COVID-19 WIDENS RACIAL & ETHNIC DISPARITIES IN GROWING ECONOMIC HARDSHIPS

In 2019, over 245,000 children in Virginia lived in poverty. The impact of COVID-19 further widens ethnic disparities for Black and Latinx households. Virginia’s KIDS COUNT Data Center indicates poverty rates of 26 percent for Black households, 18 percent for Hispanic households, and 8 percent for non-Hispanic White households. Children of color are already more likely to experience economic hardships. Economic trauma refers to a sustained stressful impact or emotional pain of one’s experience with lack of financial opportunities and poverty. Yet, when layered with environmental trauma, such as social injustices and stressors related to the pandemic, this further increases experiences of hardship, which creates complex trauma.

ONE IN TEN HOUSEHOLDS IN THE UNITED STATES BEFORE THE PANDEMIC FACED FOOD INSECURITY. OVER 14 PERCENT OF ADULTS REPORTED THAT THEIR HOUSEHOLDS DID NOT ALWAYS HAVE ENOUGH TO EAT.

According to the “Adverse Childhood Experiences (ACEs) and Household Food Insecurity: Findings from the 2016 National Survey of Children’s Health,” U.S., families that reported Adverse Childhood Experiences (ACEs), such as domestic violence, neighborhood violence, and family substance abuse, were much more likely to experience household food insecurity. Food insecurity is affiliated with a number of negative health outcomes, including poor child development, behavioral health issues, and higher hospitalizations. Experts on ACEs and food insecurity have linked the experience of adverse childhood experiences as a form of brain injury. According to Feeding America, there were 842,870 food insecure people and 233,530 food insecure children in Virginia in 2018. Solutions should integrate approaches that address exposure to community violence and discrimination in addition to more financial resources so that families can have access to affordable and healthy food options.

ACCORDING TO THE UNITED STATES DEPARTMENT OF AGRICULTURE’S ECONOMIC RESEARCH AGRICULTURE, IN 2015, 12.8 PERCENT OF THE UNITED STATES POPULATION LIVED IN LOW INCOME AND LOW FOOD ACCESS AREAS, WHICH IS ALSO KNOWN AS FOOD DESERTS. 1,186,877 OF VIRGINIA’S POPULATION LIVE IN FOOD DESERTS.
A food-desert neighborhood generally lacks a supermarket or large grocery store because of the cost food retailers face when building and/or operating a store in those locations. For example, the price of land or rent may be higher in food-desert neighborhoods. Barriers to increasing access include zoning regulations, such as the amount of parking required for new businesses, could make it more costly to develop a new store. Small grocery stores or convenience stores may face lower rent and parking costs, but they may have a harder time accommodating equipment or space needed for fresh produce or perishable products. Some food deserts may be far from convenient delivery routes, while others may have crime and security concerns that increase a store’s operating costs. Individuals who live in low income and low access areas experience inequities in diet quality, food-store access, and have limited or no options to retailers. Food insecurity may reflect a household’s need to make trade-offs between important basic needs, such as housing or medical bills and purchasing nutritionally adequate foods.

THE VIRGINIA INTERFAITH CENTER FOR PUBLIC POLICY NOTED THAT 1.2 MILLION VIRGINIANS HAVE 0 PAID SICK DAYS OR PAID TIME OFF. 41 PERCENT OF PRIVATE-SECTOR WORKERS HAVE NO ACCESS TO TIME OFF. IN THE UNITED STATES, ABOUT 38 PERCENT OF AFRICAN AMERICANS AND 50 PERCENT OF THE LATINX POPULATION DO NOT HAVE ACCESS TO A SINGLE SICK DAY OR TIME OFF. MORE THAN 30 PERCENT OF AFRICAN AMERICAN HOUSEHOLDS HAVE NO SAVINGS AND CANNOT AFFORD TO TAKE UNPAID TIME OFF FROM WORK.

The classification of an individual’s work status plays a key role in exposure to COVID-19. For example, ALICE (Asset Limited, Income, Constrained, Employed) workers, such as a child care worker, cashier, or home health aide, play essential roles in building and repairing the state’s infrastructure and economy. Yet, ALICE workers make earnings above the federal poverty line but not enough to afford basic household necessities and, as a result, often have limited or lack access to paid sick leave, health care, or benefits that them and their families healthy. Despite the critical nature of many jobs to keep our economy running, ALICE workers struggle to keep their own households from financial ruin. Virginia Interfaith Center for Public Policy notes, that when a worker takes 3.5 unpaid sick days or day off, the average family loses a month’s worth of groceries. Workers are forced to choose between feeding their families and caring for themselves or their children. Workers and their children need to be able to stay home when they are sick. Offering paid time off is one step closer to ensuring these families do not have to choose between.

INFORMED PERSPECTIVE

Voices for Virginia’s Children is home to the Campaign for a Trauma-Informed Virginia, which provides technical assistance and policy analysis to Virginia’s 27 trauma-informed community networks, which are comprised of multi-disciplinary stakeholders, including community members and professionals from public and private sectors. The network also supports Racial Truth & Reconciliation Virginia, a coalition comprised of caregivers, youth, professionals from private and public entities, and providers.
POLICY RECOMMENDATIONS:

Expand paid leave options for parents to protect their families and communities.
The pandemic has raised awareness of the importance of paid leave for families. Fifteen states have passed paid leave standards. Virginia can prioritize businesses, families, and the general public by adopting a phased-in approach for paid sick days and paid family leave.

Strengthen safety net resources for families such as TANF cash assistance, child care subsidies and SNAP nutrition benefits.
Whether a family lives in an urban, suburban, or rural setting, people collectively experience the impact that stems from the economic downturn: being laid off, the inability to find a job, difficulties supporting family, or seeing community or local organizations they depend on shut down. Despite a recent 15% increase, the monthly cash assistance provided by TANF has not kept up with the rate of inflation. Virginia can improve financial security by taking advantage of its surplus in TANF federal funding to increase TANF payment rates and eligibility levels. In addition, we can take steps to ensure nutrition resources such as Pandemic EBT and child care assistance can help meet families’ needs.

Increase access to affordable and healthy food options in underserved communities.
Food insecurity is an issue that Virginia’s inner cities, small towns and rural communities struggle to gain access to due to a lack of food enterprises, including grocery stores, food hubs, mobile markets, farmers markets and food cooperatives. While 1.25 million was invested in the VA Food Access Investment Program and Fund last year, community centers that impoverished communities rely on, such as churches and food pantries, have closed down because of the pandemic and families face challenges, such as transportation, to gain access to healthy foods through other programs. Virginia can strengthen food security by focusing on expanding infrastructure across the commonwealth and nutrition efforts to combat food deserts.