

# The Road to Hardship-Free: Philadelphia Check-Up for Children

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.<sup>1,2,3,4</sup>

## Forty percent of families interviewed by Children's HealthWatch in Philadelphia 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 St. Christopher's Hospital between January 2012 and January 2017.

### 40% of families interviewed by Children's HealthWatch in Philadelphia were hardship-free

Caregivers in hardship-free families were:

**147%**

more likely to be in good or excellent health

**80%**

less likely to report depressive symptoms (female caregivers)

Young children in hardship-free families were:

**57%**

more likely to be in good or excellent health

**28%**

less likely to have been hospitalized since birth

*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 4,132 families with low incomes interviewed, a sample that may not represent all families and children in Pennsylvania, 40% (1639) were hardship-free, 27% (1098) experienced one hardship, and 34% (1395) 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 were:

**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 Pennsylvania. On average the annual cost of infant care in a center was \$12.129 in 2017.<sup>5</sup> More than a quarter of families in Philadelphia 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 Philadelphia, families with more hardships were also more likely to report difficulty working or taking classes due to an inability to afford childcare: 17% of hardship-free families, 28% of families with one hardship, and 40% of families with two hardships experienced childcare constraints.

- 18% less likely to have been hospitalized since birth
- 34% more likely to be in good or excellent health

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

- 80% more likely to be in good or excellent health
- 44% less likely to report depressive symptoms

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

- 28% less likely to have been hospitalized since birth
- 57% more likely to be in good or excellent health

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

- 147% more likely to be in good or excellent health
- 80% less likely to report depressive symptoms

## Policy Prescriptions

Children thrive when we respond to their realities. 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 Pennsylvania 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 in health care and community settings is necessary and can be highly cost effective.<sup>6</sup>
- **Investing in the North Philadelphia Health Enterprise Zone (HEZ).** 13% of Pennsylvania's Medicaid recipients reside in North Philadelphia, where persons are more likely to be deeply impoverished.<sup>7</sup> HEZ is a collaboration among various organizations that aims to address health disparities in the area through initiatives which include supporting community schools, increasing employment opportunities and reducing barriers for adults and children who are "high-utilizers".
- **Preventing evictions.** The Philadelphia metropolitan area is ranked second in the country for the highest percentage of forced moves among major cities.<sup>8</sup> Some solutions to prevent evictions include expanding accessibility of rental subsidies, funding enforcement of stricter housing codes and inspection practices, providing loans for small landlords to repair rental units and increasing legal representation/legal aid for low-income tenants.
- **Improving the funding gap in the school systems** and continuing investment in the foundation of Pre-K. Pennsylvania has been ranked 46th in the nation for its investment in K-12 education.<sup>9,10</sup> Increasing education funding is necessary as more education is associated with better employment opportunities, higher income, reduced stress, and better health literacy, among other benefits.<sup>11,12</sup>
- **Increasing the minimum wage to \$15 per hour.** In June 2018, Governor Wolf approved an increase to the state minimum wage to \$12 — a major achievement.<sup>13</sup> We recommend continuing to push for another increase of the minimum wage to \$15, as this increase would help to reduce child poverty and increase the income of 2.2 million workers (37%) in the state.<sup>14,15</sup>

## 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 Pennsylvania 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 Philadelphia 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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