UTAH'S
FOURTH ANNUAL REPORT

ON INTERGENERATIONAL POVERTY, WELFARE DEPENDENCY AND THE USE OF PUBLIC ASSISTANCE • 2015

UTAH INTERGENERATIONAL WELFARE REFORM COMMISSION ANNUAL REPORT

Department of Workforce Services

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- Utah Juvenile Courts
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EXECUTIVE SUMMARY

In 2014, the Utah economy continued to experience significant growth. By the end of the year, job growth was 3 percent and the unemployment rate was 3.6 percent, two percent lower than the national rate. This economic growth is welcome and likely influenced Utah's intergenerational poverty families. Between 2013 and 2014, the share of both the adult and child intergenerational poverty cohorts decreased slightly. Despite these decreases, 31 percent of Utah's child population remains at risk for remaining in poverty as adults. Until adults experiencing intergenerational poverty simultaneously improve their individual situations with respect to education and economic stability, any improvement for these families is likely temporary.

In the past year, Utah has made progress in removing barriers that impede the stability and self-reliance of families experiencing intergenerational poverty. The Intergenerational Welfare Reform Commission released Utah's Plan for a Stronger Future: Five- and Ten-Year Plan to Address Intergenerational Poverty ("Utah's Plan for a Stronger Future"). This ambitious plan is a roadmap to address intergenerational poverty through the establishment of five- and ten-year goals. The primary five-year goal emphasizes the importance of alignment and coordination across agencies serving families. An overview of the efforts in the past twelve months is included in the Utah Intergenerational Welfare Reform Commission Annual Report 2015, which follows this data report.

In addition, communities impacted by intergenerational poverty are increasingly utilizing the data contained in these annual reports. These communities are attaining greater understanding of the educational and economic outcomes of families and beginning to discuss local solutions to these challenges. Similarly, business leaders, religious organizations, academics and advocacy groups are engaged in the efforts around intergenerational poverty and the long-term effect it may have on Utah's future. Additionally, these groups are discussing their role and coordinating efforts across a variety of initiatives to align with the outcomes and indicators established by the Intergenerational Welfare Reform Commission.

Although progress is being made, the data throughout this report reveals the well-being of children in the cycle of poverty and welfare dependence

The Intergenerational Poverty Welfare Reform Commission Annual Report provides an update on activities in 2015 and includes evidence-based policy recommendations based on the data contained in this report.

remains in jeopardy. These children continue to face challenges within several domains of child well-being that limit their path to opportunity. In accordance with the Intergenerational Poverty Mitigation Act, agencies continue to coordinate and share data to evaluate the indicators of child well-being. The data is classified in the following domains: early childhood development, education, family economic stability and health.

In each of these areas, children at risk of remaining in poverty are continuing to experience poor outcomes. In 2015, agencies established additional indicators including the following: (1) quality child care; (2) homelessness; (3) involvement with the juvenile justice system; and (4) substance abuse and mental health. Additionally, data is provided for a new cohort of young adults between the ages of 18 and 21, experiencing intergenerational poverty. The report also provides information regarding access to important educational supports in schools serving the highest percentages of children at risk of remaining in poverty as they become adults.

The Intergenerational Poverty Mitigation Act emphasizes the need of the data provided in this report to inform evidence-based policy and programs, as well as targeting governmental resources effectively to those solutions that will achieve the goals of the Act. Following this report, the Intergenerational Welfare Reform Commission's Annual Report outlines evidence-based policies based on the data contained herein. Its focus is on communities serving high concentrations of children at risk of remaining in poverty and the barriers that impact these children's stability and later opportunities.

Important findings from this Fourth Annual Report include the following:

- The size of the intergenerational poverty adult cohort decreased by 13 percent and the intergenerational poverty child cohort decreased by 5 percent; although only a small percentage of the decrease is attributed to increased income.
- Similar to previous years, 31 percent of Utah's children are at risk of remaining in poverty as they become adults.
- Of the individuals experiencing intergenerational poverty, 11 percent have received homeless services.
- Students at risk of remaining in poverty continued to experience poor educational outcomes in School Year 2013, although graduation rates improved slightly.
- The average annual wage for adults in the intergenerational poverty adult cohort increased 8 percent to $11,506.
- Among the intergenerational poverty cohorts, rates of childhood abuse and neglect reported ranged from 26 to 35 percent, substantially higher than the 1.2 percent statewide rate.

Although the data presented in this report reveals characteristics of the families experiencing intergenerational poverty, as well as children at risk of entering the cycle of poverty, caution must be exercised when interpreting the findings. Given the limitations of the multiple data-tracking systems and the challenges of matching data across state agencies, this report presents different levels of correlation, not causation, between the indicators included and intergenerational poverty. But given the unprecedented collaboration of data, as compared with other state governments, these limitations should be understood in light of the innovative demands of this type of data collection. Thus, the patterns reported here should be considered a "first look" into otherwise lesser known trends and patterns among this important population — Utah's public assistance recipients.

SECTION 1: INTRODUCTION

In 2012, the Utah Legislature adopted the Intergenerational Poverty Mitigation Act (Act), recognizing that children in the cycle of poverty and welfare dependency experience barriers to stability and opportunity.[1] When families remain in the cycle of poverty there are high societal and economic costs to Utah.

The Act requires the Department of Workforce Services to provide an annual report on the status of individuals experiencing intergenerational poverty. It meets this requirement through coordination of data sharing across the five state agencies that comprise the Intergenerational Welfare Reform Commission (Commission). These agencies include the following: Department of Health (DOH), Department of Human Services (DHS), Department of Workforce Services (DWS), Juvenile Courts and the Utah State Office of Education (USOE).

The Act has been in place for four years allowing for the identification of trends in baseline data established in previous reports. This report continues to track four cohorts of Utahns. These cohorts include the following: (1) adults utilizing public assistance in Utah for whom there is no record indicating they participated in public assistance programs in Utah as children, referred to as "PA, non-IGP adult cohort;" (2) adults utilizing public assistance and utilized public assistance as children, referred to "IGP adult cohort;" (3) children of those adults in the IGP adult cohort, referred to as "IGP child cohort;" and (4) children of those adults in the PA, non-IGP adult cohort, or "at-risk child cohort."[2] In addition, a new cohort of young adults experiencing intergenerational poverty, "IGP young adult cohort," is identified.

These cohorts of individuals, especially the children, experience poor outcomes that make their exit from poverty and welfare dependence difficult. Many of the adults are young, single women with young children. The challenges of raising young children on their own frequently results in high levels of stress, anxiety and in many cases, abuse and neglect, substance abuse and poor health.

These parental struggles have a direct impact on parent child-rearing strategies, child nutrition, and child exposure to economic instability that likely result in impairments in early brain development and socio-emotional skills. These impairments are one critical factor that explains why children in poverty are months behind their more affluent peers at school-entry. This gap tends to follow these children throughout their academic years placing additional challenges to their career development, which leads to economic instability in adulthood, and thereby continuing the cycle of poverty and welfare dependence.

In order for a child to grow up in an environment that clears their path for stability and opportunity, they must be provided a foundation of support that allows them to become successful adults. This foundation is built beginning in early childhood and continues into adulthood. Determining whether the foundation is properly built requires evaluation of measurable benchmarks along the way. Throughout this report, these indicators are discussed and analyzed. The following diagram lists the indicators tracked in each of the four areas of child well-being.

INDICATORS

OF CHILD WELL-BEING LEADING TO SUCCESS IN ADULTHOOD

EDUCATION

- Kindergarten participation
- Chronic absence rates
- 3rd grade language arts proficiency
- 8th grade math proficiency
- AP participation
- ACT scores
- Graduation rates
- Juvenile justice engagement

FAMILY ECONOMIC STABILITY

- Adult educational attainment
- Adult employment
- Wage levels
- Housing stability

HEALTH

- Access to health care, including physical, mental and dental health
- Rates of abuse and neglect
- Participation in nutrition programs

EARLY CHILDHOOD DEVELOPMENT

- Access to health care beginning in infancy
- Access to quality child care
- Preschool participation
- Kindergarten readiness

SECTION 2:

UNDERSTANDING POVERTY AND INTERGENERATIONAL POVERTY IN UTAH

Understanding the context of intergenerational poverty requires evaluation of the impact poverty in general is having in Utah. Intergenerational poverty is a distinct subset of those experiencing poverty, reflecting a type of poverty that is difficult to escape and remains entrenched in families from one generation to the next.[4] Since the Great Recession, overall poverty in Utah has grown. In 2013, approximately 15 percent of Utah's children were living in poverty, an increase from 11 percent in 2007.[5] Although significantly lower than the national rate of 22 percent, the effects of childhood poverty are too great to ignore. Children growing up in poverty experience challenges to healthy development both in the short and long term, demonstrating impairments in cognitive, behavioral and social development.

Through evaluation of the intergenerational poverty data and research, it is evident that children experiencing poverty are not just experiencing economic hardship. Rather these children are confronting significant barriers and challenges to success. These same barriers and challenges are also impeding their parents' ability to meet the basic needs of their children. As a result, the ability to successfully reduce the number of children at risk of remaining in poverty requires more than simply providing economic support to these families, although such support is often critical to ensuring the stability necessary to succeed.

As required by the Act, the annual report must include statewide poverty rates and child poverty rates. The following evaluates those rates.

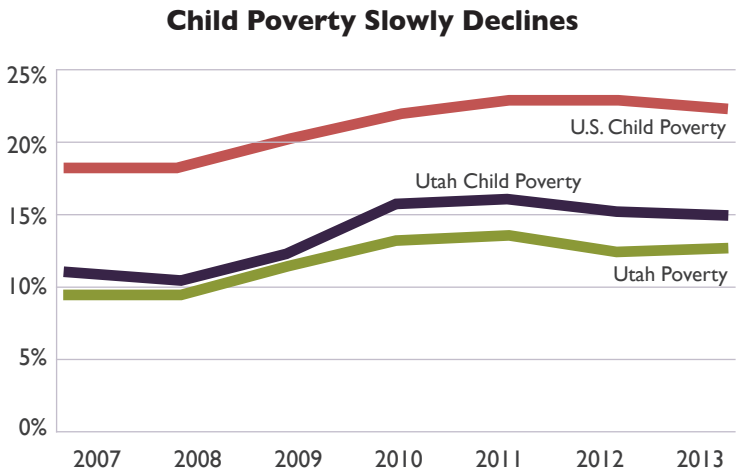
Baseline Data: Poverty

Nationally, poverty is established by the federal Department of Health and Human Services. In 2015, a family of four is in poverty if income is below $24,250.

Persons in family/ household	Poverty guideline
1	$11,770
2	$15,930
3	$20,090
4	$24,250
5	$28,410
6	$32,570
7	$36,730
8	$40,890

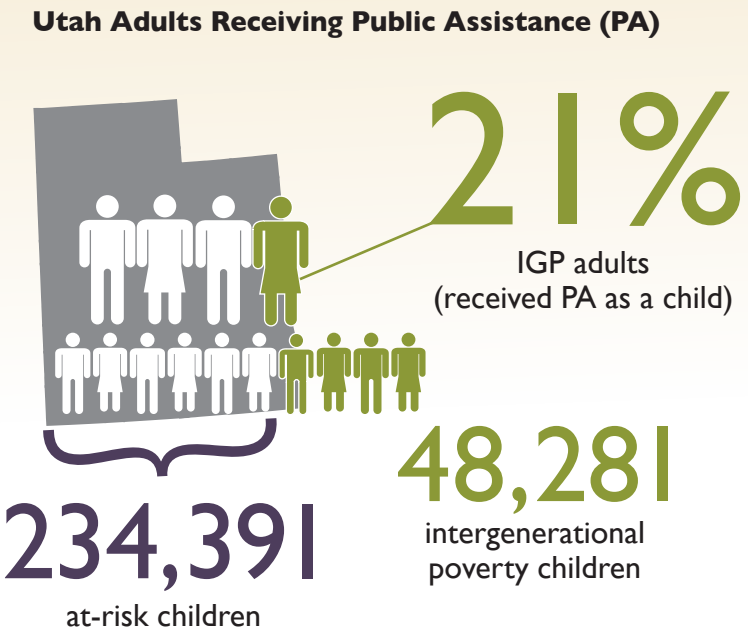
Although Utah continues to achieve significant economic gains and the rate of those in poverty has not increased since 2011, there has been surprisingly little decrease in child poverty. In fact, according to data from the U.S. Census Bureau, 38 percent of children between the ages of zero and five years old are living in poverty. This is particularly troubling given early childhood development research demonstrating the impact poverty has on development of young children.[6]

A family of four is in poverty if income is below **$24,250**



Baseline: Intergenerational Poverty Adult Cohort

The baseline for establishing the Intergenerational Poverty Adult Cohort is different than the baseline of poverty in Utah. Rather than just reporting the percentage of child and adult poverty in Utah, this baseline examines the percentage of Utahns who receive public assistance as adults and when they were children. The Intergenerational Poverty Mitigation Act identified DWS as the agency responsible for establishing and maintaining a system to track intergenerational poverty. DWS is tracking outcomes for four cohorts of individuals. The following diagram identifies each cohort.[7]



As economic conditions improve, higher levels of low-skilled individuals are working but still lack a career leading to stability. Until low-skilled workers increase skill levels or obtain higher levels of education leading to a career, they are more susceptible to the peaks and valleys of economic cycles.

Since 2012, when DWS began tracking intergenerational poverty, there have been small fluctuations in the size of the identified cohorts. In 2014, each of the identified cohorts has decreased with the exception of the PA non-IGP adult cohort.

Public Assistance, Cohort Comparison				
	2012	2013	2014	2015
Total PA Adults	151,170	149,639	149,053	145,396
IGP Adults	35,778	36,449	35,816	31,057
Non-IGP PA	115,392	113,190	113,237	114,339

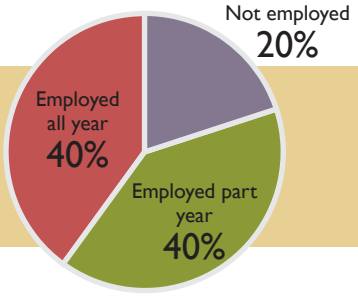
Between 2011 and 2014, the period in which DWS began tracking this data, among all individuals receiving public assistance between the ages of 21 and 43, there was a 4 percent decrease.[8] Among the IGP adult cohort, there was a decrease of 13 percent during this same period.

Although improvements in Utah's economy may be responsible for this decrease, little has changed in the lives of these adults to lead to their permanent exit from the cohort.

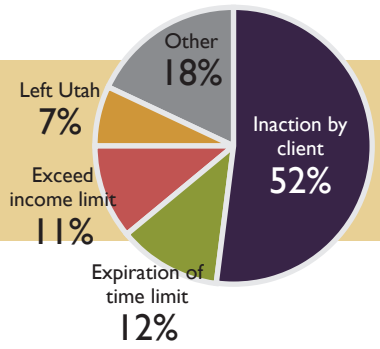
Among the 7,158 adults included in the 2014 report but not included in this year's report, 60 percent had some employment in 2014 and obtained an average annual wage of $22,856, which remains below the Federal Poverty Level (FPL), for a family of four.[9]

Although a greater share of these individuals had full-year employment than members remaining in the IGP adult cohort, only 11 percent left the cohort due to exceeding program income limits.[10] Rather, 52 percent of the case closures among those exiting the cohort were due to inaction by the individual. See Appendix C.1. 2013 IGP Adults Not in 2014 Cohort.

2014 Employment of Adults Exiting Cohort



Reasons for Case Closures



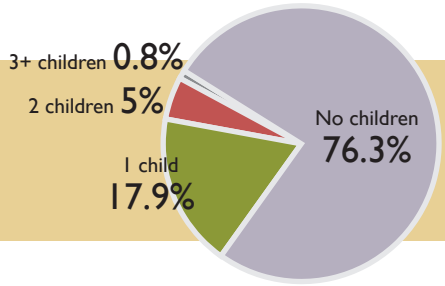
Baseline: IGP Young Adult Cohort

In addition to the adults ages 21 through 43, a new cohort of young adults is identified. This new cohort includes individuals experiencing intergenerational poverty, ages 18 through 21. Increasingly, young adults are struggling to gain traction in the nation's economy. During the Great Recession, young adults experienced high unemployment, leading to missed opportunities to gain early work experience. This early work experience often leads to increased knowledge and job readiness skills obtained through part-time and starter jobs.[11] When young adults lack these early job skills, lifetime earnings are often jeopardized.[12]

IGP Young Adult Cohort			
Age in December	Female	Male	Total
18	120	113	233
19	1,511	1,239	2,750
20	1,276	758	2,034
21	262	170	432
Total	3,169	2,280	5,449

For young adults growing up in intergenerational poverty, the economic ramifications are even greater in Utah, where these young adults are often starting families of their own. However, only 24 percent of the IGP Young Adult Cohort members have children.

IGP Young Adult Cohort with Children

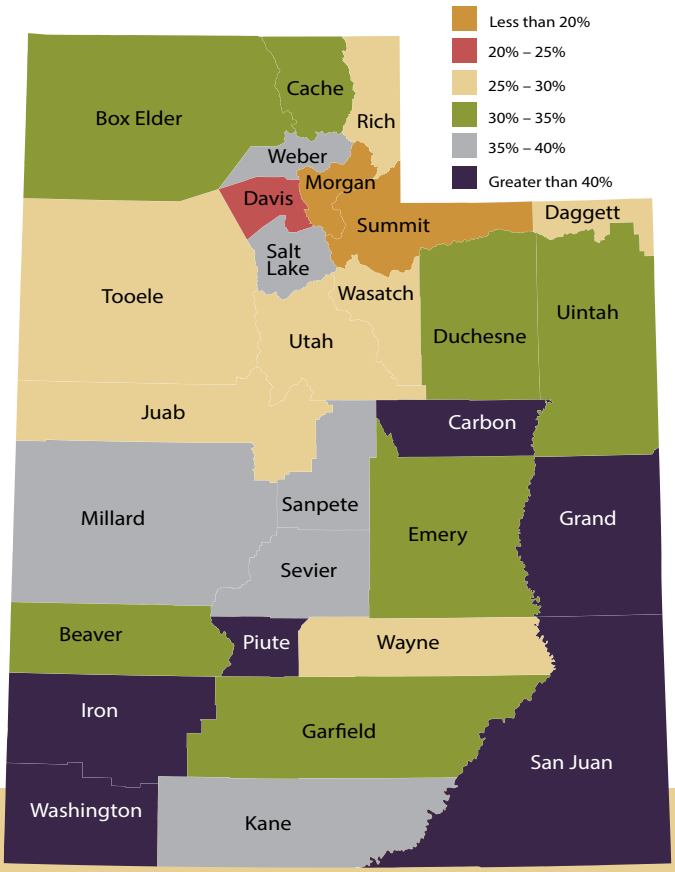


Where data is available, further analysis of these young adults will be included throughout this report.

Baseline: Children At Risk of Remaining in Poverty

Children at risk of remaining in poverty as they become adults reside throughout Utah. In some counties, more than 40 percent of the children are at risk of remaining in poverty and more than 1,000 children are experiencing intergenerational poverty. See Appendix B, Table B.1. IGP Child and IGP Adult Cohorts by County.

IGP & At Risk Children by County

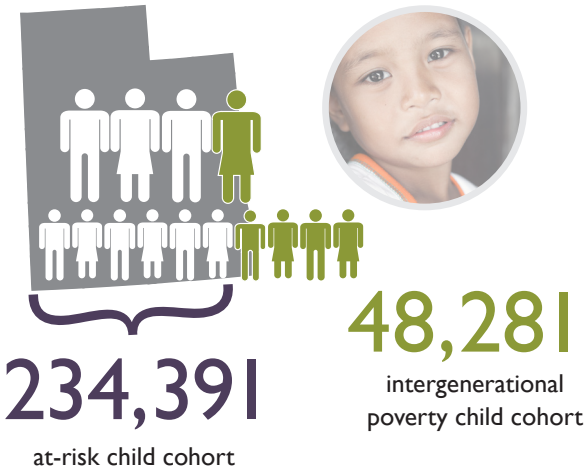


There are a lot of brilliant minds lost in poverty.
—Mellowdey Trueblood
Next Generation Kids participant

Those experiencing poverty at any point in their childhood are more likely to also be poor as an adult than someone who never experienced poverty. The National Center for Children in Poverty (NCCP) has found that among children living in poverty for eight years or more between the ages of zero to 15, 45 percent will remain poor when they are 35 years old.[13] Among the IGP child cohort, 78 percent have utilized public assistance for eight years or more.[14]

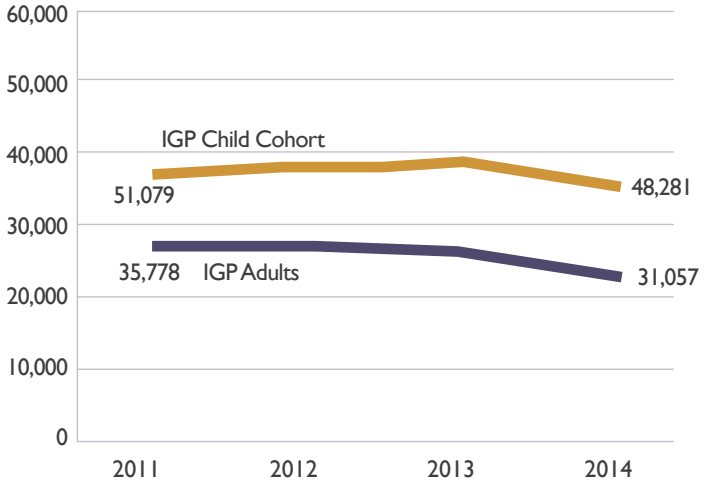
Between 2011 and 2014, among the children experiencing intergenerational poverty, the cohort decreased 5 percent. The at-risk child cohort decreased only one percent between 2013 and 2014, the only years that cohort has been tracked.

Children in Jeopardy of Remaining in Poverty

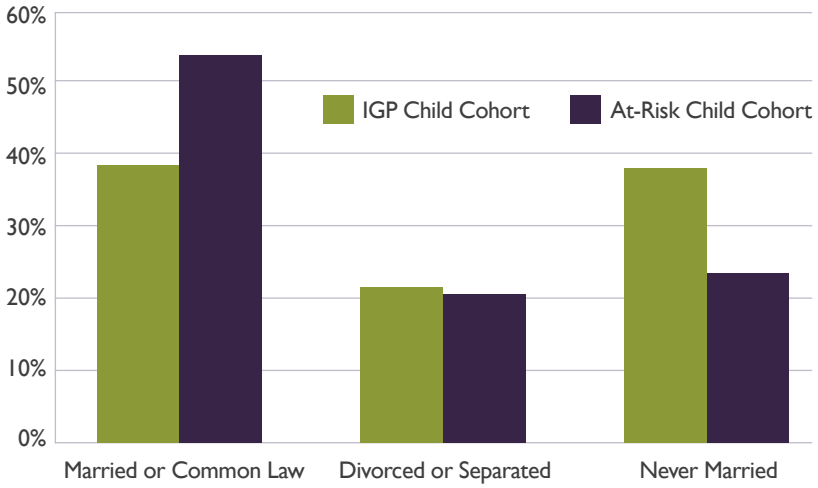


However, the children within both the IGP child cohort and the at-risk child cohort continue to represent 31 percent of Utah's child population. This is a two percent decrease from the 2014 Annual Report but still demonstrates that there are a significant number of children under the age of 18 in jeopardy of remaining in poverty, as they become adults.

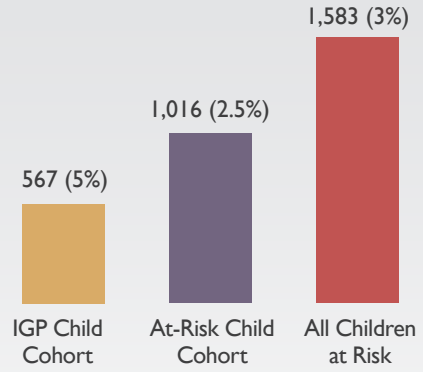
Intergenerational Poverty Declines
2011–2014



Children by Marital Status of Adults



Child of Teen Mother



According to NCCP, there are several factors that place children at risk for poor health, educational and developmental outcomes. Among those risk factors are economic hardship, unmarried parents and being the child of a teen parent.[15]

The majority of children experiencing intergenerational poverty are growing up in single-parent households.

The risk factor of being a child of a teen parent is less prevalent than growing up in a single-parent household. Among the children in the IGP child cohort, 567 children or 5 percent are children of a teen parent.

61 percent of the children experiencing intergenerational poverty are living in single-parent households.

Basic Demographics of IGP Adult Cohort

68% are women

81% are less than 35 years old

76% have children

88% of the children are under 13 years old

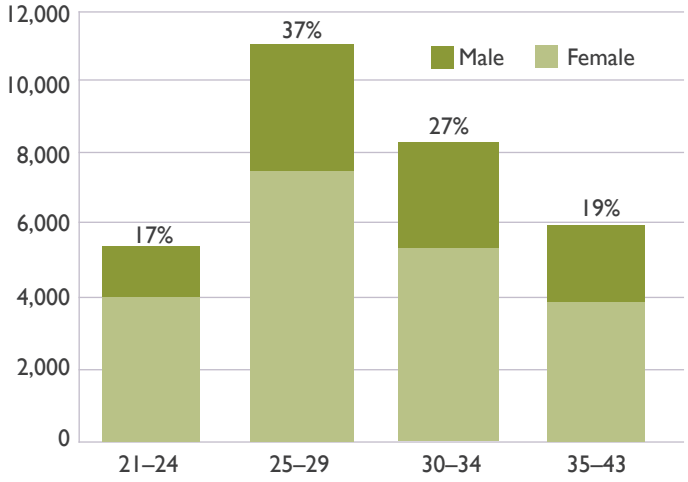
Baseline: Demographics of the Cohorts

The demographics of the public assistance populations, including those experiencing intergenerational poverty, were provided in the 2014 Annual Report.[16] In the past year, there have been only slight changes in the overall demographics of the populations.

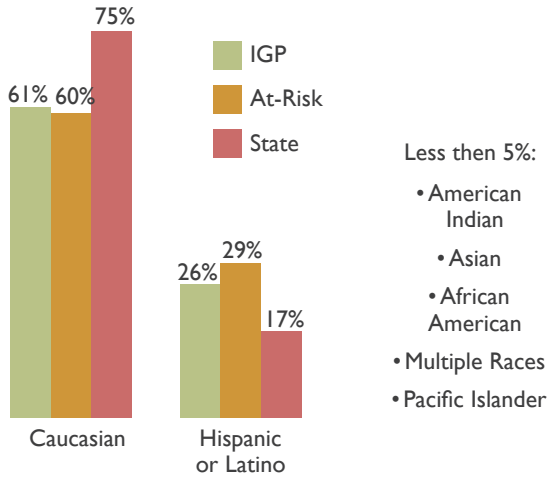
Not surprisingly, the demographics of the IGP adult cohort align with eligibility requirements for the public assistance programs analyzed to establish the IGP adult cohort. Most programs require the presence of dependents in the home; most dependents reside with their mother and economic hardship tends to impact young families.

It is important to note that although significantly fewer men are appearing in the IGP adult cohort, there are likely many more men experiencing intergenerational poverty. According to the U.S. Census, there is a more equal distribution among men and women living in poverty, between the ages of 21 and 43 years old.[17] Since the parents are young, it is no surprise that 88 percent of the children are twelve years old or younger.

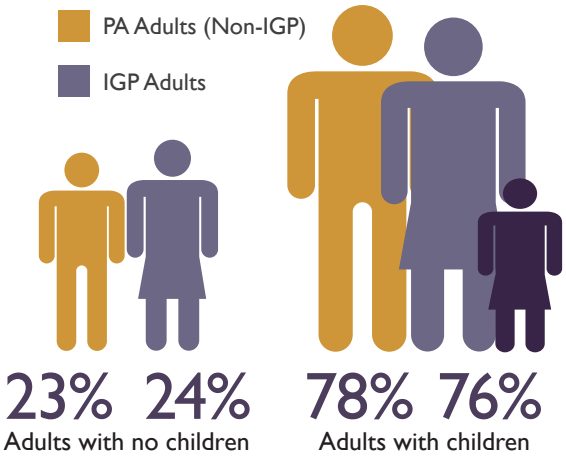
Majority of IGP Adults are Below 30 Years of Age



Student Enrollment by Race & Ethnicity
School Year 2013



Adults with Children 2014



In past reports, race and ethnicity were evaluated through administrative data collected by DWS. The data was self-reported and voluntary. This year, the race and ethnicity distribution among children experiencing intergenerational poverty and at risk of remaining in poverty is provided by the Utah State Office of Education (USOE). The data reveals that some racial minorities are disproportionately represented among children at risk of remaining in poverty compared to the racial and ethnic distribution among all Utah students. For example, African Americans represent one percent of the Utah student population but two percent of both the IGP child and at-risk child cohorts. Similarly, Native Americans represent only one percent of the Utah population but five percent of the IGP child cohort

Baseline Data: Public Assistance Utilization

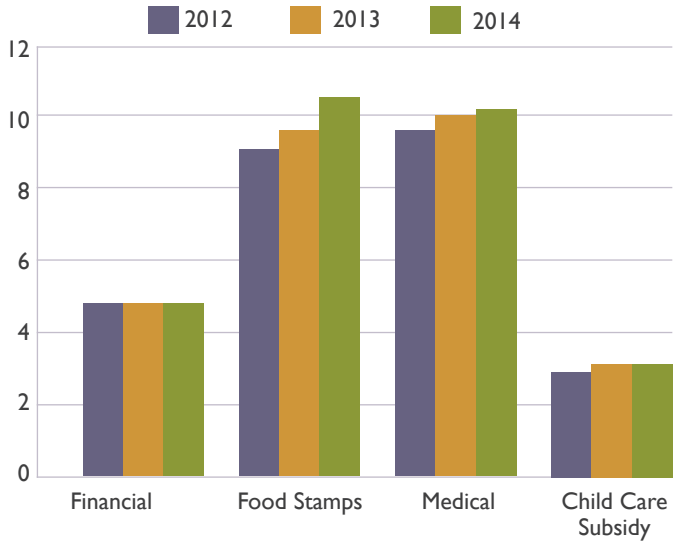
The use of public assistance is a component of identifying the status of individuals experiencing intergenerational poverty. Since the Act was adopted, analysis has been conducted to gain greater understanding of public assistance utilization. In the past four years, the length of time in which the IGP adult cohort and the IGP child cohort have received public assistance has increased slightly.

The distribution of public assistance participation reveals that the majority of individuals experiencing intergenerational poverty are relying on programs to assist them in meeting the basic needs of their families, including assistance to ensure parents are able to provide food and health care for their children.

In the past four years, there has been an increase in the share of the IGP adult cohort receiving medical benefits while the share of children receiving medical benefits remained high.[18] In 2014, the data revealed that although children at risk of remaining in poverty had access to health care through either Medicaid or the Children's Health Insurance Program (CHIP), the utilization of that health care was low in the areas of mental health care and dental care. As parents obtain access to health care, it is expected that health care utilization will increase for their children.[19]

Participation in Public Assistance

Total lifetime average number of years, IGP adult and child



Public Assistance as an Adult in CY 2014	Adults		Children	
	IGP	PA, non-IGP	IGP	At-Risk
Financial	5.8%	3.9%	9.2%	5.2%
Food Stamps	83.8%	74.6%	91.8%	59.1%
Child Care	11.6%	6.3%	17.8%	6.9%
Medical	73.3%	66.3%	93.8%	93.3%

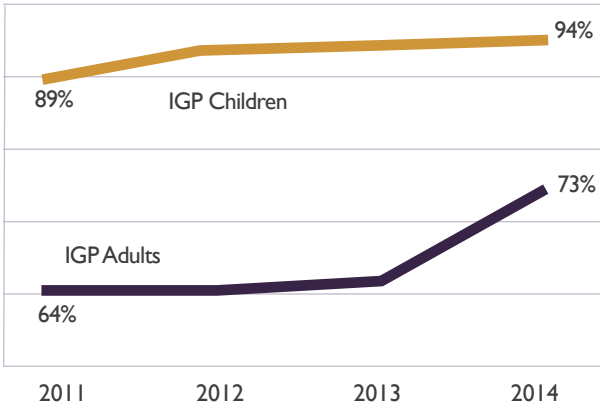
There are several possible explanations for the increase in the share of IGP adults receiving medical benefits. First, medical assistance enrollment includes individuals enrolled in Utah's Primary Care Network (PCN).[20] Since 2013, the monthly enrollment in PCN has increased 12 percent. Although the data above does not differentiate medical assistance by program type, it is likely that many members of the IGP adult cohort are receiving medical assistance through PCN.

Second, the implementation of the Affordable Care Act (ACA) may explain part of the increase in Medicaid. Since the federal Health Insurance Marketplace opened in 2014, there have been national campaigns encouraging people to apply for Marketplace coverage. When someone applies at the Marketplace, they are automatically screened for Medicaid eligibility. If the Marketplace believes an applicant would likely be eligible for Medicaid, the application is sent to the state for a full Medicaid determination. It is difficult to know whether this has in fact, led to the increase among the IGP adult cohort in Medicaid.

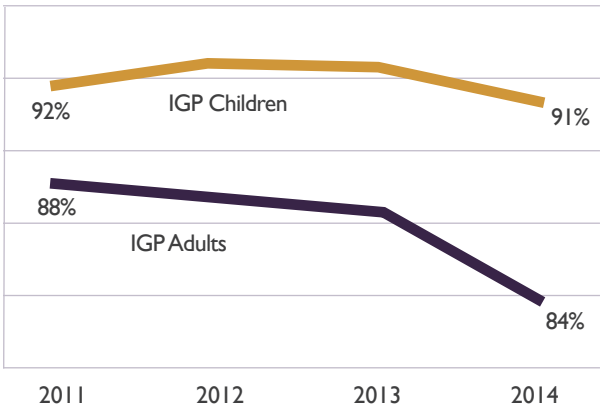
In contrast, there has been a slight decline in the share of families receiving Food Stamps. The data seems to indicate that although a smaller percentage of intergenerational poverty families are receiving Food Stamps, those who are receiving it are participating longer.

Among the families experiencing intergenerational poverty, the median annual cost of providing public assistance is $2,901 annually.[21] This figure includes the resources expended on child care subsidies, financial assistance and Food Stamp programs. It does not include expenditures associated with health care. These additional resources provided to these families when combined with the average annual income of $11,506 for intergenerational poverty adults, keeps these families well below the Federal Poverty Level.

Medical Assistance Increases for IGP Adults
enrollment, 2011–2014



Slight Decrease in Food Stamp Participation
enrollment, 2011–2014



SECTION 3:

INDICATORS AND BASELINES FOR CHILD WELL-BEING

The ultimate goal of the Intergenerational Poverty Mitigation Act is to "measurably reduc[e] the incidence of children . . . who remain in the cycle of poverty and welfare dependency," through improved coordination and alignment among state agencies serving the needs of vulnerable children and families.[22] The Act also requires the establishment of data-driven policies that are evidence-based. As a result, data must be used to determine where needs exist, ensuring financial resources are properly expended on programs and policies that are effective. Whether programs and policies are effective requires the establishment of outcomes that are measurable.

The 2014 Annual Report established indicators within the four areas of child well-being as a means of assessing progress toward the goal of the Act.[23] These indicators revealed significant barriers and challenges, beyond income, for children trying to exit the cycle of poverty and welfare dependency in adulthood. The four domains evaluated include: (1) early childhood development; (2) education; (3) family economic stability; and (4) health.

EARLY CHILDHOOD DEVELOPMENT

Increasingly, brain development research is revealing that the foundation for social and economic mobility in adulthood are built in early childhood.[24] As a result of adversity and toxic stress in early childhood, including economic hardship, abuse and neglect, brain development is frequently impeded. These changes to brain development have lasting implications into adulthood and lead to increased societal burdens.[25]

The early years in a child's life also establish the foundation for later academic success. Unfortunately, children raised in families experiencing economic hardship are less likely to be ready for school when they enter kindergarten. The cognitive deficits emerge early, largely due to limited exposure to reading and verbal communication from caregivers and remain throughout their school years.[26]

The following indicators of Early Childhood Development are identified because research has demonstrated that these indicators assist in predicting positive early childhood development:

Indicators of Early Childhood Development

- Access to health care beginning in infancy
- Access to quality child care
- Preschool participation
- Kindergarten readiness

50% of children under 6 years old in Utah require child care services outside their home.

Access to Health Care Beginning in Infancy

Beginning in pregnancy, access to proper prenatal care is critical for a child's development. Lack of prenatal care often leads to babies born with low birthweight resulting from poor nutrition, poverty and stress. In Utah, low-income, pregnant women have access to public health insurance.

In 2014, less than 10 percent of pregnant women from the IGP adult cohort, accessing public health insurance, received prenatal care. The figure is only slightly higher among pregnant women in the PA adult cohort.

The need for health care continues after birth to establish healthy development throughout childhood.

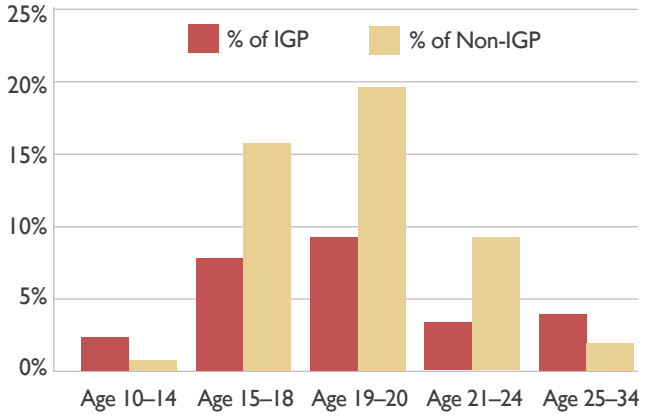
Among children between zero and one year old, 97 percent receive public health insurance. Although access to health insurance is important, visiting a physician during this period of development ensures children receive the health care they need. Fortunately, 90 percent of children from the IGP child cohort visited a physician in their first year of life.

Access to Quality Child Care

An important contributor to early development occurs through secure and positive relationships with adults able to support a child's development and learning. The science of early childhood development also highlights the need for consistency and continuity of early care and education. As a result, increased emphasis is being placed on the quality of the environments children are being raised in, including

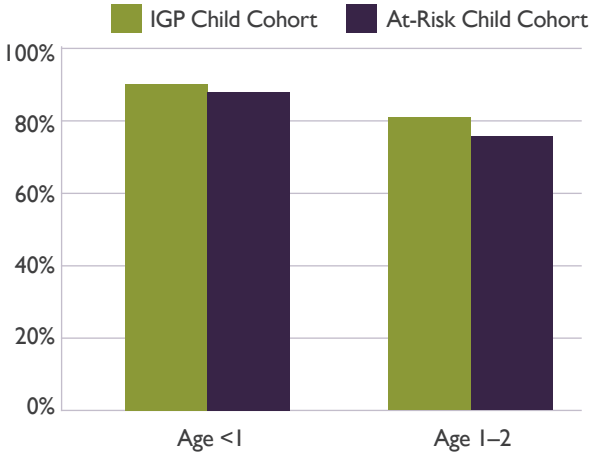
Percent of Enrollees Utilizing Preventive Care Services

who are pregnant women

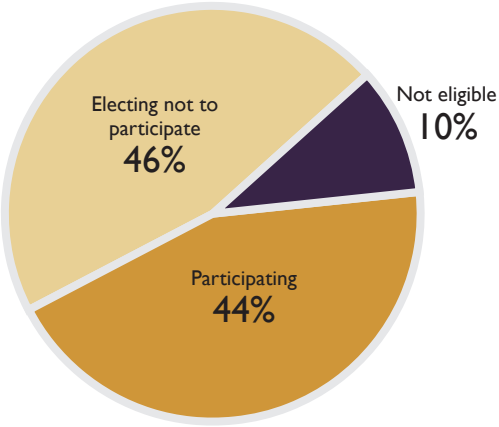


Medical Care in First Years of Life

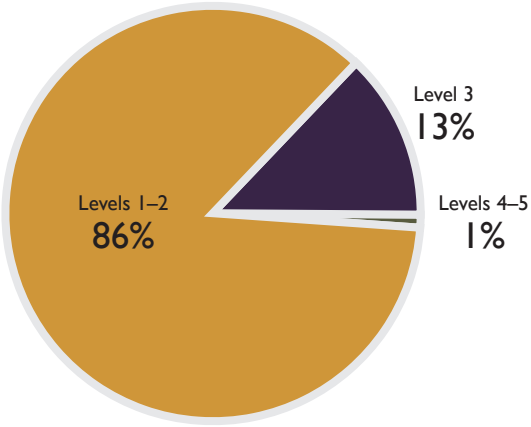
0–2 year olds



Child Care Program Participation in QRIS
by percent of subsidy children by program



QRIS Levels of Participating Programs
by percent of subsidy children in each level



all types of child care settings. For many children, most of this early care is provided in the home. However, nearly 50 percent of Utah children under six years old require child care services outside of the home.[27]

Given the increased need for child care and the importance of the relationships between child care providers and young children, access to high-quality child care plays a valuable role in child development.[28] Among the children at risk of remaining in poverty, over 24,000 received child care through subsidies at some point in 2014.

The Utah Office of Child Care administers the state's Quality Rating Improvement System (QRIS). The QRIS is utilized by licensed child care providers to improve the quality of their programs.[29] Only 44 percent of all children receiving child care subsidies are receiving care in programs voluntarily participating in Utah's QRIS.

Of the programs that are participating in QRIS, the majority of children are in programs achieving a level two rating or lower.[30] The program level achieved depends upon the number of quality indicators a child care program attains in several areas including health and safety, indoor and outdoor environments, parent engagement and professional development.[31]

Professional Development of Utah's Child Care Workforce

Given the importance of secure and positive relationships in a child's development, the professional skills and educational attainment of child care providers is important. This is especially true of lead teachers and program directors or administrators. The graph below provides the educational attainment of child care providers and early childhood educators in Utah and the nation.

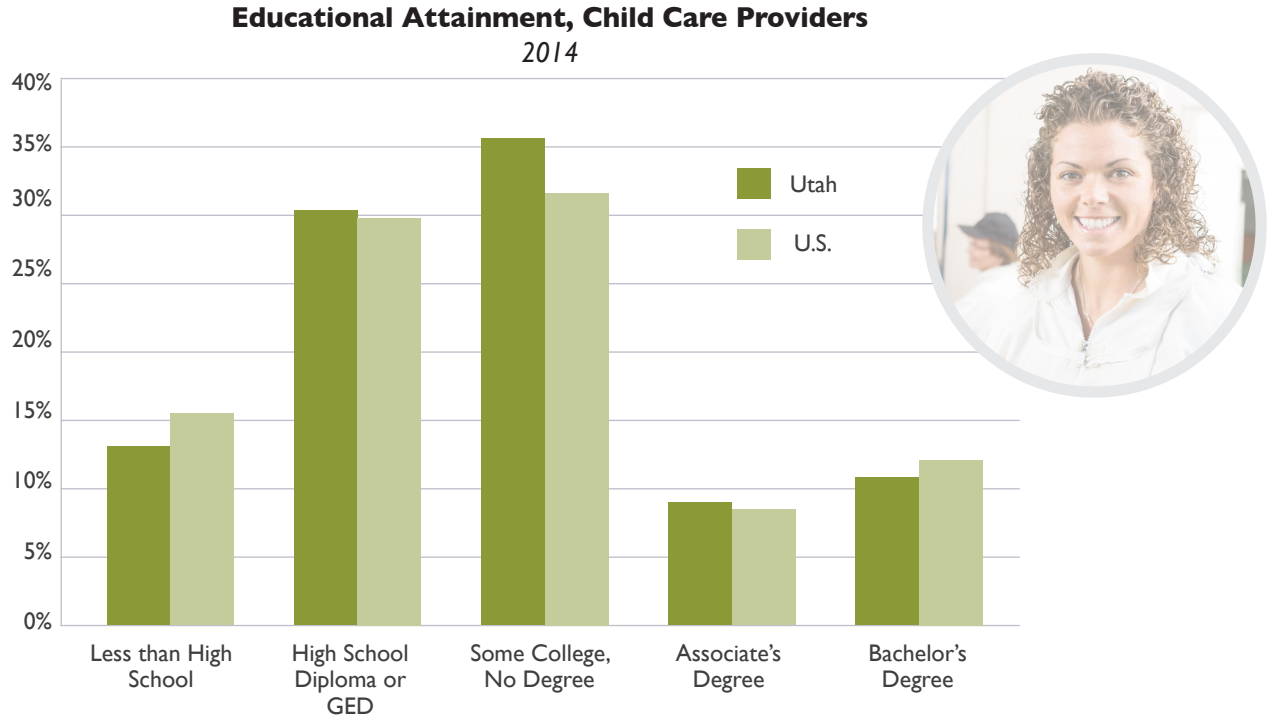
Preschool Participation

In Utah, high-quality preschool programs greatly reduce or close the achievement gap which exists between low-income and higher income children throughout a child's academic career, as well as reduce participation in special education among low-income students.[32] Although preschool is available on a limited basis in Utah, data reveals that only 13 percent of Utah's three- and four-year-olds enroll.[33]

In 2014, recognizing this important outcome, Utah began utilizing limited state funds to provide preschool for approximately 800 low-income students.[34] Although there is limited state funding for preschool, several Local Education Agencies (LEA) throughout the state utilize federal funding sources to provide preschool for at-risk children.

Currently, of 103 Utah elementary schools serving ten percent or more children experiencing intergenerational poverty, only 38 percent offer a preschool program. In addition, some LEAs provide preschool to students through non-profit organizations or through the Head Start Program.[35] See Appendix B, Table B.2. High IGP Students by School.

At this time, data is not available to identify whether children at risk of remaining in poverty are attending preschool. It is expected this data will be obtained in the future through the Early Childhood Utah database.



Kindergarten Assessment

Children entering kindergarten with skills in math and reading are more likely to achieve academic success, attain higher levels of education, and secure employment in adulthood. In contrast, children lacking these skills continue to perform behind their peers throughout their academic careers.

Although national research demonstrates that children in poverty often enter kindergarten lacking the cognitive and early literacy skills necessary to be successful, Utah does not have an existing, statewide kindergarten readiness tool.[36] As a result, it is impossible to conclude whether Utah children at risk of remaining in poverty lack math, reading and other skills upon entering kindergarten requiring specific policies to address deficits.

At this time, data sources have not been established to track all of the indicators relevant to assess the Early Childhood Development domain. In the future, much of this data will be available through the Early Childhood Utah longitudinal database.

The research is clear that the early years in a child's life are critical for establishing the foundation necessary for a child to be successful into adulthood. Moreover, studies have found that investing in early childhood programs for low-income children yields a cost-benefit ratio and internal rates of return as high as 18 percent over 35 years.[37] There is reason to believe that those rates of return may be even higher among children experiencing intergenerational poverty. Among Utah's youngest children at risk of remaining in poverty there is room for improvement in the areas of health, access to high-quality child care and access to high-quality preschool.

Education then, beyond all other devices of human origin, is a great equalizer of the conditions of men — the balance wheel of the social machinery.

–Horace Mann

EDUCATION

Education is an important component of child well-being. The opportunity to obtain a quality education increases both employment opportunities and lifetime earnings, as well as supporting economic stability for parents and their children. Children attending school are less likely to engage in risky behaviors and interact with the juvenile justice system.

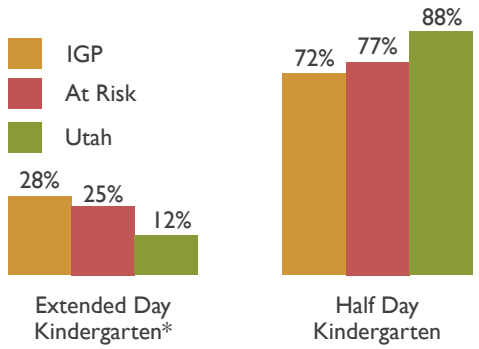
Additionally, labor market data reveals the role that completing high school and entering post-secondary training plays in long-term economic stability. In Utah, adults lacking an education beyond high school experience higher rates of unemployment and lower wages.[38] This research gives cause for concern with respect to children at risk of remaining in poverty who are experiencing poor academic outcomes as early as third grade.

The relationship between education and a skilled workforce is leading to increased efforts throughout Utah to improve academic outcomes for all Utah students. In addition to the Intergenerational Welfare Reform Commission, Utah business leaders and policymakers are working toward achieving Governor Herbert's goal of 66 percent of all Utahns possessing a trade certificate or post-secondary degree by 2020.[39]

The following EDUCATION INDICATORS are being tracked:

- Kindergarten participation
- Chronic absence rates
- Third grade language arts proficiency
- Eighth grade math proficiency
- AP participation
- ACT scores
- Graduation rates
- Juvenile justice rates

Kindergarten Enrollment by Student Type
SY 2013



**Extended day kindergarten includes optional extended day, extended hours, and other extended as defined by USOE.*

Only 26% of the kindergarten students experiencing intergenerational poverty participate in an extended day kindergarten program, however this is higher than found in the general Utah population.

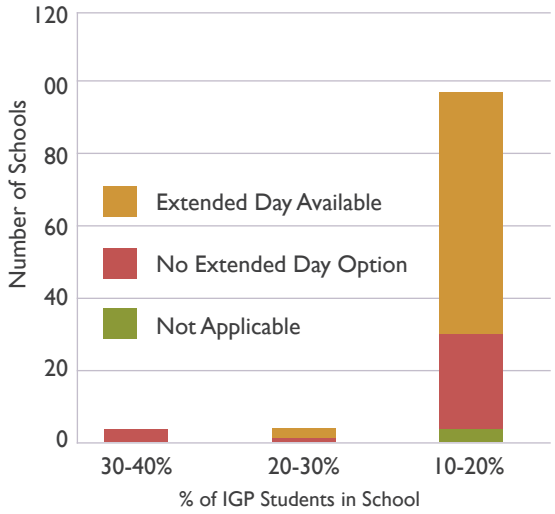
Kindergarten Participation

In Utah, kindergarten is optional and the availability of extended day kindergarten is limited. Fortunately, nine of ten kindergarten-age children in Utah enroll in kindergarten. Of those children enrolled, 84 percent attend the half-day kindergarten program.

According to USOE, students participating in extended day kindergarten have improved academic outcomes throughout the school year, relative to their peers not participating.[40] Despite these positive outcomes, extended day kindergarten is not provided in every Utah elementary school. Among the 104 schools serving 10 percent or more children from the IGP child cohort, 32 schools do not offer extended day kindergarten. See Appendix B, Table B.2. High IGP Students by School.

Between 2012 and 2013, enrollment in an extended day kindergarten program increased three percent with 8,265 kindergarten students participating. Among those participating, 815 were from the IGP child cohort and 2,641 were from the at-risk child cohort.[41] The rate of participation in full-day kindergarten programs is higher among the children experiencing intergenerational poverty than the statewide; however, schools with the highest percentages of children experiencing intergenerational poverty are less likely to be provided an extended day kindergarten option.

Availability of Extended Day Kindergarten by IGP Student Concentrations



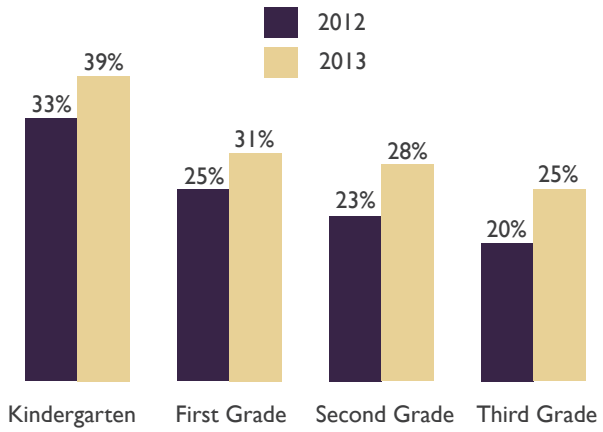
Attendance

Increasingly, educators are identifying chronic absence rates as an important predictor of academic outcomes. Children attending school regularly and consistently, beginning in kindergarten, perform better on academic achievement exams and are more likely to graduate from high school.[42] In fact, there is a cumulative influence of chronic absence such that with every year of chronic absenteeism, an increasing percentage of students drop out of high school. The Utah Education Policy Center found that more than half of all Utah children who were chronically absent for two years dropped out of high school.[43]

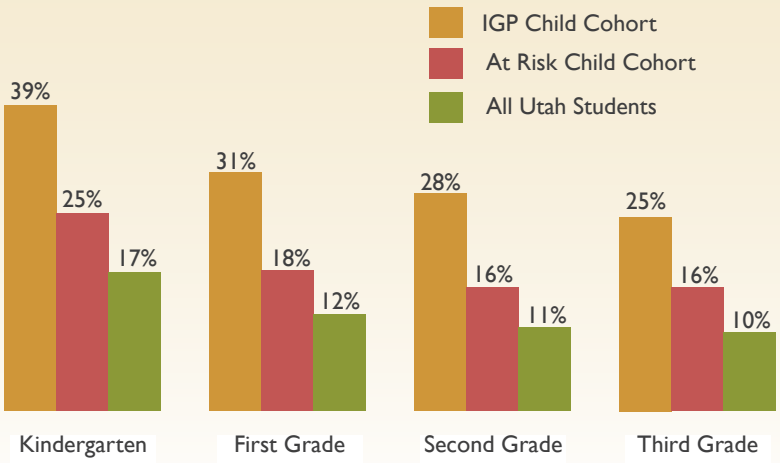
Chronic absence is defined as missing ten percent of the academic year, for any reason.[44] These absences include excused and unexcused absences. Among children in poverty, chronic absence rates are typically higher. Often, there are several factors contributing to increased absenteeism among low-income children including issues with housing, health, transportation, and other ongoing influences in a child's environment.[45] See Appendix B, Table B.3. Homelessness and School Attendance.

This research aligns with chronic absence rates among children experiencing intergenerational poverty which are significantly higher than both the Utah statewide rates and rates of children in the at-risk child cohort. In fact, between 2012 and 2013, chronic absence rates among the IGP child cohort increased across all early grades.

Chronic Absenteeism Increases for IGP Students
SY 2012–13



Chronic Absence in Lower Grades
SY 2013



39% of kindergarten students from the IGP child cohort were chronically absent, compared to only 17% of all Utah kindergarten students.

Third Grade Language Arts Proficiency

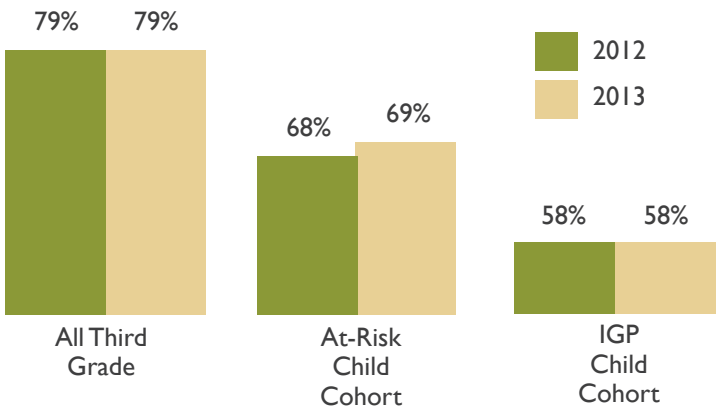
Since educational outcomes are so highly influenced by early childhood development, poverty and chronic absenteeism, it is not surprising that an academic achievement gap exists between high-income and low-income children.[46] Among children experiencing intergenerational poverty, the gap tends to be significant with respect to standardized test scores in academic subjects foundational to positive educational outcomes.

One of the primary indicators tracked by educators is third grade language arts proficiency, which includes reading.[47] The ability to read proficiently by third grade is the foundation for future academic outcomes. In the early years, children learn to read so that they read to learn in the later grades. Children entering fourth grade struggling with literacy are more likely to drop out of high school.[48]

Unfortunately, the gap in language arts proficiency scores by income levels of students is large, despite ongoing efforts of the Utah State Office of Education to implement a variety of interventions to ensure students at risk of poor academic outcomes are reading proficiently by third grade.[49]

Third Grade Language Arts Proficiency

CRT Scores, SY2012–2013

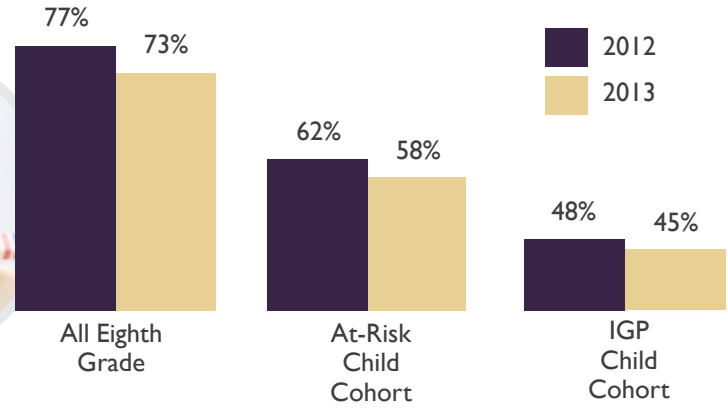


Eighth Grade Math Proficiency

A second critical academic indicator is eighth grade math proficiency. As noted above, proficiency in literacy is foundational for later academic success, including math proficiency. Research has shown that foundational math skills increase graduation rates, college completion rates and provide the skills necessary to be successful in an increasingly technology-based workplace.[50] Again, the gap among students based on economic status continues in the eighth grade math proficiency scores. Students from the IGP child cohort continue to struggle and perform far behind other Utah students.

Eighth Grade Language Arts Proficiency

CRT Scores, SY2012–2013



Advanced Placement Courses

Advanced Placement examinations offer the opportunity for high school students to earn college credit while still in high school. AP tests demonstrate academic achievement and help defray the costs associated with attending institutions of higher education. Unfortunately, for many IGP child cohort students enrolled in AP classes, nearly half are unable to receive college credit due to failing AP exams. It is important to note that there is a fee for taking an AP exam; however federal and state government provides assistance to low-income students to offset the cost of the exam.[51]

During the 2013 school year, of the 48,589 Utah students participating in AP exams, only eight percent were children at risk of remaining in poverty. Unfortunately, the AP pass rate among those students is substantially lower than the statewide AP pass rate.[52]

ACT Assessment as a College Readiness Assessment

Another important hurdle for participating in post-secondary education is the ACT assessment, an assessment that measures student college-readiness.

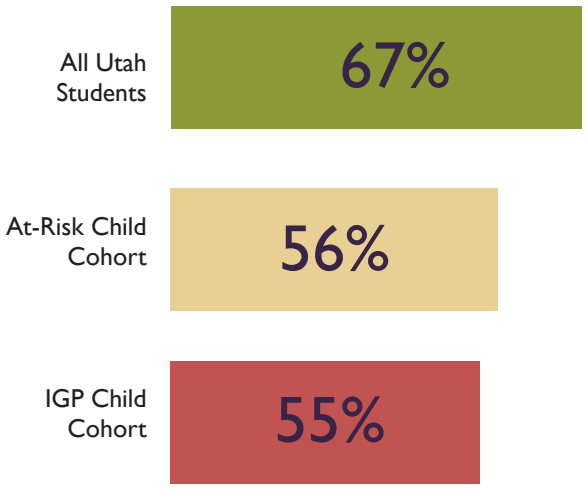
Although low ACT scores are not necessarily a barrier for entry into post-secondary institutions, many universities evaluate ACT scores for admission and establish a composite score of 18 as an important benchmark.

Statewide, 64 percent of students attained a composite score of 18 or higher. Among the students from the IGP child cohort, only 41 percent scored 18 or higher. Although a post-secondary degree is only one path to achieving economic self-reliance, it is an increasing necessity in the modern economy.

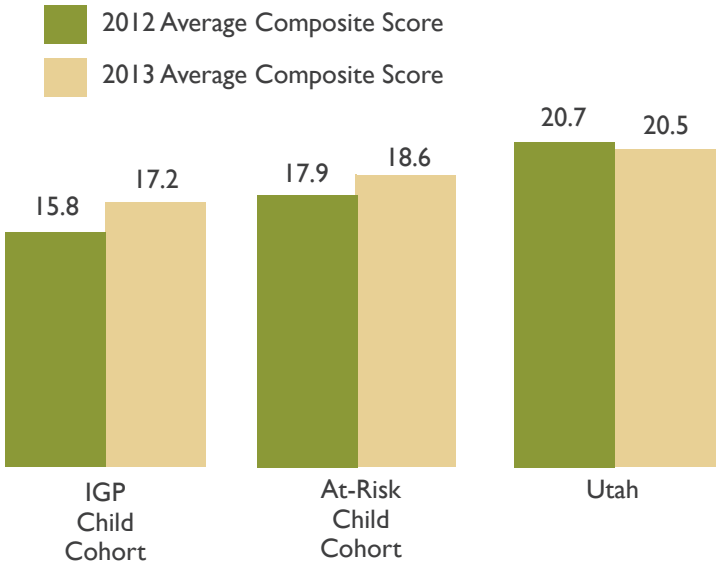
Graduation Rates

As Utah moves toward its goal of increasing the number of Utahns with a post-secondary education or trade certificate, graduation rates continue to rise. In 2013, 81 percent of Utah students graduated from high school. Although the increase is positive, only 72 percent of Utah's economically disadvantaged students graduated.[53] The graduation rate is even lower among the students at risk of remaining in poverty, though it too is showing signs of improvement.

AP Exam Pass Rate
SY 2013



IGP Student ACT Scores Improve
SY2012–2013

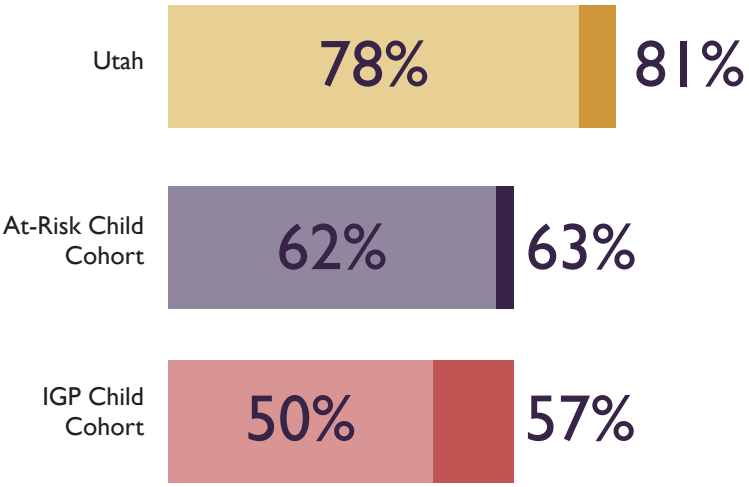


ACT Scores 18 or Above

64%	55%	41%
Utah	At-Risk Child Cohort	IGP Child Cohort

High School Graduation Rates Improve Slightly

SY 2012–2013



Juvenile Justice

When children receive quality education they are more likely to remain engaged in their education, which often reduces the likelihood they will engage in risky and criminal behavior. Education becomes a particularly important refuge for children experiencing barriers and challenges including poverty, abuse and neglect, and food insecurity. Unfortunately, these barriers and challenges often lead to interactions with Utah's juvenile justice system. The Utah Legislature recognized the relationship between economic hardship and criminal behavior in the Intergenerational Poverty Mitigation Act by including the Juvenile Court Administrator as a member of the Intergenerational Poverty Welfare Reform Commission.

Among the children at risk of remaining in poverty, as they become adults, 31 percent between the ages of 10 and 17 interacted with Utah's juvenile justice system at some time in their lives, not simply during 2015. This includes individuals with juvenile court cases and services through Utah's Division of Juvenile Justice Services. See Appendix C, Table C. 3. Description of Juvenile Justice Categories.

Involvement with Juvenile Justice Services	2013	2014
Youth Services	5%	6%
Delinquency Referral	19%	19%
Juvenile Court Diversion	11%	11%
Habitual Truancy	3%	3%
Delinquency Adjudication	9%	10%
Detention Alternatives	2%	2%
Secure Detention	5%	5%
Juvenile Probation	2%	3%

In an effort to maintain engagement in their education, children in the juvenile justice system are being held accountable for educational outcomes. In 2015, Utah Juvenile Court judges began receiving monthly academic reports from the schools educating children in the juvenile justice system. Among other actions, the reports allow judges to develop court orders containing academic outcomes.

The path to academic success begins in early childhood. Children entering kindergarten behind their peers start an academic career filled with challenge, from high chronic absence and low proficiency in foundational subjects, to high dropout rates. Until academic outcomes improve for Utah's at risk students, statewide graduation rates will continue to struggle.

FAMILY ECONOMIC STABILITY

The nation is experiencing growing income inequality and decreasing income mobility. In Utah, this gap is smaller than in other parts of the country. Fortunately, children growing up in poverty in Utah are more likely to move out of poverty as adults than children growing up in poverty in other neighborhoods in America.[54] Although there is greater economic mobility in Utah, only 11.5 percent of the children growing up in poverty in Salt Lake City will move up the economic ladder to the top income quintile.[55]

Although the focus of the Act is on Utah's children, these children are impacted directly by their parents. As a result, children experiencing intergenerational poverty are less likely to be one of the 11 percent of children in poverty able to escape the cycle where they remain in homes unable to meet their basic needs. When basic needs of children are not met, there is increased risk of academic struggles and engagement in risky behavior. Moreover, when families experience poverty, there is increased stress and deprivation for parents and children. Increasingly, this stress and deprivation is impacting brain development in the children.[56]

The following indicators are being tracked to evaluate the economic stability of the families in which children at risk of remaining in poverty are growing up:

Indicators of Family Economic Stability

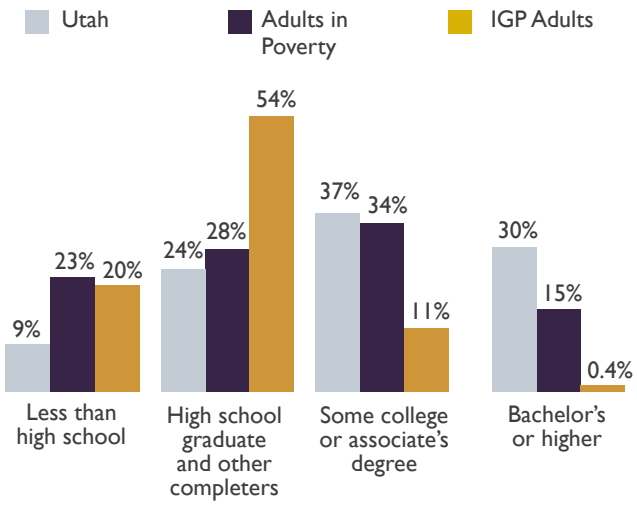
- Adult educational attainment
- Annual employment
- Wages
- Housing

Parental Educational Attainment

The level of education a parent achieves has significant bearing on several components in a child's life. A parent's level of education directly impacts attachment to the labor force, wages and lifetime earnings.[57] Additionally, there is a correlation between the level of parental education and the level of education their children attain.[58]

Nearly 74 percent of the intergenerational poverty adults lack an education beyond high school. This rate has remained consistent since 2012. Until efforts are made to increase enrollment in post-secondary training for members of the IGP adult cohort, levels of educational attainment are likely to remain largely unchanged. As a result, these individuals will continue to be subject to the peaks and valleys of the economy —s truggling to maintain employment in economic downturns and finding temporary, low-wage employment during periods of economic growth.

Lower Educational Attainment for IGP Adults



Employment

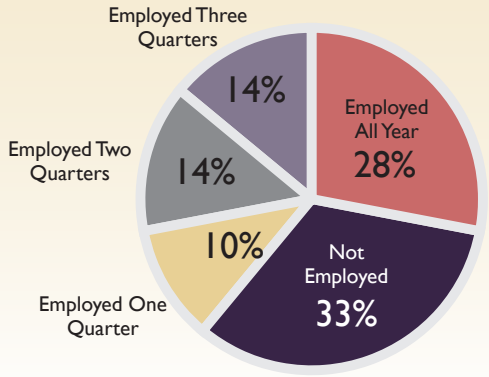
In 2014, the majority of both the IGP adult cohort and the non-IGP adult cohort worked. The percent of adults receiving wages each quarter in 2014 increased three percent from 2013, from 29 percent to 32 percent.

Among the IGP young adult cohort, 28 percent worked all four quarters in 2014.

There were some minor differences in the rate of employment in 2014 between men and women. Women were more likely to be employed throughout the entire year. This is relevant given that 61 percent of the children experiencing intergenerational poverty are living in single-parent households, with their mothers.

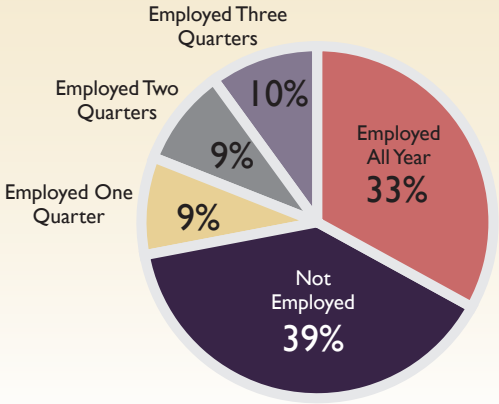
> The fact that many Americans continue to suffer years after the technical end of the Great Recession should offend any sense of plain justice.
>
> –Arthur C. Brooks, American Enterprise Institute

67% of IGP Young Adults Worked in 2014

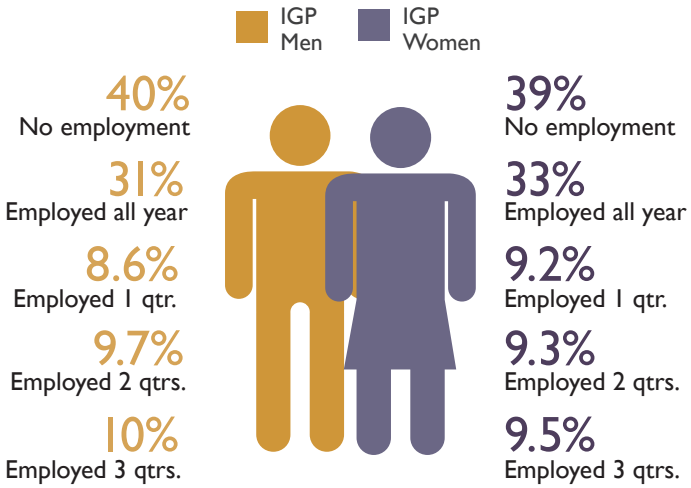


61% of IGP Adults Worked in 2014

Adults in IGP Adult Cohort on DWS Case

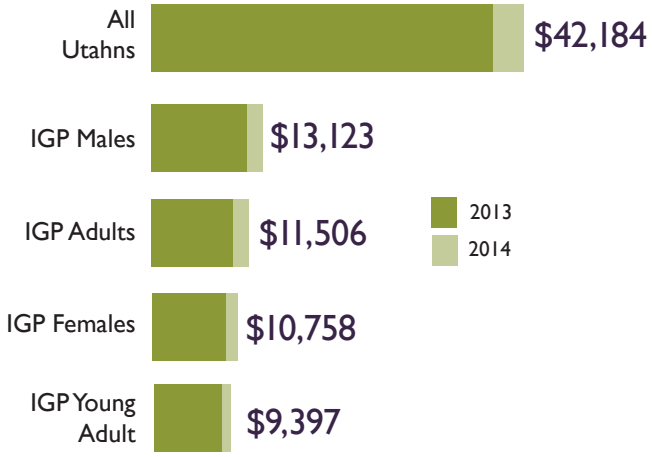


2014 IGP Adult Cohort Employment



Wages Increase but Remain Low

Average annual wages 2014



Annual Wages

As noted earlier, Utah's economy continued to grow in 2014. As a result of this growth, the average annual wage increased three percent. Similarly, the average annual wages of the IGP adult cohort increased; however, the average annual wage of the IGP adult cohort was a mere $11,506 and even lower among the women in the IGP adult cohort. This wage is inadequate to rent the average two-bedroom apartment in Utah, which requires an average annual income of $32,510.[59]

Housing

An important factor in healthy child development is stable housing. When children live in stable housing they develop social relationships with peers, cultivate a sense of community and most importantly, experience stability in their educational environment. In fact, children experiencing homelessness experience several challenges to school attendance. See Appendix B, Table B.3. Homelessness and School Attendance.

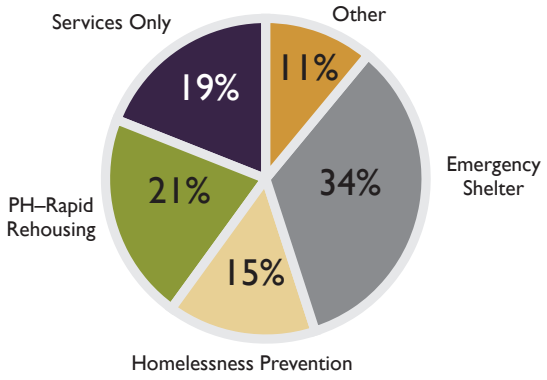
In this year's report, two indicators related to housing stability are analyzed: (1) interactions with the homeless system; and (2) housing mobility.

Utah's Homeless Management Information System (HMIS) collects client-level information on the characteristics and service needs of people experiencing homelessness.[60] Among families experiencing intergenerational poverty, there is indication that housing stability is a major issue. In past reports, self-reported data was included around the issue of homelessness. For the first time, data is available to determine whether families experiencing intergenerational poverty accessed homeless services; types of services accessed; and frequency of engagement with homeless services.

Among the intergenerational poverty cohorts, 11 percent received services through agencies included in HMIS. Among the children experiencing intergenerational poverty, nine percent have been served through HMIS agencies at some point in their lives and they have an average number of enrollments for these services of 2.24.

For each of these individuals, the services received through homeless service providers vary and range from emergency shelter to homeless prevention. Among the nine percent of IGP child cohort members utilizing homeless services, one-third received emergency shelter services.

Homeless Supports for IGP Child Cohort



Average Number of HMIS Enrollments

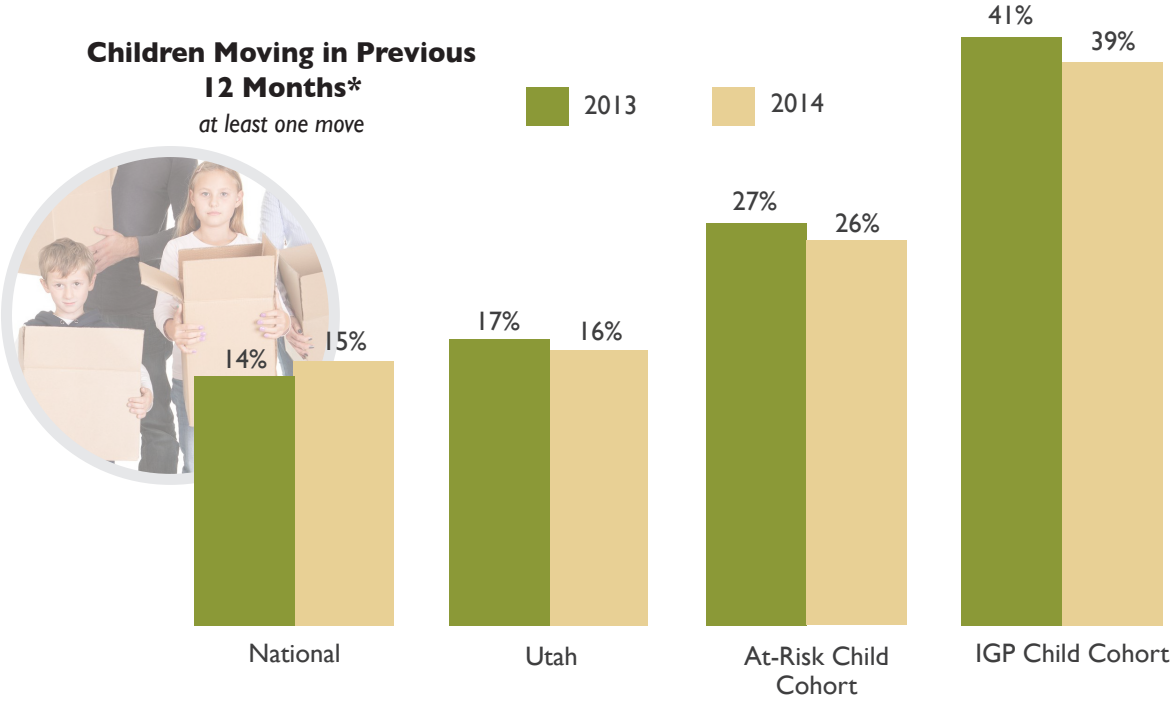
2.24	3.21	2.10	2.70
IGP Child Cohort	IGP Adult Cohort	IGP 18-21 year old	**Total IGP Average Enrollments**

Further data is needed to determine the effectiveness of these homeless support services and any additional housing supports families are receiving such as housing vouchers.

Although a move to a new home may be beneficial for a child and her family, frequent moves cause disruption in a child's life and frequently lead to poor academic performance and high school dropout rates.[61] Housing mobility is an indicator for both family economic stability and education and as a result, is frequently cited as a risk factor of child well-being.[62]

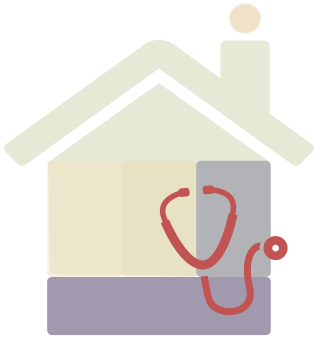
Between 2013 and 2014, mobility among children in the IGP child cohort decreased slightly.

Although intergenerational poverty in Utah appears to be the result of several challenges, family economics are an important component in meeting the basic needs of children to support their emotional, social and cognitive development. Unfortunately, families receiving public assistance across generations are struggling to maintain sufficient connection to the labor force allowing them to consistently meet these basic needs of their children. Parents exhibit a strong desire to work but low educational attainment and low job skills lead to only sporadic attachment to Utah's labor force even in Utah's strong economic climate.



The Utah and National figures are based on moves within 12 months of data collection. The IGP and At-Risk child cohorts are moves in CY 2014.

HEALTH



Access to medical care for both physical and mental health treatment increases the odds that parents can maintain employment, children consistently attend school, and parents possess the capacity to care for their children. Unfortunately, children growing up in poverty and having adverse childhood experiences during their childhood have poorer health outcomes into adulthood.[63]

In Utah, adults participating in the Family Employment Program have experienced significantly higher rates of adverse childhood experiences (ACES). These higher rates have been correlated to significantly higher rates of physical and mental health issues, lower levels of education and more frequent experiences of housing struggles and intimate partner violence.[64] Access and utilization of health care can potentially help reduce the long-term ramifications of ACES, when addressed early.

The indicators tracked in the domain of Health include the following:

Indicators of Health

- Access to health care including physical, behavioral and dental health
- Rates of abuse and neglect
- Participation in nutrition programs

94% of the IGP child cohort and 93% of the at-risk child cohort members receive public health insurance coverage.

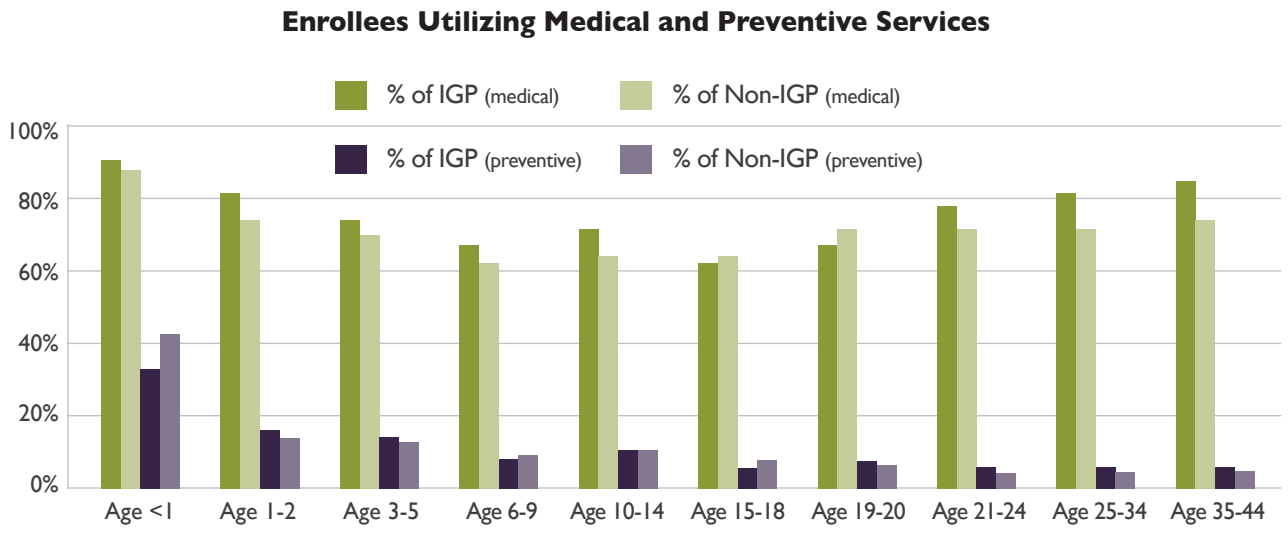
Access to Health Care

Although public health insurance provides medical coverage to an overwhelming majority of children experiencing intergenerational poverty through either Medicaid or CHIP, adults caring for these children are not covered at the same levels. However since 2013, an increasing percentage of IGP adult cohort members receive Medicaid. See Section 2, page 16.

In 2014, 76 percent of all intergenerational poverty recipients of public health insurance utilized medical services at least once in the year. In fact, across most age groups, a greater share of the intergenerational poverty individuals utilized services than those not experiencing intergenerational poverty.

Public Health Insurance
2013 and 2014 enrollment

94%	93%	66%	73%
IGP Child Cohort 2013 and 2014	At-Risk Child Cohort 2013 and 2014	IGP Adult Cohort 2013	IGP Adult Cohort 2014

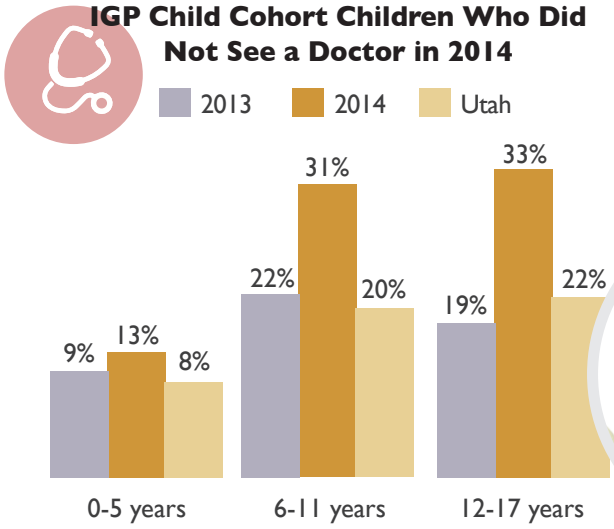


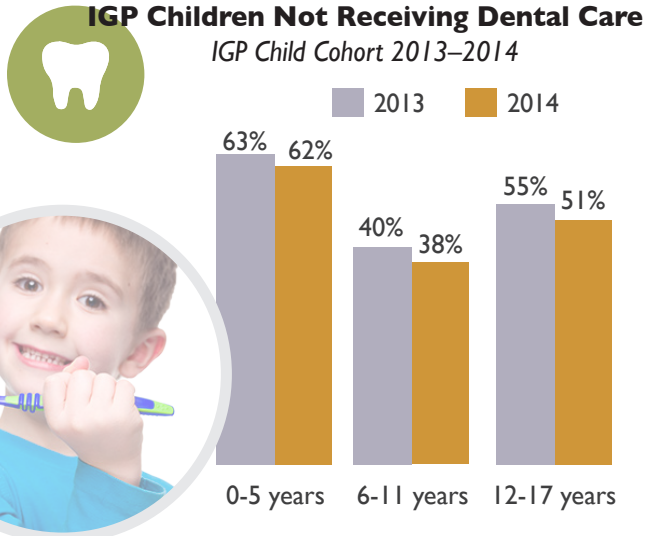
Unfortunately, there was a large increase in the number of children who did not see a doctor in 2014. It is difficult to determine whether this is the result of fewer children seeking medical care when needed or due to recent policy changes related to implementation of the ACA. In the past, families were enrolled in Medicaid when they needed to see a doctor for a medical issue. Today, as enrollment in Medicaid increases due to the implementation of the ACA, families enroll in Medicaid in advance of medical conditions. This may be one possible explanation for the increase in the number of children enrolled in public health insurance who did not see a physician in 2014.

A key component of health care utilization involves preventive medical visits. When individuals receive medical care as a preventive measure, they are more likely to avoid serious medical conditions requiring costlier care, increased absences from work and school, and an inability to care for other family members. In 2014, preventive care across age groups was quite low. Only 31 percent of the enrollees experiencing intergenerational poverty utilized preventive care services and the percent of visits decline with increasing age.

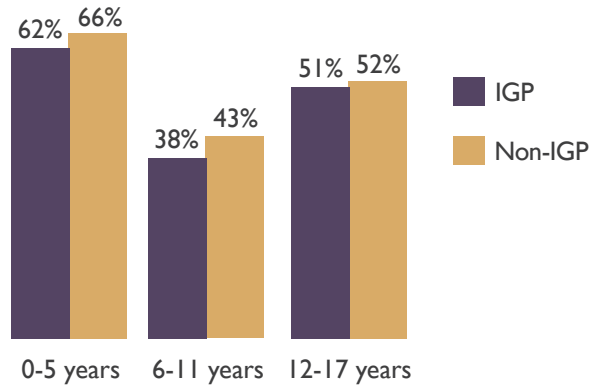
Access to Dental Care

Poor oral health care among children can lead to poor academic performance and poor overall health.[65] At this time, Utah does not provide dental care for most adults receiving Medicaid. In 2014, 32 percent of the intergenerational poverty enrollees and 33 percent





Children Who Did Not See a Dentist in 2014



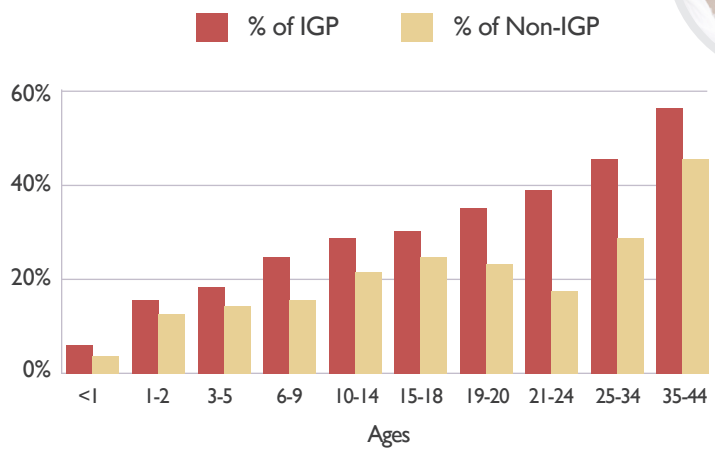
of the non-IGP enrollees had at least one dental preventive care visit.

Access to Behavioral Health Care

The likelihood that children living in poverty will experience trauma, stress and anxiety increases the need for access to behavioral health services.[66] These mental health issues have lasting implications into adulthood.

Among the intergenerational poverty cohorts receiving public health insurance, only 27 percent received mental health services in 2014, with the percentage increasing with the ages of the individuals. For example, 55 percent of the IGP adult cohort between the ages of 35 and 44 received mental health services in 2014, compared to only 29 percent of children between the ages of 15 and 18 years old.

Enrollees Utilizing Mental Health Services



Frequently, mental health challenges and substance abuse co-occur in individuals. In fact, drug addiction is recognized as a mental illness.[67] In 2014, eight percent of the adults in the IGP adult cohort received treatment for substance abuse disorders.

Fortunately, it appears more children experiencing intergenerational poverty received mental health care in 2014. This is a welcome improvement for a population of children subject to challenging home situations.

IGP Individuals Receiving Mental Health Services

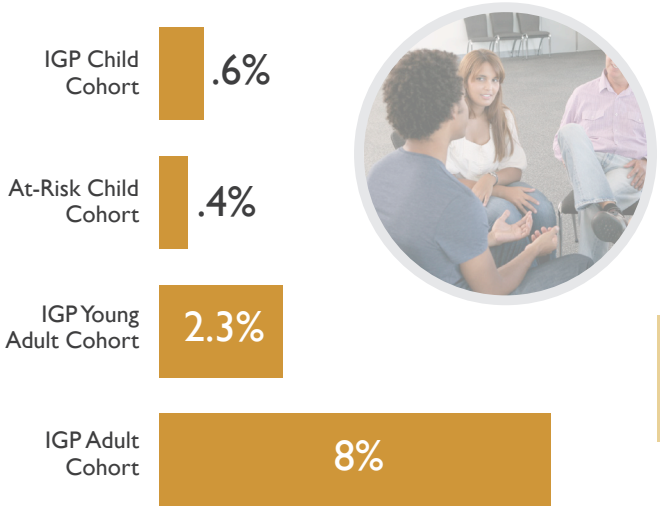
19%
IGP Child Cohort

15%
At-Risk Child Cohort

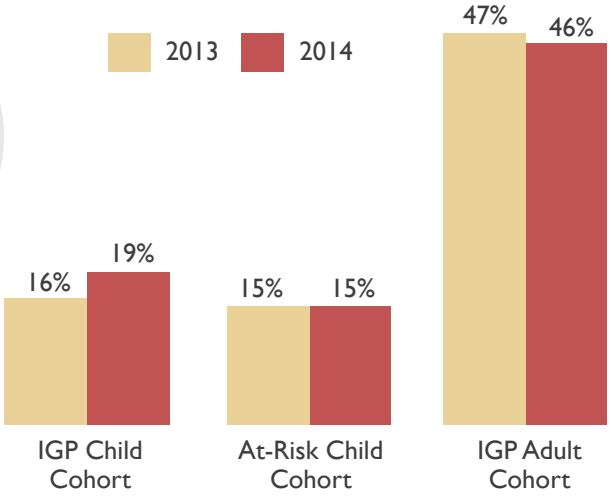
34%
IGP Young Adult Cohort

46%
Adult Cohort

Substance Abuse Disorder Treatment
DSAMH 2014



Received Mental Health Care
Medicaid recipients 2013–2014

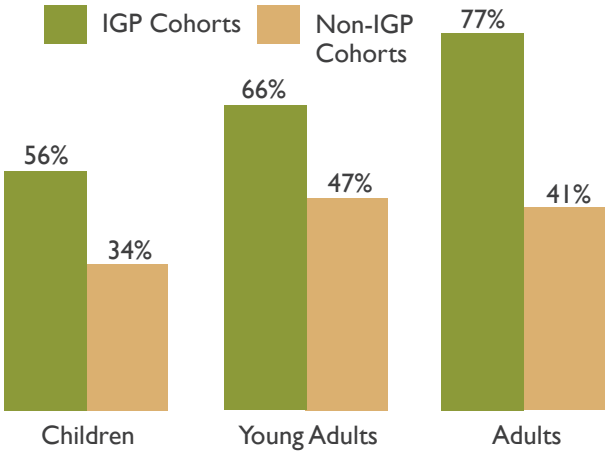


Rates of Childhood Abuse and Neglect

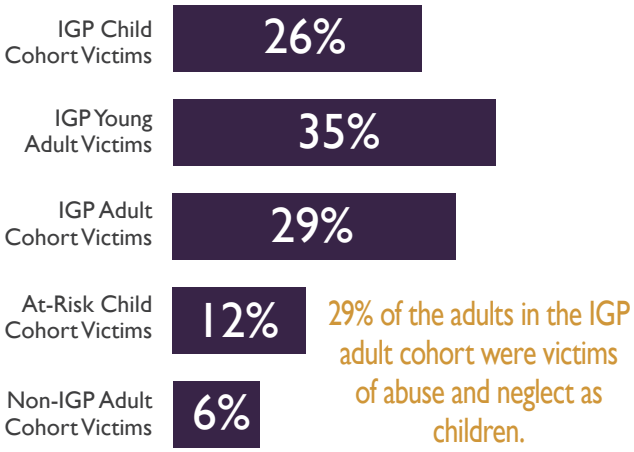
The maltreatment of children impacts child well-being in profound ways, often leading to psychological and emotional problems. When it occurs to a very young child, abuse and neglect can impact brain development, the developing nervous system and the immune system.[68] This early damage continues as these children become adults, often leading to alcoholism, depression, drug abuse, high-risk behaviors and in some cases, deviant criminal behavior. These conditions often make it difficult for adults to complete formal education, maintain employment or engage in healthy parenting when they have children.[69]

Although not all involvement with Utah's Division of Child and Family Services (DCFS) involves substantiated cases of abuse and neglect, the intergenerational poverty cohorts have significant interactions with DCFS.

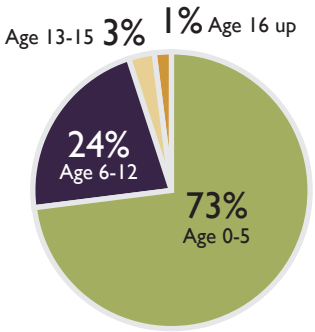
Greater Involvement with DCFS Among IGP
Percent of individuals matched in DCFS database



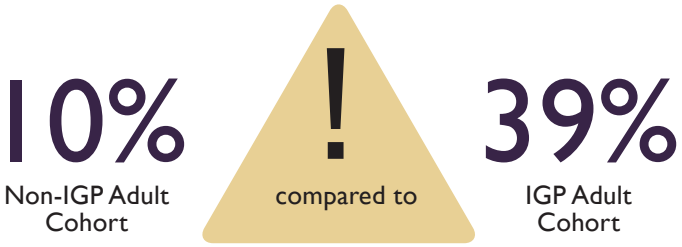
Victims of Abuse and Neglect



Most Victims are Five or Younger
IGP Child Cohort



Perpetrators Who Were Child Victims



Among those who have interacted with DCFS, intergenerational poverty cohorts have been victims of substantiated cases of abuse and neglect in much higher percentages than the non-IGP cohorts and the statewide population. This once again demonstrates that although lack of income is a significant issue for families experiencing intergenerational poverty, these families face additional challenges apart from income, all of which make it difficult for them to emerge from the cycle of poverty.

The rates of abuse and neglect vary by age of the victim.

Unfortunately, the long-term impact that childhood abuse and neglect has on an individual leads to an increase of risky behaviors and continuation of the cycle of abuse and neglect by increasing the likelihood that the victim may later become the perpetrator.[70]

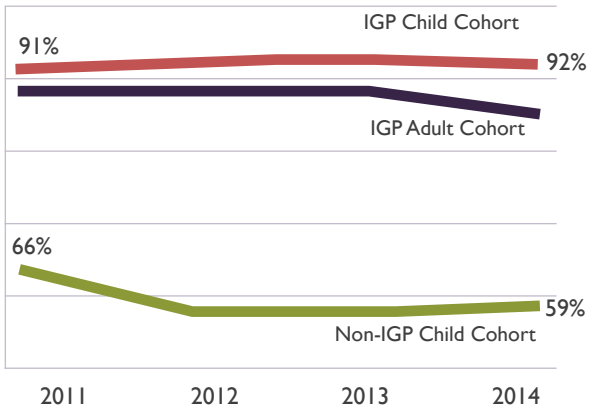
Participation in Nutrition Programs

In Utah, 20 percent of children experienced food insecurity in 2013.[71] Food insecurity occurs when there is insufficient nutritious food for children to lead active and healthy lives. Children experiencing food insecurity are ill more frequently; struggle academically; less likely to graduate from high school and go onto college; and less likely to earn enough income to feed their families when they are adults.[72] Although intergenerational poverty families receiving Food Stamps has decreased since 2011, a large share of the IGP child cohort continue to live in families receiving Food Stamps.

In addition to Food Stamps, low-income children are eligible for free or reduced lunch through their schools. In 2013, nearly 4 in 10 Utah students participated in the School Nutrition Program, a slight increase from 2012. The rates among children in the IGP child cohort and at-risk child cohort are significantly higher.

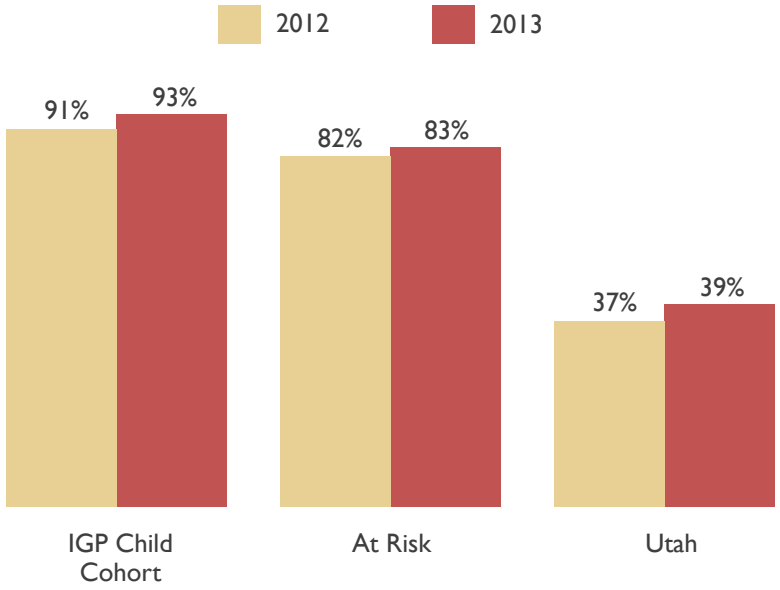
> In 2013, one in five Utah children experienced food insecurity.

Food Stamps Cover IGP Families
SNAP 2011-2014



Although children at risk of remaining in poverty participate in programs to ensure their nutritional needs may be met in school, there is little data available to determine whether these same children are actually consuming the food provided. There are indications that low-income children are not arriving at school sufficiently early to ensure they eat school breakfast.[73] There may be several explanations including timely arrival at school and stigmas associated with receiving school breakfast and lunch. As a result of these challenges, a small number of Utah schools are providing students with breakfast in the classrooms at the start of the school day. This is in contrast to the traditional school breakfast model requiring students to arrive 30 minutes or more early to school.

Participation in the School Breakfast & Lunch Program
SY 2012-2013



CONCLUSION

The Utah economy continues to improve. This improvement has led to temporary improvement for the families in Utah experiencing intergenerational poverty. However, the data contained in this Fourth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance continues to reveal the challenges and barriers confronting children in jeopardy of remaining in poverty as adults. Until these barriers and challenges are removed for both the children and their parents, these economic gains are temporary.

The economic conditions along with the complex issues of intergenerational poverty remain largely unchanged in 2014. However, in 2015, the Intergenerational Welfare Reform Commission and a variety of community stakeholders engaged in significant efforts to work toward the goals adopted by the Commission in Utah's Plan for a Stronger Future. The combined and coordinated efforts of government, religious organizations, academic institutions and communities to support the overall well-being of children at risk of remaining in poverty, will work to address issues beyond economics.

The children at risk of remaining in poverty are provided limited opportunity for success in childhood that would lead to stability into adulthood. Beginning as early as infancy, children have limited access to high-quality child care and education jeopardizing the critical foundation necessary to enter kindergarten ready to learn. Additionally, these young children are the victims of a range of traumatic experiences, including abuse and neglect, impacting cognitive, social and emotional development. As a result, children experience poor academic outcomes, which in turn, often leads to lower high school graduation rates.

Sadly, the cycle of poverty is evident in the lives of their parents who themselves have low educational attainment levels. The low educational attainment of the individuals included in the IGP adult cohort correlates with inconsistent employment and low wages, despite strong indication that these adults would like to maintain employment.

Despite these challenges, Utah is well positioned to address these issues given its strong economy and population size. The data indicates that there are significant areas where improvements must be made in order to ensure that these children are growing up in stable families and communities able to provide the opportunities to successfully exit poverty and welfare dependency, and create a virtuous cycle of economic success. The data also reveals areas where progress is already being made and resources are being coordinated, such as in health care access and nutritional access.

The Intergenerational Welfare Reform Commission Annual Report, which follows, addresses these challenges and offers evidence-based strategies to ensure efforts and resources continue to be coordinated in areas with the highest need.

APPENDIX A.1

INTERGENERATIONAL POVERTY WELFARE REFORM COMMISSION MEMBERS

NAME	TITLE
Jon Pierpont, Chair	Executive Director, Department of Workforce Services
Joe Miner	Executive Director, Department of Health
Ann Silverberg-Williamson	Executive Director, Department of Human Services
Brad Smith	State Superintendent of Public Instruction, Utah State Office of Education
Dawn Marie Rubio	Juvenile Court Administrator
David Burton	Intergenerational Poverty Advisory Committee Chair

APPENDIX A.2

INTERGENERATIONAL POVERTY ADVISORY COMMITTEE MEMBERS

REPRESENTATIVE	NAME	ORGANIZATION
Committee Chair	Bishop H. David Burton	
Advocacy Group that Focuses on Childhood Poverty	Lincoln Nehring	Voices for Utah Children
Advocacy Group that Focuses on Education	Bill Crim	United Way of Salt Lake
Academic Expert in Childhood Poverty or Education		
Faith-based Organization that Addresses Childhood Poverty or Education	Rabbi Ilana Schwartzman	Congregation Kol Ami
Local Government Representative that Addresses Childhood Poverty or Education	Joe Piccolo	Mayor of Price, Utah
Child Mental Health	Dr. Doug Goldsmith	The Children's Center
Child Health	Dr. Renee E. Olesen	Intermountain Kearns Clinic
Additional Member Option	William Duncan	Sutherland Institute Center for Family and Society
Additional Member Option	Judge Paul Lyman	Juvenile Court Judge
Additional Member	Dawn Davies	Utah PTA

APPENDIX B

ADDITIONAL DATA ON THE IGP AND PA, NON-IGP ADULT COHORTS

Table B.1. IGP Child and IGP Adult Cohorts by County—Highest to Lowest

	IGP Kids (3)	Share of IGP Kids	Child Population (4)	Share of Child Population	IGP Kid Concentration Index	IGP Adults (1)	Share of IGP Adults	Adult Population (2)	Share of Adult Population	IGP Adult Concentration Index
Salt Lake	17,409	36.2%	308,137	34.4%	1.05	11,848	38.3%	412,256	38.9%	0.98
Utah	6,249	13.0%	193,132	21.5%	0.60	3,855	12.5%	216,418	20.4%	0.61
Weber	6,127	12.7%	69,901	7.8%	1.63	4,113	13.3%	85,068	8.0%	1.65
Davis	3,815	7.9%	108,247	12.1%	0.66	2,429	7.8%	112,289	10.6%	0.74
Washington	3,029	6.3%	42,592	4.8%	1.33	1,581	5.1%	43,790	4.1%	1.24
Cache	1,637	3.4%	36,460	4.1%	0.84	1,000	3.2%	46,687	4.4%	0.73
Tooele	1,278	2.7%	21,219	2.4%	1.12	782	2.5%	20,703	2.0%	1.29
San Juan	1,260	2.6%	4,833	0.5%	4.86	725	2.3%	4,435	0.4%	5.59
Iron	1,219	2.5%	13,597	1.5%	1.67	761	2.5%	17,041	1.6%	1.53
Box Elder	985	2.0%	16,703	1.9%	1.10	608	2.0%	15,723	1.5%	1.32
Carbon	840	1.7%	5,683	0.6%	2.75	631	2.0%	6,541	0.6%	3.30
Uintah	760	1.6%	11,918	1.3%	1.19	453	1.5%	12,546	1.2%	1.24
Sevier	687	1.4%	6,434	0.7%	1.99	460	1.5%	6,145	0.6%	2.56
Sanpete	676	1.4%	7,868	0.9%	1.60	414	1.3%	9,693	0.9%	1.46
Duchesne	508	1.1%	6,956	0.8%	1.36	302	1.0%	6,724	0.6%	1.54
Millard	278	0.6%	3,970	0.4%	1.30	160	0.5%	3,391	0.3%	1.61
Juab	253	0.5%	3,629	0.4%	1.30	139	0.4%	3,157	0.3%	1.51
Grand	250	0.5%	2,114	0.2%	2.20	164	0.5%	2,895	0.3%	1.94
Emery	236	0.5%	3,379	0.4%	1.30	146	0.5%	3,035	0.3%	1.65
Wasatch	152	0.3%	8,821	1.0%	0.32	93	0.3%	8,573	0.8%	0.37
Beaver	107	0.2%	2,099	0.2%	0.95	68	0.2%	1,865	0.2%	1.25
Kane	104	0.2%	1,697	0.2%	1.14	58	0.2%	1,830	0.2%	1.08
Summit	84	0.2%	10,220	1.1%	0.15	54	0.2%	12,231	1.2%	0.15
Garfield	56	0.1%	1,300	0.1%	0.80	44	0.1%	1,347	0.1%	1.12
Morgan	34	0.1%	3,545	0.4%	0.18	22	0.1%	2,879	0.3%	0.26
Piute	32	0.1%	406	0.0%	1.47	20	0.1%	318	0.0%	2.15
Wayne	26	0.1%	764	0.1%	0.63	19	0.1%	683	0.1%	0.95
Rich	22	0.0%	699	0.1%	0.59	9	0.0%	583	0.1%	0.53
Daggett	2	0.0%	266	0.0%	0.14	3	0.0%	313	0.0%	0.33

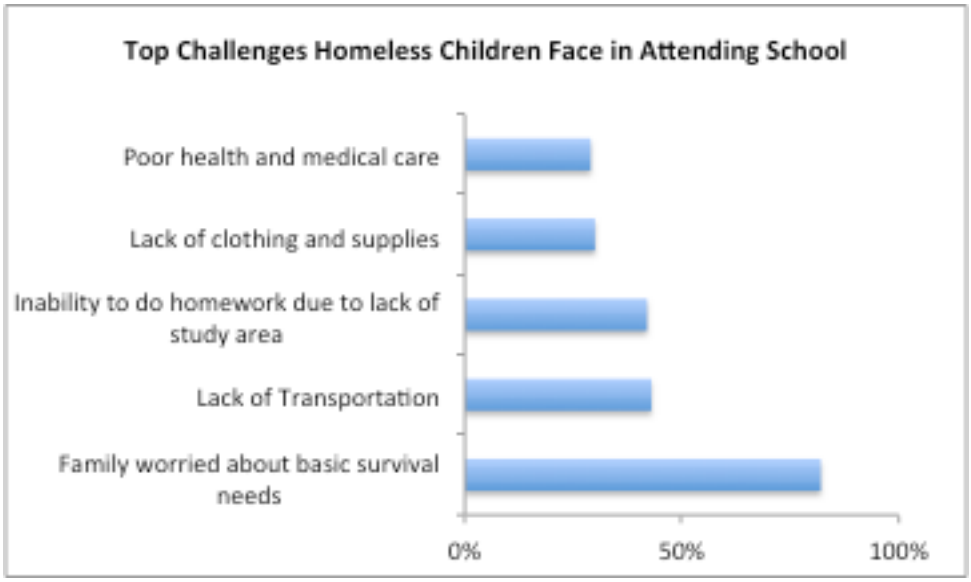
Table B.2. High IGP Students by School

District or Charter	School	DATA			PROGRAMS			
		% IGP Enrollment	%PA Enrollment	Chronic Absence	Pre-K	Extended Kindergarten	Afterschool	MHEIC
SAN JUAN	TSE'BII'NIDZISGAI SCHOOL	38.2%	31.3%	47%	X		yes	
SAN JUAN	BLUFF SCHOOL	36.5%	22.1%	38%	X		X	
CARBON	BRUIN POINT SCHOOL	32.3%	31.5%	24%	X			X
SAN JUAN	MONTEZUMA CREEK SCHOOL	30.3%	30.3%	39%	X			
SAN JUAN	BLANDING SCHOOL	24.8%	23.7%	18%	X			
OGDEN CITY	DEE SCHOOL	23.0%	47.0%	19%		x	21st , IGP,X	
SAN JUAN	MONUMENT VALLEY HIGH	21.2%	38.1%	21%	N/A	N/A	X	
OGDEN CITY	BONNEVILLE SCHOOL	21.1%	33.2%	19%		x		
SALT LAKE	WASHINGTON SCHOOL	19.5%	43.4%	33%	X	x	X	X
OGDEN CITY	ODYSSEY SCHOOL	18.4%	42.2%	28%		x	21st,X	X
OGDEN CITY	HILLCREST SCHOOL	17.8%	31.9%	20%		x		
OGDEN CITY	JAMES MADISON SCHOOL	17.8%	51.0%	26%		x	21st, IGP	X
OGDEN CITY	GRAMERCY SCHOOL	17.5%	41.0%	23%		x	21st, IGP	X
GRANITE	MAGNA SCHOOL	17.4%	31.6%				21st	
DAVIS	WHITESIDES SCHOOL	17.0%	34.7%	15%	X	x	X	
SAN JUAN	WHITEHORSE HIGH	16.3%	34.6%	26%	N/A	N/A	X	
WEBER	CLUB HEIGHTS SCHOOL	16.2%	39.4%	16%		x		X
OGDEN CITY	HERITAGE SCHOOL	16.0%	32.1%	24%		x	21st	X
CARBON	SALLY MAURO SCHOOL	16.0%	24.9%	15%				X
DAVIS	DOXEY SCHOOL	15.6%	34.4%	8%	X		X	
OGDEN CITY	POLK SCHOOL	15.4%	33.7%	20%		x	X	
GRANITE	JAMES E MOSS SCHOOL	15.0%	41.5%	16%	X	x		
OGDEN CITY	THOMAS O SMITH SCHOOL	14.7%	40.2%	24%		x	IGP,X	X
OGDEN CITY	HORACE MANN SCHOOL	14.7%	30.7%	20%		x		
SEVIER	SALINA SCHOOL	14.4%	21.0%	10%		c		
CANYONS	EAST MIDVALE SCHOOL	14.3%	50.5%	11%		x	21st,X	X
DAVIS	VAE VIEW SCHOOL	14.3%	33.2%	8%	X		X	X
OGDEN CITY	GEORGE WASHINGTON HIGH	14.2%	50.0%	73%	N/A	N/A	21st, IGP	
GRANITE	SOUTH KEARNS SCHOOL	14.1%	28.0%	7%	X	x	X	X
GRANITE	OQUIRRH HILLS SCHOOL	14.1%	33.3%	8%	X	x	21st.X	
SAN JUAN	ALBERT R LYMAN MIDDLE	13.9%	26.9%	9%				
GRANITE	REDWOOD SCHOOL	13.6%	42.4%	19%	X	x	21st,X	
SALT LAKE	LINCOLN SCHOOL	13.6%	41.9%	17%	X	x	X	X
CARBON	WELLINGTON SCHOOL	13.5%	19.7%	10%				
GRANITE	ACADEMY PARK SCHOOL	13.4%	35.9%	12%		x	21st, IGP,X	
SEVIER	ASHMAN SCHOOL	13.1%	27.1%	16%		c		

District or Charter	School	DATA			PROGRAMS			
		% IGP Enrollment	%PA Enrollment	Chronic Absence	Pre-K	Extended Kindergarten	Afterschool	MHEIC
CANYONS	SANDY SCHOOL	13.0%	37.5%	15%	X	x	21st,X	X
PROVO	FRANKLIN SCHOOL	13.0%	39.7%	14%			21st, IGP,X	X
CANYONS	COPPERVIEW SCHOOL	13.0%	43.6%	12%		x	21st, X	X
OGDEN CITY	TAYLOR CANYON SCHOOL	12.9%	27.3%	17%		x		
GRANITE	ROLLING MEADOWS SCHOOL	12.9%	31.1%	15%	X	x	21st	
SALT LAKE	RILEY SCHOOL	12.9%	39.2%	14%	X	x	X	X
WASHINGTON	CORAL CLIFFS SCHOOL	12.8%	40.4%	15%		x	X	
DAVIS	CRESTVIEW SCHOOL	12.8%	33.4%	12%	X		X	
OGDEN CITY	MOUND FORT JUNIOR HIGH	12.7%	37.3%	20%	N/A	N/A	IGP,X	
GRANITE	ROOSEVELT SCHOOL	12.7%	40.7%	20%	X	x	21st,X	
SALT LAKE	M LYNN BENNION SCHOOL	12.6%	42.4%	25%	X	x	21st	
NORTH SANPETE	FAIRVIEW SCHOOL	12.5%	18.8%	14%				
SALT LAKE	WHITTIER SCHOOL	12.5%	25.6%	12%	X	x	X	X
GRANITE	DAVID GOURLEY SCHOOL	12.4%	35.0%	16%	X	x		
GRANITE	STANSBURY SCHOOL	12.3%	31.5%	11%	X	x	21st	
OGDEN CITY	WASATCH SCHOOL	12.3%	28.0%	18%		x		
GRAND	HELEN M. KNIGHT SCHOOL	12.1%	23.6%	14%			21st, IGP,X	X
DAVIS	WASATCH SCHOOL	12.1%	30.4%	13%	X		X	
TOOELE	HARRIS SCHOOL	12.0%	32.9%	23%		x		
OGDEN CITY	LINCOLN SCHOOL	12.0%	30.1%	15%		x	21ST, X	X
PINNACLE CANYON ACADEMY	PINNACLE CANYON ACADEMY	12.0%	37.3%	41%			X	X
JORDAN	HEARTLAND SCHOOL	11.9%	27.4%	16%		x	yes	
GRANITE	LINCOLN SCHOOL	11.9%	53.3%	13%	X	x	21st,X	
DAVIS	SOUTH CLEARFIELD SCHOOL	11.9%	41.0%	17%	X	x	X	X
CARBON	CREEKVIEW SCHOOL	11.8%	17.0%	18%				
GRANITE	PLYMOUTH SCHOOL	11.7%	34.8%	16%		x	21st	
WEBER	ROY SCHOOL	11.6%	23.8%	18%		x	(cbo)	
GRANITE	WOODROW WILSON SCHOOL	11.5%	49.2%	13%	X	x	21st,X	
GRANITE	LAKE RIDGE SCHOOL	11.5%	37.4%	12%			21st	
WASHINGTON	CORAL CANYON SCHOOL	11.4%	39.5%	15%		x		
GRANITE	WESTERN HILLS SCHOOL	11.4%	40.4%	8%	X	x		
SALT LAKE	FRANKLIN SCHOOL	11.4%	34.1%	7%	X		yes	X
SALT LAKE	JACKSON SCHOOL	11.4%	34.6%	11%	X	x	x	X
WASHINGTON	SUNSET SCHOOL	11.3%	34.0%	11%		x	X	
GRANITE	CARL SANDBURG SCHOOL	11.3%	29.6%	11%			21st	
WEBER	WASHINGTON TERRACE SCHOOL	11.3%	31.5%	13%		x		X

District or Charter	School	DATA			PROGRAMS			
		% IGP Enrollment	%PA Enrollment	Chronic Absence	Pre-K	Extended Kindergarten	Afterschool	MHEIC
LOGAN CITY	BRIDGER SCHOOL	11.1%	39.1%	13%			21st,X	
GRANITE	WEST KEARNS SCHOOL	11.1%	33.7%	15%		x		
UINTAH	EAGLE VIEW SCHOOL	11.1%	24.2%	26%		x	21st	
DAVIS	FREMONT SCHOOL	11.0%	31.8%	14%		x	X	
SALT LAKE	EDISON SCHOOL	11.0%	32.4%	15%	X	x	x	X
DAVIS	ANTELOPE SCHOOL	10.9%	24.0%	14%	X	x	21st, X	
EMERY	CASTLE DALE SCHOOL	10.9%	16.8%	14%				
IRON	CEDAR NORTH SCHOOL	10.8%	30.4%	14%		x	X	X
DAVIS	SUNSET SCHOOL	10.8%	29.9%	13%			X	
SEVIER	MONROE SCHOOL	10.7%	25.5%	18%		x		
UINTAH	ASHLEY SCHOOL	10.6%	22.4%	20%		x	yes	
GRANITE	PIONEER SCHOOL	10.5%	33.9%	13%		x	21st	
GRANITE	JACKLING SCHOOL	10.4%	32.1%	12%		x	21st, IGP,X	
EMERY	BOOK CLIFF SCHOOL	10.4%	22.4%	9%	X		X (CBO)	
GRANITE	JOHN C FREMONT SCHOOL	10.4%	34.6%	9%		x	X	
TOOELE	NORTHLAKE SCHOOL	10.2%	29.4%	17%		x		
JORDAN	MAJESTIC SCHOOL	10.2%	35.3%	11%		x		
GATEWAY PREPARATORY ACADEMY	GATEWAY PREPARATORY ACADEMY	10.1%	32.6%	24%			IGP,X	
DUCHESNE	MYTON SCHOOL	10.1%	21.9%	17%				X
OGDEN CITY	HIGHLAND JUNIOR HIGH	10.1%	32.9%	16%	N/A	N/A	21st	
ALPINE	GREENWOOD SCHOOL	10.0%	32.4%	14%	X	x		X
NORTH SANPETE	MT PLEASANT SCHOOL	9.9%	20.8%	7%	X	x		
BOX ELDER	LAKE VIEW SCHOOL	9.9%	25.9%	15%		x		
IRON	CEDAR EAST SCHOOL	9.9%	42.6%	18%		x	X	X
ALPINE	GENEVA SCHOOL	9.8%	33.7%	16%	X	x	X	X
SALT LAKE	PARKVIEW SCHOOL	9.8%	29.6%	13%	X	x	X	
GRANITE	ARCADIA SCHOOL	9.7%	27.0%	11%				
WEBER	ROOSEVELT SCHOOL	9.7%	28.0%	21%		x		X
WASHINGTON	EAST SCHOOL	9.7%	39.2%	17%		x		
GRANITE	WHITTIER SCHOOL	9.6%	29.5%	15%			21st	
GUADALUPE SCHOOL	GUADALUPE SCHOOL	9.6%	38.5%	14%		x	X	
GRANITE	TWIN PEAKS SCHOOL	9.6%	31.1%	17%				
GRANITE	SILVER HILLS SCHOOL	9.6%	35.7%	12%		x	21st, IGP,X	
SALT LAKE	NIBLEY PARK SCHOOL	9.5%	29.4%	10%			X	
NEBO	PARK SCHOOL	9.5%	34.4%	17%			X	X
GRANITE	MILL CREEK SCHOOL	9.5%	30.8%	14%		x		
SALT LAKE	NORTH STAR SCHOOL	9.5%	32.4%	10%	X	x	21st	

Table B.3. Homelessness and School Attendance



Source: U.S. Department of Education, Office of Planning, Evaluation, and Policy Development, Policy and Program Studies Service, State and District Implementation of the Education for Homeless Children and Youth Program, School Year 2010-2011.

APPENDIX C

ADDITIONAL TABLES PROVIDED BY COMMISSION AGENCIES

Table C.1. Adults No Longer in 2014 Adult Cohort

Count of Total Closure & Denial Reasons Set in Groupings - for the Last Month Clients Received Benefit Types					
Closure / Denial Reason	**Medical**	**Child Care**	**Financial**	**Food Stamps**	**Grand Total**
Closure Due to Inaction of Client	1,171	218	31	3,509	4,929
Time Limit	8		3	1,110	1,121
Over Income Limit	173	52	20	813	1,058
Other	393	77	35	210	715
Residency Requirements	338	16	8	292	654
Household Composition Requirements	247	2	5	97	351
Spenddown/Fee Not Paid	215				215
Customer Request	60	30	3	70	163
Death	53		1	24	78
Over Asset Limit	28		1	11	40
Work Requirement Not Met			5	28	33
Other Insurance Available	31				31
Not Working Enough Hours		24			24
TPL/Child Support Requirements	22				22
Not Disabled	15		6		21
Non-Participation			9		9
Voluntary Quit				1	1
Grand Total	**2,754**	**419**	**127**	**6,165**	**9,465**

Table C.2. Health Indicators by County

			Health Access Issues		Mental Health Issues			Healthy Living/ Physical Health Issues			
County	IGP Adult Concentration Index	2014 Unem-ployment Rate	Percentage of Persons with No Insurance Coverage (6)	Percentage of Persons with No Personal Doctor (7)	Percentage of Persons with Poor mental health in 7 or more of past 30 days (7)	Percentage of Persons Ever Told Have a Depressive Disorder (7)	Suicide Rate per 100,000 population (8)	Percentage of Adults eating less than three vegetables each day (7)	Percentage of Adults Who are Obese (7)	Percentage of Adults Reporting Fair or Poor Health (7)	Percentage of Adults Not Getting Recommend Aerobic Physical Activity (7)
Beaver	1.25	3.9%	**	14.7*	13.8	23.3	51.04*	91.9*	31.0	18.2	50.8
Box Elder	1.32	3.9%	11.2	13.7	14.3	22.3	20.36	85.9	31.2	11.2	43.0
Cache	0.73	3.2%	10.3	23.4	12.5	18.8	15.4	83.7	23.9	12.1	39.8
Carbon	3.30	5.2%	8.7	19.2	21.0	23.8	46.69	88.5	31.7	16.7	45.7
Daggett	0.33	4.2%	**	**	**	**	**	74.6*	31.1*	**	42.8*
Davis	0.74	3.6%	6.7	20.2	14.6	21.6	15.19	82	24.9	10.5	40.4
Duchesne	1.54	3.6%	11.4	30.3	19.2	18.2	29.59	81.2	26.1	17.1	45.0
Emery	1.65	5.2%	8.4	30.3	22.4	18.9	37.74	81.9	26.2	17.0	50.0
Garfield	1.12	8.6%	30.1	31.8	10.1*	22.5*	27.19*	**	26.9	11.1*	52.4
Grand	1.94	6.2%	15.6	19.0	11.4	21.9	48.54	81.9	26.5	16.7	37.7
Iron	1.53	4.5%	13.0	25.6	16.9	21.1	25.08	81.5	24.7	16.4	38.3
Juab	1.51	4.0%	9.1	19.3	12.0	19.6	32.01*	90.7	27.1	11.3	39.9
Kane	1.08	4.6%	**	26.8	12.2	29.4	50.47*	91.0*	21.1	13.9	59.4
Millard	1.61	3.5%	18.9	25.6	16.4	18.5	43.11	89.8*	28.3	14.2	46.9
Morgan	0.26	3.4%	**	22.2	9.3*	11.0	13.73*	78.8	21.3	7.5	31.5
Piute	2.15	6.7%	19.7	**	13.3*	17.5*	**	82.6*	22.4*	10.8*	32.0*
Rich	0.53	3.7%	**	31.1*	**	**	**	**	16.2*	14.6*	24.6*
Salt Lake	0.98	3.7%	13.3	26.8	16.5	22.5	20.84	81.5	24.8	14.0	41.7
San Juan	5.59	7.5%	24.7	31.9	20.7	25.7	25.41*	87.0*	22.9	16.2	48.5
Sanpete	1.46	4.5%	23.7	23.3	15.2	20.5	25.16	83.3	25.0	18.2	45.1
Sevier	2.56	4.5%	9.8	12.5	20.5	30.0	29.44	89.7	27.8	18.0	49.3
Summit	0.15	3.4%	14.5	28.5	10.6	15.8	14.5	80.7	13.0	7.8	34.4
Tooele	1.29	4.7%	8.7	25.6	16.5	22.4	17.45	88.7	31.1	13.9	46.2
Uintah	1.24	3.5%	14.3	30.6	15.6	21.4	25.46	88.1	29.1	17.3	44.2
Utah	0.61	3.5%	11.9	24.5	14.9	20.4	16.49	82.1	24.3	13.0	41.3
Wasatch	0.37	3.7%	15.9	23.4	14.2	16.6	20.73	82	21.3	11.6	31.6
Washington	1.24	4.3%	17.5	24.5	14.7	19.6	23.52	81.2	23.2	10.3	39.7
Wayne	0.95	9.4%	35.8	13.9*	16.4	15.5	**	84.4*	15.1	13.3	26.4
Weber	1.65	4.3%	12.9	25.6	16.7	23.8	22.31	83.6	26.7	16.2	41.7
TOTAL		3.8%	12.5	25.6	15.7	21.4	20.35	82.5	24.9	13.7	41.5

(1) Utah BRFSS 2011-2013 all ages age-adjusted; (2) Utah BRFSS 2011-2013 Adults aged 18 and above age-adjusted; (3) Utah Death Certificate Database, Office of Vital Records and Statistics, age-adjusted 2011-2013

Indicates that county confidence interval is higher than state value

Indicates that county confidence interval is lower than state value

Table C.3. Description of Juvenile Justice Categories

JJS Services Categories: DJJS Services includes the major categories of residential and non-residential programming provided or arranged by DJJS. Observation & Assessment, Community Placement, and Secure Care are reserved for youths in DJJS legal custody.

Delinquency Referral Category: The delinquency referral category includes the number of DWS sample matches with an incident where the incident prosecuting severity was 2 to 11 and 21; this includes felonies, misdemeanors, status, infraction, traffic, and contempt. The categories are mutually exclusive and subtotals are equal to the total number of youth with a delinquency referral listed in the Delinquency Referral category.

Diversion Category: The Diversion category includes the number of DWS sample matches with an incident where the prosecuting severity of 2 to 11 and 21 and an intake decision flag where the Non-judicial Flag was equal to "Y."

Habitual Truancy Category: The Habitual Truancy Referral category includes the number of DWS sample matches where the incident had a statute ID of 1076 (Habitual Truancy) or 1249 (Habitual Truant Citation). Based upon request, truancy referrals were provided as a separate category. This category indicates whether the youth had a habitual truancy referral and is a separate analysis from the severity of referrals detail provided above. The severity detail categories provided above and the habitual truancy referral category are not mutually exclusive.

Delinquency Adjudication Category: The Delinquency Adjudication category includes the number of DWS sample matches with an incident where the incident prosecuting severity was 2 to 11 and 21, which includes felonies, misdemeanors, status, infraction, traffic, and contempt, and an adjudication date that was not equal to null.

Probation Category: The Probation category includes the number of DWS sample matches with a start disposition code of PSS or PRO on the Probation Table in CARE.

Bind Over Category: The Bind Over to District Court category includes the number of DWS sample matches with a disposition code of BOD (bound over to District Court), OCT (certification), Bound Over, Cert Granted (certification granted). Note: Bind over disposition codes changed in 2014; this is why there are two different bind over codes and two different certification codes to capture both time periods.

APPENDIX D:

ABOUT THE DATA

The data contained in this report is generated from a variety of sources. The majority of the data is report for the calendar year, 2014. In some cases, data is not available on the calendar year. In those instances the date is provided and the timeframe specified.

DATA FROM SECTION 2: Understanding Poverty and Intergenerational Poverty in Utah

The source for the majority of the data contained in Section 2 is provided by DWS and is largely reported by DWS customers, unless otherwise noted below.

Definition of the Cohorts

The adults and children included in the cohorts are those individuals served by one or more of four public assistance programs anytime from 1989 to the present, for at least twelve months. The programs include child care subsidies, financial assistance, Food Stamps, and/or Medicaid or CHIP. Where an adult or child is included in either of the intergenerational poverty cohorts is dependent on whether the adult also received public assistance for at least twelve months as a child.

Due to the fact that the DWS administrative data only is available back to 1989, the adults included in the 2015 report 43 years old or younger. Each year, the age of the adult cohort increases one year.

Child of a Teen Mother is provided by the Department of Health, Division of Vital Statistics going back to 1964.

Student Enrollment by Race & Ethnicity is provided by the Utah Data Alliance, analyzing student enrollment data from USOE. The data is analysis of the 2014 intergenerational poverty cohorts matched with the data from the 2013 school year.

DATA FROM SECTION 3: Indicators and Baselines for Child Well-Being

Early Childhood Development

Enrollees Utilizing Preventive Services Who Are Pregnant Women is analysis of women receiving Medicaid coverage who were pregnant in 2014. The data is provided by DOH which matched the women with Medicaid utilization data to evaluate whether pregnant women received preventive health care.

Medical Care in the First Years of Life is analysis of the IGP child cohort and At-Risk child cohort members who were two years old or younger in 2014. The data is provided by DOH which analyzed Medicaid utilization to determine whether children visited a doctor.

Child Care Programs Participating in QRIS is provided by DWS–Office of Child Care in coordination with the Child Care Professional Development Institute. It includes data on licensed child care providers in Utah. It is data as of July 2015.

QRIS Levels of Participating Programs is an analysis of the percent of children in Utah receiving child care subsidies by the QRIS level obtained by those providing child care to these children. The data is provided by

DWS–Office of Child Care in coordination with the Child Care Professional Development Institute.

Educational Attainment, Child Care Providers is provided by the U.S. Census Bureau. It is analysis of those providing child care in Utah, not necessarily to low-income children.

Education

The educational data contained within this report was provided by the Utah Data Alliance and includes matching of the 2014 child cohorts to 2013 school year data, the most recent year of education data available. Data obtained from a source other than UDA is noted below.

Availability of Extended Day Kindergarten by IGP Student Concentrations is based on data provided by USOE which evaluated all schools serving 10 percent or more children in intergenerational poverty. DWS analyzed the list of the schools to determine the percent of schools providing extended day kindergarten programs.

Involvement with Juvenile Justice Services represents a match of both child cohorts with data from the Juvenile Courts and DHS, Division of Juvenile Justice Services. The 2015 data in this report was based on a sample of 13,779, 10- to 17-year-old youths provided by the Department of Workforce Services (DWS). All individuals in the CARE system with a date of birth between January 1, 1996 and December 31, 2004 were identified for matching purposes. Individuals in the DWS sample were matched to youths identified in the CARE data system based on (a) first name, (b) last name, (c) gender, and (d) date of birth. Adoption incidents were excluded because duplicated case numbers are allowable for this type of incident. This process resulted in 4,240 matches and 4,218 unique case numbers. Matched individuals account for 30.6% of the DWS sample of 13,779. The categories in this analysis are based on an unduplicated count of individuals. CARE was last queried by the Juvenile Court on June 29, 2015 at 10:45 AM and by DJJS on June 27 at 10:45 AM for this analysis.

Family Economic Stability

The data contained in this section is analysis of DWS data. The educational attainment data is self-reported by DWS customers. The employment and wage data is provided by the Bureau of Labor Statistics: Quarterly Census of Employment and Wages.

Homeless Support for IGP Child Cohort is provided by the DWS–Housing and Community Development Division. It includes a match of the IGP child cohort members with HMIS to determine whether children received homeless support for a Utah homeless service provider at any time in the child's life.

Children Moving in Previous 12 Months is provided by DWS. It is an analysis of the number of times a DWS customer reported a change of address during CY 2014.

Health

The majority of the data contained in this section was provided by the Department of Health. It included a match of all cohorts receiving Medicaid or CHIP health care coverage. The data related to childhood abuse and neglect was provided by DHS, Division of Children and Family Services. The exceptions are provided below.

Public Health Insurance Enrollment is eligibility data provided by DWS.

IGP Child Cohort Who Did Not See a Doctor in 2014 includes statewide data from the 2010 National Survey of Children's Health, 2011–2012, the most recent year data is available. The remaining data included in this chart is analysis of Medicaid or CHIP utilization data in 2013 and 2014.

Substance Abuse Disorder Treatment is based on data provided by DHS, Division of Substance Abuse and Mental Health. It is based on receipt of treatment services in CY 2014.

Food Stamps Cover IGP Families is the number of individuals in relevant cohorts receiving Food Stamps in Utah through the Supplemental Nutritional Assistance Program (SNAP). The data is based on the calendar years provided.

Participation in the School Breakfast & Lunch Program is the number of Utah students from the relevant cohorts enrolled in USOE Child and Adult Care Food Program during SY 2012 and SY 2013. The data is provided by the UDA with the exception of the statewide figure which is provided by USOE and can be found at http://www.schools.utah.gov/data/Reports/Child-Nutrition.aspx.

UTAH INTERGENERATIONAL WELFARE REFORM COMMISSION

ANNUAL REPORT 2015

Pursuant to Utah Code §35A-9-305, the following is the Utah Intergenerational Welfare Reform Commission Annual Report 2015. The Intergenerational Welfare Reform Commission (Commission) is composed of the executive directors of the following: Department of Health (DOH), Department of Human Services (DHS), and Department of Workforce Service (DWS). In addition to those members, the Commission includes the Utah State Office of Education (USOE), State Superintendent of Public Instruction; the State Juvenile Court Administrator; and the Chair of the Intergenerational Poverty Advisory Committee.

As required by statute, this annual report describes the purpose of the Commission and its activities throughout 2015.

SECTION 1: PURPOSE OF THE COMMISSION

The Commission was created by the Intergenerational Poverty Mitigation Act (Act), Utah Code §§35A-9-101-306. The primary purpose of the Act is to reduce the incidence of Utah children living in poverty and welfare dependency, as they become adults.

The purpose and duties of the Commission are described in Utah Code §35A-9-303 and paraphrased below to include the following:

1. Collaborate in sharing and analyzing data and information regarding the cycle of poverty and welfare dependency;
2. Examine and analyze shared data and information regarding intergenerational poverty to identify and develop effective and efficient plans, programs and recommendations to help at-risk children in the state escape the cycle of poverty and welfare dependency;
3. Implement data-driven policies and programs addressing poverty, public assistance, education and other areas to reduce the number of children who remain in the cycle of poverty and welfare dependency as they become adults;
4. Establish and facilitate improved cooperation between state agencies, down to the case work level, in rescuing children from intergenerational poverty and welfare dependency;
5. Encourage participation and input from the Intergenerational Poverty Advisory Committee and other community resources to help children escape the cycle of poverty and welfare dependency; and
6. Report annually on its progress.

SECTION 2: REQUIREMENTS OF THE ANNUAL REPORT

This 2015 Annual Report will meet the following reporting requirements:

1. Describe how the Commission fulfilled its statutory purposes and duties during 2015;
2. Describe policies, procedures and programs that have been implemented or modified to help break the cycle of poverty and end welfare dependency for children in the state affected by intergenerational poverty;
3. Include recommendations on how the state should act to address issues relating to breaking the cycle of poverty and ending welfare dependency for children in the state affected by intergenerational poverty; and
4. Update the five- and ten-year plan.

In March 2015, the Commission released Utah's Plan for a Stronger Future: Five- and Ten-Year Plan to Address Intergenerational Poverty. An update on the benchmarks established in that report are provided in Appendix 1. Commission Benchmarks. The benchmarks in that report are interim targets measuring progress toward achieving the Commission's five- and ten-year goals. The indicators contained in Utah's Fourth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance 2015, assist in determining the progress of both the interim targets and the ultimate goals developed to address intergenerational poverty.

SECTION 3: 2014 ACTIVITIES

In 2015, the Commission focused largely on activities that ensure progress is being made toward the five-year goals it adopted in Utah's Plan for a Stronger Future: Five-and Ten-Year Plan to Address Intergenerational Poverty. The emphasis is largely placed on improving coordination and alignment of state systems to improve service delivery to children at risk of remaining in poverty. As a result, the past twelve months included increased education for Commission-agency staff on the issue of intergenerational poverty and analysis of the data and its relationship to the core missions of the agencies.

The habit of saving is a critically important complement to education and social capital needed for upward mobility.

Stuart M. Butler, PhD., Heritage Foundation, Center for Policy Innovation

In addition, the following describes additional activities engaged in by the Commission during 2015, as those activities relate to its purpose:

1. Collaborate in sharing and analyzing data and information regarding the cycle of poverty and welfare dependency.

    - Sharing of data to produce Utah's Fourth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance 2015. The agencies engaged in ongoing efforts to share data to continue evaluating the barriers and challenges facing children in jeopardy of remaining in the cycle of poverty and welfare dependency as they become adults. This included entering into new data-sharing agreements to obtain data in the following areas not previously reported: mental health and substance abuse, engagement in the juvenile justice system, and vital statistics and homelessness.

2. Examine and analyze shared data and information regarding intergenerational poverty to identify and develop effective and efficient plans, programs and recommendations to help at-risk children in the state escape the cycle of poverty and welfare dependency.

    - Identifying common clients across agencies. Until 2015, the primary purpose of cross-agency data sharing was to provide an update on the intergenerational poverty cohorts for the annual data report. In 2015, the scope of the data sharing broadened to improve coordination of service delivery to clients utilizing public assistance across agencies and programs. Throughout 2015, Commission agencies met regularly to discuss barriers to serving common customers, which frequently involved limitations of data sharing. Most of the limitations are due to federal laws around individual privacy.

    - As a result of these ongoing communications, agencies are sharing data on customers that do not violate privacy laws. These arrangements will result in improvements in service delivery and coordinated case management. Moreover, these efforts will ensure progress toward the Commission's five-year goals focusing on system and program alignment, as well as the statutory requirement to improve agency cooperation "down to the caseworker level."

    - Utilized data and research to develop policy areas impacting children in jeopardy of remaining in the cycle of poverty and welfare dependency. In 2015, the work of the Commission focused on coordinating the development of evidence-based programs that serve the needs of families experiencing intergenerational poverty; although, some of these evidence-based programs serve a population broader than the members of the IGP cohorts. Where coordination occurs across agencies during the development of programs, improved service delivery and understanding of agency roles follows. Each of the programs is discussed in greater detail below and aligns with the goals adopted by the Commission in each of the four areas of child well-being.

3. Implement data-driven policies and programs addressing poverty, public assistance, education and other areas to reduce the number of children who remain in the cycle of poverty and welfare dependency as they become adults.

    - Agency initiatives developed to reduce the number of children who remain in the cycle of poverty and welfare dependency. In 2015, each of the Commission agencies spent significant time evaluating the data contained the annual data report. A number of initiatives serve populations significantly broader than the intergenerational poverty population, but will move Utah toward the goal of reducing children in the cycle of poverty as they become adults (see Appendix 2. List of Agency Programs). It is important to note that although few initiatives were implemented to strictly serve the members of the IGP cohorts, the data revealed that the policies would assist those families. As noted above, in some instances, the policies and programs were implemented in coordination with other Commission-member agencies.

The following provides a list of the 2015 activities:

Department of Health. The Department of Health continued work on two primary initiatives: (1) establishment of the Healthy Utah plan; and (2) expansion of the state's network of home visitation programs to include targeting of young parents in the cycle of poverty for home visitation programs.

In 2015, 94 percent of the children in the intergenerational poverty cohort and 93 percent of the children in the at-risk child cohort have access to health care through either Medicaid or the Children's Health Insurance Program (CHIP). However, only 73 percent of the parents in the IGP adult cohort have access to health insurance. Given the relationship between health insurance access for adults and health care utilization for children, increasing health care access for parents is critical for child well-being. Moreover, healthy parents are more likely to be employed, effectively care for their children and ensure children are regularly attending school.

As a result, the Department of Health continued to work with the Utah Legislature and Governor Gary R. Herbert to gain approval for a health care program that would provide insurance to adults not previously eligible for Medicaid.

Additionally, research has shown that child well-being improves when young families with newborns receive home visitation services through an evidence-based home visitation program. One of these outcomes includes reducing the incidence of child abuse and neglect, which the data demonstrates is significantly higher among children from the IGP Child Cohort. As a result of the data and research, DOH obtained additional resources for the Office of Home Visitation to serve more families at risk of remaining in poverty. The additional resources have also resulted in increased coordination to identify target clients served by the Department of Human Services and the Department of Workforce Services.

Department of Human Services: The Department of Human Services implemented an evidence-based pilot to improve coordination of services across its five divisions, as well as with DWS customers. The "System of Care" model, which is referred to as "Model of Care," is a philosophy and framework for service delivery with the purpose of improving access and expanding coordination of services to families of children with serious emotional disturbance.

Although the DHS move to implement Model of Care predates the intergenerational poverty initiative, the data contained in the annual report demonstrates that many individuals experiencing intergenerational poverty are victims of child abuse and neglect, interact with the juvenile justice system, experience behavioral health challenges, and lack resources to meet the basic needs of their children. As a result, many of the families experiencing intergenerational poverty are being served by multiple caseworkers from multiple divisions within DHS and DWS.

Beginning in 2014 and continuing into 2015, DHS organized working groups to implement Model of Care in the DHS Western Region. The working groups included representatives from DWS, DOH and USOE and covered topics such as employee training, measurable outcomes and case management. In addition, the implementation has included extensive discussion across agencies to determine the methodology for identifying customers in DHS, also receiving services in DWS. However, it is not necessarily the case that a family eligible for Model of Care is also receiving public assistance.

In addition, DHS Division of Child and Family Services developed the "Homeworks" program in Ogden, an area where a large number of families experiencing intergenerational poverty reside. This program is designed to use

a family case management structure to prevent children who are at risk of going into state custody from removal from their home. The Ogden DCFS staff has been coordinating with DWS staff in the area to ensure children experiencing intergenerational poverty are included in the Homeworks pilot.

Department of Workforce Services. In 2015, the Department of Workforce Services established an internal work group to utilize the data to improve its policies and programs. The work group, which meets regularly, included staff representing Food Stamps, Temporary Assistance for Needy Families (TANF), Child Care, youth employment and housing.

As a result of those meetings, the Food Stamp education program, or SNAP-Ed operated by Utah State University, is improving access to food and nutrition education to families experiencing intergenerational poverty. It will begin prioritizing education to those families, as well as families receiving Food Stamps for extended periods of time. Although improving outreach to those priority families, SNAP-Ed will continue to focus on education to the elderly and disabled.

Additional efforts include ongoing discussions regarding implementation of a two-generation service delivery model. Although most public assistance programs require the presence of dependents for eligibility, many programs only address the needs of the parent. However, experience demonstrates that two-generation models effectively serve the needs of both children and their parents simultaneously. As a result, DWS is implementing two-generation approaches in its Family Employment Program (FEP).

Beginning in 2014 and throughout 2015, DWS began implementing this approach in its Next Generation Kids (NGK) demonstration project in Ogden. The goal of the project is to help participating families stabilize their economic situation through employment. Although providing services primarily to parents, the project incorporates the four areas of child well-being established by the Commission in the development of a family-focused case management plan designed to meet the project's goal. It does this by connecting families to community resources that will meet the needs of the adults and the children simultaneously. Particular emphasis is being placed on the education of children through ongoing communication with schools and high-quality child care, including enrollment in high-quality preschool programs.

In 2015 NGK has served 31 families, which includes 64 children. The project has improved stability for intergenerational poverty families by connecting families to housing resources, afterschool programs, high-quality preschool, food and nutrition programs, and financial education classes. It has assisted ten adults obtain employment, four parents obtain their high school diploma or GED, and ten parents enroll in job training. In 2016, DWS will be seeking similar early outcomes as the NGK project begins serving intergenerational poverty families in Salt Lake County in Kearns and the Glendale neighborhood, two areas with high concentrations of intergenerational poverty families.

There have also been increased efforts to improve the targeting of DWS grants to child care and afterschool programs to those areas of the state where the largest concentrations of children at risk of remaining in poverty reside. In 2015, the Office of Child Care released three grants targeting those communities. Those grants included the following: (1) child care quality improvement grant; (2) afterschool quality grant; and (3) intergenerational poverty afterschool grant.

In all three grants, data was utilized to ensure government resources were properly targeted to private child care programs and afterschool programs serving children at risk of remaining in poverty. All three grants require implementation of evidence-based practices and ongoing program evaluation.

Finally, DWS educated its staff to improve coordination of its services to its customers. This effort included ongoing training and the establishment of a data dashboard, identifying community resources available throughout Utah. The data dashboard allows DWS staff to connect customers to an extensive network of community programs funded to serve a variety of needs that DWS does not address. These programs include service as broad as the following: job growth and training programs, domestic violence, family preservation, and pregnancy prevention. In addition to establishing the dashboard, DWS organized statewide webinars on intergenerational poverty, community resources and two-generation approaches to service delivery.

Utah State Office of Education. In 2015, the Utah Office of Educations devoted resources to ensure the outcomes in the Intergenerational Poverty Interventions Grant Program were met in its first year.

The USOE, in coordination with the University of Utah's Education Policy Center, established a set of assessment tools to ensure programs receiving funds were properly serving intergenerational poverty children.

Additionally, the USOE assisted with the education of the Utah State School Board regarding the academic outcomes for children at risk of remaining in poverty. In May 2015, the School Board meeting included extensive discussion of the subject and the corresponding data.

Utah Juvenile Courts. In 2015, the Utah Juvenile Court and the Juvenile Court bench worked with the Department of Human Services to implement a new practice to better serve children in the juvenile justice system. As the data indicates, 31 percent of the children at risk of remaining in poverty, between 10 and 17 years old, interacted with Utah's juvenile justice system at some point in their lives. Additionally, the data demonstrates that children at risk of remaining in poverty experience poor academic outcomes.

As a result of this data, members of Utah's Juvenile Court bench began receiving monthly academic reports of the children appearing in Juvenile Court. These reports provide valuable information for judges to utilize in court orders. Although initially there were challenges with Local Education Agencies (LEA) releasing the academic information to the Juvenile Court judges, those challenges have been largely addressed.

In addition, the Juvenile Court Bench devoted a training seminar to intergenerational poverty at its spring conference. Given the unique role of the Juvenile Court Bench to enforce the laws of the state, it has limited involvement in the development of those laws. However, the judges are provided with a large degree of autonomy in the establishment of court orders for the families appearing in their courtrooms. The increased knowledge and understanding of the intersection between economic hardship, abuse and neglect, and criminal and risky behavior is designed to assist judges in improving outcomes for the children they serve.

4. Establish and facilitate improved cooperation between state agencies, down to the case worker level, in rescuing children from intergenerational poverty and welfare dependency. As detailed above, many of the agency initiatives and the legislative initiatives have required extensive cooperation across state agencies including at the case worker level. These collaborative efforts are not only occurring within programs but include cross-agency training to improve service delivery to Utah families. Progress must still be made, particularly with respect to identifying common customers, without violating individual privacy rights of Utahns.

5. Encourage participation and input from the IGP Advisory Committee and other community resources to help children escape the cycle of poverty and welfare dependency.

    - Advisory Committee and the Research Subcommittee provided input on the design of Utah's Fourth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance 2015. Both the Advisory Committee and the Research Subcommittee were involved in the development and review of the Fourth Annual Report. Several members of the Research Subcommittee were responsible for the gathering and submitting data for the 2015 report.

    - Convening first research conference on intergenerational poverty. The members of the Intergenerational Welfare Reform Commission supported and helped organize the Intergenerational Poverty Research Sub-Committee's first research conference on intergenerational poverty at the University of Utah. The conference was held in March 2015 and was attended by over 125 individuals, including a variety of academic researchers, governmental researchers and community stakeholders to discuss the issue and determine additional research needs. It fulfilled the statutory requirement of engaging "academic experts, advocacy groups, nonprofit corporations, local governments, and religious institutions in exploring strategies and solutions to help children in the state who are victims of intergenerational poverty escape the cycle of poverty and welfare dependency." UT CODE §35A-9-303(1)(e).

    - As a result of the conference, additional research and data needs were identified, as well as additional research partners.

    - Advisory Committee provided policy recommendations to the Commission for its review. In August 2015, the expertise of the Advisory Committee was leveraged to create a list of policies it believes will reduce the cycle of poverty and welfare dependency among Utah children within the four domains of child

well-being. Much of those recommendations are outlined in Section 4, below. The Commission will discuss additional recommendations at its October 2015 meeting.

- Increased involvement among community stakeholders. Over the past twelve months, there has been increased interest in the issue of intergenerational poverty. As result, the Commission chair has met with several community stakeholders representing businesses, religious organizations, non-profit organizations and advocacy groups, as well as people experiencing poverty.

  Additionally, private-public partnerships are being established to serve families. In 2015, United Way of Northern Utah and United Way of Salt Lake have joined the Next Generation Kids demonstration projects to assist in coordination with LEAs and community resources for participating families. Where applicable, caseworkers from these organizations will coordinate case management with the NGK staff. During a joint meeting of the Commission and the Advisory Committee, United Way of Northern Utah discussed its effort to coordinate with NGK specifically and IGP broadly through Ogden United Promise Neighborhood.

  Finally, numerous organizations have included presentations of the subject of intergenerational poverty and the data provided in the annual reports. These organizations have included the Utah Banker's Association, the Juvenile Court Bench, Economic Club of Utah, Help Me Grow and national organizations such as the National Conference of State Legislatures, Education Committee.

- Increased engagement of local communities. In 2015, participation in the intergenerational poverty initiative increased among Utah communities. In an effort to address challenges for residents, communities with high rates of intergenerational poverty familiarized themselves with the data and in some instances, gathered community stakeholders to review community-level data and begin discussing local solutions to the issue. Among those communities were Ogden, Price, Provo and Kearns.

  In July 2015, a joint meeting of the Commission and the Advisory Community was held at James Madison Elementary School in Ogden. During that meeting, representatives from the community-based initiative Ogden United Promise Neighborhood and the City of Ogden discussed the efforts to incorporate the goals of the Commission in a number of city-wide efforts to improve economic outcomes for Ogden residents.

  Finally, Salt Lake County is incorporating the issue of intergenerational poverty in a variety of initiatives including increasing access to home visitation services and in its place-based initiative in Kearns, a community where 1,243 children experiencing intergenerational poverty reside.

SECTION 4: RECOMMENDATIONS FOR 2015

In August 2015, the Intergenerational Poverty Advisory Committee reviewed a number of policy and program recommendations designed to measurably reduce the incidence of Utah children in poverty, as they become adults. The following lists the recommendations adopted by the Commission. At its October 2015 meeting, additional recommendations will be considered.

Early Childhood Development

1. Target children at risk of remaining in poverty for high-quality preschool.

   Both at the state level and the national level, high-quality preschool has shown great results in closing the achievement gap between low-income children and their more affluent peers.
   Additionally, national research has determined that the rate of return on an investment of quality preschool for low-income children is between 7 and 10 percent achieved through improved educational outcomes, health outcomes, economic productivity and reduced crime.

   Currently, only 40 percent of Utah's preschool-age children are participating in preschool. Additionally, of the 103 elementary schools serving high concentrations of intergenerational poverty students, only 38 percent offer preschool.

Recommendation: All elementary schools serving high concentrations of intergenerational poverty students should establish a high-quality preschool classroom able to serve 50 percent of students at risk of remaining in poverty.

2. Establish a statewide kindergarten readiness assessment.

   In determining the educational needs of young students, schools must know the strengths of the students entering kindergarten. Without this crucial information, schools have difficulties determining the programs necessary to serve their students. According to an inventory of states throughout the country, 37 states utilize a statewide assessment tool to obtain this information.

   In Utah, there is a patchwork of kindergarten assessment tools utilized in some of Utah's LEAs. This presents a challenge utilizing data to establish policies and presents a challenge for students who are often mobile throughout the school year.

   Recommendation: Develop a statewide kindergarten assessment tool that is administered to all incoming kindergarten students in Utah.

Education

1. Ensure all schools serving high concentrations of IGP students establish full-day kindergarten programs.

   USOE has found that full-day kindergarten leads to improved academic outcomes. Despite this finding, 30 percent of the schools serving 10 percent or more of students experiencing intergenerational poverty lack an extended day kindergarten program. In fact, the top five schools with the highest concentrations of students from the IGP child cohort lack this option.

   Recommendation: All schools that serve 10 percent or more of students from the intergenerational poverty child cohort establish an extended day kindergarten option.

2. Establish 529 plans for all kids entering school with incomes at or below 100% of the federal poverty level.

   Designated children's savings accounts for education increases educational attainment and long-term financial stability for children. Children whose families have saved a minimum of $500 for college are three times more likely to enroll in college and four times more likely to graduate from college.

   Recommendation: Children entering school at or below 135 percent of the federal poverty level should have an educational savings account established with publicly seeded funds and an incentive structure to encourage savings within the first year of establishing the account. Each account would be accompanied with a financial education component for parents and children. The accounts would be held in trust for the children by a third party.

3. Develop a standard definition of "absence."

   Regular and consistent school attendance is an important factor in academic outcomes. The habit of regular attendance begins in kindergarten. When a child is absent, excused or unexcused, 10 percent or more of a school's year, those absences cumulate and jeopardize academic success.

   Recommendation: In Utah, each LEA establishes its own definition of "absence" and interprets an absence differently. Given the importance of school attendance and the issues with chronic absenteeism, particularly among low-income children, a statewide definition of absence should be established in Utah.

Family Economic Stability

1. Increase educational attainment and job training.

   Members of the IGP adult cohort are sporadically attached to the labor market due to low educational attainment and low skills. Utahns with an education beyond high school experience lower unemployment and higher wages. However, many low-income, single-parents lack the support necessary to return to school while raising a family, including limited access to child care.

   Recommendation: In Utah, child care subsidies should be available for low-income families pursuing an education or receiving job training in an occupation that provides a wage sufficient to meet the basic needs of their family, upon completion.

2. Increase asset building among IGP adult cohort.

   Approximately 61 percent of the IGP adult cohort worked in 2013; however, average annual wages are woefully inadequate to meet the basic needs of their families. As a result, families facing economic hardship have limited access to resources in times of emergency. The ability to become self-reliant requires development of assets.

   The asset-building field has been growing with new approaches for increasing assets among low-income individuals. Through the years, Utah has encouraged savings through high school financial literacy classes, availability of individualized development accounts and encouraging people to save refundable tax credits such as the federal Earned Income Tax Credit (EITC). [1]

   Low-income families lack savings instruments that are designed for small savers. In an addition to encouraging savings, these families require financial education to promote savings and change spending habits. Several states have established programs designed to provide financial education.[2]

   Two evidence-based savings products demonstrating success in asset development for low-income savers include children's savings and other accounts providing an incentive for saving through matching funds and "prize-linked" savings accounts.[3]

   Recommendations:

   1. Utah should establish a financial education program available for working individuals earning less than 135% of FPL. Upon successful completion of the program, a savings account would be open with publicly seeded funds and an incentive structure to encourage savings within the first 12 months of establishing the account.

   2. Eliminate any barriers within Utah Code that prevent credit unions from establishing PLS accounts.

Health

1. Adopt Utah plan to insure individuals in the "coverage gap."

   Although more than 90 percent of the children experiencing intergenerational poverty have access to health care, only 73 percent of their parents have access. When parents have health insurance, they are more likely to bring their children to the doctor and more likely to maintain economic stability if a health crisis occurs.[4]

   Recommendation: Adopt the Utah plan to insure individuals falling within the Medicaid "coverage gap."

2. Increase access to mental health services for at-risk children.

   Children growing up in economic hardship frequently are victims of toxic stress. This stress has lasting implications often leading to poor health outcomes and alcohol and drug abuse.[5] Under Utah's Mental Health Early Interventions (MHEI) school behavioral health program, 36 percent of the children who received services were stabilized, disciplinary referrals decreased by 46 percent and there was a 7 percent increase in GPA.[6]

Of the 238 schools identified as serving 6 percent or more children experiencing intergenerational poverty, only 23 percent have MHEI services.

Recommendation: Ensure that all schools serving high rates of intergenerational poverty students participate in the school-based behavioral health program.

CONCLUSION

In 2015, the Intergenerational Welfare Reform Commission made significant progress in meeting the purpose of the Act. Most significantly, it utilized the data provided in the first three annual reports to establish clear goals that will ensure Utah children have stability in their lives and their basic needs are met. This will lead to opportunity into adulthood, benefiting the children and Utah.

There were two primary activities in which the Commission engaged that will lead to progress on a core purpose of the Act and five-year goals of improving coordination and alignment of services provided which to children at risk of remaining in poverty. These activities included: (1) increased communication among agencies serving the same families; and (2) increased coordination with community stakeholders to leverage resources outside of government to serve families. In both instances, the Commission provided resources and leadership to move toward these objectives.

In addition, the Commission is taking concrete steps to meet the Act's primary goal of measurably reducing the incidence of Utah children in poverty and welfare dependency, as they become adults. Each of the Commission-member agencies is evaluating internal programs and policies to improve outcomes for children at risk of remaining in poverty. Moreover, in 2015, analysis of the data and research resulted in the adoption of an initial list of clear and well-defined policy recommendations. Although the recommendations may require action by the Utah Legislature, some can be adopted and implemented by community stakeholders devoted to improving stability and opportunity for Utah children.

As the Commission continues its work in 2016, it will remain focused on the adopted goals contained in Utah's Plan for a Stronger Future. It will continue to evaluate gaps in the data to ensure progress is made toward the goals, as well as analyze evidence-based programs proven to improve outcomes for families struggling to meet the basic needs of their children. Moreover, it will work to ensure that the goals of the initiative are not solely held by state government but shared with community stakeholders.

(Endnotes)

1 Utah Individualized Development Account Network, http://www.uidan.org/; Volunteer Income Tax Assistance Program, Earn It. Keep It. Save It., http://utahtaxhelp.org/financial-integration.

2 Stuart M. Butler, PhD, David C. John, and Sean Rust, Boosting Economic mobility Through Prize-Linked Savings, The Heritage Foundation Center for Policy Innovation, May 29, 2013.

3 Id.; Corporation for Enterprise Development, Scholarly Research on Children's Savings Accounts, June 2014, http://cfed.org/assets/pdfs/FactFile_-_Scholarly_Research_On_Childrens_Savings_Accounts.pdf.

4 Jennifer E. DeVoe, MD., Carrie J. Tillotson, MPh, Lorraine S. Wallace, PhD., Children's Receipt of Health Care Services and Family Health Insurance Patterns, Ann. Fam. Med., 2009 Sep: 7(5); 406-413.

5 Vincent J. Felitti et al., Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study, 14A.m J. Prev. Med 245 (1998).

6 Utah Department of Human Services, Division of Substance Abuse and Mental Health, Mental Health Early Intervention Services 2014 Report.

COMMISSION REPORT: APPENDIX 1. COMMISSION BENCHMARKS

IGP AREA OF CHILD WELL-BEING	INTERGENERATIONAL WELFARE REFORM COMMISSION GOALS	BENCHMARK	DATA AVAILABLE	PROGRESS
EARLY CHILDHOOD DEVELOPMENT	Align all systems involved in early childhood development to ensure Utah has the capacity to prepare children at risk of remaining in poverty for kindergarten. (5 year)	Rates of abuse and neglect no greater than statewide rate.	X	IGP: 26% Statewide: 1.1%
		55% of 0-5 year olds read to daily.		
		100% 0-3 year olds experiencing development delays receive assessment from Baby Watch.		
		100% 0-3 year olds with delay participate in Baby Watch.		
	Children at risk of remaining in poverty as they become adults are emotionally, cognitively and developmentally prepared for kindergarten. (10 year)	100% 0-3 year olds with delay complete Baby Watch.		
		100% of children enrolled in CHIP/Medicaid have primary care provider.		
		100% of children receiving public medical care receive health care as recommended by APA.		
		100% of child care providers serving over 10% subsidy children are participating in QRIS.	X	35%
EDUCATION	Align systems assisting with educational outcomes to ensure efforts are focused in schools disproportionately impacted by intergenerational poverty. These systems include all levels of government, local schools, communities, businesses and non-profits. (5 year)	95% of IGP children are enrolled in full-day kindergarten or Optional Extended Day Kindergarten (OEK).	X	28% of IGP enrolled in kindergarten participated full-day or OEK
		Full day or OEK kindergarten is available at 100% of schools serving high concentrations (10% or more) of IGP children.	X	
		Language Arts proficiency scores equal to or better than statewide rate.	X	IGP: 58% At-risk: 69% Utah: 79%
	Children at risk of remaining in poverty as they become adults graduate from high school at the rate equal to the statewide rate. (10 year)	Math proficiency scores equal to or better than statewide rate.	X	IGP: 45% At-risk: 58% Utah: 73%

EDUCATION		75% of teachers are "highly qualified" in schools with high rates of students experiencing IGP.		
		100% of schools with high rates of student mobility develop plans to address needs of students who enter and leave schools frequently.		
		Reduce all chronic absence rates in K-3 among children at risk of remaining in poverty to the statewide rates for each grade.	X	K: 39% (IGP); 25% (At-risk) 17% (Utah) 1st: 31%, 18%, 12% 2nd: 28%, 16%, 11% 3rd: 25%, 16%, 10%
		Graduation rates equal to the statewide rate.	X	IGP: 57% At-risk: 63% Utah: 81%
		Number of moves in a 12-month period.	X	
FAMILY ECONOMIC STABILITY	Children at risk of remaining in poverty are living in stable families, able to meet their basic needs (i.e. food, housing, health, safety and transportation). (5 year)	50% of IGP adults obtain and maintain year-round employment providing wages sufficient to meet economic needs of family.	X	32% worked year round; average annual wage was $17,566
		50% of IGP adults on pathway to job skills leading to employment in occupations sufficient to meet needs of family.		
		100% of families with earned income are applying tax and seeking credits to which entitled.		
	Children at risk of remaining in poverty are living in families that are self-sufficient/reliant. (10 year)			
HEALTH	Children experiencing intergenerational poverty have access to quality physical health, mental health and dental care, regardless of where their family resides in Utah. (5 year)	Percentage of adults with children who are uninsured .		
		PA adults (12 months or more) receive mental health services at a rate equal to statewide rate.	X	
		PA adults (12 months or more) visit a health care provider at a rate equal to statewide rate.	X	3.4% received preventive health care in 2014

HEALTH	Children experiencing intergenerational poverty are receiving physical, mental and dental care at the same rates as the statewide rates in each of those areas, regardless of where their family resides in Utah. (10 year)	100% of schools serving high percentages of children at risk establish policies ensuring children participating in Free Lunch Program receive breakfast and lunch.		
		Ensure children at risk requiring mental health services receive services equal to the statewide rate.		
		100% of children at risk have access to health care.		IGP: 94% At-risk: 93%
		Children at risk see a dentist at the rate equal to the statewide rate, as reported by National Survey of Children's Health.	X	IGP: 40% At-risk: 40%

COMMISSION REPORT: APPENDIX 2. IGP COMMISSION AGENCY PROGRAMS

Early Childhood Development	Education	Family Economic Stability	Health
Health	Education	Workforce Services	Health
Baby Watch	21st Century Centers	Employment Services	Healthy Utah
Home Visiting	CTE Pathways	Development Workshops	Accountable Care in Rural Areas
Early Childhood Statewide Data Integration	Academic Achievement of the Disadvantage	Two Generation Approach to Case Management	Opening Current Procedure Technology
Fetal Exposure	Early Intervention	Training & Education	Medicaid focus on IGP
Human Services	ELL Services	TANF Programs	WIC
Crisis Nurseries	Homeless Education	Eligibility Services	Human Services
Workforce Services	Indian Education	Unemployment Insurance	JJS and Wellness
Quality Child Care	MESA	Education	Education
Pre-K Grants	Neglected/Delinquent	UtahFutures.org	After School Snack
Education	Open Enrollment		Child/Adult Care Food
Preschool Pioneer	StepUp Ready		Family Day Care Homes
Early Childhood Education Grants	Health		National School Breakfast and Lunch
Social Impact Bond	Health Promotion		Summer Food Service
STAR	Human Services		Vision Screening
UPSTART	Educational & Training Vouchers		Workforce Services
	Youth in Custody		Medicaid Eligibility
	Parenting Leadership Council		
	Workforce Services		
	Afterschool grants		
	WIA Youth		

ENDNOTES

1 Utah Department of Workforce Services, Utah's Plan for a Stronger Future: Five- and Ten-Year Plan to Address Intergenerational Poverty (March 31, 2015) http://jobs.utah.gov/edo/intergenerational/igp5_10yearplan.pdf.

2 Utah Code §35A-9-101 et seq.

3 Throughout the report, "PA" refers to "public assistance" and includes participation in Food Stamps, Medicaid or the Children's Health Insurance Program (CHIP), Child Care Subsidy, and Cash Assistance programs administered by DWS. Throughout the report "IGP" refers to intergenerational poverty.

4 UTAH CODE §35A-9-102 Intergenerational Poverty Mitigation Act: "'Intergenerational Poverty' means poverty in which two or more successive generations of a family continue in the cycle of poverty and government dependence. 'Situational Poverty' means temporary poverty that is generally traceable to a specific incident or time period within the lifetime of a person and is not continued to the next generation." (Utah, 2012)

5 United States Census Bureau, 2013 Census. American Community Survey, 1-year Estimates. Poverty rates are released by the Census Bureau each year. The current data is available through 2013.

6 National Scientific Council on the Developing Child (2005/2014), Excessive Stress Disrupts the Architecture of the Developing Brain: Working Paper 3. Updated Edition. http://www.developingchild.harvard.edu.

7 Although 21 percent of those receiving public assistance in Utah also received it as children, due to limitations of available data, this figure fails to account for adults currently receiving public assistance who grew up outside of Utah.

8 Throughout this report, DWS is providing data from Calendar Year ending December 31, 2014 unless otherwise noted. Additionally, each year the age of the adult cohort increases by one year. This report includes adults up to 43 years old. This is due to the availability of data beginning in 1989 when DWS began recording public assistance utilization.

9 According to DWS, 18 percent of the adults leaving the IGP adult cohort in 2014 were employed in the Administrative Support and Waste Management sector. This is nearly three times larger than the sector's share of statewide employment. This is an industry dominated by temporary help agencies.

10 The public assistance programs included in the intergenerational poverty data include Cash Assistance Programs, Child Care Subsidies, Food Stamps ("SNAP") and Medical.

11 Annie E. Casey Foundation, Youth and Work: Restoring Teen and Young Adult Connections to Opportunity, Summer 2012, http://www.aecf.org/m/resourcedoc/AECF-YouthAndWork-2012-Full.pdf.

12 Id.

13 Sarah Fass, Kinsey Alden Dinan, Yumiko Aratani, National Center for Children in Poverty, Child Poverty and Intergenerational Mobility (Dec. 2009), http://www.nccp.org/publications/pdf/text_911.pdf.

14 Utah Department of Workforce Services, Utah's Third Annual Report on Intergenerational Poverty and Welfare Dependency and the Use of Public Assistance, 15-17 (September 30, 2014), http://jobs.utah.gov/edo/intergenerational/igp14.pdf.

15 National Center For Children in Poverty, Young Child Risk Calculator, http://www.nccp.org/tools/risk/; See also 14 at 18-25 for a complete analysis of these risk factors for the children at risk of remaining in poverty when they become adults.

16 See 14 at 13, 11-16.

17 U.S. Census, American Community Survey, 2013 one-year estimates showing that among the 13 percent of Utahns living in poverty, 47 percent are men and 53 percent are women.

18 Although the share of the IGP adult cohort members receiving medical assistance has increased, the actual number of IGP adults receiving assistance has decreased by 829 individuals.

19 Jennifer E. DeVoe, MD, Carrie J. Tillotson, MPH and Lorraine S. Wallace, PhD, "Children's Receipt of Health Care Services and Family Health Insurance Patters," Annals of Family Medicine, September 2009): 406-413.

20 Utah's Primary Care Network is a health insurance program established with a Medicaid waiver. It is a more limited program than traditional Medicaid and only covers services administered by a primary care provider.

21 Department of Workforce Services analysis of the expenditures associated with the public assistance programs that are utilized in determining whether an individual meets the definition of intergenerational poverty.
22 UTAH CODE §35A-9-303(1)(c), Intergenerational Poverty Mitigation Act (Utah, 2012).
23 See Annie E. Casey Foundation, 2015 KIDS COUNT Data Book, June 2014, http://www.aecf.org/resources/the-2015-kids-count-data-book/.
24 Dr. Jack Shonkoff, presentation to the American Enterprise Institute, The Science of Early Learning: A Foundation for Expanding Opportunity (June 4, 2015) accessed at http://www.aei.org/events/the-science-of-early-learning-a-foundation-for-expanding-opportunity/, stating "pillars of social and economic mobility are built in early childhood."
25 Center on the Developing Child, Harvard University, InBrief: The Impact of Early Adversity on Children's Development, http://developingchild.harvard.edu/index.php/resources/multimedia/videos/inbrief_series/inbrief_impact_of_adversity/ (accessed July 29, 2015).
26 Betty Hart & Todd R. Risley, "The Early Catastrophe: The 30 Million Word Gap by Age 3," American Educator (Spring 2003), https://www.aft.org/pdfs/americaneducator/spring2003/TheEarlyCatastrophe.pdf.
27 U.S. Census Bureau, 2014 Population estimates: Child Care Aware, Child Care in the State of Utah (May 2015), http://usa.childcareaware.org/wp-content/uploads/2015/06/2015-State-Fact-Sheets-Utah.pdf (accessed July 30, 2015).
28 Ann Austen & Alex Fronk, Summary of Significant Results for the Care About Childcare Validation Project, Utah State University, 2015 finding that centers providing care for high numbers of children covered by Utah child care subsidies correlates with a lower score on the ECERS-R, research-based assessment tool. The same study found that higher levels of educational attainment for center directors and teachers are correlated with higher scores on the ECERS-R.
29 Several states require child care providers to participate in QRIS and base subsidy amounts on the level of rating achieved.
30 Achieving levels in Utah's QRIS requires verification of a specified number of quality indicators.
31 A full list of the quality indicators for Utah's QRIS system is available online at http://ccpdi.usu.edu/htm/c-a-c/indicators/licensed-center-child-care/health-safety-lccc.
32 Janis Dubno, "High Quality Preschool Closes the Achievement Gap and Reduces Special Education Costs for At-Risk Children," Voices for Utah Children, http://bidwellkidsclub.com/Kids_Club_Preschool/Preschool_Research_files/Preschool%20Study%20reduces%20Special%20Education.pdf.
33 Utah Foundation, Lessons from Our Neighbor: Learning from Colorado's Educational Success, Research Report 731 (July 2015), http://www.utahfoundation.org/uploads/rr731.pdf.
34 UTAH CODE §53A-1b et seq. State System of Public Education, School Readiness Initiative (May 13, 2014), established the School Readiness Initiative and provides funding for approximately 800 low-income preschools through a "Pay for Success," financing model.
35 Ogden School District has partnered with the YMCA to provide preschool. Davis School District utilizes Head Start funding, in addition to federal educational funds to provide preschool to three- and four-year-olds.
36 Child Trends Data Bank, Early School Readiness (July 2015), http://www.childtrends.org/?indicators=early-school-readiness.
37 National Scientific Council on the Developing Child, The Science of Early Childhood Development. (2007), http://developingchild.harvard.edu/resources/reports_and_working_papers/science_of_early_childhood_development/.
38 Utah Department of Workforce Services, "Jobs with the Best Career Options 2010-2020," Utah Jobs Outlook (2012).
39 See Prosperity 2020, http://prosperity2020.com/the-plan-goals/; Governor's Education Plan, http://www.utah.gov/governor/docs/education/PACE2013Booklet.pdf.
40 Utah State Office of Education, Optional Extended Day Kindergarten (OEK): Report to the Utah State Board of Education (June 2011), available at http://www.schools.utah.gov/board/Reports/Optional-ExtendedDayKindergartenRptJune2011.aspx.
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42 Hedy N. Chang, Mariajose Romero, Attendance Works, Present, Engaged, and Accounted For, The Critical Importance of Addressing Chronic Absence in the Early Grades, National Center for Children in Poverty (September 2008), available at http://www.nccp.org/publications/pdf/text_837.pdf.
43 Utah Education Policy Center, University of Utah, Research Brief: Chronic Absenteeism (July 2012) available at http://uepc.utah.edu/_documents/chronic-absenteeism-research-brief.pdf.

44 See 42.
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