NEWS RELEASE

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Census Bureau reports more than one in ten Connecticut children in poverty; over one in ten residents uninsured

Coalition calls on CT Congressional delegation to avoid severe federal funding cuts that would increase numbers of poor and uninsured

Findings released today from two national surveys by the U.S. Census Bureau reveal that more than one in ten Connecticut children are in poverty and over one in ten residents are uninsured. The findings are released as Congress considers severe cuts to federal programs that help to lift families out of poverty. Connecticut Voices for Children and a diverse coalition of 40 Connecticut organizations called on the state’s Congressional delegation to reject proposed federal cuts to programs that help families in poverty-wage jobs to better afford health care, food, and other basic needs.

Census data from the American Community Survey show that 10.5% of Connecticut children under 18 (87,000 children) in 2004 lived in families with incomes under the Federal Poverty Level ($19,307 for a family of four), unchanged from 2003 levels. The 2004 Connecticut child poverty estimate represents no progress over the 1990 child poverty rate of 10.4%, despite record-low unemployment in the 1990s and an aggressive effort to move welfare recipients into the workplace. Among children under age 5, 11.1% (23,000 Connecticut children) were in poverty. Among all residents, 7.6% (257,000 residents) had income below the poverty level.

In addition, the Census Bureau reported that 11.6% (407,000) of Connecticut residents in 2004 were without health insurance coverage for the entire previous 12-month period. This was an increase of 50,000 residents over 2003 (though this change was not statistically significant). Among Connecticut children under 18, 8.5% (71,000 children) were uninsured for the entire year, unchanged from the previous year, despite signs of an improving Connecticut economy. In Connecticut, 74.3% of residents were covered by employer-based or privately-purchased insurance in 2004.

Nationally, 15.7% of Americans were uninsured (45.8 million), similar to the 2003 rate (15.6%). Eight in ten uninsured Americans come from working families, according to the Kaiser Family Foundation. However, 81% of uninsured workers are employed by firms that do not offer health benefits or are not eligible for their employer’s plan.

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“In the nation’s wealthiest state, parents who are working full-time should have sufficient funds for decent housing, a good education, quality child care, and health care for their children” said Doug Hall, Associate Director of Research at Connecticut Voices for Children. “Yet the thousands of Connecticut families holding jobs that pay poverty wages or that don’t offer health insurance benefits find that -- no matter how hard they work -- there’s not enough income to make ends meet.”

The Census findings are released as Congress considers severe reductions in federal programs that effectively help lift families out of poverty, including Medicaid and Food Stamps. These major program changes are accompanied by proposals to permanently repeal or severely cut the federal estate tax, which would reduce federal revenues by as much as $1 trillion over the first 10 years of repeal, yet benefit only the very wealthiest Americans. Congress is expected to vote on key budget legislation beginning as early as the first week in September.

Connecticut Voices for Children, along with a diverse coalition of 40 organizations in the state, called on Connecticut’s Congressional delegation to:

- Oppose the program changes and funding cuts now being considered by the U.S. House and Senate that would fall most heavily on low income children and their families, and other vulnerable populations.
- Protect initiatives like Medicaid and Food Stamps that have proven track records of promoting the health and well being of hundreds of thousands of Connecticut residents.
- Support a balanced approach to federal deficit reduction that includes retaining the federal estate tax and reversing tax cuts for the wealthiest Americans, rather than only cutting federal programs that help the most vulnerable.

“We ask our Congressional delegation to stand up for the people of Connecticut and press for a balanced approach to federal deficit reduction. This means minimizing cuts to programs that provide vital services to children and families who need them – services like health care and access to food – while reducing windfall tax breaks to our very wealthiest citizens,” said Ellen Scalettar, Senior Policy Fellow at CT Voices for Children.

“It is both morally and economically imperative that Connecticut reduce the number of its children whose development is handicapped by the multiple burdens of poverty – unsafe homes and communities, poor health and nutrition, and inadequate education. In this fiercely competitive global economy, Connecticut can’t afford to ‘bench’ 10% of its farm team in this way. Connecticut has the means to provide all its children with the tools necessary to reach their full potential. The question is whether it has the wisdom. Our future lies in their hands, after all,” commented Shelley Geballe, President of CT Voices for Children.

As one would expect from the state with the highest per capita income in the nation, Connecticut’s child poverty rate compares favorably to other states, and is the 2nd lowest in the United States. Nationally, 18.4% of children and 13.1% of all Americans were under the federal poverty level in 2004. Connecticut’s 2004 median family income was $73,458, which ranked 2nd highest among all states, behind New Jersey.

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National and state-level data on poverty, income, and health insurance coverage are available on the U.S. Census Web site at www.census.gov. Data are drawn from the Current Population Survey (CPS) and American Community Survey (ACS). **CT Voices has cited ACS data for poverty and income figures, because ACS may present more reliable estimates for a small state like Connecticut.**

Connecticut Voices for Children (www.ctkidslink.org) is a research-based policy and advocacy organization committed to promoting leadership, policy change, and investment on behalf of all of Connecticut’s children and youth.

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<thead>
<tr>
<th>Poverty/income indicator &amp; data source</th>
<th>Connecticut 2004 % and #</th>
<th>Connecticut 2003 % and #</th>
<th>United States 2004 % and #</th>
<th>United States 2003 % and #</th>
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<tbody>
<tr>
<td>Persons with income less than Federal Poverty Level (ACS)</td>
<td>7.6% (257,229)</td>
<td>8.1% (272,911)</td>
<td>13.1% (37,161,510) significant increase</td>
<td>12.7% (35,846,289)</td>
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<tr>
<td>Children under 18 with income under FPL (ACS)</td>
<td>10.5% (86,736)</td>
<td>11.0% (90,857)</td>
<td>18.4% (13,245,202) significant increase</td>
<td>17.4% (12,673,283)</td>
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<tr>
<td>Median family income in 2004 dollars (ACS)</td>
<td>$73,458</td>
<td>$71,405</td>
<td>$53,692</td>
<td>$53,631</td>
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<tr>
<th>Uninsured indicator &amp; data source</th>
<th>Connecticut 2004 % and #</th>
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<th>United States 2003 % and #</th>
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<tr>
<td>Children uninsured, entire previous 12 months (CPS)</td>
<td>8.5% (71,000)</td>
<td>8.3% (71,000)</td>
<td>11.2% (8.3 million)</td>
<td>11.4% (8.4 million)</td>
</tr>
<tr>
<td>Persons uninsured, previous 12 months (CPS)</td>
<td>11.6% (407,000)</td>
<td>10.4% (357,000)</td>
<td>15.7% (45.8 million)</td>
<td>15.6% (45 million)</td>
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*Source: U.S. Census Bureau (www.census.gov)*

Unless specifically noted in the comparison charts above, there were no statistically significant changes in most indicators from 2003 to 2004. The estimate of children in poverty is an estimate for all children, not only “related children.” **CT Voices has used CPS data for estimates on the uninsured, since the ACS does not gather this data.**

-END-
To: Representative Nancy Johnson  
Re: Proposed Federal Budget Cuts: Medicaid and Food Stamps  

We write to express our deep concern about the potential cuts and structural changes that threaten the Medicaid and Food Stamp programs in the reconciliation process. We ask that you do all you can to preserve these proven, essential supports for Connecticut’s children and adults.

Recent figures show that:

- Nearly 488,000 Connecticut residents benefit from the Medicaid program. This estimate includes more than 263,000 children, 62,000 elderly residents, 61,000 blind and disabled persons, and 103,000 other adults.

- More than 203,000 Connecticut residents benefit from the Food Stamp program. This estimate includes over 92,000 children, 21,000 elderly residents and 36,000 persons with disabilities.

These two programs not only help meet two essential needs of our state’s most vulnerable residents, but also are cost effective. Medicaid reduces the crowding of our emergency rooms with persons in health crises that are more costly to treat, the potential for outbreaks of communicable disease, days of work lost to untreated illness, and the temporary and permanent impairment of health status among those already at greater risk for health problems. In the case of Food Stamps, the program assures basic nutrition so essential to children’s capacity to learn and to the capacity of our seniors and persons with disabilities to survive. Food Stamps are credited with the near disappearance of the severe malnutrition-related health problems that had been documented prior to the institution of the program.

Although we realize that you do not serve as a member of the Committees of cognizance on these matters, we also know that you are held in high esteem by your colleagues and that your leadership will go far to preserve the programmatic and financial strength of both Medicaid and nutrition programs.
With respect to Medicaid, we ask that you:

1. Talk with your colleagues about the vital importance of Medicaid as the program that improves low-income Americans’ access to doctors, preventive care and overall health; provides care at a lower cost than private insurance; and supports health care providers;
2. Request that if TANF re-authorization or any other additional legislation is to be included in the reconciliation bill, that the costs associated with the re-authorization not result in deeper cuts to Medicaid;
3. Oppose increasing cost sharing, reducing benefits available to Medicaid beneficiaries and any other provisions that diminish the availability and affordability of coverage;
4. Consider cost savings from other programs in the jurisdictions of the committees that are not targeted toward low-income people; and
5. To the degree that savings must be achieved in Medicaid, they should come from policies like increasing the Medicaid rebate and reducing payments to pharmacies, that help both the federal government and the states reduce the growing costs of prescription drugs, not from changes to cost sharing and benefits that are harmful to low-income people. These prescription drug cost saving proposals have been endorsed by the Administration, the National Governors’ Association, the Medicaid Commission, and by advocates for beneficiaries and providers.

With respect to Food Stamps, we ask that you:

1. Talk with your colleagues about the importance of Food Stamps and the program’s accomplishments: that it has diminished severe hunger that was prevalent prior to enactment and helped the country’s neediest families, all with great efficiency and accountability;
2. Recommend that if the Food Stamp program is to be cut, as the chairmen of both Agriculture Committees have asserted, that the cuts total no more than the $600 million proposed in President Bush’s budget; and
3. Oppose any structural changes to the Food Stamp program, either through an optional, five state Food Stamp block grant or through a super waiver structure that would allow states to use food stamp funds for things other than basic nutritional assistance.

Not only are the lives and physical well being of nearly one half million people in Connecticut at stake, but so too are the financial resources of our state which will have to fill in where the federal government forsakes our neediest citizens.

We thank you in advance for doing all you can to protect the interests of the people of Connecticut in the reconciliation process.

Sincerely,

AIDS LIFE Campaign
AFSCME, Council 4
AFSCME, Local 714 (Representing DSS eligibility and other workers)
AFSCME, Local 2663 (Representing DCF & DSS Social Workers)
Bridgeport Child Advocacy Coalition
Broad-Park Development Corp.
Collaborative Center for Justice
Connecticut AIDS Residence Coalition
Connecticut Alliance for Retired Americans
Connecticut Association for Human Services
Connecticut Association of Area Agencies on Aging
Connecticut Association of Nonprofits
Connecticut Citizen Action Group
Connecticut Coalition Against Domestic Violence
Connecticut Conference of the United Church of Christ
Connecticut Food Association
Connecticut Food Bank
Connecticut Institute for the Blind
Connecticut Legal Rights Project
Connecticut Legal Services, Inc.
Connecticut Nonprofit Human Services Cabinet
Connecticut Oral Health Initiative
Connecticut Voices for Children
Connecticut Women’s Consortium
End Hunger CT!
Family Service of Greater Waterbury, Inc.
Greater Hartford Legal Aid
Hartford Food System
Health Care for All
League of Women Voters of Connecticut
Legal Assistance Resource Center of CT
Middlesex Coalition for Children
National Alliance on Mental Illness of Connecticut
Norwich Human Services
People Against Injustice, New Haven, CT
Planned Parenthood of Connecticut
Safe Haven of Greater Waterbury, Inc.
Southwest Community Health Center, Inc.
Task Force on Child Hunger, Office of the Mayor, City of Middletown, CT