

Intergenerational Poverty, Women & Children's Health

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Background: Utah's Intergenerational Poverty Initiative and Public Health

Poverty is a key driver of poor population health outcomes. Families or individuals in poverty are more likely to experience chronic conditions, including asthma and diabetes, less likely to have access to healthy food and walkable neighborhoods, and more likely to have limited access to medical care. Women are at an even greater risk of poverty, due to social conditions. Because health is largely patterned along socioeconomic lines, eliminating or reducing poverty would lead to dramatically improved public health ¹.

In 2012, the State of Utah embarked on a major initiative to address poverty, passing the Intergenerational Poverty Mitigation Act to target families experiencing poverty in multiple generations. This Act is premised on the idea that not all poverty is the same. Some families experience 'situational' poverty, receiving public assistance for less than 12 months. For families in situational poverty, the public assistance system helps families move out of poverty. The State distinguishes a second group, those in 'entrenched' or cyclical poverty.

"Intergenerational Poverty is poverty in which two or more successive generations of family continue in the cycle of poverty, as measured through utilization of public assistance at least 12 months as an adult and at least 12 months as a child." -Utah Intergenerational Welfare Reform Commission, 2016 Report ².

The Intergenerational Poverty Mitigation Act's goal is to reduce the number of families caught in intergenerational poverty (IGP). The IGP Act and

subsequent IGP Initiative coordinates data across state public assistance agencies to better understand IGP families and develop programs and policy recommendations for Utah going forward.

Defining IGP Adults and Children

The focus of the IGP Mitigation Act is children, but the Act recognizes that to address the needs of children, programs and resources must also help parents. The IGP Mitigation Act identifies cohorts of IGP parents and children to target programs and data tracking: 1) IGP parents are defined as parents who received public assistance as a child; 2) IGP children are children whose parents received public assistance as a child; 3) non-IGP or 'at-risk' children are children who are currently on public assistance but whose parents either did not receive assistance, or there is no record of them receiving assistance. The different cohorts are based on public assistance usage data beginning in 1989 (when usage data became available).

Finally, several groups are not included in the IGP definitions and categories, which has implications for the data collection and subsequent programs and policy recommendations. Adults who grew up outside of Utah and adults who are non-citizens are not included in the definition of IGP adults. Therefore immigrants are largely excluded from IGP analysis, except in the at-risk child cohort. In addition, Native American families who received public assistance through tribal-based safety net programs were also excluded. Because of these definitions, it is estimated that the number of individuals experiencing poverty across generations is higher than the state's count ³.

1 <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2009.166082>

2 <https://jobs.utah.gov/edo/intergenerational/igp16.pdf>

3 *ibid*

2015 IGP and Non-IGP Population

Adults on Public Assistance, non IGP	148,988
IGP Adults on Public Assistance	37,512
IGP children	57,602
Children on Public Assistance, non-IGP children	234,151

Utah Data Trends and Indicators: Intergenerational Poverty, Women and Children

Women experience higher levels of intergenerational poverty. Of the IGP adults, 68% are women. This is consistent with poverty across Utah, where women experience higher poverty rates than men. In Utah, 12.2% of women are living in poverty, lower than the U.S. average of 16% ⁴.

While Utah's rate of poverty is lower than the national average, the poverty rates look very different when disaggregated by race and ethnicity. Women of color are more likely to live in poverty than White women and their male counterparts. According to Census data, in Utah Latina or Hispanic women have a poverty rate of 25.9%, Black women have a poverty rate of 20.3%, and American Indian women have a poverty rate of 36.1%. Rural women also have higher poverty rates than urban women in Utah. Several rural counties in Utah have some of the highest rates of intergenerational poverty ⁵. Single, female-headed households are at the greatest risk of being in poverty among IGP and non-IGP women. Overall, in Utah, 28.9% of female-headed households are in poverty. Women with younger children have even higher rates of poverty; among female-headed households with children under the age of 18, 37.5% are in poverty; among female-headed households with children under the age 5, 46.9% are in poverty ⁶.

For children, the child poverty rate has declined slightly in Utah to 13%, compared to a national average of 21%. Similar to women in poverty, children of color and rural children experience higher rates of poverty in Utah ⁷.

⁴ https://www.uvu.edu/uwlp/docs/uws_poverty.pdf

⁵ *ibid*

⁶ *ibid*

Women and Children's Health

Utah's IGP initiative reveals several trends regarding poverty, women and children's health. In some areas, IGP women reflect the same trends seen among non-IGP women in poverty; in other areas, these two groups diverge.

Among IGP women and children, enrollment in public health coverage is higher than the non-IGP population. This is not surprising given that the IGP Act defines intergenerational poverty as public assistance usage. Medical assistance is one of the main types of public assistance used by the IGP cohort, following SNAP or food stamps.

In Utah 12% of parents do not have health coverage, which is consistent with the national average. For children, Utah has one of the highest rates of uninsured children in the nation, despite making progress in recent years. 7% of Utah children lack health insurance, compared to 5% nationally. Uninsured rates for children living in poverty are even higher ⁸.

Health care utilization is higher among the IGP population. 81% of IGP individuals had access to medical care compared to 78% of non-IGP individuals, defined as utilizing medical services at least once in the last year. IGP women also have higher rates of prenatal care, compared to non-IGP women.

Among new mothers, 5% of IGP children were born to teen mothers. Overall, the teen birth rate continues to decline nationwide and in Utah. In 2014, Utah was at a teen birth rate of 7.57, and in 2015 the rate is 6.94 ⁹.

⁷ <http://datacenter.kidscount.org/data#UT/2/0/char/0>

⁸ *ibid*

⁹ <https://jobs.utah.gov/edo/intergenerational/igp16.pdf>

Intergenerational Poverty and the 7 Domains of Health

Intergenerational poverty affects all aspects of physical and reproductive health, social health, emotional health, occupational and financial health, environmental health, intellectual health and spiritual health. Intergenerational poverty underscores how different social conditions and factors affect health outcomes and well-being. IGP children are at a greater risk for experiencing adverse childhood experiences (ACEs), which can affect their entire life course. Children who grow up in poverty are more likely to experience ACEs or poverty-induced trauma and stressors. Poverty-induced trauma can impact a child's healthy brain development and increase the likelihood of developmental delays, chronic health problems and poor physical health outcomes later in life ¹⁰. IGP children have higher rates of chronic school absenteeism, creating barriers to achieving optimal intellectual, occupational and financial health. Moreover, families in poverty often live in worse environmental conditions, such as apartment buildings with poor indoor air quality, or homes closer to industrial sites and pollutants. Poverty also imposes barriers to emotional and spiritual health; IGP families and children have more mental health diagnoses than the non-IGP cohort ¹¹. The IGP Initiative in Utah illustrates that there is not one single issue area for intervention. The impact of entrenched poverty on individuals and children affects all 7 domains of health.

Recommendations and Resources

The IGP initiative outlines many promising programs and policies to improve families' health outcomes and reduce poverty. In recent years, lawmakers have adopted several state policies specifically targeting children in the IGP cohort, including expanding access to high quality pre-school for IGP children.

Promising policies in the future should target parents and their children: access to medical care, increasing working family tax credits, and expanding evidence-based home visiting programs. Policies that would expand access to Medicaid coverage for parents, including family planning services and behavioral health care, would be an effective measure to support IGP parents. Not only would parents greatly benefit from expanded access to care, but when parents have health insurance they are more likely to make sure their children are connected with care and coverage. A state earned income tax credit or EITC is another important measure, providing a tax credit to low-income working families. Finally, expanding home visiting programs allow more mothers and children to receive support and care during pregnancy and the first years of a child's life. Home visiting programs are evidence-based and show improved outcomes for mothers and infants. Overall, programs that support both parents and children provide families with a stronger foundation for moving out of poverty.

Resources

Utah's Intergenerational Poverty Commission produces a thorough annual report on the state of intergenerational poverty in Utah. The IGP initiative's comprehensive data collection and sharing across public agencies has been a model for other state initiatives. The annual report gives detailed information about improvements and setbacks in Utah's efforts to reduce intergenerational poverty.

¹⁰ School Readiness Matters: The Campaign for Grade Level Reading: http://gradelevelreading.net/wp-content/uploads/2014/06/School-Readiness-Matters-Research-Confirms-and-Citations-r2_KC.pdf

¹¹ <https://jobs.utah.gov/edo/intergenerational/igp16.pdf>