

# Children, Poverty and Lasting Effects

## Moving Upward

When families move from high-poverty housing projects to lower-income neighborhoods, it improves outcomes for their children in educational attainment and future income. *The Effects of Exposure to Better Neighborhoods on Children: New Evidence from the Moving to Opportunity Project*, American Economic Review, Harvard University and NBER (August 2015) studied families who moved from high-poverty housing projects to lower-poverty neighborhoods through the Moving to Opportunity experiment (MTO) and found that:

- Moving to a lower-poverty neighborhood significantly improved college attendance rates and earnings for children who were below age 13 when their families moved.
- By living in better neighborhoods, these children were less likely to become single adults.
- For those who moved before they were 13 years old, when they became adults, their annual income would be 31% higher than others in their mid-twenties.
- "The duration of exposure to a better environment during childhood is a key determinant of an individual's long-term outcomes."
- Using vouchers to move families with young children to lower-poverty neighborhoods from high-poverty housing projects may reduce the intergenerational persistency of poverty (and eventually generate positive returns for taxpayers).
- **Moving a child to a lower-poverty neighborhood by age 8 would increase the child's total lifetime earnings about \$302,000.**

Earlier research indicated that moving from lower-poverty areas greatly improved circumstances for the families, including:

- Mental health
- Physical health
- Subjective well-being of adults
- Family safety



For children who were older and for adults who moved, few positive long-term benefits were observed, possibly because the duration of the poverty affected them more significantly. In fact, moving to a very different environment could be slightly detrimental for older children as it could disrupt social networks and have other adverse effects.

<http://scholar.harvard.edu/hendren/publications/effects-Exposure-Better-Neighborhoods-Children-New-Evidence-Moving-Opportunity>

*An Atlas of Upward Mobility Shows Paths Out of Poverty*, New York Times (May 4, 2015) also discussed the findings of the Harvard study and provided examples of families who had moved.  
[http://www.nytimes.com/2015/05/04/upshot/an-atlas-of-upward-mobility-shows-paths-out-of-poverty.html?\\_r=0](http://www.nytimes.com/2015/05/04/upshot/an-atlas-of-upward-mobility-shows-paths-out-of-poverty.html?_r=0)

### **Concentrated and Persistent Poverty**

HUD's *Understanding Neighborhood Effects of Concentrated Poverty* (Winter 2011) discussed its Moving to Opportunity (MTO) initiative. It indicated that many issues are connected to neighborhoods with concentrated poverty, including:

- Crime and delinquency
- Education
- Psychological distress
- Various health problems

It pointed that in poor neighborhoods, some effects can be mitigated by community efforts, when residents work together to decrease violence and lessen other negative effects of concentrated poverty. Families can sometimes also mitigate the negative effects of a poor neighborhood, but HUD notes that the relationship between neighborhood and family structure remains complicated and suggests that supporting mobility to better neighborhoods is crucial.

<http://www.huduser.gov/portal/periodicals/em/winter11/highlight2.html>

*Concentration of Poverty in the New Millennium* uses 2007-2011 Census data to show that poverty returned to the 1990 peak during the Great Recession. It discusses racial/ethnic variations and has several maps from 2011 data. (December 2013)

[http://www.tcf.org/assets/downloads/Concentration of Poverty in the New Millennium.pdf](http://www.tcf.org/assets/downloads/Concentration_of_Poverty_in_the_New_Millennium.pdf)

A research brief from Child Trends, *Adverse Childhood Experiences: National and State-Level Prevalence* (July 2014) notes that economic hardship is the most common experience, followed by divorce/separation of a parent or guardian. The number of ACEs is likely to increase as a child gets older.

[http://www.childtrends.org/wp-content/uploads/2014/07/Brief-adverse-childhood-experiences\\_FINAL.pdf](http://www.childtrends.org/wp-content/uploads/2014/07/Brief-adverse-childhood-experiences_FINAL.pdf)



Image: Child Trends

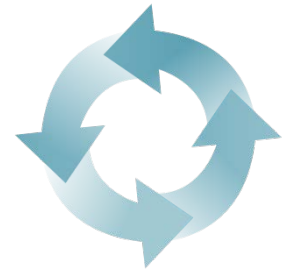
### **When Poor Children Become Adults**

Poverty has been related to negative implications for future well-being through research findings. *Child Poverty and Its Lasting Consequence* from the Urban Institute (2012) describes many studies that indicated that poverty could be related to behavioral problems, lower IQ scores (as early as age 5), lower academic achievement, etc. As the stress of poverty and its circumstances affect children, it can "impair children's brain development and impede their future success." It estimates that the cost of

child poverty could be \$500 billion each year and that it is important to identify resources to improve the well-being of children and their families.

*Child Poverty and Its Lasting Consequence* discussed the implications of race, noting that poor minority babies have disadvantages beyond poverty. For example, poor black newborns are more likely to live in female-headed families, have less educated parents and live in households in which no adults are employed, with any of these factors lowering the opportunity for upward mobility. It noted that children (especially minorities) born to poor parents without a high school education are much more likely to spend most of their lives in poverty.

If children are born into non-employed families, they are more likely to be persistently poor. Longer periods of a children living in poverty increase the likelihood that these children will drop out of high school and teen premarital childbearing. These can both which can lead to future economic difficulties, resulting in a detrimental effect to the next generation. "Poor children can perpetuate the poverty cycle as they become adults." *Childhood Poverty and Its Lasting Consequence* indicates that it is essential to target vulnerable children for early intervention because the first years of life can significantly affect brain development.



[http://www.urban.org/research/publication/child-poverty-and-its-lasting-consequence/view/full\\_report](http://www.urban.org/research/publication/child-poverty-and-its-lasting-consequence/view/full_report)

"Adult achievement is related to childhood poverty and the length of time they live in poverty," according to *Childhood Poverty and Adult Success*, from the Urban Institute (September 2015). The children who experience poverty are likely to be high school dropouts and have unemployment/underemployment as young adults. It points out the prevalence and disparity:

- 38.8% of children are poor for at least a year before they become 18;
- 30.1% of white children are poor for at least a year before they become 18;
- 75.4% of Black children are poor for at least one year before they become 18;
- 10.5% of all children are persistently poor (poor for at least half of childhood);
- 4.3% of white children are persistently poor;
- 38.5% of Black children are persistently poor.

*Childhood Poverty and Adult Success* points out that not all poor children have poor adult outcomes and identifies some factors that may be related to the likelihood of poor adult outcomes:

- Length of time in poverty (persistent poverty decreases the likelihood of college completion)
- Parental education (children with parents with a high school education are more likely to complete high school)

- Residential instability (moving for negative reasons can lower academic achievement, particularly moving three or more times before age 18)
- Multigenerational households (in persistently poor households, multigenerational households may increase high school completion, enrollment in postsecondary education and college completion)

<http://www.urban.org/sites/default/files/alfresco/publication-pdfs/2000369-Child-Poverty-and-Adult-Success.pdf>

### **Children are more likely to be in poverty than adults.**

For decades, children throughout the United States have been more likely to be poor than adults, which places children at higher risk for various problems (Child Trends Data Bank, *Children in Poverty* 2014). Poor children are exposed to factors that may impair brain development and affect social and emotional development. Poor children are exposed to factors that may impair brain development and affect social and emotional development.

Poor children are more likely to be exposed to these negative factors:

- Environmental toxins
- Inadequate nutrition
- Maternal depression
- Parental substance abuse
- Trauma and abuse
- Violent crime
- Divorce
- Low-quality child care
- Decreased cognitive stimulation (in part from exposure to a more restrictive vocabulary as infants)

Children who live in poverty are more likely to experience these negative health outcomes:

- Poor health
- Chronic health conditions
- Born prematurely at low birth weight
- Mental health problems (personality disorders, depression); emotional and behavioral problems
- Higher rates of risky health-related behaviors (smoking, early sexual activity)
- Higher risk for poor cognitive and academic outcomes
- Lower school attendance
- Lower reading and math test scores

- Increased distractibility
- Higher rates of grade failure
- Early high school drop out
- Likely to engage in delinquent behaviors as adolescents
- Lower occupational status and lower wages
- Deficits in working memory in adulthood

<http://www.childtrends.org/?indicators=children-in-poverty>

### **Poverty as an Adverse Childhood Experience**

In November 2015, Governor Bill Haslam recently held a statewide [Adverse Childhood Experiences](#) Conference that included many members of the Tennessee General Assembly and Tennessee Supreme Court as well as others from the State and Metro government agencies. Because the ACEs process is complex and the interventions equally complex, work during the next few years will be to educate people about ACEs to help them understand how to prevent and/or mitigate such experiences.

<http://www.tennessean.com/story/news/health/2015/11/12/tennessee-hopes-take-lead-addressing-childhood-trauma/75444190/>

The [Metropolitan Nashville Public Health Department](#) and Healthy Nashville are leading the Davidson County initiative, with a Healthy Nashville Summit dedicated to Adverse Childhood Experiences on April 22, 2016.

<http://www.healthynashville.org/index.php?module=InitiativeCenters&func=display&icid=21>

Adverse Childhood Experiences (ACE) has been linked to later health problems. Because of a variation in the level of resiliency (mitigating factors such as having a loving grandparent, understanding teacher, trusted friend), some people with greater ACE may function at a higher level. As adults, trauma-informed therapy could also mitigate the long-term effects of ACE.

The U. S. Substance Abuse and Mental Health Services Administration indicates that a trauma-informed approach can be incorporated in a variety of settings. It can enhance the recovery of people who have been affected by trauma.

<http://www.samhsa.gov/trauma-violence>

The National Council for Behavioral Health notes that trauma can have broad and significant effects on people, including distrust, despair and emotional damage. It indicates that "Trauma is a near universal experience of individuals with behavioral health problems," which suggests the magnitude of the effects of ACEs.

The National Council for Behavioral Health explains that the traumatic experiences affect physical, mental, behavioral and spiritual functioning. There are evidenced-based models of trauma-informed care that can effectively improve the damage sustained by individuals who experienced trauma. Components include early screening and assessment, consumer-driven care and services, nurturing a trauma-informed and responsive workforce, evidenced-based practices, creating safe environments, community outreach, partnership building and ongoing performance improvement and evaluation. <http://www.thenationalcouncil.org/areas-of-expertise/trauma-informed-behavioral-healthcare/>

Children who are experiencing ACEs sometimes have signs of stress, such as having nightmares, recurring thoughts of a stressful event, may re-enact the trauma through play or seem distracted or withdrawn. The graphic below from CDC/Robert Wood Johnson Foundation shows that the three types of ACEs – abuse, neglect and childhood dysfunction.

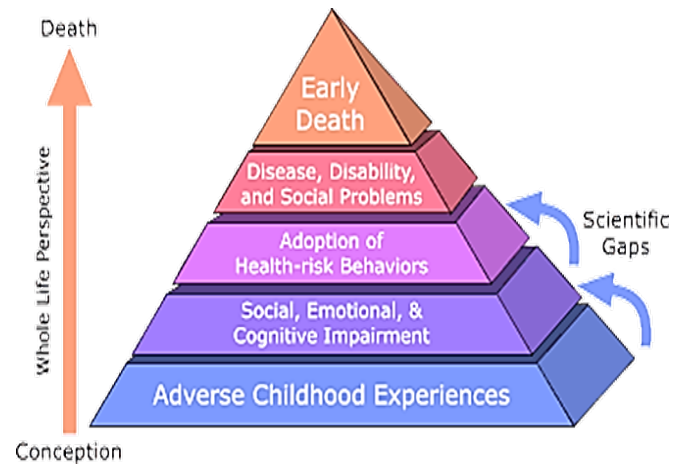
Adverse Childhood Experiences have been more recently identified as:

1. Economic hardship (if experienced somewhat often)
2. Divorce/separation of a parent
3. Death of a parent
4. A parent served time in jail
5. Witness to adult domestic violence
6. Victim of or witness to neighborhood violence
7. Living with someone who was mentally ill or suicidal
8. Living with someone who had an alcohol or drug problem
9. Being treated or judged unfairly due to race/ethnicity

Because of experiencing ACEs, including living in poverty, there is an increased likelihood of behaviors that would impair later health:

- Smoking
- Alcoholism / Drug Use
- Lack of Physical Activity
- Missed Work
- Severe Obesity
- Diabetes
- Depression

- Suicide Attempts
- STDs
- Heart Disease
- Cancer
- Stroke
- COPD
- Broken Bones



<http://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean>

### Using ACEs to help babies in the court system

*Judges are using brain science to help babies caught in the court system* (Quartz, November 17, 2015) describes an initiative to reduce trauma on young children involved in the legal system. In the Miami-Dade County area, family courts are involving psychologists and other coordinators to work along with attorneys and child welfare workers.

Based on the psychological, social and physical problems created by Adverse Childhood Experiences, these “baby courts” are designed to address the needs of newborns to age 3, and there are 30 across the U.S. Critics of the traditional system say there may be quick intervention in removal of children but inadequate support for families with the services to address their specific problems. Baby courts consider parents and children as a unit, whose needs are evaluated by a court coordinator. Then children often go to psychotherapy with their parents and they also attend early-childhood education programs to prepare them for kindergarten.

Court therapists recognize that a mother’s own high ACEs score could contribute to her inability to effectively parent her child. High levels of stress in childhood can create attachment difficulties that can make it difficult for people to be good parents when they grow up. As a result, the cycle can continue for generations, suggesting the importance of multigenerational initiatives.

The article explains how that the brains of babies develop through interactive socializing, in which the mother responds to sounds and movements of the baby. The video *Still Face Experiment* from the University of Massachusetts at Boston shows that the baby becomes distressed when the mother stops responding. Because babies need social stimulation, the lack of responsiveness is emotionally neglectful and can be as damaging as physical abuse.

<https://www.youtube.com/watch?v=apzXGEbZht0>

<http://qz.com/551481/judges-are-using-brain-science-to-help-babies-caught-in-the-court-system/>