



The Road to Hardship-Free: Little Rock Check-Up for Children

All children deserve to have a hardship-free childhood. Children's first years of life are a critical period of rapid brain and body growth, greatly influencing the trajectory for their health and ability to gain the knowledge, education, and skills necessary for obtaining their highest potential. Parents are crucial in the development of this trajectory by providing responsive and loving support of their children. The parents' ability to provide this support and to meet the needs of their children greatly depends upon a family's ability

to afford basic necessities such as food, rent, utilities, medical care and prescription medicines.^{1,2,3,4}

39% of families interviewed by Children's HealthWatch in Little Rock were hardship-free

Children's HealthWatch researchers interviewed families of young children ages 0-4 during their child's visit to the emergency room at Arkansas Children's Hospital between January 2012 and January 2017.

39% of families interviewed by Children's HealthWatch in Little Rock were hardship-free

Caregivers in hardship-free families were:

327%

more likely to be in good or excellent health

81%

less likely to report depressive symptoms (female caregivers)

Young children in hardship-free families were:

86%

more likely to be in good or excellent health

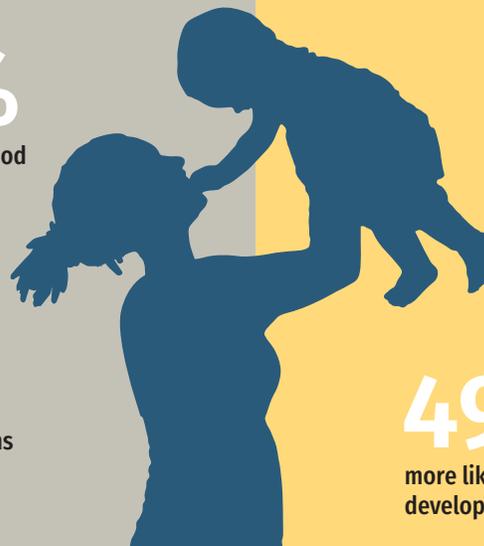
20%

less likely to have been hospitalized since birth

49%

more likely to meet developmental milestones

Data collected: January 2012 - January 2017. All data depicted are compared to families with two or more hardships.



We created a set of social determinants vital signs, composite scores of five separate hardships for this analysis. The hardship scores consist of:



Food Insecurity: When families lack access to enough food for all members to lead active, healthy lives because of insufficient family resources.



Housing Instability: When families experience at least one of the following: being behind on rent in the past year, moving twice or more in the past year, or experiencing homelessness during the child's lifetime.



Energy Insecurity: When families have limited or uncertain access to enough household energy to sustain a healthy and safe life.



Foregone care: When families delay or forgo receiving medical care or filling prescriptions because of cost.



Health cost sacrifices: When families are unable to pay for basic needs because of the cost of medical care or prescription medicines.

Among 4,410 families with low incomes interviewed, a sample that may not represent all families and children in Arkansas, January 1, 2012 – January 1, 2017, 39% (1711) were hardship-free, 28% (1241) experienced one hardship, and 33% (1458) experienced two or more hardships.

Children and caregivers in hardship-free families had better health

The relationship between the number of hardships and the impact on children and caregivers' physical and mental health follows a dose-response – as the number of hardships increase, so too do the odds of poor health outcomes. However, being hardship-free is protective for children and their caregivers.

Compared to children in families with one hardship, children in hardship-free families are:

Childcare Constraints In order for parents to go to work or school, they want to know that their child is well cared for and safe. However, childcare costs can be a significant barrier. Childcare, particularly high-quality, formal childcare, such as childcare centers or preschools, is expensive in Arkansas. On average the annual cost of infant care in a center was \$6,188 in 2017.⁵ 17% of families in Little Rock report the constraints of childcare make working or gaining more education difficult, therefore reducing a family's ability to become hardship-free. Among families interviewed by Children's HealthWatch in Baltimore, families with more hardships were also more likely to report difficulty working or taking classes due to an inability to afford childcare: 10% of hardship-free families reported childcare constraints, 17% of families with one hardship reported childcare constraints, 27% of families with two hardships experienced childcare constraints.

- 33% less likely to have been hospitalized since birth
- 70% more likely to be in good or excellent health

Compared to caregivers in families with one hardship, caregivers in hardship-free families are:

- 120% more likely to be in good or excellent health
- 59% less likely to report depressive symptoms

Compared to children in families with two or more hardships, children in hardship-free families were:

- 20% less likely to have been hospitalized since birth
- 86% more likely to be in good or excellent health
- 49% more likely to meet developmental milestones

Compared to caregivers in families with two or more hardships, caregivers in hardship-free families were:

- 327% more likely to be in good or excellent health
- 81% less likely to report depressive symptoms

Policy Prescriptions

Children thrive when we cultivate their environment for them to overcome barriers and succeed. Advancing policies and resources that provide opportunities for all families with children to become hardship-free is critical to keeping children and their caregivers healthy. Cross-sector strategies and policy improvements to reduce economic hardships are within reach in Arkansas and include:

- **Screening for economic hardships in clinical settings** using validated screening tools including those defined in this report. Given the significant associations between hardships and child and family health, identifying and addressing social needs and connecting people to assistance in health care and community settings is necessary and can be highly cost effective.⁶
- **Implementing a state EITC at 20% of the federal credit** would help working families in Arkansas. Increases in the EITC have been linked to improved birth outcomes, increased consumption of fruits and vegetables, better educational outcomes, and longer life expectancy.⁷ Implementing an EITC would help working families in the state have more of their earned money to pay for necessities.
- **Ensuring any health care related legislation maintains access** to affordable, quality health care for all Arkansas residents, adults and children.
- **Reinstating public health insurance eligibility based on income at 138%** of the Federal Poverty Line or higher without adding work requirements.⁸ Efforts to reduce access to affordable health care will increase economic hardships and jeopardize child and family health.⁹
- **Increasing investment in affordable housing.** Currently, Arkansas has 49 affordable homes available for every 100 households with extremely low incomes (incomes at or below 30% of area median income).¹⁰ This housing shortage often results in housing instability among families, a known risk to children’s health and family well-being.¹
- **Developing a “tenants bill of rights”.** In Arkansas, landlords are not required to fix housing quality issues and renters cannot take money out of rent for repairs. These conditions negatively affect renter households. Establishing renter’s rights will protect renters from landlord retaliation by enforcing stricter housing codes, imposing fines for landlords whose rental properties are not up to code and issuing small loans for landlords to make rental unit repairs.¹¹
- **Investing in PreK to improve the future success of Arkansas’s children.** Quality education is associated with better employment opportunities, higher income, reduced stress, better health literacy, among other benefits.¹²
- **Raising the minimum wage to \$11 per hour.** More than 300,000 Arkansans struggle to make ends meet making the current state minimum wage of \$8.50.¹³ If Arkansas raised the minimum wage, children across the state would benefit from higher family incomes improving their family’s ability to afford food, housing, utilities, and health care.

How we get to hardship-free

This check-up for children shows that hardship-free children and caregivers are healthier and more likely to thrive. We will create a healthier Arkansas by making a commitment to prioritize our youngest children. A vision to address hardships must first address the roots of poverty, including low-wages,

barriers to employment, lack of educational opportunities, and discrimination while also improving access to assistance programs that improve health. Improving the social determinants vital signs of families with young children in Little Rock is necessary for our communities' current and future health and well-being.

About Children's HealthWatch Children's HealthWatch is a nonpartisan network of pediatricians, public health researchers, and children's health and policy experts. Our network is committed to improving children's health in America. We do that by first collecting data in urban hospitals across the country on infants and toddlers from families facing economic hardship. We then analyze and share our findings with academics, legislators, and the public. These efforts help inform public policies and practices that can give all children equal opportunities for healthy, successful lives.

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