! But her family could not afford to live without her salary, and Kimberly's state did not mandate paid family and medical leave, nor did her job offer it. I listened to Jade, who is deeply religious and believes that a mother's place is in the home, as she explained through tears that a lack of health insurance and an inadequate family income sent her back to work at Starbucks after her kids were born, despite her dreams of staying home. And I could relate to Talia, who had two babies while earning a PhD in psychology but gave up a promising postdoctoral position when it became untenable to manage the demands of the job, the economics of childcare, and the needs of two children under four.

Despite a culture that champions "family values," our society is not centered on families. It is not built around programs and policies that protect or promote those values. Quite the opposite. We erect daunting barriers in the path of far too many mothers and fathers—from mundane issues like irregular work hours that complicate childcare to profound structural problems like systemic racism that hold back sizable portions of our population. All these barriers limit the time and energy parents can devote to the brain development of their children. The barriers are unsupportive of parents, and they are holding back our next generation.

There is an alarming disconnect between what we know about what children's brains need and what we have actually done to develop those brains. At the very moment when parents and children could most use help, and when that help would have an outsize influence on children's ultimate ability to learn and succeed by strengthening neural connections, society does nothing—or worse, makes things harder. When it comes to children, public attention and money have been focused on K–12 schooling. But supporting children only during these years means we have skipped over the earlier phase that is critical to laying the foundation for learning at the K–12 level. Our efforts come too late for many, who will have been left so far behind during that critical period that by the time they get to kindergarten, they may never be able to catch up. Even preschool for all, while important, is not early enough.

The first three years of life are when the brain is in its most rapid, most critical period of growth. Successful education is predicated on the ability to learn, and that ability is dependent on what happens long before a child sets foot in kindergarten or even preschool. During those early critical years, parents are left largely on their own. This is why, despite decades of effort, we have not moved the needle on educational outcomes or equity. In the OECD's 2018 international educational rankings, the United States ranks 38 out of 79 countries in math and 19 in science.¹⁴ Among developed countries, ours is near the bottom of the pack. We are the richest country in the world, per capita, yet we have lost sight of what is required to give all children a strong start on the road to being productive adults.

A Crystallizing Moment

I was already contemplating these deep-seated problems when the COVID-19 pandemic shut down the country in March of 2020. At the University of Chicago Medical Center, where I work, it was

all-hands-on-deck. I spent hours screening patients, talking to and corresponding with frightened people, noting their symptoms, and advising them on whether or not to go to the hospital. When I was on call as an ear, nose, and throat surgeon, my medical specialty meant I was working on the areas of the body—the nose and mouth—where the risk of transmitting the virus was highest. (The first doctor to die of COVID in China was an otolaryngologist like me.)¹⁵ One difficult day I treated a man in his early forties who could not breathe on his own and needed a tracheotomy. Normally, that's a routine procedure to provide a surgical airway, but during COVID, it became a high-stakes procedure that required me to call in two chief residents to help. The medical side of the experience was exponentially harder than usual because of the anxiety and extra protocols COVID brought, but the human side of it was harrowing. As I stared at the man's thin, wasting body, I could see only hints of the strong construction worker he had been just a few weeks before. I knew his mother had already died from COVID-19 and that his wife was also sick and hospitalized in another unit. I had to wonder who was taking care of their young children and what would become of this family, which was being torn apart by this terrible disease.

And then, on April 21, more than a month into the pandemic, I got a text from Nelson, one-third of my operating room A-team.

|| Pls pray for Gary Rogers. He was intubated today.

I was so shocked I could barely breathe. Because of the pandemic, we weren't performing elective surgeries, so we hadn't seen each other in a few weeks. But Gary, tall and strong with a quick wit and quicker smile, had been a warm, steady, supremely capable part of my life for years. Both Gary and Nelson had been OR nurses at Comer Children's Hospital within the University of Chicago

Medical Center since it opened in 2005. It was while at his second job, caring for dialysis patients—work he took on to help his daughters pay for college—that Gary contracted COVID. As a fifty-eight-year-old Black man, he was in a demographic group that seemed to be at higher risk of serious illness. And I knew as well as anyone that at that point in the pandemic, as doctors were scrambling to understand how to treat this new disease, once someone required a ventilator, the prognosis wasn't promising. I feared Gary was going to die.

After more than a month in the intensive care unit and two weeks on a ventilator, Gary was left with generalized muscular atrophy and cardiomyopathy and had to spend several weeks in rehab before he was strong enough to go home—and ultimately to return to work. When we reunited in OR4 for our first cochlear implant surgery late in June, I was flooded with relief to have Gary, Nelson, and Robin (who had had a milder case of coronavirus) back together.

For a time, I took comfort in the thought that at least children were relatively immune to the virus. Alas, that was wishful thinking. Some did get sick (especially once the Delta variant of the virus arrived), many lost parents and loved ones, and nearly all suffered terribly from the loss of in-person schooling. The effects of the pandemic on children are still being calculated as I write. But within all the trauma and hardship of the pandemic, a sliver of positive news emerged. Even in the face of the extraordinary stresses the pandemic created—in many cases precisely because of those stresses—many families reported spending more time together. That was certainly true for me. With my kids (now in high school and college) in the house all the time, we had more family dinners than we had had in years. Even for families who suffered job losses, the pandemic's social safety nets helped some to cushion the blow and allowed families to enjoy being together. In March 2020, Congress's first

relief bill, the \$2.2 trillion CARES Act, replaced lost income for many workers, even those without unemployment insurance. Several more relief bills followed. They included, among other things, more direct payments to families and increased child tax credits. According to a study of recipients of the first round of pandemic aid, many of those who got those checks reported more positive parent-child interactions than those who didn't get checks.¹⁶ But here's the rub: Parents were able to engage in conversations with their kids, to be there for their children and nurture their young brain cells, because the world had just about come to a complete stop. That is not real life. And the family conversations sometimes came at the cost of paychecks and financial security. That is not tenable. Eventually, most of the parents who were working remotely would have to return to the office, at least part-time, and the parents who were out of work would find new jobs. They had to. What would happen to family time and parent-child interaction then?

We can no longer deny how thoroughly entangled our private family lives are with our economic lives. Parents cannot work if their children do not have a safe place to spend the day. In the pandemic, schools closed and our already inadequate childcare system all but disintegrated. Two-thirds of childcare centers were closed in April 2020 and one-third remained closed in April 2021.¹⁷ Even the Federal Reserve began to worry that childcare might be the broken leg of the economic stool that would make it impossible for the country to right itself.¹⁸

Parents were left on their own. Anxious and exhausted, they were called on to manage every aspect of their children's lives—to be teachers, coaches, therapists, and camp counselors—all day every day for the better part of a year in many places, longer in others. Even among those who didn't lose their jobs, millions ended up quitting (mostly mothers) or cutting back on work hours (again mostly mothers).¹⁹ Doing it all was unsustainable. The pandemic was like a

powerful earthquake with lingering aftershocks that showed just how shaky our nation's infrastructure of support for parents and, therefore, for children really was.

COVID was a crystallizing moment for me. As I watched its effects reverberate through the long months of distancing and difficulty, I was reminded that extreme situations can be clarifying. They show you what works, they show you where the weaknesses are, they show you what really matters. You cannot push pause on the work in progress that is a child's brain. And the pandemic was a forceful reminder that no one is meant to parent entirely alone. It really was the worst-case scenario from OR4, as if the power had failed, there was no oxygen or light, *and* the A-team had left me. (Gary nearly did!)

The pandemic also made plain that our current approach to children and families is both shortsighted and expensive. There was already plenty of evidence of that before the pandemic if you looked for it. Not investing in early childhood is estimated to cost our country billions. There is a cost to children, a cost to parents, and a cost to society. Economist and Nobel Laureate James Heckman of the University of Chicago has calculated that investments in programs supporting children from birth to age five (even programs that are very expensive in the short term) deliver a 13 percent annual return to society through better education, health, social, and economic outcomes well into the adulthood of the children served.²⁰ A failure to invest, on the other hand, means society ends up losing money because, without the preemptive protection of strong early childhood development, it must ultimately spend more on such things as health care, remedial education, and the criminal justice system. In short: If we don't invest in children from the earliest days of their lives, we—and they—do not just lose out on reaping the rewards of that investment, we pay a severe penalty for our failure. Consider this: A much-cited report by ReadyNation found that the overall

cost to society of childcare issues is \$57 billion a year and that the direct cost to employers is \$12.7 billion. It has also been estimated that if American women stayed in the workforce at a rate similar to Norway's, which has government-subsidized childcare, the United States could add \$1.6 trillion to the GDP.²¹ Parents cannot work if there is no one to care for their children.

The Myth of Going It Alone

How did we get to this wholly untenable situation, where each parent stands alone on the dark riverbank? Where the dangerous currents and inadequate boats of my dream are made manifest in the hard realities of daily life? Where each parent's shoulders sag under the weight of the load? Somehow the centrifugal force of our societal choices flings children and parents to the outer reaches of our priorities instead of putting them at the center.

A string of deliberate political decisions, sins of omission and unintended consequences are to blame. But one consistent theme runs through the choices we have made as a society: the mythic idea of American individualism. The roots of this idea reach to the nation's founding, to the colonial settlers and western pioneers who *had* to go it alone. Tough and independent, they made their own way because there was no alternative. We have been celebrating them ever since, even though our circumstances today are very different. Individualism perpetuates going it alone as a virtuous ideal. Expecting societal help is seen as a form of weakness, an admission of failure. And since the ideal of individualism is bound up with our ideas about the sanctity of our right to make our own decisions about our families and how we want to parent, such support is deemed inimical to liberty and freedom. At least that is how the story goes.

A key element of such thinking is the concept of parental "choice," which has been held up as sacrosanct, as the source of all parental

authority. Anything else is considered un-American. The result has been to convince parents that they should be able to shoulder the enormous responsibility of early childhood care, development, and education on their own without formal support. Indeed, they should *want* to do so, should see it as a manifestation of their freedom to make decisions about their family life without interference.

As parents, we (especially moms) have internalized this propaganda. Burdened by guilt, most are managing a delicate balancing act, struggling to make it work, yet forever feeling inadequate, unable to live up to the ideal we imagine we should achieve. Occasionally, we get glimpses of an alternate universe when one of our own escapes the madhouse of the United States to another, saner country and finds that it really doesn't have to be this way. The popularity of *Perfect Madness* by Judith Warner and *Bringing Up Bébé* by Pamela Druckerman, both bestselling books that note the ample state-financed resources for parenting in France, reveals a desire for things to be different. And they could be.

In many other countries, support for family and parenting is increasingly recognized as an important part of social policies and investment packages aimed at reducing poverty, decreasing inequality, and promoting positive parental and child well-being. UNICEF is advocating for at least six months' paid leave for all parents, safe and comfortable public and workplace locations for women to breastfeed, and universal access to quality, affordable childcare from birth to the first day of first grade.²² But here in the United States, we seem to have bought into the status quo idea. That, and perhaps our personal sense of failure as parents, keeps us from demanding more support from society. We are convinced we should be able to do this on our own and feel guilty about asking for help. I see this among my fellow physicians, my patients and friends, and the TMW families. I see it on the left and on the right, among the affluent and the poor. Few are spared.

In reality, choice and individualism for parents are myths—

convenient for those who wish to abdicate responsibility for offering support, horribly inconvenient for those who buy into the myth and suffer as a result. “Individualism” in parenting is more fantasy than reality, and “choice” borders on being an outright falsehood, implying as it does the availability of multiple options. In truth, most parents have few options and therefore not much to choose from, so how can we call that “freedom of choice”? Without support, there is no such thing as true choice. And you know what? In real life, except in a pandemic, almost no one actually parents alone. The reason the proverb “It takes a village” resonates is because it is true. Caring for children with zero help or community support is practically unheard of. There have always been grandparents, and aunts and uncles, and older siblings. There have always been neighbors and friends. There have always been other parents. Even pioneers circled the wagons to keep each other safe. We have offered each other advice, babysitting, moral support, and commiseration. We have been in it together. But valuable though they are, these private sources of support are not enough. Support systems are wonderful, but publicly financed and society-wide supportive systems are critical. We need more, and we should expect more, of our society.

Our Guiding Stars

Today we are in the midst of a public health crisis—one that goes far beyond the pandemic and will long outlast it unless we do something about it. Unlike COVID-19, it’s a problem for which there is no vaccine. The lifelong impacts of early brain development are an invisible fault line running through society, magnifying and threatening to make permanent the disheartening inequities we see in our world. Multiple interwoven power structures, of economics, class,

and race, ignore or actively undermine the ability of millions of parents to provide the stimulating, language-rich early learning environments they so desperately want their children to have.

In other words, the disparities that plague our nation begin far earlier in a child's life than most people realize. We are suffering from an invisible epidemic in the form of unequal opportunities for the early brain development that all children need to achieve their innate promise.

Sometimes the enormity of this crisis, the same one that pulled me from the operating room, is overwhelming. I once again feel as I did in my old dream, that I am standing on the dark riverbank. That we all are. But I'm also reminded of the words of Dr. Martin Luther King Jr. in the midst of the battle over civil rights that gripped this country in the 1960s: "Only when it is dark enough can you see the stars."²³ And I do see. I see with clarity two separate but inextricably intertwined ideas that allow us to move forward.

First, science gives us a road map. Just as it tells us what to prioritize individually as parents, it can show us where to go societally as well. It can lay out the coordinates that will lead us toward healthy brain development for all children. That goal, laying the foundation for optimal brain development, should be our constant guide. It will keep us focused on where we want to go as we set out to transform our society into one that makes its future citizens its focal point.

The science of brain development tells us to begin when learning begins, not on the first day of school but on the first day of life. Even in the womb, babies learn to recognize their parents' voices.²⁴ Timing is everything. Neuroplasticity, the brain's incredible ability to organize itself by forming new neural connections throughout life, is at its peak between birth and the age of three. Brain circuits are a use-it-or-lose-it proposition. While our brains remain plastic throughout our lives, they will never be more so than in the magical and essential early years.²⁵ To capitalize on this time, the all-

important first step is rich conversation. It is often called serve-and-return, the back-and-forth of parents interacting with their children. Talking, smiling, pointing, responding—that nurturing interaction is powerful enough to help children move forward and develop two critical sets of skills that will allow them to succeed in school and in life. It delivers cognitive skills, the kind found on intelligence and aptitude tests: reading and writing, numeracy, pattern recognition. And it builds noncognitive, or “soft,” skills like grit and resilience. In other words, nurturing interaction builds the whole brain.²⁶

Neuroscience shows us that environment matters, too. Stable, calm environments foster socioemotional skills and executive function; disruptive environments impede their development.²⁷ Our society robs too many families of the opportunity to provide healthy environments. Illness. Poverty. Homelessness. These afflictions and others can trigger instability, and the resulting toxic stress becomes a risk factor endangering healthy brain development. When the ultimate development of a child is hampered, we all lose. Our future society will be made up of the children being reared today; therefore society should be helping to lay the foundation for optimal development of all its children.

If the science of the brain is our road map, it is parents who do the steering. That is the second critical point. Parents are the captains of their families’ ships, manning the helm. But every captain needs a crew. It is time to reject the myth of individualism as justification for failing to provide societal support. That makes about as much sense as my walking into OR4 without my A-team. Having that A-team there does not diminish my control of the room. When parents hand me their child at the red line, they know exactly who is holding the scalpel. They are also glad to know that I have backup. Working together with me at the helm, my team and I get the job done. Having backup doesn’t make me any less a surgeon, just as

living in a society with family-friendly supports doesn't make a mom or dad any less a parent or any less in charge. Parents need true choice. They need authority *and* backup.

Building a Parent Nation

That's why this book about the importance of foundational brain development is called *Parent Nation*. Parents are the guardians of our future well-being. They should be recognized as the guardians of our present as well. Mothers and fathers are ordinary people—not one is endowed with superpowers—yet they accomplish something extraordinary when they raise children successfully. Parents are the architects of their children's brains and thus also the architects of society's future. It is only when we create a movement to support parents on their journey that we as a society can support the needs of early childhood. Loving mothers and fathers do not need a PhD or expensive gadgets to do an excellent job at supporting early brain development and building our future citizens. They need easily acquired, basic knowledge about how best to foster critical neural connections. They need time with their children to nurture those connections. They need high-quality childcare that complements their efforts. They need to be able to provide children with stress-free homes. And they need support for this formative endeavor from employers, from communities, and from policy makers—that's who I mean by "society."

When I wrote my first book, I thought that just knowing and understanding, and having others know and understand, the powerful brain science would be enough to bring about meaningful change. I was wrong. Real, essential change will occur only when there is a concerted, collective, national effort to bring it about. What we need is to recognize that we can lighten the parenting load

by sharing it, by demanding what we require, and by asking society to help. What we need is to see the power in coming together as parents and as a nation to help all children. What we need is to put children's brain development at the heart of our thinking and planning.

By giving children the opportunity to achieve whatever their natural gifts allow, we fulfill the promise of their promise. Everything we do that affects families must begin there. In essence, we must reverse the spin and set up a society that pushes our focus inward, to the children—and their caregivers—at the center. We need to change the way society views an entire segment of the population: parents. Not just low-income parents. All parents. And in turn we need to change the way parents view themselves and elevate their expectations of support.

But how do we do it? By lifting our voices as one. There are tens of millions of us. Together, we can fight for our needs and our children's needs—for high-quality childcare, paid family leave, a child allowance. We can fight to address childhood poverty. We can demand that prenatal and pediatric care be holistic and include information about brain development. We can call on employers to institute family-friendly policies that are also good for their bottom line. If we form a coalition of parents, we can work together for the changes we need.

To create fundamental change, to ameliorate society's most entrenched problems, we must help all Americans to see that healthy brain development should be the North Star that guides us to a more productive, just, and equitable society. Addressing the issues of children and, therefore, their families doesn't help only those individuals; it is a necessary piece of addressing civil rights, gender equality, and the strength of our economy. So far, we have failed to see it that way. The ramifications of that critical failure are becoming more impossible to ignore with each passing day and were brought into the highest relief during the pandemic.

As a physician caring for children for over twenty years, I can attest to the fact that there are no fiercer advocates for children than their parents. I've seen it, time and time again. It is a beautiful thing to behold. Parents want to give their children what is rightfully theirs, the promise of their promise, even in the face of extreme obstacles. What if we could harness that passion, persistence, and determination into a movement that would compel society to deliver on children's unalienable right to realize their potential? What if we could convince society to make foundational brain development our guiding principle, our new North Star?

The beauty of this approach lies in its capacity to benefit each and every one of us, even non-parents. Undoubtedly, it will help to level the playing field and ensure that all children have a better shot at reaching their full potential and matching the achievements of their peers. The fate of each child, no matter how well nurtured, is, ultimately, intimately intertwined with the fates of all children. The strength of our country is based on ensuring that all our children have the *same* opportunity.

Being a parent has the power to bring us to our knees. But what brings us to our knees must also rouse us to our feet. Change doesn't happen spontaneously. These days, I dream of parents lined up next to me on the shoreline, millions of us setting out together, with our children, in sturdy boats capable of navigating even the most torrential river. I hope this book will remind parents that there is more that unites us than separates us; that it will help parents see that they are not alone in their struggles or aspirations for their children; and that it will make clear to parents that we are stronger together. I hope it will give parents and their allies what they need to succeed. And that, together, we will build a parent nation.