

D3: Poverty and Health A Deep Dive into the Data



What is Poverty?





- Poverty is hunger.
- Poverty is lack of shelter.
- Poverty is being sick and not being able to see a doctor.
- Poverty is not having access to school and not knowing how to read.
- Poverty is not having a job, is fear for the future, living one day at a time.



People who are barely able to pay for food and shelter...

Are simply not able to consider these other expenses

The World Bank

Department of Health and Human Services

- Community Services Block Grants
- Head Start
- Low-Income Home Energy Assistance Program (LIHEAP)
- PARTS of Medicaid (31 percent of eligibles in Fiscal Year 2004)
- Hill-Burton Uncompensated Services Program
- AIDS Drug Assistance Program
- Children's Health Insurance Program
- Medicare Prescription Drug Coverage (subsidized portion only)
- Community Health Centers
- Migrant Health Centers
- Family Planning Services
- Health Professions Student Loans Loans for Disadvantaged Students
- Health Careers Opportunity Program
- Scholarships for Health Professions Students from Disadvantaged Backgrounds
- Job Opportunities for Low-Income Individuals
- Assets for Independence Demonstration Program

Department of Agriculture

- Supplemental Nutrition Assistance Program (SNAP) (formerly Food Stamp Program)
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- National School Lunch Program (for free and reduced-price meals only)
- School Breakfast Program (for free and reduced-price meals only)
- Child and Adult Care Food Program (for free and reduced-price meals only)
- Expanded Food and Nutrition Education Program

Department of Energy

Weatherization Assistance for Low-Income Persons

Department of Labor

- Job Corps
- National Farmworker Jobs Program
- Senior Community Service Employment Program
- Workforce Investment Act Youth Activities

Department of the Treasury

Low-Income Taxpayer Clinics

Corporation for National and Community Service

- Foster Grandparent Program
- Senior Companion Program
- VISTA

Legal Services Corporation

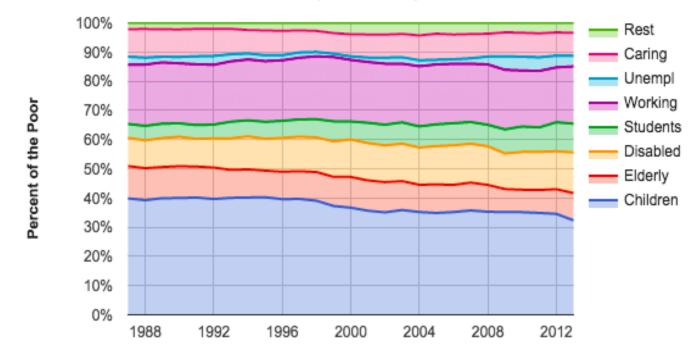
Legal Services for the Poor

Persons in Family/ Household	2018 FPL
1	\$12,140
2	\$16,460
3	\$20,780
4	\$25,100
5	\$29,420
6	\$33,740
7	\$38,060
8	\$42,380
>8 add	\$4,320

Persons in Family/ Household	2018 FPL	2016 FPL
1	\$12,140	\$11,880
2	\$16,460	\$16,020
3	\$20,780	\$20,160
4	\$25,100	\$24,300
5	\$29,420	\$28,440
6	\$33,740	\$32,580
7	\$38,060	\$36,730
8	\$42,380	\$40,890
>8 add	\$4,320	\$4,160

Persons in Family/ Household	2018 FPL	2016 FPL	2016 138% FPL
1	\$12,140	\$11,880	\$16,394
2	\$16,460	\$16,020	\$22,108
3	\$20,780	\$20,160	\$27,821
4	\$25,100	\$24,300	\$33,534
5	\$29,420	\$28,440	\$39,247
6	\$33,740	\$32,580	\$44,960
7	\$38,060	\$36,730	\$50,687
8	\$42,380	\$40,890	\$56,428
>8 add	\$4,320	\$4,160	

Who Are The Poor? (1987-2013)



Bruenig, M. (2015, May 1). The poverty capitalism creates. Retrieved from http://www.demos.org/blog/5/1/15/poverty-capitalism-creates



Holt, J. (2007). The topography of poverty in the United States: A spatial analysis using county-level data from the Community Health Status Indicators project. *Prev Chronic Disease*, *4*(4), A111.

POVERTY – THE CAUSE OF CAUSES



Socioeconomic status is the most powerful predictor of disease, disorder, injury and mortality we have.

"

Tom Boyce Chief of UCSF's Division of Developmental Medicine

The association between poverty and poor health is substantial and the effects are experienced over a lifetime.

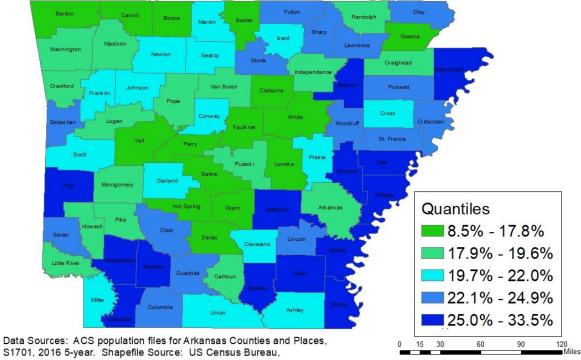
Mansfield, C., & Novick, L. (2012). Poverty and health: Focus on North Carolina. *NCMJ. North Carolina Medical Journal*, 73(5), 366-373.

A quote from Virchow, the father of pathology, comparing the mortality rates of the aristocracy in Berlin with those of the poor.

<u>in 1879</u>

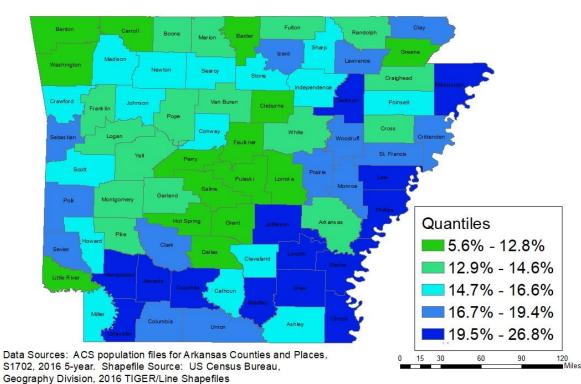
Virchow, R. (1985). Medicinische Reform No. 14. In *Collected Essays on Public Health and Epidemiology* (originally published in 1879 as Gesammelte Abhandlungen aus dem Gebierte der öffentlichen Medicin und der Seuchenlehre). Rather, LJ, trans-ed. Canton, MA: Science History Publications; 1(31).

Arkansas - Percent Below Poverty Level, 2016 Total Population



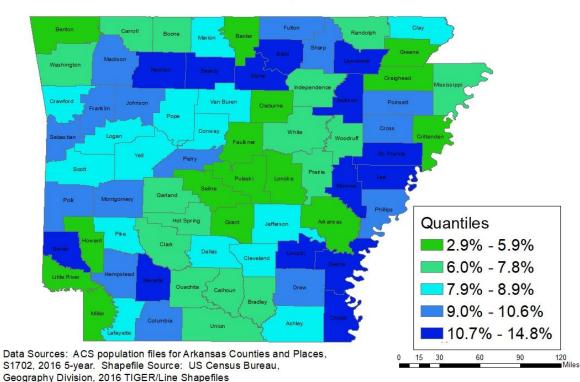
Geography Division, 2016 TIGER/Line Shapefiles

Arkansas - Percent Below Poverty Level, 2016 All Families



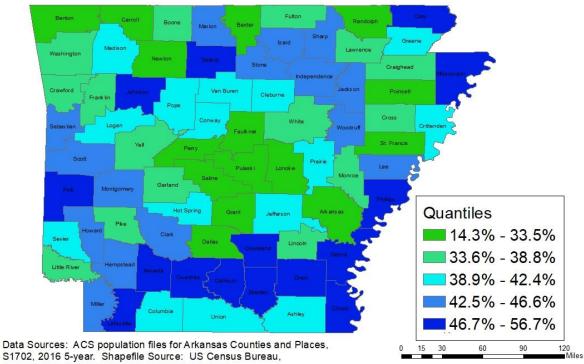
18

Arkansas - Percent Below Poverty Level, 2016 Married-Couple Families



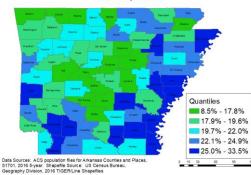
19

Arkansas - Percent Below Poverty Level, 2016 Female Only Families

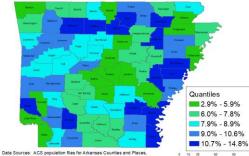


Geography Division, 2016 TIGER/Line Shapefiles

Arkansas - Percent Below Poverty Level, 2016 Total Population

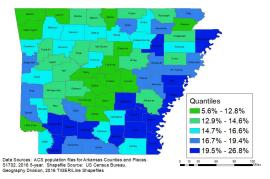


Arkansas - Percent Below Poverty Level, 2016 Married-Couple Families

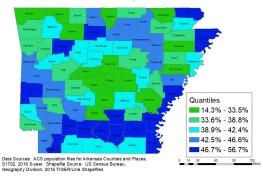


Data Sources: ACS population files for Arkansas Counties and Places, S1702, 2016 5-year. Shapefile Source: US Census Bureau, Geography Division, 2016 TIGER/Line Shapefiles

Arkansas - Percent Below Poverty Level, 2016 All Families



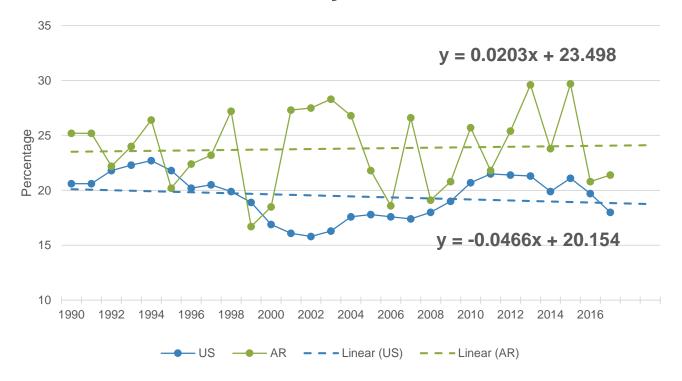
Arkansas - Percent Below Poverty Level, 2016 Female Only Families



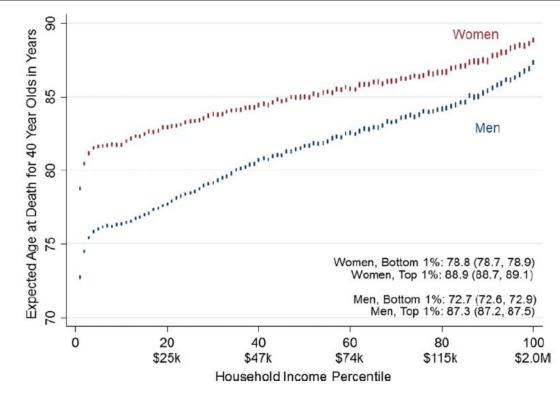
Arkansas – Percent Below Poverty Level, 2016 County Ranges – Quintiles

Quintiles	Total Population	All Families	Married- couple Families	Female Only Families
Q1	8.5-17.8	5.6-12.8	2.9-5.9	14.3-33.5
Q2	17.9-19.6	12.9-14.6	6.0-7.8	33.6-38.8
Q3	19.7-22.0	14.7-16.6	7.9-8.9	38.9-42.4
Q4	22.1-24.9	16.7-19.4	9.0-10.6	42.5-46.6
Q5	25.0-33.5	19.5-26.8	10.7-14.8	46.7-56.7

Children in Poverty, US and Arkansas



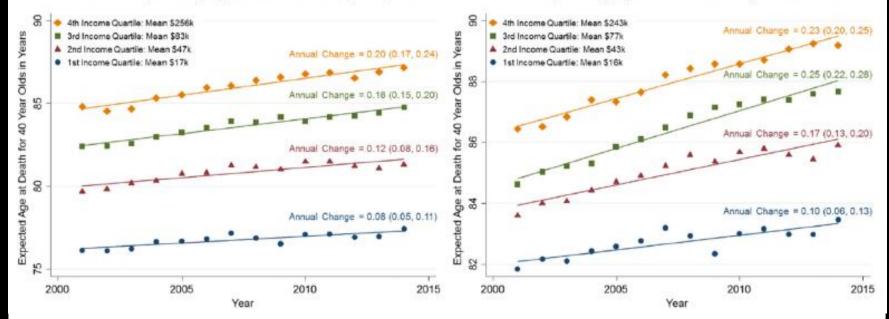
U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplements



Chetty R, Stepner M, Abraham S, et al. The Association Between Income and Life Expectancy in the United States, 2001–2014: Association Between Income and Life Expectancy in the United States. *JAMA*. 2016;315(16):1750-1766. doi:10.1001/jama.2016.4226.

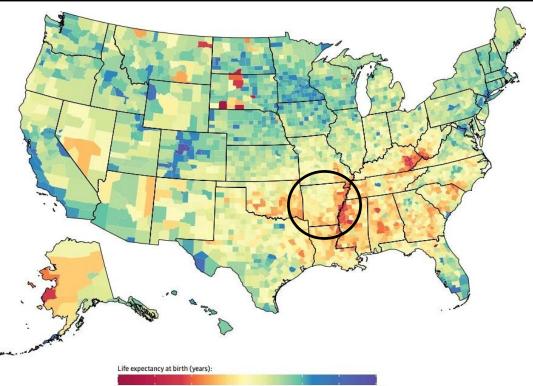
A. Life Expectancy by Income Quartile by Year, Men

B. Life Expectancy by Income Quartile by Year, Women



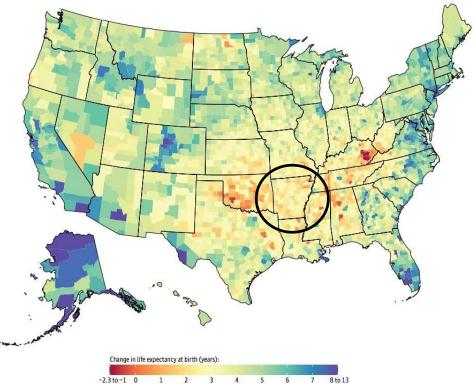
Chetty R, Stepner M, Abraham S, et al. The Association Between Income and Life Expectancy in the United States, 2001–2014: Association Between Income and Life Expectancy in the United States. *JAMA*. 2016;315(16):1750-1766. doi:10.1001/jama.2016.4226.

Life Expectancy at Birth by County, 2014

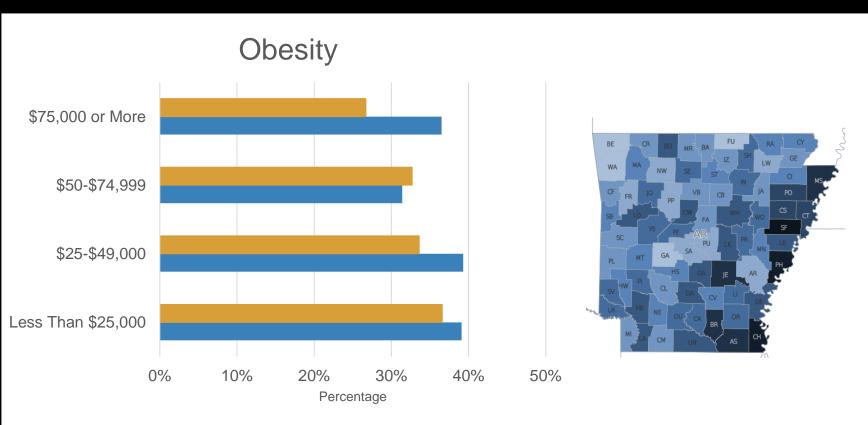


Luscombe, R. (2017, May 8). Life expectance gap between rich and poor US regions is "more than 20 years." *The Guardian*. Retrieved from https://www.theguardian.com/inequality/2017/may/08/life-expectancy-gap-rich-poor-us-regions-more-than-20-years 26

Change in Life Expectancy at Birth by County, 1980 to 2014

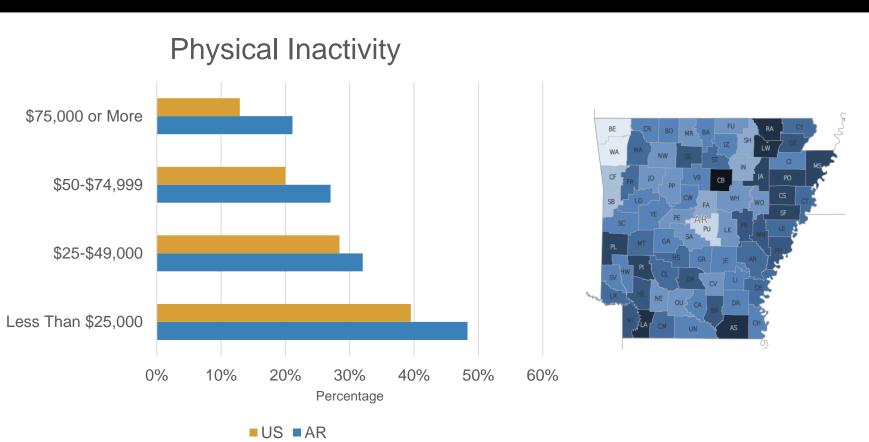


Luscombe, R. (2017, May 8). Life expectance gap between rich and poor US regions is "more than 20 years." *The Guardian*. Retrieved from https://www.theguardian.com/inequality/2017/may/08/life-expectancy-gap-rich-poor-us-regions-more-than-20-years 27



■US ■AR

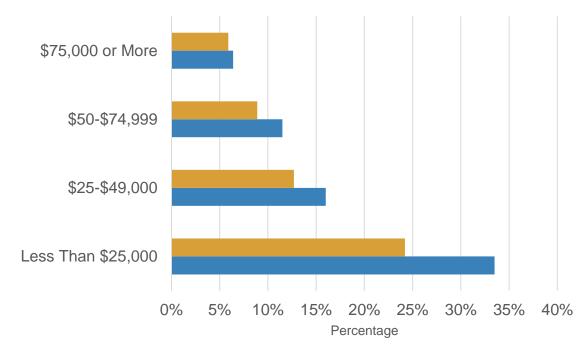
America's Health Rankings/County Heath Rankings. Original Source: CDC, BRFSS, 2016



America's Health Rankings/County Heath Rankings. Original Source: CDC, BRFSS, 2016

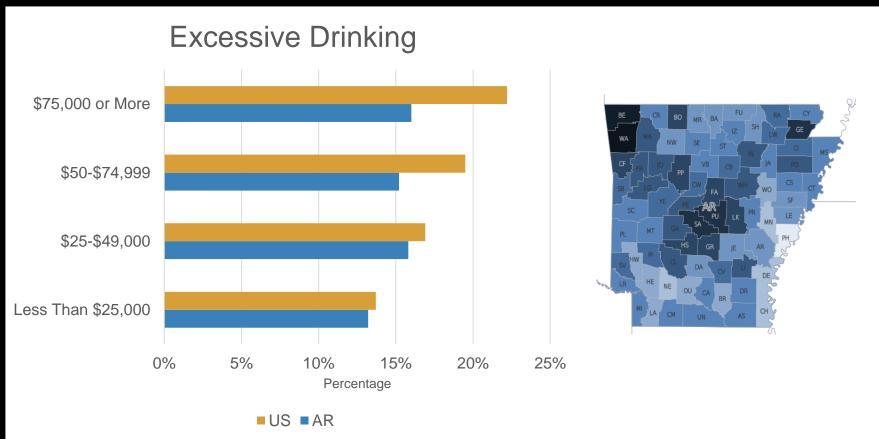
29

Frequent Physical Distress



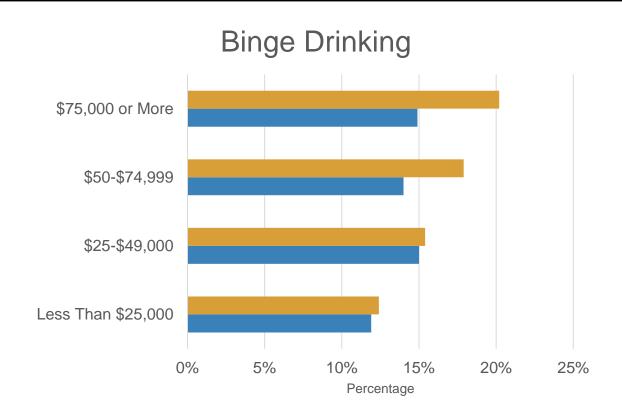
US AR

America's Health Rankings. CDC, Behavioral Risk Factor Surveillance System, 2016

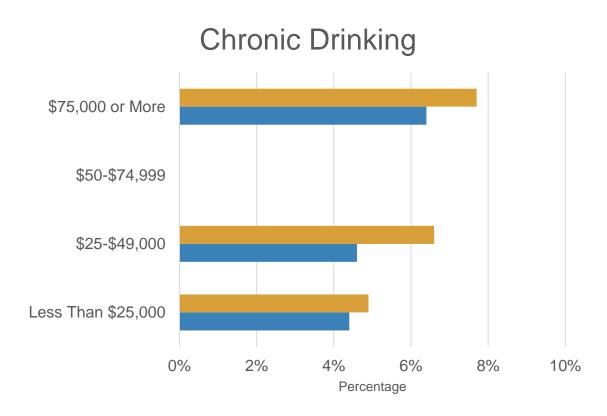


America's Health Rankings/County Heath Rankings. Original Source: CDC, BRFSS, 2016

31

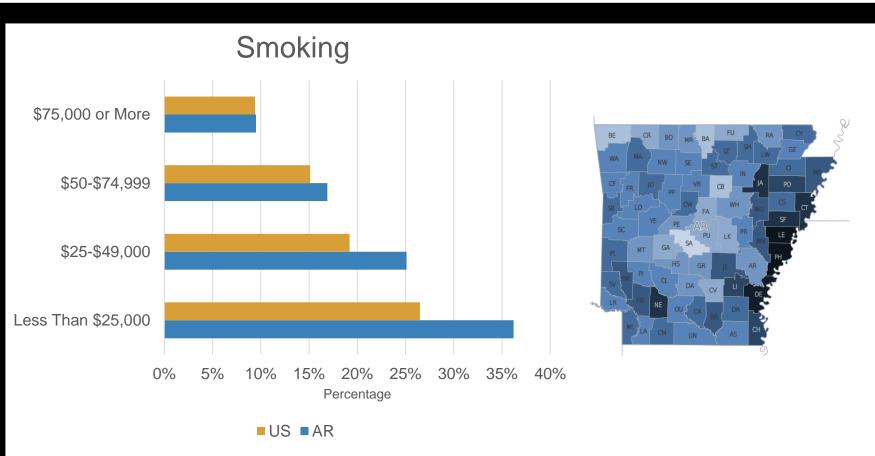


■ US ■ AR America's Health Rankings. CDC, Behavioral Risk Factor Surveillance System, 2016



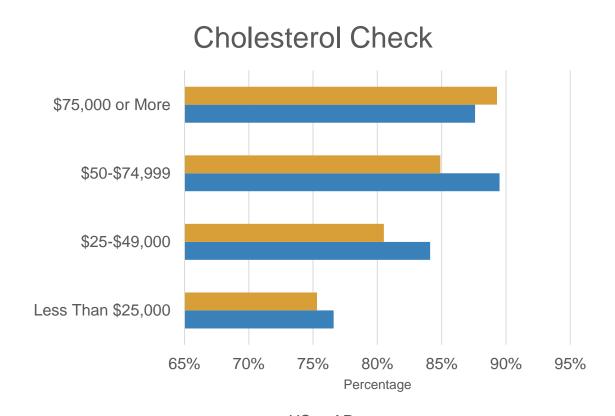
US AR

America's Health Rankings. CDC, Behavioral Risk Factor Surveillance System, 2016

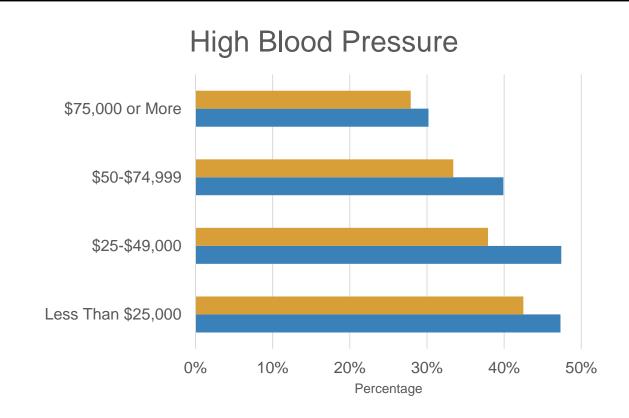


America's Health Rankings/County Heath Rankings. Original Source: CDC, BRFSS, 2016

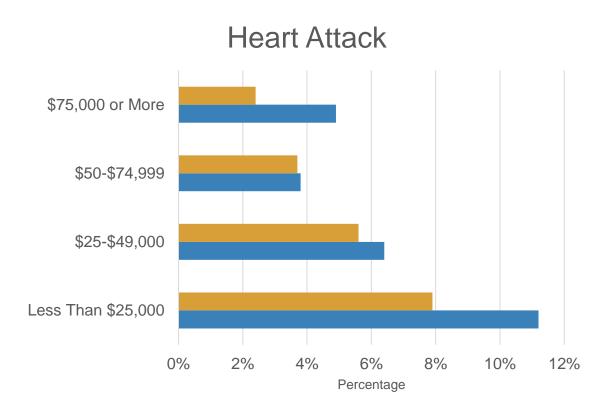
34



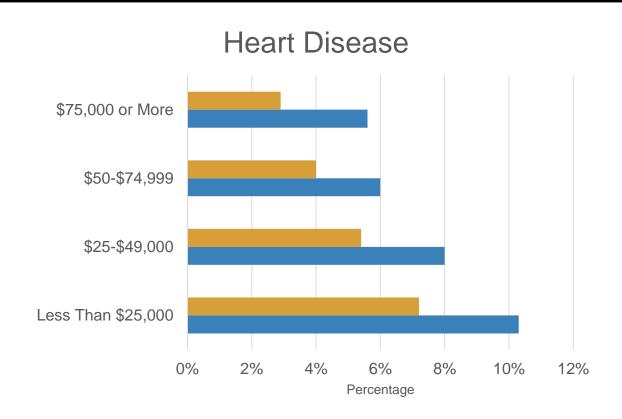
■ US ■ AR America's Health Rankings. CDC, Behavioral Risk Factor Surveillance System, 2016

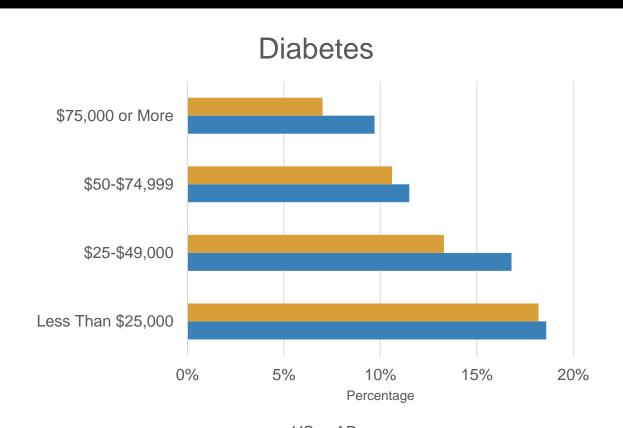


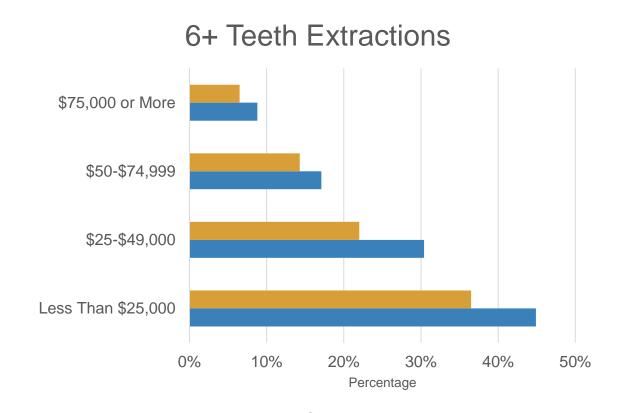
■ US ■ AR America's Health Rankings. CDC, Behavioral Risk Factor Surveillance System, 2016

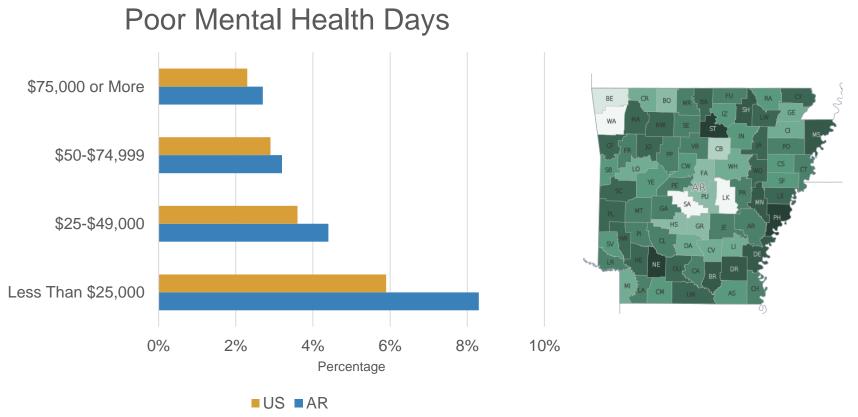


■US ■AR





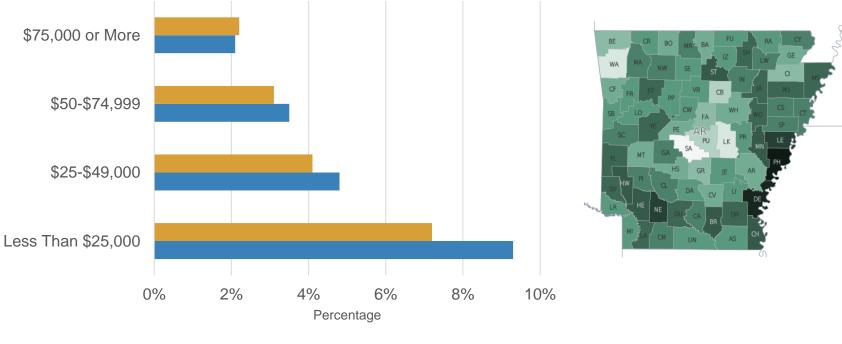




America's Health Rankings/County Heath Rankings. Original Source: CDC, BRFSS, 2016

41

Poor Physical Health Days

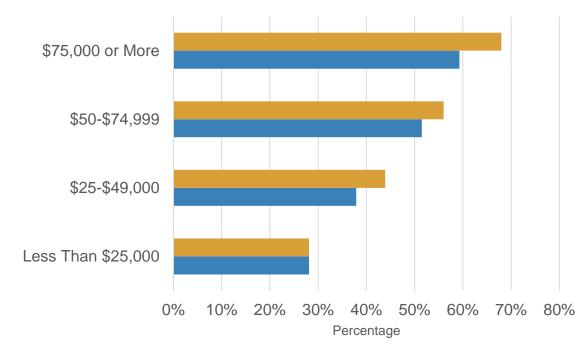


■US ■AR



∎US ■AR

Very Good/Excellent Health Status



US AR

Arkansas was the first state to receive approval to expand Medicaid under the Affordable Care Act through a Section 1115 waiver.

Maylone, B., & Sommers, B. (2017). *Issue Brief. Evidence from the private option: The Arkansas experience*. The Commonwealth Fund. Retrieved from http://www.commonwealthfund.org/~/media/files /publications/issue-brief/2017/feb/1932_maylone_private_option_arkansas_ib_v2.pdf



Medicaid patient: 'I miss working'

http://money.cnn.com/2018/04/10/news/economy/trump-executive-order-workrequirements/index.html

Key Findings and Conclusions

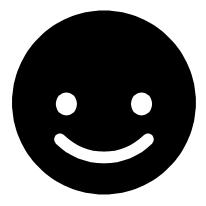
- Improved access to primary care and prescription medications
- Reduced reliance on the emergency department
- Increased use of preventive care
- Improved perceptions of quality and health among low-income adults in the state

... compared to Texas, which did not expand Medicaid

Maylone, B., & Sommers, B. (2017). *Issue Brief. Evidence from the private option: The Arkansas experience*. The Commonwealth Fund. Retrieved from http://www.commonwealthfund.org/~/media/files /publications/issue-brief/2017/feb/1932_maylone_private_option_arkansas_ib_v2.pdf

However,

- Medicaid Expansion Program requirement of 20 hours per week
 - □ Working
 - Participating in other activities such as volunteering or vocational training
 - □ Non-disabled, childless adults 19-49 years old
 - □ 2018 about 39,000 people aged 30-49 years old
 - □ 2019 over 30,000 when it's rolled out for those aged 19-29



Thanks!

You can find me (Pam Willrodt) at

- pswillrodt@ualr.edu
- **5**01.569.8221