

September 15, 2023

Joint Committee on Children, Families and Persons with Disabilities

The Honorable Robyn Kennedy, Chair
State House, Room 507
Boston, MA 02133

The Honorable Jay Livingstone, Chair
State House, Room 146
Boston, MA 02133

RE: Testimony in support of *An Act establishing basic needs assistance for Massachusetts immigrant residents* (H.135/S.76) and *An Act to lift kids out of deep poverty* (H.144/S.75)

Chair Kennedy, Chair Livingstone and distinguished members of the Joint Committee on Children, Families and Persons with Disabilities:

Thank you for the opportunity to submit testimony on behalf of Children's HealthWatch in strong support of *An Act establishing basic needs assistance for Massachusetts immigrant residents* (H.135/S.76) and *An Act to lift kids out of deep poverty* (H.144/S.75), heard by the Committee on September 12, 2023.

Children's HealthWatch seeks to achieve health equity for young children and their families by advancing research to transform policy. We accomplish this mission by interviewing caregivers of young children on the frontlines of pediatric care in urban emergency departments and primary care clinics in four cities: Boston, Minneapolis, Little Rock, and Philadelphia. Headquartered at Boston Medical Center, since 1998, we have interviewed over 80,000 caregivers and analyzed data from those interviews to determine the impact of public policies on the health and development of young children and their families' well-being.

H.135/S.76: An Act establishing basic needs assistance for Massachusetts immigrant residents

Immigrants are essential and integral members of our communities. Yet, federal welfare reform in 1996 cut core food and cash benefits for millions of legally present immigrants nationwide. Recognizing the harmful health and economic consequences of this exclusion, Massachusetts temporarily provided state-funded food and cash benefits to its immigrant residents from 1997 to 2002. However, these when these benefits were rolled back, these families were excluded. This situation has continued for the past two decades. H.135/S.76 would restore state-funded benefits to more than 13,000 legally present immigrants currently left out of the Supplemental Nutrition Assistance Program (SNAP) and Transitional Aid to Families with Dependent Children (TAFDC), helping families with low incomes across the Commonwealth afford food and basic needs.

Access to basic needs, including food, housing, utilities, and health care, is critical for the health and development of young children as well as parents' mental and physical health. We know that compared to children of US-born adults, children of immigrants are more likely to be food insecure and in poor

health, particularly among those most recently arrived.^{1,2} This is due, in part, to the fact that even when they are eligible, families are not able to access the vital supports they need. When wages are not enough to pay for necessities or work is hard to find or not medically advised, safety net programs such as SNAP and TAFDC offer partial protection against material hardship and its consequences. Decades of research show that SNAP is effective in improving health, reducing health care costs, and supporting educational success, particularly during economic downturns.³ Similarly, research shows that providing cash assistance to families improves children’s educational and health outcomes, setting them up for future success.⁴ Following federal welfare reform, Children’s HealthWatch research found that terminating or reducing cash assistance benefits was associated with increased child hospitalizations, maternal depression, and food insecurity.^{5,6}

Excluding immigrants from food and cash assistance exacerbates inequities. Challenges experienced by these communities often have a ripple effect on US citizen family members, as immigrant families may forgo benefits for which they or their children are eligible due to fear or confusion about eligibility – a phenomenon known as the “chilling effect”. Ensuring that everyone in our communities can meet their basic needs ensures the fundamental building blocks of a healthy, prosperous Commonwealth. *An Act establishing basic needs assistance for Massachusetts immigrant residents* is an opportunity for the state to step up to provide for its lawfully present immigrants when the federal safety net has failed them. This bill would cost only \$18 million, reduce inequities, and support child and family health across our state.

H.144/S.75: An Act to lift kids out of deep poverty

Families living on very limited incomes often struggle to meet their basic needs, even with financial assistance from government programs. Research from Children’s HealthWatch and others consistently shows that when low-income families cannot afford basic needs, they experience significant material hardships that have lasting adverse health and economic impacts across the life course.^{7,8,9,10} For families in deep poverty (earning below half of the federal poverty level), this struggle is significantly exacerbated.

TAFDC supports families with extremely low incomes by providing them with flexible resources that help pay rent and utilities, put food on the table, and purchase other necessities. We are deeply appreciative of the recent increases to these grants that demonstrate the Legislature’s commitment to addressing poverty by improving the adequacy of cash grants. However, even with these increases, the current maximum TAFDC grant of \$783 a month for a family of three still falls below the deep poverty threshold – \$1,036 a month. *An Act to lift kids out of deep poverty* would set a floor for TAFDC grants at 50 percent of the federal poverty line – currently \$1,036 a month for a family of three – to ensure that no family in Massachusetts is living in deep poverty. Further, it would index grants to inflation annually to protect its value from erosion.

Living in deep poverty has long-term consequences for children's health. By raising family incomes, this bill would work to interrupt the chronic and generationally persistent condition of deep poverty, and improve the health, well-being, and future economic mobility of affected children.

Massachusetts has an opportunity to support its families living with low incomes by passing these two evidence-based and critically important bills. We urge the committee to support and swiftly report out favorably *An Act establishing basic needs assistance for Massachusetts immigrant residents* (H.135/S.76) and *An Act to lift kids out of deep poverty* (H.144/S.75).

Sincerely,



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¹ Chilton M, Black MM, Berkowitz C, Casey PH, Cook J, Cutts D, Jacobs RR, Heeren T, De Cuba SE, Coleman S, Meyers A. Food insecurity and risk of poor health among US-born children of immigrants. *American journal of public health*. 2009;99(3):556-62.

² Tang MN, de Cuba SE, Coleman SM, Heeren T, Sandel M, Chilton M, Frank DA, Huh SY. Maternal place of birth, socioeconomic characteristics, and child health in US-born Latinx children in Boston. *Academic pediatrics*. 2020;20(2):225-33.

³ Kazcor K, Bruce C, Ettinger de Cuba E, Frank DA. Nourishing Futures: Strengthening child health through SNAP. Children's HealthWatch. 2023. Available at: <https://childrenshealthwatch.org/nourishing-futures-strengthening-child-health-through-snap/>

⁴ Duncan G, Magnuson K. The Long Reach of Childhood Poverty. Center on the Developing Child from Harvard University. 2011. Available at: https://inequality.stanford.edu/sites/default/files/media/_media/pdf/pathways/winter_2011/PathwaysWinter11_Duncan.pdf.

⁵ Casey P, Goolsby S, Berkowitz C, Frank D, Cook J, Cutts D, Black MM, Zaldivar N, Levenson S, Heeren T, Meyers A. Maternal depression, changing public assistance, food security, and child health status. *Pediatrics*. 2004;113(2):298-304.

⁶ Cook JT, Frank DA, Berkowitz C, Black MM, Casey PH, Cutts DB, Meyers AF, Zaldivar N, Skalicky A, Levenson S, Heeren T. Welfare reform and the health of young children: a sentinel survey in 6 US cities. *Archives of pediatrics & adolescent medicine*. 2002;156(7):678-84.

⁷ Drennen CR, Coleman SM, de Cuba SE, Frank DA, Chilton M, Cook JT, Cutts DB, Heeren T, Casey PH, Black MM. Food insecurity, health, and development in children under age four years. *Pediatrics*. 2019;144(4).

⁸ Sandel M, Sheward R, Ettinger de Cuba S, et al. Unstable housing and caregiver and child health in renter families. *Pediatrics*. 2018;141(2):e20172199.

⁹ Cook JT, Frank DA, Casey PH, et al. A brief indicator of household energy security: associations with food security, child health, and child development in US infants and toddlers. *Pediatrics*. 2008;122(4):e867-e875.

¹⁰ Council on Community Pediatrics. Poverty and child health in the United States. *Pediatrics*. 2016;137(4).