

UTAH'S FIFTH ANNUAL REPORT

ON INTERGENERATIONAL POVERTY, WELFARE DEPENDENCY
AND THE USE OF PUBLIC ASSISTANCE • 2016

UTAH INTERGENERATIONAL WELFARE REFORM COMMISSION ANNUAL REPORT





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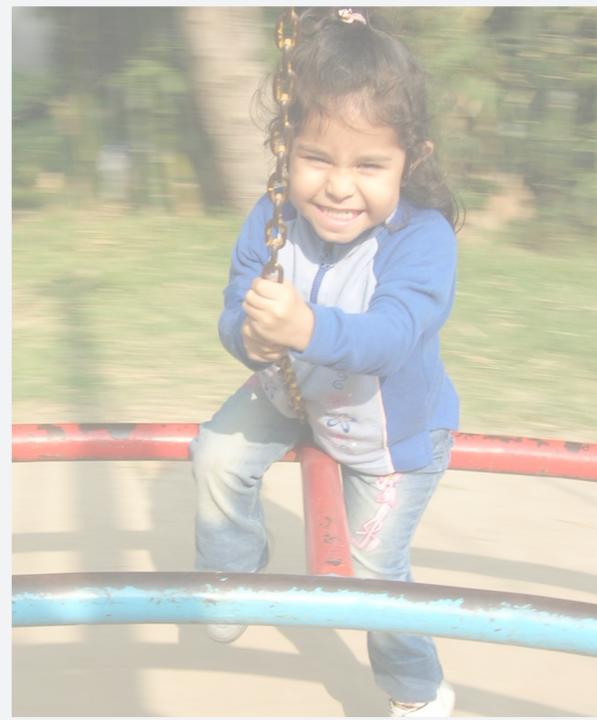
EXECUTIVE SUMMARY

Since its passage in 2012, the Intergenerational Poverty Mitigation Act (IGPA) elevated Utah as a national leader in efforts to end the cycle of poverty for families by focusing on the well-being of children.¹ This attention has not been achieved through the establishment of expensive new programs. Rather, the Act requires Utah to utilize research and implement data-driven policies to inform its decision making, ensuring families striving for better opportunities for themselves and their children realize their potential.

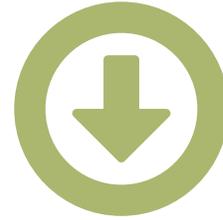
Through the past four years, political and public will has grown to address this issue, increasing opportunities for Utah children and supporting their path toward self-reliance into adulthood. These expanded opportunities ultimately reduce the need for costly public assistance programs and arm children with the tools necessary to achieve their dreams. Utah has seized the moment to focus on these families.

Utah has many strengths. It continues to gain recognition for having communities with low income inequality and high income mobility.² Recently the state ranked among the top 10 of all 50 states in a report focused on child well-being.³ The ranking includes outcomes for children across many of the same areas on which Utah's intergenerational poverty effort is focused: (1) early childhood development, (2) education, (3) family economic stability and (4) health. Although Utah is doing well in these areas, statewide data masks a great deal of variation, revealing uneven opportunities for Utah children across counties. The data compiled from previous reports and in the report that follows has been instrumental in revealing patterns of disadvantage across communities and allows the state, along with its local partners, to address limitations to opportunity for children in counties where at least 36 percent of the children are at risk of remaining in poverty.

Many of the challenges confronting children at risk of remaining in poverty evolve from economic hardship. For these children and their parents, there are a host of interrelated and complex issues that lack an easy, silver-bullet solution. These challenges include poor educational outcomes, antisocial behavior, delinquency, early pregnancy, drug addiction, and behavioral and mental health struggles. For the past four years, this annual report has utilized extensive administrative data from multiple state agencies to expose those challenges. Utah has become a leader in exposing the complexities of poverty with



Utah is paving the way nationally to end poverty for families by focusing on the well-being of children.



ambitious and clear goals, allowing comprehensive solutions to grow from communities that understand these problems firsthand.

The establishment of comprehensive solutions is guided by the roadmap established by Utah's Intergenerational Welfare Reform Commission, which includes clearly-defined goals that are measurable and achievable in the short and long term.⁴ Since its adoption, the Commission's plan has guided policymakers, agencies and communities to utilize the data provided in the annual report to meet the goals outlined in the plan. As a result, this report and the annual Commission report that follows contain discussion around the programmatic and policy changes already implemented to further these goals.

Once again, the report provides a status update on the families receiving public assistance across the important domains of child well-being. The report incorporates new indicators to continue developing the state's understanding of the challenges and barriers confronting families experiencing intergenerational poverty. This year, data is included on post-secondary education, adult corrections and academic outcomes by school for children at risk of remaining in poverty.

Fortunately, there are opportunities to break the cycle of poverty for children. This includes positive practices occurring in some of the state's most impoverished communities. In moving from establishing the challenge for families to finding solutions, the data provides an opportunity for the state and local communities to target limited resources and implement evidence-based solutions in the most effective and targeted way.

This year's report establishes:

- Updated indicators that affect the children at risk of remaining in poverty, including signs of modest improvement in each domain of child well-being.
- Promising practices occurring in Utah to address domains of child well-being.
- Ways the state has moved from data to action through developing comprehensive policies and programs that will improve outcomes for vulnerable families.

“We collaborate in ways that have never been done before with the Governor’s Office, our Legislature and our different agencies. That coordinated effort is helping families lift themselves and break that intergenerational cycle of poverty.”



—Governor Gary R. Herbert
2016 National Governor’s Association Summer Meeting

SECTION I: INTRODUCTION

A national dialogue is currently underway around the relationship between poverty and opportunity for the nation’s children. Unfortunately, it is well understood that eradicating poverty has been an elusive goal for the nation. According to some estimates, there are more than 13 federal agencies and 92 federal programs expending approximately \$1 trillion each year addressing the needs of families experiencing economic hardship.⁵ For some, this is evidence that current programs are not effective in eradicating poverty, while others argue poverty would be much worse in the nation if these expenditures were not being made.

Utah’s Unique Approach

As the country often treats all families experiencing poverty the same, Utah recognizes that poverty is more than simply a lack of economic resources. For many families living in entrenched poverty, the direct investment of economic resources cannot address the foundational challenges these families confront when living in poverty generation after generation.

The Intergenerational Poverty Mitigation Act (IGPA) is based on the premise that not all poverty is the same. As a result, Utah’s efforts to support those striving for a better future for parents and their children lies in distinguishing between situational poverty and intergenerational poverty.

This important and unique distinction, developed by the state, illustrates a clear understanding that when a family is confronted by a specific incident such as a job loss, health crisis or a death of a spouse, the public safety net often effectively supports families while weathering the storm and getting back on their feet. However, for families experiencing entrenched poverty generation after generation, the safety net alone cannot provide lasting, comprehensive support on the pathway to self-reliance. In some instances, the system may be limiting opportunity, discouraging employment and prohibiting personal responsibility.

In the past five years of research and data analysis, significant differences between situational poverty and



Situational Poverty

does not continue to the next generation, is generally traceable to a specific incident and is typically time limited.

Intergenerational Poverty is poverty in which two or more successive generations of family continue in the cycle of poverty, as measured through utilization of public assistance at least 12 months as an adult and at least 12 months as a child.

intergenerational poverty have started to emerge. The research is allowing Utah to conclude that the public safety net is effectively meeting the needs of families experiencing situational poverty. It has been determined that the majority of families receiving public assistance receive it for brief periods of time and then successfully return to self-reliance. In contrast, 25 percent of the adults receiving public assistance also received it as children. For those adults, there is a web of complex and interrelated challenges limiting their ability to be self-reliant such as low educational attainment, exposure to adverse childhood experiences and, in some cases, involvement with the criminal justice system.

The distinction between types of poverty is leading Utah to utilize the data contained in these annual reports to develop solutions to end the cycle of poverty by focusing on children. In accordance with the state's deep commitment to families, holding true to the values of supporting opportunity while expecting personal responsibility, the state is placing the family in the center of its approach to ending the cycle of poverty. Utah is implementing strategies that serve both children and their parents intentionally and simultaneously while holding programs accountable to outcomes leading to positive changes for families.

Utah's unique approach to meeting its goal of reducing the number of Utah families in the cycle of poverty, improving their quality of life and helping them become economically stable required it to define intergenerational poverty through the use of public assistance data. As a result, Utah utilizes enrollment in four public assistance programs as its starting point. The four programs included in identifying families are (1) Food Stamps (also known as SNAP, the Supplemental Nutrition Assistance Program), (2) child care subsidies, (3) Medicaid or Children's Health Insurance Program (CHIP) and (4) cash assistance.⁶ It is worth noting that participation in these programs does not necessarily reveal dependence on public assistance. In fact, many argue that child care subsidies and access to health insurance are work supports and not welfare programs. However, in the

absence of identifying individuals by other methods, Utah utilizes enrollment in these programs as a proxy for poverty.

Utilizing Data for Solutions

The first several years of the effort to reduce intergenerational poverty focused largely on understanding the experiences of families through the use of data. The complex nature of the issue requires comprehensive data sharing across state agencies, recognizing that many families interact with multiple state agencies. In an era of concerns around personal privacy and multiple data systems, sharing of data is complicated. The collaborative nature of the effort and the IGPA requires that the challenges arising from data sharing must be overcome despite it being a significant hurdle.

After three years, the data-sharing agreements are in place, and data across many state agencies and programs are included in this report. This provides the Intergenerational Welfare Reform Commission with the opportunity to understand families experiencing intergenerational poverty and develop solutions that address challenges that exist, rather than are assumed to exist, for these families.

It was not until the data matching occurred that the Commission developed its five- and 10-year plan and began providing detailed recommendations to meet its goals. After all, when utilizing data and requiring implementation of evidence-based programs and policies, solutions cannot be developed without first understanding the problem.

As the data has become more extensive, revealing opportunities for removing barriers to self-reliance, agencies involved in serving vulnerable families have begun delivering services through a family-centered, two-generation lens while also modifying policies to remove barriers to self-sufficiency. Additionally, the data has led the state to increase targeting limited resources to communities with a disproportionate share of children at risk of remaining in poverty. Moreover, the state recognizes that it alone cannot improve outcomes for families. As a result, local communities have been enlisted in the effort. Over the past

12 months, much of the statewide data was disaggregated by county and shared with 10 rural counties and two urban counties, allowing these communities to utilize the data to develop local plans to support families striving for self-reliance and increasing opportunity for their children.

In addition to providing an update on indicators established in previous reports, this report includes highlights of promising practices occurring in several of the targeted counties. Finally, the report outlines policy changes that have occurred advancing the goals of the Intergenerational Welfare Reform Commission. Those changes evolved from the data contained in previous data reports.





SECTION 2: BASELINE DATA WITHIN THE COHORTS

In 2015, Utah's economy continued to grow. The unemployment rate was a low 3.5 percent, and the job growth rate was 3.7 percent. In evaluating data in this report, it is clear that Utah's economic growth and tightening labor market are helping to improve employment and earnings among the adults experiencing intergenerational poverty. However, until the root causes of the poverty within these families are addressed, many will have difficulty ultimately escaping it.

There were positive signs that continued to emerge since last year's report. There was a decrease of families and individuals living at or below the federal poverty line, continuing a trend that has existed since 2011. As in previous years, there were members of the preceding year's IGP adult cohort exiting the cohort in the subsequent year. In 2015, approximately 8,000 adults exited the IGP adult cohort. Despite that figure, 25 percent of Utah adults receiving public assistance met the definition of intergenerational poverty.

The IGPA outlines the specific requirements of the data report.⁷ This data includes information on poverty within the nation and the state. Throughout the report, Utah applies its definition of intergenerational poverty to identify

the individuals and families evaluated. In addition to evaluating adults experiencing poverty and intergenerational poverty, information is included on children at risk of remaining in poverty as they become adults. This group of children requires the attention of those engaged in meeting the goals of the Intergenerational Welfare Reform Commission. These goals will not be met if the strategies involved in reducing intergenerational poverty focus solely on those children already in the cycle. Again, identifying children at risk through participation in public assistance programs is not an identical measure of the federal poverty measure; however, it is the best proxy available in the absence of alternative data.

This report begins with an update on all indicators provided in previous reports to evaluate the status of the adults and children receiving public assistance. It includes a detailed explanation of the cohorts identified since 2012, when the IGPA was enacted. The analysis includes detailed demographic information about individuals and the presence of risk factors among the identified children. The following section evaluates specific measures within each of the four areas of child well-being that are the focus of the Commission's goals.



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



Persons in family/ household	2016 Poverty guideline
1	\$11,880
2	\$16,020
3	\$20,160
4	\$24,300
5	\$28,440
6	\$32,580
7	\$36,730
8	\$40,890

Poverty in Utah

In 2016, a family of four is in poverty if their income is below \$24,300. The federal poverty level (FPL) varies depending on family size. Among the adults experiencing intergenerational poverty, nearly 40 percent have two or fewer children, and those single-parent families are in poverty if their income is \$20,160. In the “Family Economic Stability” discussion contained in Section 3 of this report, it is clear that

regardless of family size, the earnings of those experiencing intergenerational poverty are significantly less than the FPL.

The FPL does not include the role of additional resources that families living in poverty may receive or be eligible to receive, such as Food Stamps, school lunch program and housing subsidies.⁸ As a result, the Supplemental Poverty Measure (SPM) was established by the federal government as an additional measure of poverty that takes into account

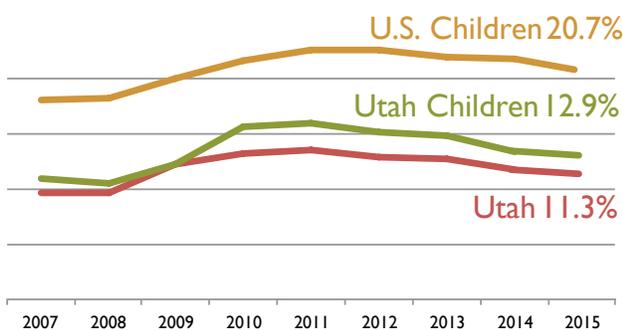
the equivalent income that many families living below the FPL receive through those additional resources. Although applying the SPM raises the income threshold among those in poverty, it is only a slight increase and would not significantly impact families experiencing intergenerational poverty.

In addition to failing to account for additional resources received by families in poverty, the FPL does not take into account variations in the cost of living by geographic areas. For example, the cost of living in Utah is lower than the cost of living in New York. Similarly, the cost of living for a family of four with one working parent in Weber County, \$49,344, is higher than Sevier County, \$47,016⁹ (see Appendix B.1—Living Wage in 12 Counties).

Although these variations and shortcomings of the FPL are important and well recognized, it is still the standard measure of poverty utilized throughout the country. It allows for the tracking of poverty rates over years and, as a result, is a factor in evaluating the nation’s economic conditions and the variations of those conditions across states.

Since 2011, Utah’s poverty rate has decreased as the state’s economy rebounded after the Great Recession. Between 2011 and 2015, the year in which the most recent data is available, Utah’s poverty rate decreased from 13.5 percent to 11.3 percent. There has been an even greater decrease in child poverty, which went from 15.9 percent to 12.9 percent

Child Poverty Continues to Decline
Poverty Rates, 2007–2015



There are enough Utah children living in poverty to fill

1,611  school buses.

in the same time period. However, there were still 115,994 children between the ages of 0 and 17 remaining in poverty.

Identifying the Cohorts

As noted, Utah is the only state currently studying the issue of intergenerational poverty.¹⁰ As a result, it established its own definition of intergenerational poverty and methodology for identifying and studying individuals meeting that definition.

Utah uses public assistance data as its basis for determining whether an individual is a member of a family “in which two or more successive generations of a family continue in the cycle of poverty and government dependence.”¹¹ In order to understand the extensive data contained in the report, it is necessary to describe the method of identifying the adults and children analyzed throughout the report. Often these groups are referred to as cohorts.¹² This report analyzes two adult cohorts and three child cohorts. The identification of the members in the cohorts is established annually based on participation in public assistance programs from the previous calendar year.¹³

It is important to note that utilization of public assistance data creates challenges for identifying all families experiencing long-term poverty. In most cases, it does not include (i) adults who grew up outside of Utah, (ii) adults who are not citizens of the United States, since many programs are not open to non-citizens, (iii) Native American families receiving public assistance through tribal-based safety net programs and (iv) adults who were children before 1989, which is the year when Utah began capturing

Each year, the adults analyzed increase by one year of age. This year, adults between the ages of 21 and 44 are included in the analysis. Typically, this causes an increase in the adults identified in the IGP adult cohort.

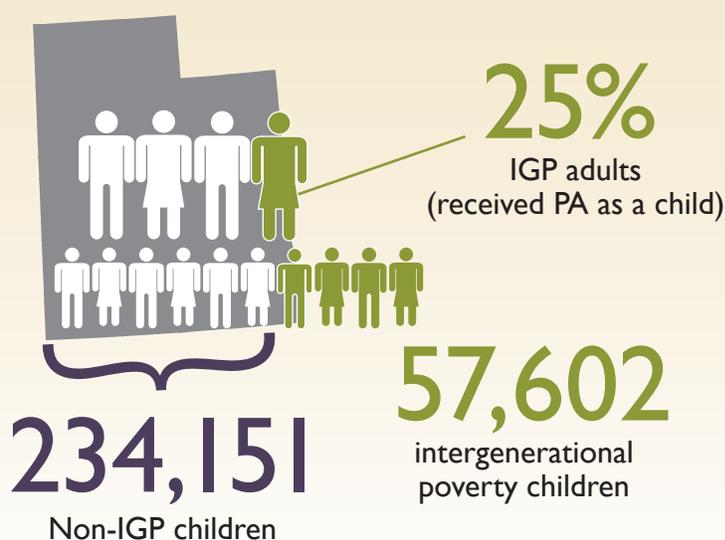
public assistance usage data. As a result, the data likely understates the number of adults and children experiencing intergenerational poverty. Despite these challenges, the data allows the state to better understand families experiencing long-term poverty. Moreover, there is little to suggest that the barriers and challenges identified throughout the report are different for families not captured in the data. It follows that programs and policies evolving from the data are expected to improve outcomes for those not included in the data. Additionally, there are other avenues for understanding those left out of this data analysis, such as participants in the School Lunch Program and data from the Census Bureau.

In this year's data, the adult cohorts include individuals between the ages of 21 and 44 receiving assistance from at least one of four previously identified public assistance programs for at least one month in the designated calendar

year. In this year's report, the information is from calendar year 2015 (CY2015). Once the adults who have received public assistance in CY2015 are identified, it is determined whether the adults also received assistance in similar programs for at least 12 months as a child. Upon making that determination, the two groups of adults are defined: (1) non-IGP (intergenerational poverty) adults, i.e., individuals between the ages of 21 and 44 with at least one month of public assistance in CY2015; and (2) IGP adults, i.e., individuals with receipt of public assistance for at least 12 months as an adult and at least 12 months as a child.¹⁴

As required by the IGPA, the focus of the intergenerational poverty effort is largely on the children. As a result, three groups of children are identified each year. Among those three cohorts of children are the following: (1) non-IGP children; (2) IGP children; and (3) at-risk children. The

Utah Adults Receiving Public Assistance (PA)



non-IGP kids are children of the non-IGP adults. In contrast, the IGP kids are the children of parents who fall within the IGP adult cohort. These are children whose parents received public assistance for at least 12 months as an adult and 12 months as a child. The third category, at-risk children, equals the sum of the non-IGP kids and the IGP kids.

At-Risk Kids = Non-IGP Kids + IGP Kids

This last group of children is the most significant. Currently, it is 33 percent of Utah's 0- to 17-year-old population. Utah will only be able to meet its goal of reducing intergenerational poverty if it broadens its focus beyond children already experiencing intergenerational poverty to include those most at risk of entering the cycle of poverty. This is particularly important since individuals experiencing economic hardship and poverty in childhood are more likely to still be poor as adults.¹⁵

Applying the Definition

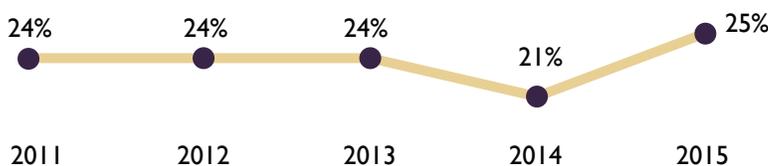
The definitions applied above have been in place since the first data report was released in 2012. Since that report, there have been fluctuations in the rate of adults experiencing intergenerational poverty. In 2015, there were 37,512 in the IGP adult cohort.

Population of Adults Receiving Public Assistance (PA)	
Total PA Adults	148,988
Non-Situational, Non-IGP Adults	75,150
IGP Adults	37,512
Situational Adults	36,326

In 2015, the IGP adult cohort comprised 25 percent of the individuals receiving public assistance. This rate has fluctuated each year within a range from 21 percent to the current 25 percent.

There are several possible factors contributing to the increase in the rate of adults experiencing intergenerational poverty. First, the data reveals that many adults met the definition of intergenerational poverty because of their public assistance experiences in childhood. For these adults, it appears the national economy in the early to mid-1990s may have impacted enrollment in public assistance programs. As a result, in 2015, many individuals receiving public assistance for at least 12 months as an adult received public assistance as a child, when national economic conditions were weak.

Slight Increase in Rates of Adults in IGP
Ages 21-44



33%

of Utah children are at risk of remaining in poverty as adults.

Increased public health coverage for adults is expected to result in an increase of health care utilization for children at risk of remaining in poverty.

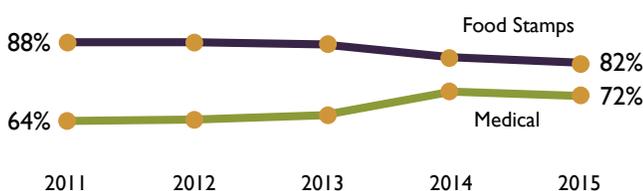
Second, the continued influence of the Affordable Care Act (ACA) and the extended open enrollment of the Primary Care Network (PCN) may provide further explanation for increased numbers of the IGP adult cohort having public health insurance. Since 2011, the rate of IGP adults receiving public health insurance has increased to 72 percent. These changes may have influenced the number of adults meeting the definition of intergenerational poverty.

Third, including an additional year of age among the adults analyzed contributes to the size of the group being identified as IGP adults.

The increase in the rate of adults covered by public health insurance may influence the rate of children receiving medical care. According to researchers, adults with health insurance are more likely to bring their child to a doctor on a regular basis.¹⁶ As a result, it is expected that increased participation in public health insurance among adults will result in increased health utilization for at-risk children. This increase would be a welcome improvement in the health indicators for children.



Majority Receive Medical and Food
Percent of IGP Adults, 2011–2015



Although the rate of adults experiencing intergenerational poverty has increased, nearly 8,000 adults previously defined as intergenerational poverty were no longer in the cohort in 2015. Among those no longer in the IGP adult cohort, half were no longer included due to a failure to meet a program requirement to continue receiving public assistance.

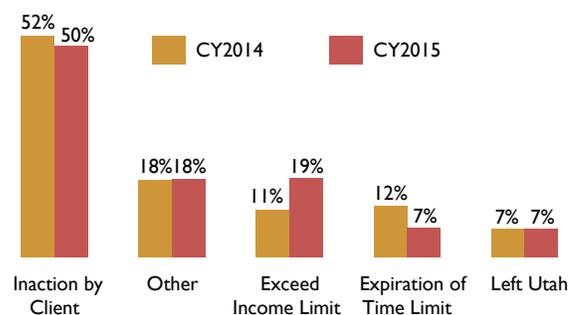
Among those who left the intergenerational poverty cohort, nearly 1 in 5 exited due to an increase of income, making them ineligible for benefits.

As in past years, the demographics of the IGP adults changed little: 79% have children, 68% are women and 78% are 35 or younger.

While studying the IGP adult cohort, it became clear that the effort to reduce intergenerational poverty must also focus on young adults at risk for remaining in poverty. In Utah, young adults between the ages of 18 and 21 form families at a younger age than the national average,¹⁷ which makes it even more important to ensure they are on a path to self-reliance. Developing job skills through exposure to employment opportunities is critical to ensure they are able to meet the basic needs of their young families.

Inaction by Customer Largest Reason for IGP Cohort Exit

Public Assistance Case Closure Reasons, 2014–2015



As in past years, the demographics of IGP adults changed little:



78%
are less than 35
years old

79%
have children

68%
are women

79% IGP Young Adults Delay Parenting
IGP 18–21 Year Olds With Children

	CY2014	CY2015
No Children	76%	79%
1 Child	18%	17%
2 Children	5%	4%
3+ Children	1%	1%



“My kids are the most important in my life. I just want them to have the best of everything like anyone else does.”

—Julie Cheever, single stay-at-home mother of a child with a disability

In 2015, there were 5,467 young adults experiencing intergenerational poverty. Among these young adults, only 21 percent have children, and 93 percent have never been married.

An analysis of the employment and wage status of these young adults is detailed within the discussion of the “Family Economic Stability” indicators.

The final groups analyzed throughout this report are the three child cohorts, including the non-IGP child cohort, the IGP child cohort, and the at-risk child cohort. The at-risk child cohort is the sum of the non-IGP child cohort and the IGP child cohort.

In 2015, there were 57,602 children experiencing intergenerational poverty. This was an increase of 9,321

children, but as was the case with the adults, part of the growth was likely attributable to the increased ages of the IGP adult cohort, which increases every year.

As in previous reports, the overwhelming majority of the IGP children were 12 years old and younger. For young children experiencing economic hardship, the stress inflicted on their families has long-term implications. First, a child growing up in poverty and experiencing hardship for at least eight years is more likely remain in poverty as an adult.¹⁸ In 2014, it was determined that 78 percent of IGP children between the ages of 15 and 17 received Food Stamps or cash assistance for at least eight years.¹⁹ Additionally, many young children facing economic hardship experience additional risk factors that jeopardize their long-term health, educational and developmental outcomes.²⁰



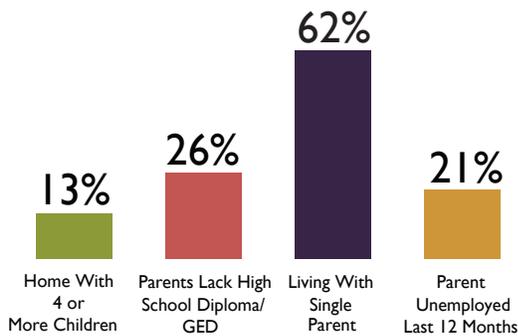


**Child Cohorts
2011–2015**

	2011	2012	2013	2014	2015
IGP Children	51,079	52,426	52,073	48,281	57,602
Non-IGP Children	N/A	N/A	236,056	234,391	234,151
At-Risk Children	N/A	N/A	288,129	282,672	291,753

Top Risk Factors for IGP Children

IGP Child Cohort, 0–9 Years Old, 2015



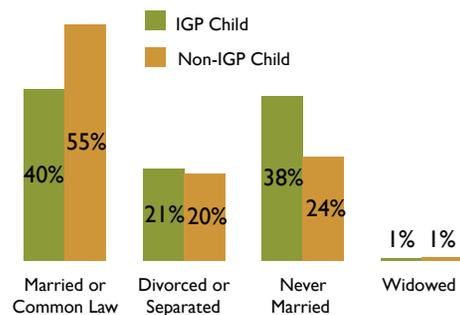
Among the IGP child and non-IGP child cohorts, the top risk factors present in their lives include living in single-parent households, having parents with limited education and having parents lacking year-round employment (see Appendix B.2—Risk Factors of Public Assistance Children, Ages 0–9).

The risk factor present for the greatest number of children is living in a single-parent household. Unfortunately, children growing up in single-parent households are more likely to live in poverty. In 2014, among single-mother families, 33

percent were impoverished.²¹ Among the children receiving public assistance, children within the IGP child cohort were more likely to live in a single-parent household—primarily single women—than the non-IGP children.

60% Growing Up in Single-Parent Households

Child Cohorts, 2015



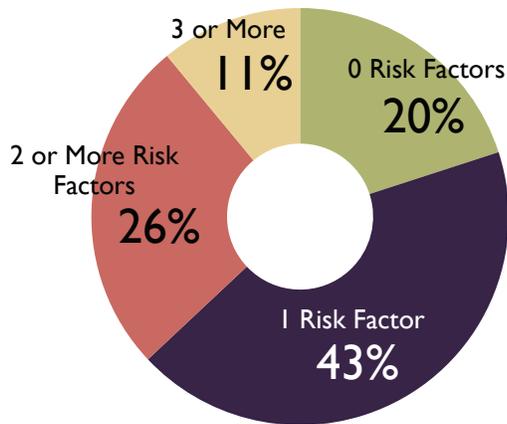
Beyond providing additional financial resources, children living in single-parent households often underperform on developmental and educational outcomes.²² Although this is the case, marriage is not a guarantee that a child’s development will flourish. Moreover, for children currently living in single-parent households, there are few effective

strategies to ensure that a single-parent household later becomes a two-parent household. Most evidence-based efforts focus on promoting healthy relationships for parents and children rather than marriage as an outcome.²³

Although it is not necessarily the case that the presence of one risk factor jeopardizes a child's success into adulthood, many of the at-risk children experience several risk factors.

Children Experience Several Risk Factors

% 0-9 Year Old IGP Children by Number of Risks



Non-IGP Kids Exhibit Fewer Risks

% 0-9 year old Non-IGP Children by Number of Risks

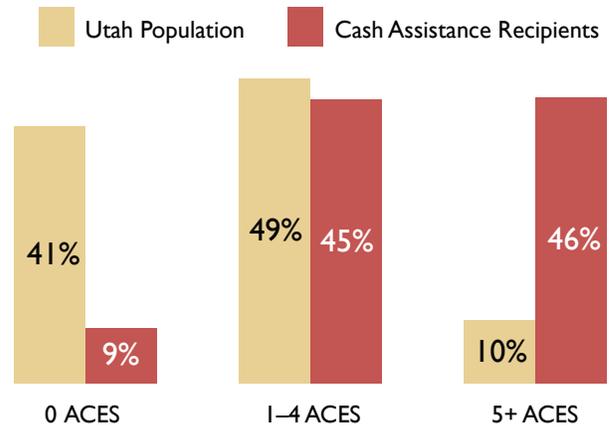


In addition to the National Center for Children in Poverty (NCCP) risk factors, often children growing up in poverty are exposed to adverse childhood experiences (ACES). The relationship between the number of ACES and long-term adult health outcomes are well established. Unfortunately, children with several ACES are more likely to experience domestic violence, substance abuse and heart conditions, and to engage in risky behaviors in adulthood.²⁴

A sampling of parents receiving cash assistance through Utah's Family Employment Program (FEP) reveals that this population experienced a greater number of ACES in childhood than the statewide population.

Greater ACES Among Cash Assistance Recipients

Sample Participants in FEP



ACES scores are particularly high among children with an incarcerated parent. The children of incarcerated parents are more likely to experience economic hardship and limited economic mobility as adults as well as lower educational achievement and a greater likelihood of school suspension and expulsion.²⁵ Unfortunately, there is some overlap between

17% of the IGP adults have been involved with the Utah Department of Corrections.



the IGP adult cohort and the adult correctional system. Among the IGP adult cohort, 17 percent had involvement with the Utah Department of Corrections (UDC).

The presence of multiple risk factors, in addition to the economic challenges confronting families, may be contributing to the outcomes reported in the areas of child well-being. That data continues to reveal there is room for improvement in the lives and future prospects for these young children.

Involvement with Corrections System		
	# in UDC	% in UDC
Non-IGP Adults	10,921	10%
IGP Adults	6,255	17%
18–21 Year Olds, at-risk	160	2%
18–21 Year Olds, IGP	104	2%



SECTION 3: IMPROVING CHILD WELL-BEING

It has been established that children in poverty often experience trauma that results from growing up in high-stress environments. The toxic stress experienced by children often leads to interrelated issues, including academic challenges, antisocial behavior, delinquency, risky behaviors and behavioral health struggles. Although significant, these challenges can be mitigated when clearly identified and addressed through evidence-based practice.²⁶

In three years, Utah has developed a better understanding of the children at risk of remaining in poverty as adults. This understanding has evolved through analysis of indicators within four areas of child well-being. The analysis across multiple areas recognizes the interrelated nature of the domains and the contribution each plays in disentangling poverty’s impact on limiting opportunity for children. Each area must be addressed in a comprehensive manner in order to ensure these children are provided the opportunity to strive for success from their earliest years and into their

careers. Previous reports discussed the significance of each area extensively.

In each area of child well-being, the indicators are updated. The data updates in each area will include several data-driven strategies implemented or expanded to narrow gaps between those experiencing intergenerational poverty and more affluent populations. These strategies will include those implemented in Utah communities that hold promise in improving outcomes for families. Many of these practices are taking place within counties with the highest rates of children at risk of remaining in poverty.

Although the data provides a great start in understanding the problem confronting families experiencing intergenerational poverty, it is not enough to simply understand the problem. Now that the challenges are well established, the data must be utilized to identify economically feasible, data-driven solutions to “help at-risk children in the state escape the cycle of poverty and welfare dependency.”²⁷

The focus on data-driven solutions is a critical requirement of the IGPA. In light of the current resources expended to address the needs of these families, government cannot afford to implement ineffective policies and programs. More importantly, families cannot afford to participate in programs that will not provide them with improved opportunity to strive for a better life.

As a result, The Intergenerational Welfare Reform Commission will utilize the data contained in this report to update its five- and 10-year plan with the adoption of data-driven strategies that will continue to advance its goals. It will be guided through that effort both by the expertise of the Intergenerational Poverty Advisory Committee and research demonstrating the most effective strategies for assisting families. Fortunately, there are several well-recognized national databases that rate strategies based on whether the programs are evidence-based practices (see Appendix C.1—National Databases on Evidence-Based Programs).

EARLY CHILDHOOD DEVELOPMENT



Increasingly, brain research is demonstrating the critical importance of the early years of a child's life. In fact, 80 percent of brain development occurs between the ages of 0 and 3 years old.²⁸ When children experience stress and trauma during that critical brain development phase, cognitive, social and

emotional impairments often arise. Fortunately, these impairments can be addressed through interventions that involve parents, communities and programs.

Since 2014, Utah has made progress in investing in interventions that have the greatest return when addressed in early childhood. These investments include expanding evidence-based home visitation programs and increasing access for low-income children to attend high-quality preschool programs. The importance of the early years in a child's life in establishing the critical foundation for success

led the Intergenerational Welfare Reform Commission to establish goals focused in this area. In 10 years, it is expected that children at risk of remaining in poverty will be emotionally, cognitively and developmentally prepared for kindergarten thanks to these interventions.

The indicators identified in the area of early childhood development include (i) access to health care beginning in infancy, (ii) access to quality child care, (iii) preschool participation and (iv) kindergarten readiness. The analysis of these indicators demonstrates that progress is being made in early childhood.

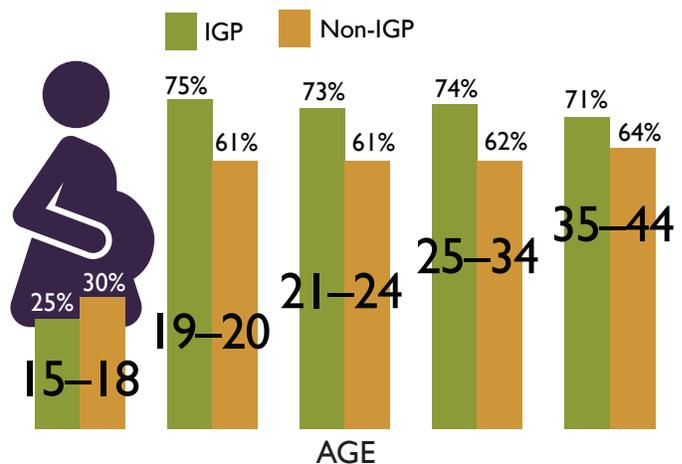
Access to Health Care Beginning in Infancy

The foundation of healthy childhood development begins prenatally. Access to prenatal care affords doctors the opportunity to discuss important health issues with parents. During those visits, parents become educated on diet, exercise, the value of breastfeeding and the struggles of post-partum depression while ensuring healthy in utero development.²⁹

Given the accessibility of health care to pregnant women, nearly three-quarters of pregnant women experiencing intergenerational poverty and covered by public health insurance received prenatal care. This rate was higher than the non-IGP pregnant women.

Prenatal Care Critical for Healthy Child Development

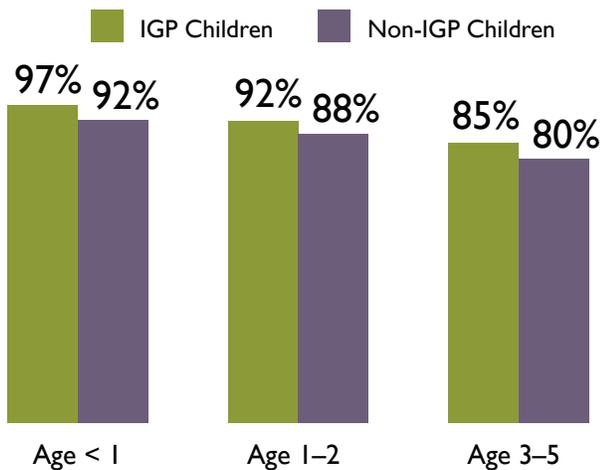
% of Pregnant Women Receiving Medicaid by Age



Following childbirth, newborns have several health care needs, including receiving the prescribed schedule of immunizations. Again, 5 percent more young children experiencing intergenerational poverty received medical care in 2015 than their non-IGP peers.

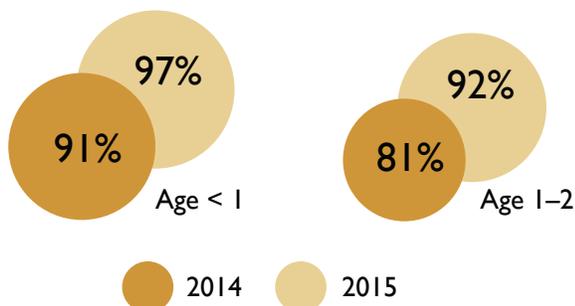
Fortunately, 97 percent of infants had the right start to healthy development, receiving medical care in their first year of life. That rate decreased as children age despite the American Academy of Pediatrics recommending an annual medical visit through adolescence.³⁰

Medical Care in Early Childhood Enrolled in Medicaid/CHIP



Since 2014, the rate of the youngest children receiving medical care increased among IGP children. The increase was particularly significant among children between the ages of 1 and 2.

Health Care Utilization Among Young IGP IGP Kids 0-2 Years Old, 2014-2015



The health care indicators relevant to healthy child development are showing positive improvements for the youngest children at risk of remaining in poverty. As parents continue to increase their access to medical care, this positive trend is expected to continue. In addition, the implementation of Medicaid Accountable Care Organizations (ACO) also may increase preventive services for children as a result of ACO performance measures.

Access to Quality Child Care

An increasing area of interest in the domain of early childhood development is access to high-quality child care. In Utah, 49 percent of children under 6 years old reside in families where there is a child care need.³¹ The research on early childhood development increasingly places the responsibility for young children's healthy development on the child care providers serving the needs of these children while parents are working. The federal Child Care Development Fund (CCDF) is the primary funding source for Utah's child care system. CCDF emphasizes the importance of ensuring children are cared for by high-quality child care providers by requiring states to utilize CCDF to increase access to high-quality child care providers, particularly for low-income children.³²

In Utah, 22,999 children attended child care through the use of child care subsidies, available primarily to low-income working parents in 2015.³³ Among these children covered by child care subsidies, 38 percent were children experiencing intergenerational poverty. These children had parents who either worked at least 15 hours per week or received cash assistance so they could receive job training and seek employment.



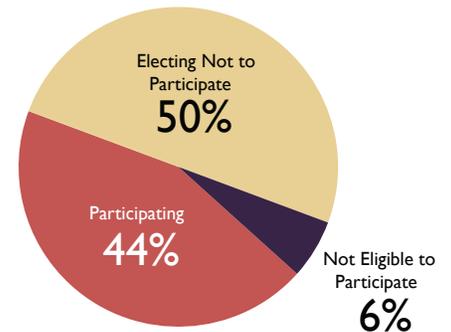
Utah's child care system supports parental choice regarding the setting in which a child receives care when parents are working. The child care programs in Utah are diverse, although most children receiving subsidies attend programs in licensed child care centers.

These programs play an important role ensuring young children develop secure and positive relationships with adults who can support their learning and healthy development. Of course, child care programs are not exclusively responsible for ensuring children's healthy development. Rather, parents, as children's first and primary teachers, also must contribute by establishing secure and safe relationships that support development.

One measure of determining whether child care providers operate a high-quality program is through their participation in the state's Quality Rating Improvement System (QRIS). The Utah QRIS includes quality indicators in the domains of health and safety, indoor and outdoor environments, parent engagement and professional development. Unlike most states, Utah does not base its child care subsidy rate on an established level of quality.³⁴ Instead, Utah's system is voluntary and open to only licensed child care programs and, as such, is considered pre-QRIS.

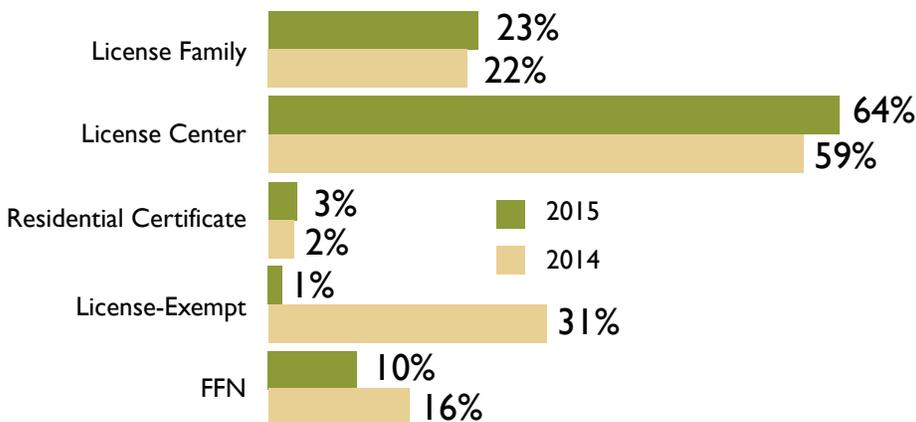
Among children receiving child care subsidies, 44 percent receive care in programs participating in Utah's QRIS. The majority of those children are in programs at the lowest levels. Since 2014, more children are in programs achieving enough quality indicators to achieve Level 3 status. The level of a program is determined by the number of self-reported quality indicators it has in place across the domains of quality rather than a progression of quality.

Children in Child Care by QRIS Participation
% of Children Receiving Subsidy



An important contributing factor to the quality within a child care program is the level of education among caregivers, teachers and program directors.³⁵ A recent study conducted by Utah State University revealed a correlation between the level of educational attainment of center directors and the

Children in Child Care by Program Type
Children Receiving Subsidy

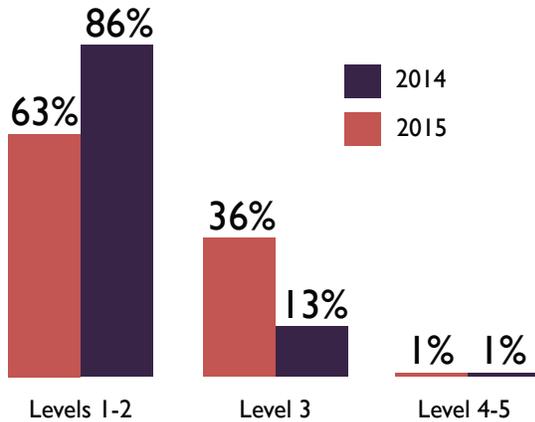


87% of children covered by child care subsidies receive care in licensed programs.



More Subsidy Children in Level 3 Programs

% Subsidy Children by QRIS Level



quality of the child care programs they are administering. The greater the educational attainment of the directors, the greater quality was found in the program.³⁶

Recently, the Utah Legislature provided additional resources to assist child care providers in attaining their Child Development Associate credential (CDA).³⁷ The CDA is recognized as the minimum level of education a child care teacher or caregiver should achieve when working in child care programs. However, 40 percent of Utah caregivers lack an education beyond high school.³⁸

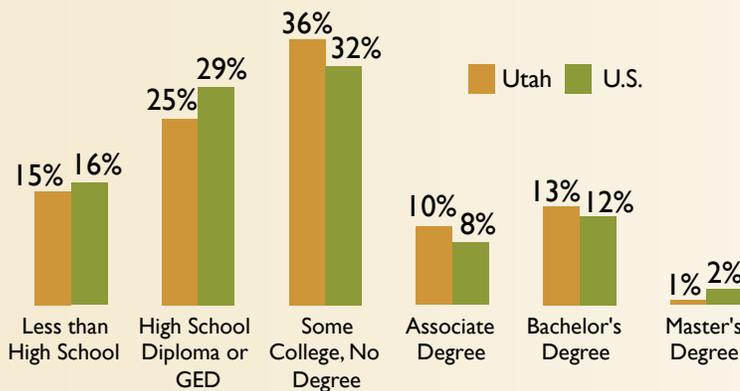
Preschool Participation

Although preschool often helps low-income children prepare for kindergarten and reduces the gap between low-income preschool-age children and their more affluent peers, only 41 percent of Utah's 3- and 4-year-olds are enrolled in preschool.³⁹ Utah recognizes the advantages and high return on investment in providing low-income children with access to high-quality preschool and continues to provide resources to ensure this access.⁴⁰

In 2015, only 44 percent of the state's public elementary

Educational Attainment of Child Care Providers

U.S. Census Data





As a result of Utah's increased investment, 98 preschool classrooms serving 3,155 low-income children received funding to improve program quality since 2014.

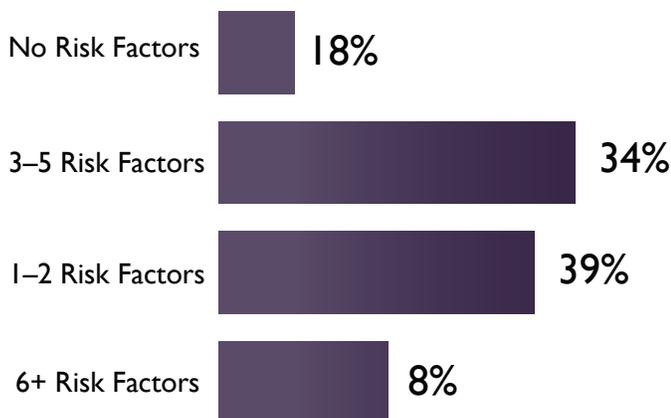


schools offered some type of preschool program. That rate increases among the schools serving at least 10 percent of children experiencing intergenerational poverty. In those schools, 63 percent offered a preschool program.

Fortunately, the Legislature established a scholarship program for 4-year-old children experiencing intergenerational poverty to attend high-quality preschools. In its first year, 206 scholarships were awarded. Among the 314 applications received, more than one-third of those children had between three and five additional risk factors beyond intergenerational poverty.⁴¹

IGP Scholarship Applications by Risk Factors

As Reported on Applications Received



Kindergarten Readiness Assessment

The primary purpose of utilizing evidence-based practices is to ensure taxpayer resources are expended responsibly on programs meeting expected outcomes. The primary outcome identified for high-quality preschool is that attendance in these programs will ensure students are cognitively, socially and emotionally prepared for kindergarten. Access to preschool is not the only strategy that aids in preparing children for kindergarten; there are a number of other methods of supporting young children's development, including healthy parenting and preventive health care. However, the recognized measure for determining whether preschool is effective is kindergarten readiness.

In some states, there is one statewide kindergarten readiness assessment. In those states, the kindergarten readiness assessment is utilized for all incoming kindergarten students. In Utah, most Local Education Agencies (LEA) utilize an assessment tool, but the tool varies dramatically by LEA.

In the absence of a statewide assessment, it is difficult for the state to evaluate whether a child is kindergarten ready or whether investments in early childhood programs are meeting expected outcomes. As a result of the challenges the variations among tools present, the Intergenerational Welfare Reform Commission has recommended that Utah adopt a standardized, statewide kindergarten readiness assessment. That recommendation has led to increased discussions among the education community, but as of publication, a common assessment tool has not been identified.

Until a statewide kindergarten readiness assessment is identified and utilized, it will be difficult to determine whether the investment in high-quality preschool is meeting the intended outcome related to kindergarten readiness.

Moving from Data to Action

“Evidence-based policymaking uses the best available research and information on program results to guide decisions at all stages of the policy process and in each branch of government.”

—The Pew Charitable Trusts

The early childhood data continues to reveal gaps that present challenges in preparing children for kindergarten and placing them on the path to achieving success. Despite its investment in evidence-based programs for young children at risk of remaining in poverty, the government is not exclusively responsible for the healthy development of its youngest citizens. Rather, personal decisions such as family formation and parenting skills are critical to child development. Parents must be empowered to meet their responsibilities as their child’s first and most important teachers, possessing the skills and knowledge necessary to support their child’s development.

The following highlights programs expected to further the Commission’s five- and 10-year goals in early childhood development. Those goals include the following:

Five-Year Goal: Align all systems involved in early childhood development to ensure Utah has the capacity to prepare for kindergarten children at risk of remaining in poverty.

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty as adults are emotionally, cognitively and developmentally prepared for kindergarten.

Promising Practice: Home Visiting

Recently, additional Temporary Assistance for Needy Families (TANF) resources were targeted to provide evidence-based home visitation services to the Central Utah Health Department as well as several rural counties targeted by the Intergenerational Welfare Reform Commission. With this expansion, only four rural counties with high rates of children experiencing intergenerational poverty lack home visitation services: Carbon, Grand, Iron and Kane.

The state’s evidence-based home visitation models include Nurse-Family Partnership (NFP) and Parents As Teachers. Both programs are designed for parents with young children to obtain strong parenting skills that promote children’s healthy development. Both programs target low-income women, some

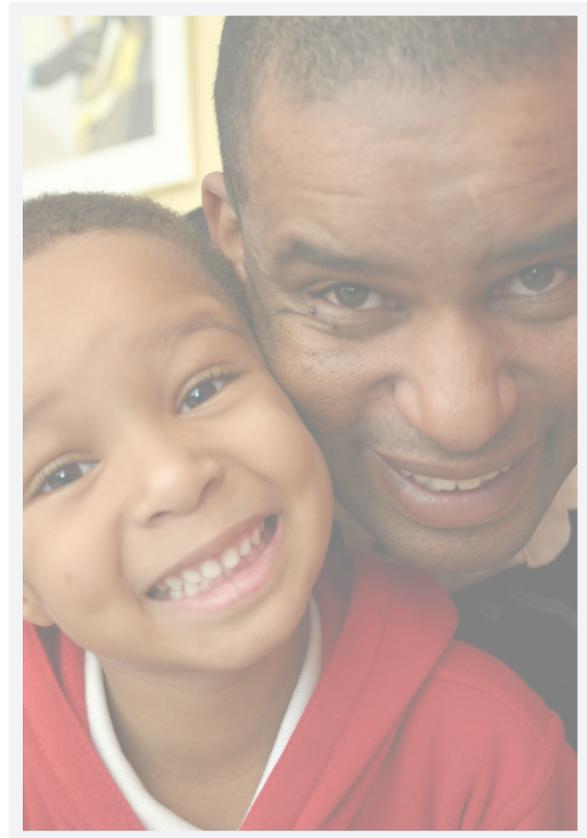
of whom are first-time parents. In NFP, services begin by the start of the third trimester of pregnancy.

Both programs have been effective in meeting outcomes around sustaining healthy pregnancies, supporting healthy child development, increasing economic self-sufficiency and playing the critical role as a child’s first teacher. One of the participants, Kate, began NFP homeless and hopeless about her future. She was an unemployed high-school dropout who suffered from mental illness. Through NFP, Kate obtained employment and currently is working toward completing her GED. Most importantly, Kate discovered that she is a capable, loving and responsible mother to her beautiful son. She is addressing his speech delay through other state resources and sees his future full of promise and hope.

Promising Practice: High-Quality Preschool in Rural Utah

Since 2014, Utah has increased investments in improving the quality of early childhood development programs. It is expected that increased investments in these early childhood programs will eventually result in a decrease of costlier governmental programs serving these children when they become adults. Utah's utilization of the data allows it to effectively target its investments in high-quality preschools to geographic areas and populations that will demonstrate the greatest outcomes for young children.

As a result of the investments, children in rural counties have access to high-quality preschools and other programs. In 2016, the Utah Legislature approved an appropriation of \$11 million dollars from TANF to expand access to high-quality preschool for low-income children and children experiencing intergenerational poverty. As a result of these funds, rural counties with high rates of children at risk of remaining in poverty will offer high-quality preschool. In these counties, which include Iron, Sevier and Washington, an additional 375 children will be served in high-quality preschools.



In addition to realigning resources to programs and populations offering the greatest potential for effectively preparing children for kindergarten, the gaps revealed through the early childhood development data led to additional policy and programmatic changes. Those changes are highlighted in the following table.



**Programs, Policies and Procedures Contributing to Commission Goals:
Early Childhood Development**

POLICY, PROGRAM OR PROCEDURE	PURPOSE	EXPECTED OUTCOME
Supporting Healthy Development of Young Children		
Home Visitation Expansion	Expands access to evidence-based home visitation programs to identified rural counties and target populations impacted by intergenerational poverty	Improve parenting skills, which promote healthy child development, and parent outcomes, which lead to self-reliance
Job-Search Child Care	Allows continuing participation in child care programs among families covered by child care subsidies for up to 60 days upon a job loss	Support the development of healthy relationships between young children and caregivers by providing continuity of care despite the disruptions in employment that may make parents ineligible for child care
Increased Access to High-Quality Preschool		
Intergenerational Poverty Scholarships	Awards scholarships to 4-year-old children experiencing intergenerational poverty to attend high-quality preschool	Increase kindergarten readiness for children experiencing intergenerational poverty
High-Quality School Readiness Grants	Funds grants to public and private preschool programs to improve program quality through adherence to the preschool quality criteria established in Utah Code §53A-1b-105	Increase the number of high-quality preschool programs serving low-income children throughout the state
High-Quality School Readiness Expansion Grants	Funds grants to high-quality public and private preschool programs to expand the capacity of the programs to serve a greater number of low-income 4-year-olds	Increase kindergarten readiness among low-income children
Professional Development of Early Childhood Educators		
Teacher Education Assistance for College and Higher Education (T.E.A.C.H.) Program	Provides 30 grants to child care directors, caregivers and teachers to obtain associate's degrees in early childhood education if they commit to work in communities serving low-income children	Increase the educational attainment of child care workers to ensure child care program quality continues to improve
Child Development Associate Credential	Provides funding for at least 300 scholarships to individuals pursuing or continuing employment in early childhood programs	Increase the educational attainment of child care workers to ensure child care program quality continues to improve

“One child, one teacher, one pen and one book can change the world.”

—Malala Yousafzai, Nobel Laureate



EDUCATION

Increasingly, an education beyond high school is a minimum requirement in most job sectors to provide an income sufficient to meet the basic needs of a family. Adults with a post-secondary education, which includes two-year degrees and trade certificates, experience lower unemployment rates and higher lifetime earnings. In 2015, the unemployment rate among those with a bachelor’s degree was 2.8 percent compared to 5.4 percent for those with only a high-school diploma.⁴² The gap between those rates tends to be greater during periods of economic decline.

As a result of the relationship between educational attainment and employment, one’s success in adulthood is connected to academic achievement. In order to ensure children at risk of remaining in poverty have the opportunity to break the cycle of poverty in which they are growing up, they must be progressing in their academic careers to ensure high-school graduation and later success in post-secondary education or training.

The following indicators have been identified to assist the Commission in tracking progress of its 10-year goal to ensure that all children at risk of remaining in poverty graduate from high school at a rate equal to the statewide graduation rate. The data continues to reveal that children at risk of remaining in poverty are struggling in key educational indicators, with only a modest improvement in results since 2013.

Juvenile Justice

As noted in the introduction to child well-being, children experiencing poverty often face interrelated challenges. Many children in poverty have an increased rate of engaging in risky behaviors. In some cases, those risky behaviors lead to interactions with the juvenile justice system, and those often follow children into adulthood. One approach to reducing delinquent behaviors is to increase engagement with education.

In 2015, among the children at risk of remaining in poverty, 29 percent were involved in the juvenile justice system, according to data from the Court and Agencies’ Record Exchange (CARE). It must be noted that not all of these children had delinquency-type involvement with the juvenile justice system. In fact, some are identified in the CARE data simply because they enrolled in a Youth Services program because of a family conflict or other family issue.



IGP Youth Involved with Juvenile Justice System
10–17 Years Old





“All children of the state are entitled to reasonably equal educational opportunities regardless of their place of residence in the state . . .”

—Utah Code §53A-17a-102

The following provides detail on each of the categories in which the children experiencing intergenerational poverty are involved with the juvenile justice system (see Appendix C.2—Description of Juvenile Justice Categories).

Involvement with Juvenile Justice Services, IGP Children Ages 10–17

Type of Service	2013	2014	2015
Youth Services	5%	6%	6%
Delinquency Referral	19%	19%	17%
Juvenile Court Diversion	11%	11%	9%
Habitual Truancy	3%	3%	3%
Delinquency Adjudication	9%	10%	9%
Delinquency Alternatives	2%	2%	2%
Secure Detention	5%	5%	4%
Juvenile Probation	2%	3%	2%

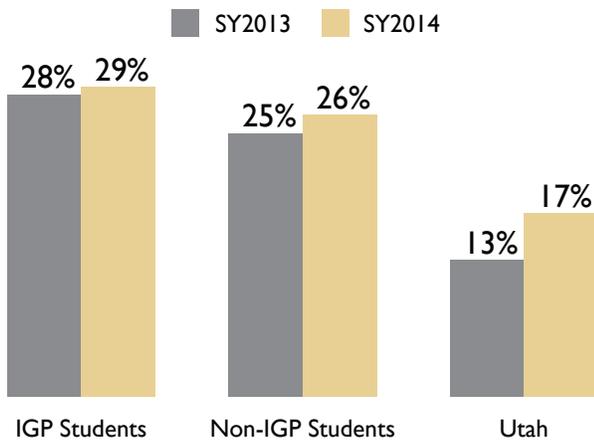
Extended-Day Kindergarten

Utah’s minimum school program requires the state to provide kindergarten but does not specify the length of the kindergarten day.⁴³ In many districts, there is an option for certain students to attend an extended-day kindergarten program. The availability and participation in extended-day kindergarten is particularly valuable for low-income children who often need additional time in the classroom and lack access to enrichment programs that help them catch up outside of school.

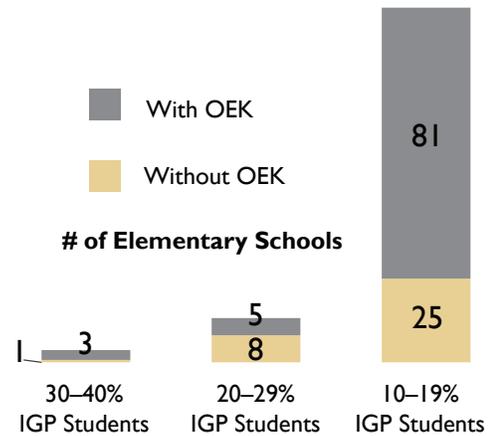
Although there is an indication that participation in extended-day programs addresses academic gaps that exist between kindergarten students based on their income, few students at risk of remaining in poverty participate in optional extended-day kindergarten (OEK) programs. This may be due to a school not offering OEK or parents not enrolling children in OEK where programs are available (see Appendix B.3—Schools Serving >10% IGP Students). However, the majority of schools in which 10 percent or more of the students are experiencing intergenerational poverty offer OEK.

72% OF THE SCHOOLS serving 10 percent or more of students experiencing intergenerational poverty offer an Optional Extended Day Kindergarten program.

OEK Participation Increases Slightly
All Kindergarten Students, SY2013–2014



Majority of Schools Serving IGP Students Offer OEK
10% or More IGP Students



Only 17 percent of children who were chronically absent in kindergarten and first grade read on grade level after third grade.⁴⁵

In 2016, the Utah Legislature considered increasing the availability of extended-day kindergarten; however, those efforts failed. As a result, the data regarding participation in OEK programs has experienced only slight improvement between the 2013 and 2014 school years.⁴⁴

Similar to preschool access, there is increased access to OEK programs among schools where 10 percent or more of the students are experiencing intergenerational poverty.

Given the positive outcomes that result from participation in extended-day kindergarten programs, increasing access and participation among children at risk of remaining in poverty will contribute to the Commission’s goal of improving graduation rates among these students.

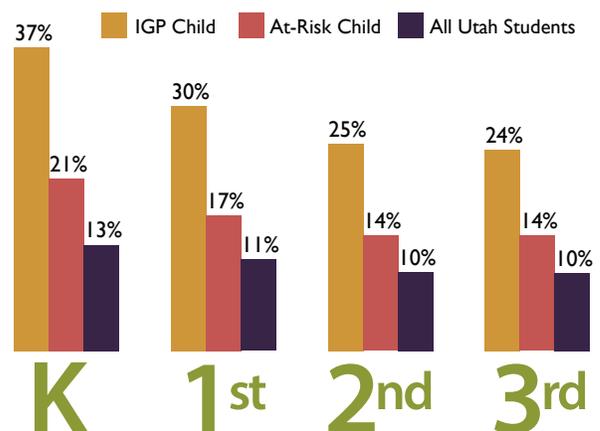
Chronic Absence

Chronic absence occurs when a child misses 10 percent or more days of school for any reason. When a student is not in school due to illness or lacking transportation, it affects academic success.

The early grades are critical to establishing a foundation for academic success, hence a focused analysis of chronic

absence rates. These rates have a cumulative effect—children chronically absent one year are more likely to be chronically absent in the following years. Unfortunately, children experiencing intergenerational poverty are much more likely to be chronically absent than the students in the non-IGP child cohort, although those rates did decrease slightly between 2013 and 2014.

Chronic Absence in the Lower Grades
SY2014



One of the most important ways to reduce chronic absence rates is to first become aware of the rates among students. With this awareness, a school then can determine whether it needs to develop a strategy for addressing it. Over the past few years, Utah schools have been identifying rates of chronic absence among students, including those experiencing intergenerational poverty (see Appendix B.3—Schools Where 10% or More Students Are IGP).

Standardized Test Scores

Standardized test scores continue to be used as an important indicator of academic progress despite increasing efforts among educators to emphasize indicators related to social and emotional learning.

In 2014, Utah changed its standardized testing tool from the Criterion Referenced Test (CRT) to the Student Assessment of Growth and Excellence (SAGE) test. CRT and SAGE test results are not comparable. This is due to a number of factors, including: (i) the adoption of new Utah Core Standards, (ii) a shift in the meaning of “proficiency,” (iii) differences in test design and (iv) changes in scoring.

Since CRT and SAGE test results are not comparable, this year’s report includes only one year of SAGE testing data. Although longitudinal standardized test data is not available on the language arts and math scores, a new indicator, student growth percentile (SGP), is provided to add context to the SAGE scores.⁴⁶ The use of the SGP provides an additional indicator to compare outcomes of students at risk of remaining in poverty within the state student population.

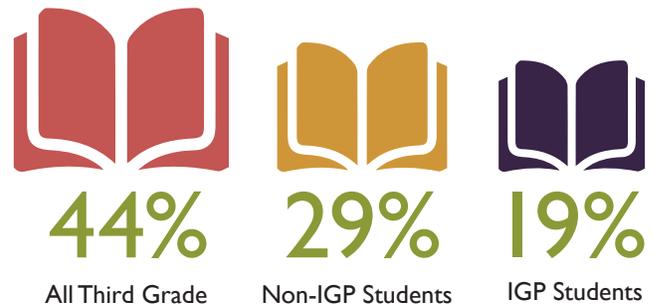
A student’s SGP is a measure of the growth in individual abilities compared to growth of students in a peer group.⁴⁷ While CRT and SAGE tests are not comparable, SGPs remain comparable from year to year and are provided in addition to the SAGE results.

Language Arts Proficiency

In third grade, the primary indicator related to academic progress is language arts proficiency. Third-grade language arts proficiency recognizes the important relationship between early literacy proficiency and later learning. At this early point in a child’s academic career, the gap between the students experiencing intergenerational poverty and all students is incredibly wide.

Third-Grade Language Arts Proficiency

SAGE Scores, SY2014

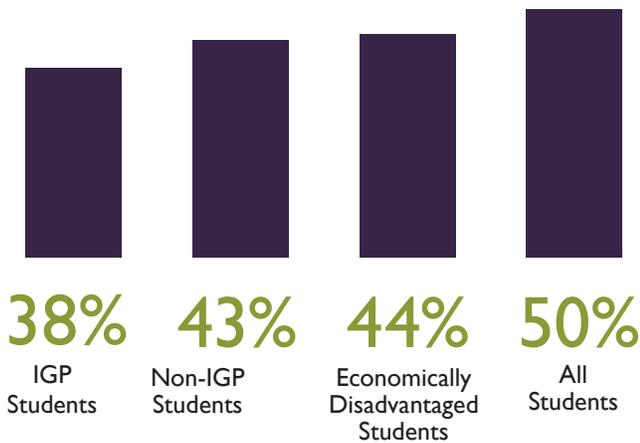


Since previous years’ data on language arts proficiency is not comparable, SGP provides further insight into the SAGE



proficiency scores. The SGP for students is calculated based on a course sequence with a prior-year test. As there is no second-grade language arts test, the fourth-grade language arts SGP is provided. The SGP shows a student's growth relative to his or her peers from third- to fourth-grade language arts. The chart below shows median growth percentile (MGP) for each cohort of students. By definition, the MGP for the "all students" group is always 50. According to Utah's school grading report card, a student is considered to achieve adequate growth if his or her SGP is 40 or higher. This means that the student grew academically equal to or better than 40 percent of his or her peers.

Fourth-Grade MGP by Student Type
SGP, SY2014



In combination with the SAGE scores, the MGP reveals significant gaps between IGP students and all Utah students.⁴⁸ Students experiencing intergenerational poverty did not experience academic growth between third and fourth grade at the same rate as other populations of students.

Math Proficiency

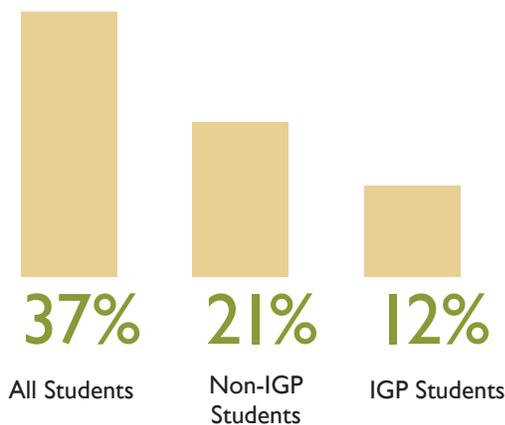
In third grade, the standardized test scores determine whether the early educational years devoted to literacy ensure that students effectively learned to read. Once students learn to read, they are reading to learn. The eighth-grade math proficiency scores are one indicator illustrating whether students are effectively reading to learn. In addition, proficiency on eighth-grade math is a predictor of graduation, college completion and success in adulthood.⁴⁹

As with the language arts scores, the math proficiency scores reveal massive disparities in the proficiency rates between the intergenerational poverty students and all Utah students.

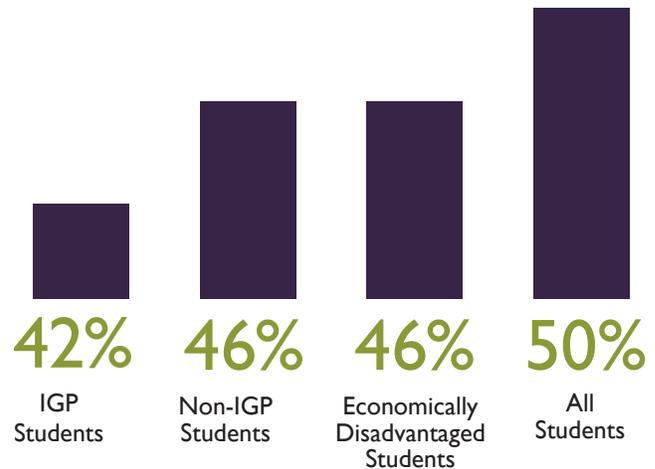
Although proficiency rates are low for all Utah students, a 12-percent proficiency rate and 21-percent proficiency rate for IGP and non-IGP students, respectively, is alarming.

When the eighth-grade math SGP is added to the analysis, the SAGE results are not quite as bleak. The data reveals that there was greater growth in math among IGP and non-IGP students than in third-grade language arts.

Eighth-Grade Math Proficiency Low
SAGE Scores, SY2014



Eighth-Grade Math MGP by Student Type
SGP, SY2014



Average ACT Composite Score for IGP Students

15.8
SY2012

17.2
SY2013

17.1
SY2014



ACT Scores

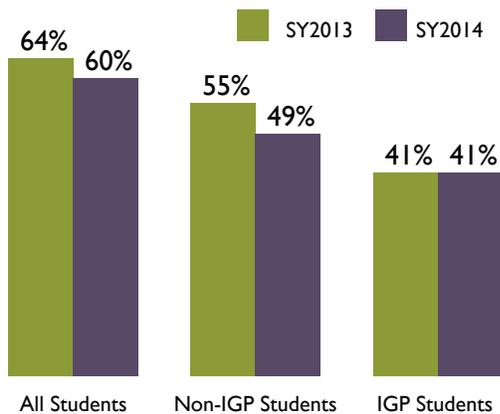
Since 2014, Utah has provided the ACT assessment free to all 11th-grade students. This assessment measures student college readiness. The ACT scores for IGP students have improved since the indicator was first reported in 2014; however it follows the same trend of earlier academic indicators. Students experiencing intergenerational poverty perform worse on the ACT than the student population as a whole. The challenge for the education community is to reverse the trajectory for these students.

The ACT scores for IGP students have improved since the indicator was first reported in 2014.

Many universities still rely on the ACT to determine admissions. A composite score of at least an 18 is an important benchmark, although a low ACT score is not necessarily a barrier to admission, particularly for two-year programs.

Students Scoring Above 18 on ACT

ACT Composite Score, SY2013–2014



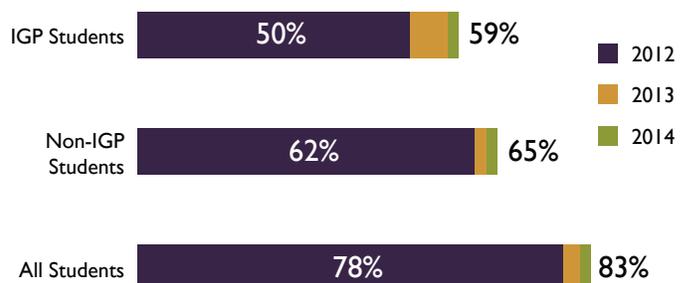
High School Graduation

The educational goal established by the Commission to increase graduation rates among IGP students is not relevant only to the work of the Commission. That goal also aligns with Utah Governor Gary Herbert’s goal that 66 percent of all Utah adults have a trade certificate or post-secondary degree by 2020.

These complementary goals are improving statewide graduation rates, which in turn, seems to be influencing rates for all student types.

“66 by 2020” Influences Graduation Rates

SY2012–2014



Moving from Data to Action

Since the Intergenerational Poverty Mitigation Act (IGPA) was implemented, several initiatives have evolved to address the educational outcomes of Utah students with emphasis on low-income children.

In addition to several initiatives underway to increase statewide graduation rates and increase enrollment in post-

secondary education and job-training programs, the following highlights efforts expected to further the Commission's five- and 10-year goals in education.⁵⁰ Those goals include the following:

Five-Year Goal: Align systems assisting with educational outcomes to ensure efforts are focused in schools disproportionately impacted by intergenerational poverty. These systems include all levels of governments, local schools, communities, businesses and nonprofit organizations.

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty as they become adults graduate from high school at a rate equal to the statewide rate.



Promising Practices: Piute School District

Piute County recognizes the need for increased economic development to improve the county's economic conditions. These economic development goals require an educated workforce. In recognition of that relationship, Piute School District is creating a culture where enrollment in post-secondary education or training programs is expected of all students, even among those who are first-generation college students.

Piute School District established five professional learning communities (PLC) to address student learning gaps, utilizing data and ongoing communication across the PLCs. The PLCs work with a coordinated approach to support students and ensure that despite where a student is located on the achievement continuum, he or she is receiving the academic support necessary to progress within that continuum. These PLCs are supported with increased investment from the school. This increased investment led to the establishment an average teacher-to-child ratio of 1:12.

In addition to the PLCs, Piute School District partners with Snow College to provide students with access to college advisors who work with the high-school counselor to enroll students in post-secondary programs. This partnership places students on career pathways that leverage the strengths of each student.

Piute School District is placing the student at the center of their education and implementing strategies to teach the whole student. This approach of meeting not only the academic needs of students but also social and emotional needs is allowing Piute School District to increase its graduation rates and increase post-secondary enrollments among its students.



In addition to local approaches implemented by Local Education Agencies (LEAs), the educational outcome data has led to the following policy and programmatic changes.

**Programs, Policies and Procedures Contributing to Commission Goals:
Education**

POLICY, PROGRAM OR PROCEDURE	PURPOSE	EXPECTED OUTCOME
Improving Educational Outcomes		
Partnerships for Student Success	Establishes a grant program to evaluate whether establishing community schools in low-performing school districts supports improvements in academic outcomes for children living at or below 185% FPL	Improve educational outcomes for low-income students through the formation of cross-sector partnerships that use data to align and improve efforts focused on student success
Intergenerational Poverty Interventions in Schools	Provides grants to public and private afterschool programs to provide additional academic support and other life skills to children at risk of remaining in poverty as adults	Improve educational outcomes through participation in high-quality afterschool programs
Monthly Education Court Report	Ensures that the juvenile court bench is provided with regular updates on the educational outcomes of children engaged in the juvenile court system	Improve educational outcomes for children engaged in the juvenile court system





“Inherently in the human spirit is the desire to pay your own way and to work to support yourself.”

—Governor Gary R. Herbert



FAMILY ECONOMIC STABILITY

An integral part of ending the cycle of poverty involves a family’s economic stability. A family must have enough income to meet children’s basic needs, including food, shelter, clothing and transportation. As evidenced by participation in public assistance programs, many families are unable to meet these basic needs. The report does not establish a cause for that inability; rather, it identifies indicators that, if improved, may lead to a family’s capacity to meet those basic needs.

The Commission’s 10-year goal within this area of child well-being is to ensure that children at risk of remaining in poverty are living in families that are self-reliant. The interim, five-year goal is to first ensure the basic needs of these children are being met. This may be done through a combination of public assistance programs, faith-based programs and employment.

Indicators of progress being made to meet this goal include (i) adult educational attainment, (ii) stable employment, (iii) wages and (iv) housing. Although foundational changes leading to economic stability among families have not occurred, data shows increased employment and wages for families. These are positive signs, but it is too soon to conclude these changes will remain during turbulent economic conditions.

In an effort to add further context, data is included on participation in post-secondary education and training as well as housing affordability.

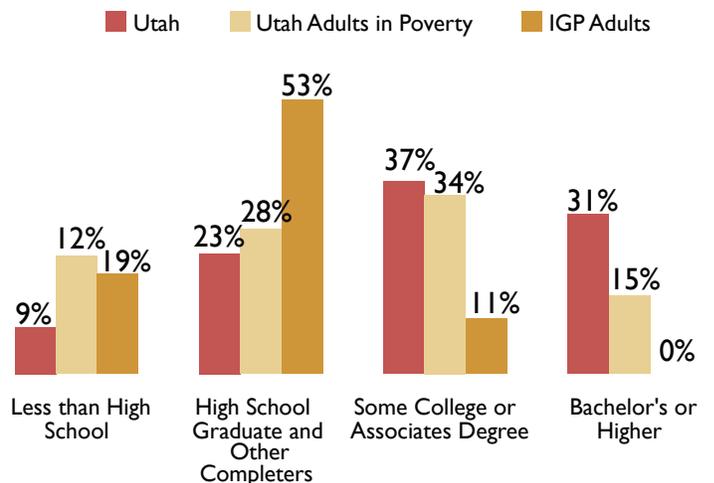
Educational Attainment

The modern economy places increased importance on higher levels of educational attainment. It is increasingly unlikely that an individual with only a high-school diploma can find employment paying a wage to meet the basic needs of a family. Although a four-year college degree is not required for this purpose, additional types of post-secondary training or certificates may also lead to economic self-reliance.

Unfortunately, among those individuals who reported their level of educational attainment, post-secondary education and training is incredibly low among the adults and young adults experiencing intergenerational poverty.⁵¹ In fact,

Majority of Adults Lack Education Beyond High School

IGP Adults, 2015



educational attainment for these populations of Utahns lags significantly behind the Utah adult population.

This year, additional data is included from both Utah System of Higher Education (USHE) and Utah Colleges of Applied Technology (UCAT) to add some additional context to the educational attainment data.

The data includes information on those enrolled in both systems as well as awards given. Among the UCAT enrollments, only 2 percent were individuals experiencing intergenerational poverty, and only 5 percent were enrollments from the non-IGP cohorts. This data identifies an area to target for enrollment growth, given the economic value and short-term time commitment often required to obtain a trade certificate.

Combined, the USHE and UCAT enrollments reveal that one in five IGP young adults were enrolled in post-secondary education but a much smaller percentage of the members of the IGP adult cohort were enrolled.

Total Post-Secondary Enrollment, 2015		
	Enrolled	% Enrolled
IGP Young Adult	1,165	21%
Non-IGP Young Adult	1,889	21%
IGP Adult	3,224	9%
Non-IGP Adult	15,093	14%

Only a small share of the adult and young adult cohorts have received an award from a USHE school.

USHE Awards, Adults and Young Adults	
	Receiving Post-Secondary Awards
IGP Young Adult	1%
Non-IGP Young Adult	1%
IGP Adult	4%
Non-IGP Adult	10%



The majority of awards to young adults were certificates or associates degrees, which is not surprising given that these young adults are between the ages of 18 and 21 years old. In contrast, a greater share of the adults received bachelor's degrees or higher.

USHE Awards by Type, 2015									
	Certificate < One Academic Year	Certificate One Year	Associates Degree	Bachelor's Degree	Post-Baccalaureate Certificate	Master's Degree	Post-Master's Certificate	Doctor's Degree – Professional Practice	Doctor's Degree – Research/Scholarship
IGP Young Adult	13	2	29	1					
Non-IGP Young Adult	26	2	54						
IGP Adult	288	77	721	463	14	20		2	3
Non-IGP Adult	626	233	3,956	5,330	59	442	5	85	14
TOTAL	953	314	4,760	5,794	73	462	5	87	17

\$13,424 was the average annual wage for IGP adults working in 2015. Utah's average annual wage that year was \$44,318. In 2015, the federal poverty level for a household of four was \$24,250.

Until the adults and the young adults have the opportunity to obtain post-secondary education or training, their ability to meet their responsibilities as parents will be challenged and lead to continuing public assistance utilization.

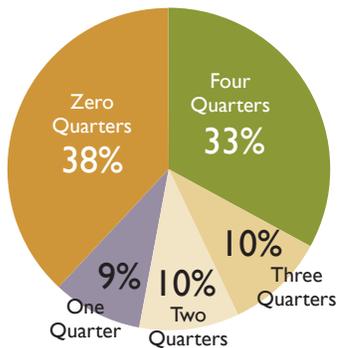
Employment and Wages

The relationship between educational attainment and attachment to the labor force is supported through data. Typically, the unemployment rate among individuals who lack an education beyond high school is higher than for those with higher levels of education.

Among the adults experiencing intergenerational poverty, there continues to be a strong desire to work, as evidenced by the rates of employment in 2015. These rates have remained relatively stable since the baseline for this indicator was established using 2013 data.

Majority of IGP Adults Worked in 2015

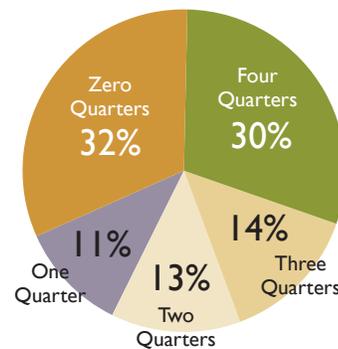
Based on Quarterly Wage Data



Similar rates of employment exist among the young adult intergenerational poverty cohort, although a greater share of those young adults worked in 2015.

More Than Two-Thirds of IGP Young Adults Worked in 2015

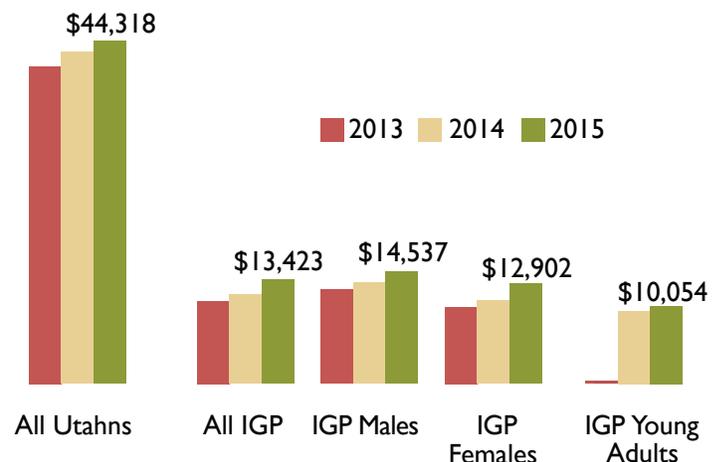
Based on Quarterly Wage Data



Fortunately, wages for these families increased significantly between 2014 and 2015. In fact, wages increased 11 percent for the IGP adult cohort and a more modest 7 percent for the IGP young adult cohort. This reflects a similar trend in statewide wages, which increased 8 percent during the same period.

Wages Continue to Improve

Average Annual Wage, 2013–2015



This continued wage growth is welcome at a time when wages have seemed to stagnate over the past several years. Although a positive sign in meeting the Commission’s goal of increasing self-reliance among families experiencing intergenerational poverty, the average annual wages for those working fall well behind the income required to meet basic needs.

Housing

Stable housing supports the healthy development of children by promoting social relationships, cultivating community and supporting education.⁵² When affordable housing is not available, family stability is affected. In those instances, families may be subject to frequent moves and, in some cases, homelessness.

Housing is affordable when families pay less than 30 percent of their income to housing. When families are paying more than that, they are considered cost burdened and may experience difficulties meeting other basic needs such as food, clothing, transportation or medical care.⁵³

In Utah, 31 percent of the population is cost burdened in their housing.⁵⁴ For families experiencing intergenerational poverty, half of the adults are paying more than 30 percent of their income toward housing.⁵⁵

Housing Burden of Food Stamp Recipients	
	Housing >30% of Income
Utah	31%
IGP Adults	50%
Non-IGP Adults	48%

One-third of the IGP adult cohort are paying more than 50 percent of their income to housing, leaving little remaining to afford food, clothing and transportation.

Lack of access to affordable housing and stable employment may be factors contributing to housing mobility. Children in the IGP child cohort move more frequently than children in the non-IGP child cohort, although there was a decrease in mobility between 2013 and 2015.⁵⁶

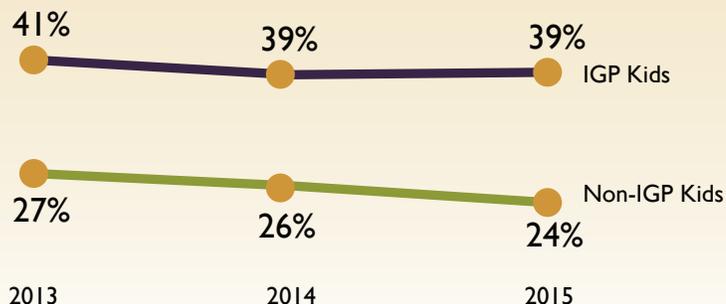
Emergency shelter housing is a last option for families unable to afford housing. Before reaching that point, families are eligible for several services, as Utah recognizes that homelessness generates long-term negative outcomes, particularly for children.

In Utah, homeless services are identified and tracked in the Homeless Management Information System (HMIS). There is a clear relationship between those accessing homeless services and intergenerational poverty. In 2015, among HMIS clients, 43 percent were either experiencing intergenerational poverty or at risk of experiencing it.

Among the children in the IGP child cohort, 10 percent received services identified in HMIS. The largest category of individual service types was emergency shelter services, where the average length of stay was 37 days.

The increased utilization of emergency shelter services has generated increased dialogue and investment in Utah

Housing Mobility Among Children Declines
Children Moving at Least Once in 12 Months, 2013–2015



over the past year. These additional resources have helped to provide some stability for children requiring emergency shelter services.

Moving from Data to Action

Utah promotes the values of personal responsibility and work not only for their roles in establishing economic stability but also for the dignity they provide. The data contained in this report reveals that most individuals receiving public assistance benefits do have income through wages, but it is clearly not sufficient to meet the basic needs of their families. As a result, these families rely on public assistance to provide for themselves and their children.

Increasing family stability, including economic stability, is a key to ending the cycle of poverty for Utah children. In the long term, improving academic outcomes will help establish a foundation of economic stability for those children as they become adults. But in the short term, the economic conditions in which currently they are being raised must improve given the interrelated nature of poverty and child well-being.

Although the data reveals modest economic improvements among families experiencing intergenerational poverty, these conditions will not be sustained until the root causes of economic instability are addressed in these families. They must improve job skills and remove barriers to employment in order to enter and advance in careers that pay a sufficient wage. Additionally, these families must have avenues for asset development.

Over the past year, several policies and programs have evolved that will address some of these foundational challenges for families while advancing the Commission's family economic stability goals. Those goals include the following:

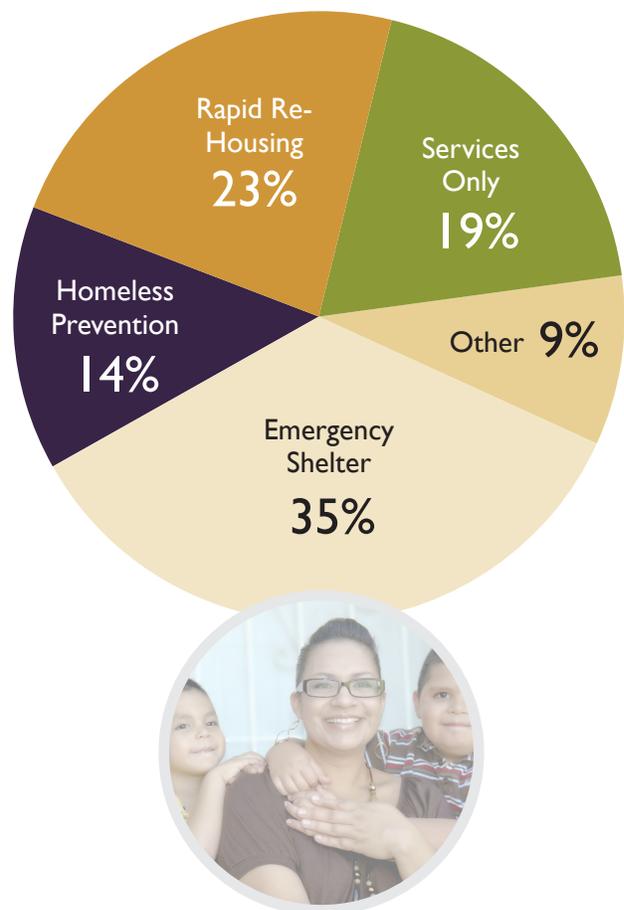
Five-Year Goal: Children at risk of remaining in poverty live in stable families that meet their basic needs (e.g., food, housing, health, safety and transportation).

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty live in families that are self-reliant.

In addition to strategies adopted in systems outside of state government, the following policies and programs will further the family economic stability goals of the Commission.

Thirty-seven days is the average length of stay in a homeless shelter among IGP children requiring emergency shelter.

Homeless Supports for IGP Children
HMIS 2015



Promising Practices: Adult Education in San Juan County

In recognition of limited success in its adult education program, San Juan School District (SJSD) partnered with Utah State University Eastern-Blanding (USUE-Blanding) to administer the program. There was a belief among adult educators that the last place a high-school dropout returning to school would want to be is back at high school. So, SJSD and USUE-Blanding decided to test the theory that attending classes on a college campus sends a different message to these students. They seem to be proving this theory.

USUE-Blanding is administering the adult education classes that are so desperately needed in this economically depressed region. The program is achieving a level of success seemingly unattainable in other programs. The program focuses not only on the academic needs of students but assesses individual social and emotional needs at the time of enrollment. The program connects students to supportive services such as onsite child care, tutoring, financial aid resources, counseling and developmental courses. Upon enrollment, regular monitoring of academic progress is tracked through

USUE's Early Alert System, which notifies instructors and advisors of challenges with students so that issues may be addressed timely.

USUE's approach is working. In 2015, the Native American students, who made up 70 percent of the program, comprised 78 percent of the graduates. Many students identify access to child care for their children while they attend classes as the primary reason for their success. Others note the individualized attention and support they receive through USUE's program.

One student, a single mother with two children, worked part time while attending school. Since the mother worked, she was eligible to receive child care subsidies while attending school. Her youngest child was only 6 weeks old when she began the program. She noted that the onsite child care program allowed her to be in close proximity to her children with the knowledge that they were in a program that supported their well-being. This knowledge provided her with the sense of security she needed, allowing her to focus on her coursework.

This young mother eventually graduated and began a career in education.



**Programs, Policies and Procedures Contributing to Commission Goals:
Family Economic Stability**

POLICY, PROGRAM OR PROCEDURE	PURPOSE	EXPECTED OUTCOME
Addressing Basic Needs of Families		
Evidence-Based Homeless Support Services	Releases grants through TANF to implement evidence-based supportive service programs for families experiencing homelessness	
Year-Round Funding for Midvale Family Shelter	Appropriates additional funding to ensure The Road Home's Midvale Family Shelter operates year-round and not only in winter	Provide stability for families with young children while they require emergency shelter services
Increasing Job Skills		
Strategic Workforce Investments	Provides grants to partnerships among school districts, post-secondary education and businesses to develop stackable credential programs in high-demand technical jobs	Increase job training and employment of individuals within high-demand industry clusters
Utah Cluster Acceleration Partnership	Provides funding to post-secondary educational institutions to develop, implement or enhance educational programs responsive to regional and statewide industry needs, as well as provides funding to schools to implement or enhance career pathway programs and connections to post-secondary institutions	Strengthen collaboration between education, industry and economic development to better respond to the needs of regional and statewide designated clusters
Salt Lake Community College (SLCC Promise)	Helps eligible, full-time students at Salt Lake Community College pay for their education by covering the cost of tuition and fees when federal grants fall short	Remove economic barriers and provide a pathway for SLCC students to complete degrees
Removing Barriers to Employment		
Job-Search Child Care	Provides 60 days of ongoing child care upon a job loss, allowing the parent to engage in job-search activities	Help the parent return to full employment before the benefit ends
Reducing Cliff Effect for Child Care	Increases child care subsidy copayments slowly as income increases	Remove disincentives for parents to receive additional income, thereby encouraging ongoing employment
Upfront Child Care	Approves eligibility for child care quickly and efficiently	Establish child care subsidies to allow a parent to access child care and accept employment opportunities
Two-Generation Approaches to Case Management	Assesses and addresses the needs of the entire family and removes barriers to employment	Help parents obtain and maintain employment by addressing the needs of the entire family and removing barriers to employment through existing resources



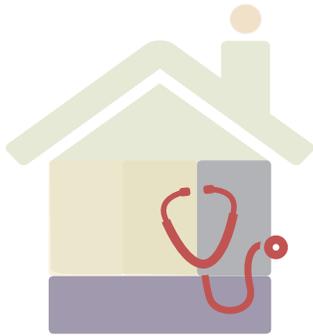
PROMISING PRACTICES: Promoting Self-Reliance in Weber County

The SparkPoint Center helps low-income families escape poverty and achieve long-term financial stability. SparkPoint participants, many of whom experience intergenerational poverty, access resources to address multiple areas of need while working through a coordinated case management process to streamline the effectiveness of each service. These resources help families build self-sufficiency, stabilize their finances and increase assets to move ahead.

The goal at SparkPoint is to ensure that all program participants achieve financial stability. Financial stability is defined as having (i) a livable income that reaches the Self-Sufficiency Standard (\$45,000 for a family of four in Ogden), (ii) a credit score of at least 650, (iii) savings equal to three to six months of living expenses and (iv) debt less than 40 percent of monthly income.

SparkPoint is meeting outcomes and positively impacting the financial stability of participating households. Families that previously were unbanked and relying on predatory and peripheral lending become connected to traditional financial institutions and tools. Many participants have opened individual bank accounts, increased credit scores and increased monthly income through employment.

Linda is a SparkPoint participant. She was referred to the program through the Ogden Housing Authority. In December 2015, Linda began meeting with her financial coach. Since then, Linda has obtained full-time employment and increased her income from \$12.02 per hour to \$13.00 per hour with full benefits, decreased her debt by \$5,000, opened a savings account that has a balance of \$1,800 and increased her credit score to 700. Beyond those positive outcomes, Linda's Food Stamp benefit is likely to close positively due to income. Although she has made great progress, Linda continues to meet with her SparkPoint coaches.



“He who has health, has hope; and he who has hope, has everything.”

—Thomas Carlyle, Scottish Philosopher

HEALTH

As with the other domains of child well-being, poverty and economic hardship impact health outcomes. These social determinants of health play a significant role in establishing health disparities across Utah, which, in turn, lead to increased cases of premature death and disease as well as other negative health outcomes that ultimately may affect employment and school attendance.⁵⁷

In Utah communities with high rates of poverty and low levels of educational attainment, more individuals report their health as either poor or fair.⁵⁸ Although families experiencing intergenerational poverty have access to public health insurance, social determinants of health and exposure to adverse childhood experiences (ACES) may be influencing both health care utilization and long-term health outcomes into adulthood.

Access to Health Care

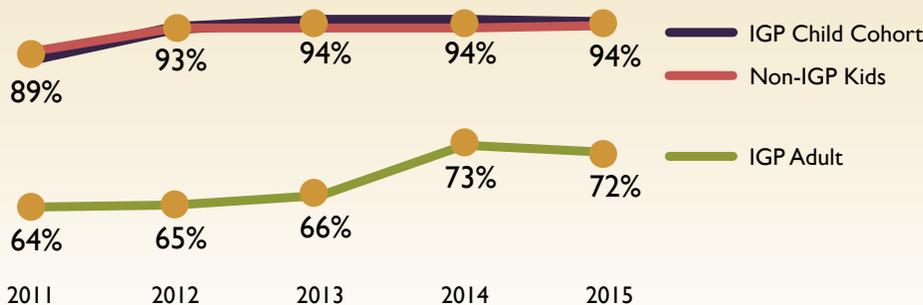
Nationally, there has been a decrease in the rate of uninsured children. Since 2008, the rate of children without health insurance decreased from 10 percent to only 6 percent.⁵⁹ The rate among children experiencing intergenerational poverty is equal to the national rate and is likely to be even lower when factoring in access to private health insurance. Similarly, the rate of uninsured adults has also decreased.

The decrease in the rate of uninsured children is welcome. Health insurance protects families from financial risk where serious or chronic health conditions arise, and it allows a family to quickly address health concerns. For low-income children, access to health insurance ensures that chronic health issues



Public Health Insurance Covers IGP Children

Medicaid/CHIP Enrollment, 2011–2015



In 2015, 28% of Medicaid enrollees who are IGP visited the emergency room at least once, compared to only 17% of non-IGP enrollees.



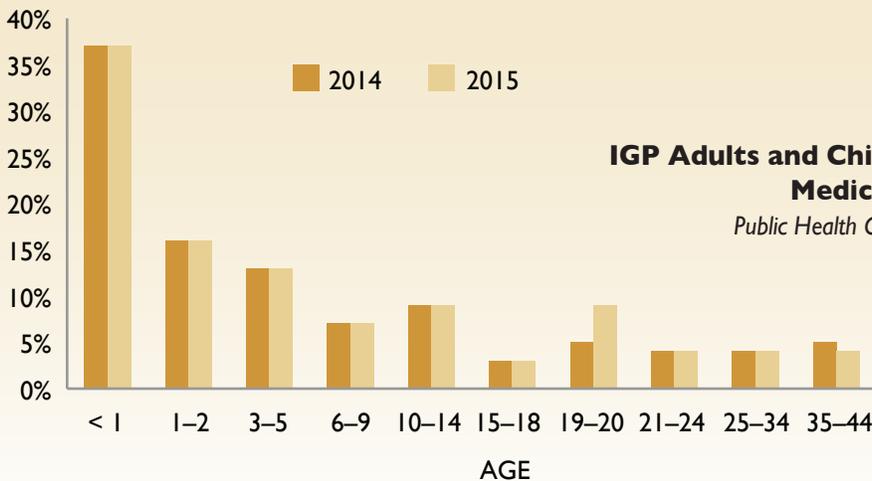
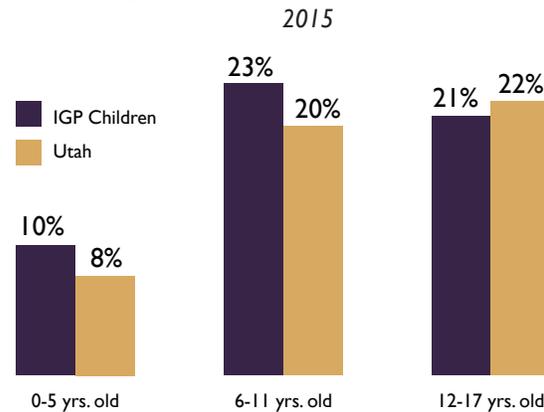
such as asthma can be treated without affecting school attendance or causing more serious health problems.

Although health care access has increased since 2011, health care utilization remains low. Overall, 81 percent of individuals experiencing intergenerational poverty had access to medical care at a higher rate than non-IGP individuals, and they utilized medical services at least once during 2015 compared to 78 percent of the non-IGP individuals. Those defined as IGP also tend to receive public health insurance longer, remaining in the program for an average of five consecutive months. Those not receiving preventative care are more likely to be treated in hospital emergency rooms, particularly within the IGP cohorts.

Despite the increased health care access, the rate at which people are utilizing important preventative care, behavioral health and dental care services remains low. From 2014 to

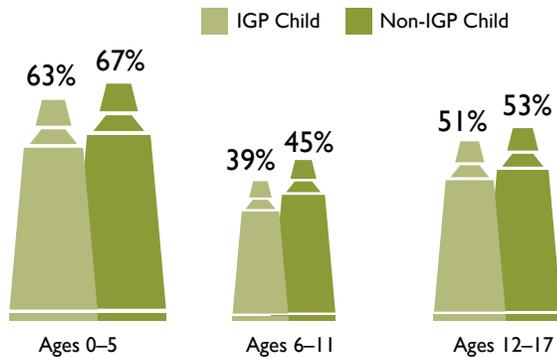
2015 there was little change in the use of preventative care across all age groups. The highest rate of use remains among the youngest children, with children less than 1 year old accessing preventative care at a rate more than twice that of every other group.

Gap Closing for Those Who Did Not See a Doctor

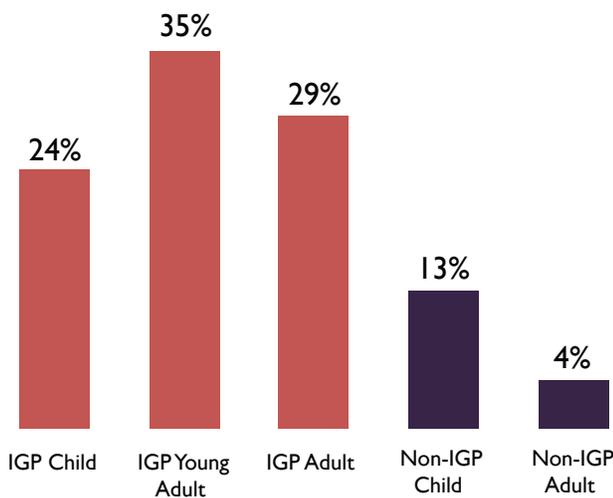




Children Not Seeing a Dentist Children Covered by Medicaid 2015



Child Maltreatment Higher Among Intergenerational Poverty Individuals Substantial Cases of Abuse and Neglect, 2015



It would seem to follow that an increase in access to health insurance would result in fewer children going without medical care. However, there are still children at risk of remaining in poverty who failed to see the doctor in 2015. Fortunately that rate continues to decline, which is narrowing the gap between children at risk and all Utah children.

Dental Care

Individuals often avoid receiving dental care for a number of reasons, including lack of insurance, lack of dentists and fear of seeing the dentist. Additionally, many wrongfully conclude that dental care is not as important as seeing a physician. However, poor oral health can lead to poor academic outcomes, poor social relationships, an inability to obtain employment and low weight for children.⁶⁰

In Utah, dental care is not available to most adults receiving Medicaid unless a dental emergency occurs. It is unclear whether the lack of access to dental care for adults is impacting the utilization of dental care among children. Regardless, many children did not receive dental care in 2015 despite access to dental coverage.

Behavioral Health Care

As noted above, children growing up in poverty are more likely to be subject to ACES that impact their long-term health outcomes. As a result, children growing up in poverty, particularly intergenerational poverty, have greater risk of having behavioral and emotional problems, including anxiety, unhappiness and aggression.⁶¹

One category of ACE is child maltreatment. Among the children at risk of remaining in poverty and their parents, a larger share have been subject to a substantiated case of abuse or neglect than the statewide population.

Although poverty is not the cause of maltreatment of children, it is recognized as a contributing factor, as is growing up with a single parent.⁶² It is important to emphasize that most people experiencing poverty do not mistreat their children. However, when poverty is combined with additional risk factors of maltreatment, including substance use and stress, it may increase the likelihood of maltreatment.

Across all ages, from childhood into adulthood, analysis of Medicaid data reveals that the IGP cohorts were diagnosed with mental health conditions at a greater rate than non-IGP cohorts.

For those experiencing mental health conditions, treatment is available through the public mental health system as well as through private mental health providers. Those individuals in the IGP cohorts received treatment from the public mental health system at a greater rate than the non-IGP cohorts. This gap may be attributed partially to greater access to Medicaid among individuals in the IGP cohorts.

Statewide, approximately 30 percent of the adults and 20 percent of children ages 10 through 17 who were in need of

mental health services received them in 2015.⁶³ Although the local mental health authorities are not providing services at a similar rate, Medicaid data reveals that both the IGP and non-IGP cohorts received care at a higher rate than the statewide rate where a mental health diagnosis was a factor in a claim.

Substance use often co-occurs with mental health conditions. The prevalence of substance use in Utah is generally low relative to the nation. In 2015, only 7 percent of Utah's adult population needed treatment for dependence or abuse of either alcohol or drugs, or both.⁶⁴ When that population is disaggregated and the intergenerational poverty and non-intergenerational poverty populations are analyzed instead,

Promising Policy: Family First Prevention Services Act

“Children are best served in homes, surrounded by family, familiar schools and community.”

—Ann Williamson, Utah Department of Human Services

In 2015, there were 10,843 children at risk of remaining in poverty who had a foster care case. When children are removed from their homes and placed in foster care, the long-term implications for the family are profound. Moreover, the costs associated with long-term foster care are high. As a result, Senator Orrin Hatch has introduced the Family First Prevention Services Act.

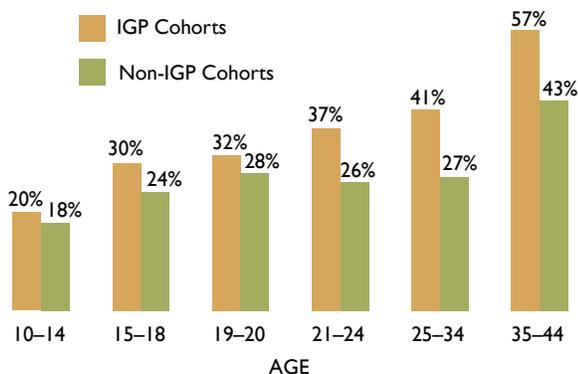
The policy recognizes that providing evidence-based

prevention services for families at risk for a foster care placement reduces the need for the placement and improves outcomes for children and families. The policy gives states flexibility to use federal foster care funds for prevention services that focus on the needs of the family. When a foster care placement is necessary, the policy would promote placements in family settings rather than non-family settings.

There are several more details of the legislation, which is pending approval in the United States Congress. Its focus on use of evidence-based prevention services and preservation of the family supports many of the families experiencing intergenerational poverty and interacting with the Division of Child and Family Services.

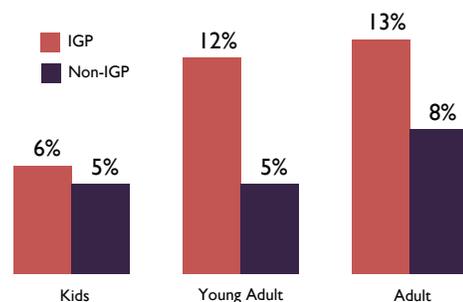
Individuals with Mental Health Diagnosis

Based on Medicaid Diagnosis Codes, 2015



IGP Receiving Mental Health Services at Higher Rate

Receiving Services from Local Authorities



those groups tend to have a higher rate of substance abuse and dependence, and it increases with age.

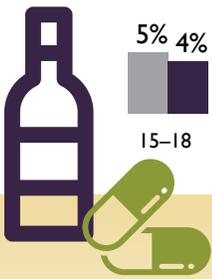
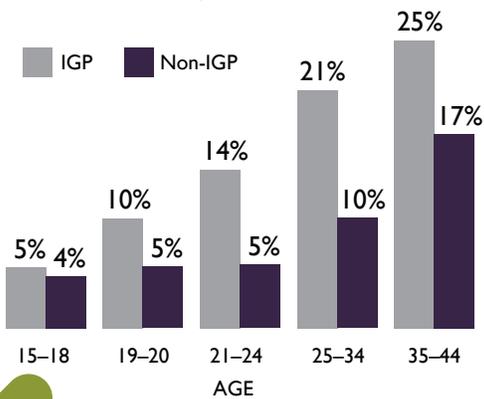
Statewide, the public behavioral health system only met 10 percent of the need for treatment among individuals with alcohol or drug dependence. That rate was higher among those in the IGP cohorts. Similarly, individuals within the intergenerational poverty cohorts received treatment from the public substance use disorder system at a greater rate than those in the non-IGP cohorts. Again, this was likely due to the eligibility of Medicaid among these groups.

As is the case with the statewide data, which varies greatly from national data, there are likely variations among Utah counties with regard to the rates of substance use disorders as well as available resources to treat disorders within particular communities.



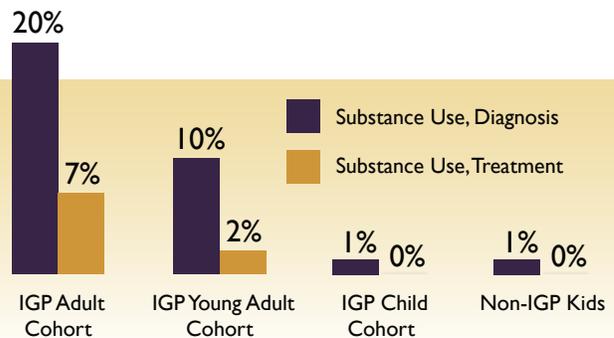
Medical Recipients with Substance Use Disorder-Related Diagnosis

Medicaid Diagnosis Codes, 2015



Substance Use Treatment Low

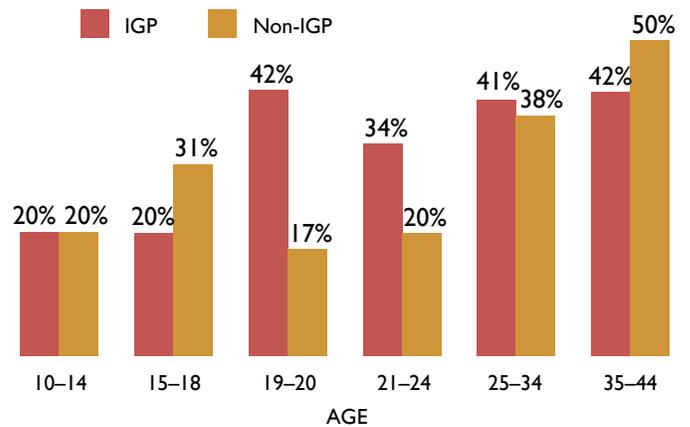
DSAMH and DOH Diagnosis Codes and Treatment



Among all Utah adults needing mental health services, 30 percent received services in 2015. That rate is exceeded among adults experiencing intergenerational poverty.

Medicaid Recipients with Mental Health Diagnosis Receiving Care

Utilizing Services in 2015



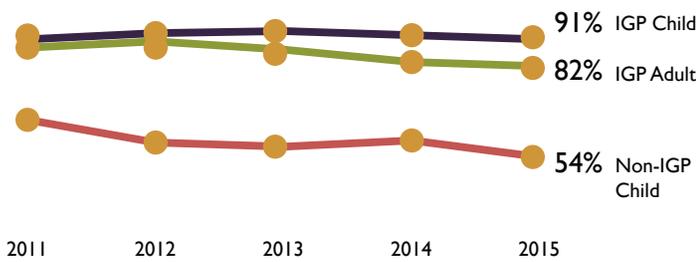
In 2015, 25% of IGP adults between the ages of 35 and 44 had a medical diagnosis related to substance use.

Participation in Nutrition Programs

The participation in the Supplemental Nutrition Assistance Program (SNAP) program—which is known as Food Stamps in Utah—has decreased for the non-IGP children but remained at 91 percent for the IGP children.

Nutritional Needs Covered by Food Stamps

SNAP Enrollment 2011–2015



Although SNAP participation has remained fairly stable, participation in the School Lunch Program has decreased among all groups.

A potential explanation for decreased participation in the School Lunch Program may be the implementation of the United States Department of Agriculture’s community eligibility provision. That program allows Local Education Agencies (LEAs) and individual schools in high-poverty areas to provide free breakfast and lunch to all students without the burden of collecting and processing applications for free and reduced-price meals.⁶⁵ The implementation of the community eligibility provision has several advantages for both the children and school administrators. It has increased participation among students while decreasing the stigma for students requiring free lunch. It also eases the administrative burden and increases efficiency for schools. Most importantly, it ensures that low-income students have two nutritious meals each day, which improves school behavior and academic performance.

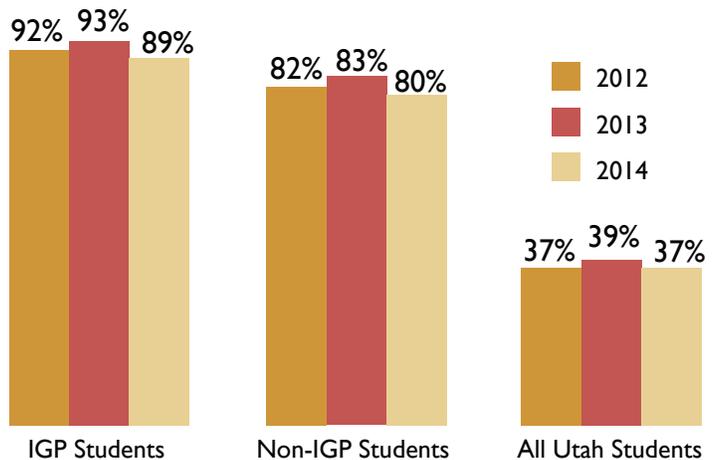
An LEA or school may elect to take advantage of the community eligibility provision, although it requires either entity to determine whether 40 percent or more of its students are eligible for a free lunch. This can be based on the percent of students receiving SNAP and therefore categorically eligible for free lunch. Since utilization of the

37% of all Utah children participate in the School Lunch Program.



Decreased Enrollment in School Lunch Program

Free or Reduced Lunch Participation SY2012–2014



community eligibility provision is elective, not all eligible LEAs or schools take advantage of the provision (see Appendix B.4—Community Eligibility Provision by School).

Moving from Data to Action

Over the past several years, health insurance access has improved significantly, and, as a result, the vast majority of IGP children and their parents have access to health insurance. At this point, data reveals that the gap in the area of health exists in actually utilizing available health care services. Increased utilization will prevent serious health conditions, or if not prevented, the conditions will be addressed in a timely manner.

The Commission goals in the area of health also focus on utilization, first acknowledging that health care can only be utilized where it is available. The Commission's health goals include the following:

Five-Year Goal: Ensure that all children experiencing intergenerational poverty have access to quality physical health, mental health and dental care, regardless of where their family resides in Utah.

Ten-Year Goal: Ensure that all children experiencing intergenerational poverty are receiving physical, mental and dental care at the same rate as their peers in statewide rates, regardless of where their family resides in Utah.

In the past year, local communities have made efforts to address the health needs of their families, particularly in the area of behavioral health, which often co-occurs with extreme poverty.



Promising Practices: Promoting Positive Community Outcomes in Carbon County

Carbon County is committed to providing a safe environment that empowers youth to be healthy, successful and compassionate. To achieve this goal, the county, in partnership with the Utah Division of Substance and Mental Health, formed the CARE Coalition. The coalition includes a key leadership board composed of representatives from county government, association of governments, local behavioral health authorities, Carbon County School District, local hospitals, Utah State University-Eastern, local health authorities and law enforcement.

Carbon County is using the evidence-based Communities that Care model, which is a prevention system designed to reduce adolescent delinquency and substance abuse through preventive interventions identified and tailored to the county's needs. The model provides the structural guidance and technical assistance necessary to create a community-level approach to identifying current needs and resources, setting priorities and developing an action plan.

The CARE Coalition is a model of cross-sector partnerships convened to address community challenges. Although in its infancy, the CARE Coalition is well on its way to developing a comprehensive community-needs assessment that will shape its strategic plan, including reducing intergenerational poverty in the county.

Promising Practices: School-Based Behavioral Health

Recently, an Ogden student attending Heritage Elementary School was experiencing significant behavioral challenges and had multiple behavioral referrals. Fortunately for the student, Heritage Elementary had a school-based behavioral health program. During the time of services, this student changed from one with significant behavioral challenges to becoming his classroom’s Husky HERO, which is a student doing well in academics, behavior and attendance.

The availability of School-Based Behavioral Health (SBBH) is important to the healthy development of children exposed to toxic stress and adverse childhood

experiences. The timing of providing mental health services to students is critically important, given that the onset of half of all lifetime mental illnesses takes place by age 14, and three-fourths have an onset by age 24. Almost one in five young people have one or more Mental, Emotional or Behavioral Disorder(s) (MEB) that cause some level of impairment within a given year; however, fewer than 20 percent receive mental health services. The SBBH program allows MEBs to be addressed during recommended windows of opportunity.

Beginning in 2015, the Intergenerational Welfare Reform Commission began evaluating whether schools with high rates of students experiencing intergenerational poverty participated in the SBBH program (see Appendix B.3—Schools Where 10% or More Students Are IGP).

In addition to those locally based strategies, additional policy, procedural, and programmatic efforts have taken place to address the health care needs of families experiencing poverty, as shown in the chart below.



Programs, Policies and Procedures Contributing to Commission Goals: Health

POLICY, PROGRAM OR PROCEDURE	PURPOSE	EXPECTED OUTCOME
Health Access		
Limited Medicaid Expansion	Expands Medicaid to include income eligibility levels up to 60% FPL, bringing in parents with children, chronically homeless, people with mental illness and substance-abuse disorders, and those involved in the criminal justice system	Provide specified populations with access to medical care so they receive preventive care and promptly treat health conditions. As many as 3,000–4,000 adults with children may be eligible for Medicaid.
School-Based Behavioral Health (SBBH) Program	Expands access to the SBBH program in schools with high rates of children experiencing intergenerational poverty	Improve behavioral health conditions among Utah students at risk of remaining in poverty, which will improve school behavior and educational outcomes

CONCLUSION

The data analyzed throughout this report reveals challenges among the families experiencing intergenerational poverty. Parents face difficulties obtaining and maintaining employment in occupations that provide an income sufficient to meet the basic needs of children, and children face significant educational challenges, as revealed by several indicators. As early as infancy, children do not receive appropriate opportunities that would allow them to reach their full potential, and this has the long-term effect of imposing an economic burden on the state. In many cases, the lack of opportunity for these children eventually leads them to utilize costly governmental services when there are less expensive strategies available that present a higher economic return.

Utah's intergenerational poverty initiative is not designed to greatly expand government and establish new programs hoping to increase opportunities for children. Rather, its purpose is to gather data and research to inform decision-making. The expectation is that through the data contained throughout this report, individuals, organizations and policymakers focused on improving outcomes for families will effectively target existing resources and programs to efficiently assist families on the road toward self-reliance.

In four years, Utah has made progress toward addressing the gaps revealed in the data. It has developed a comprehensive plan, including measurable goals, and has begun targeting limited resources in effective ways to achieve those outcomes. Although state government plays an important role in gathering and analyzing the data to inform decision-making, it must leverage additional systems to meet its priorities. The Commission's focus on providing county-level data to those geographic areas where a large share of children are at risk of remaining in poverty enlists Utah's local governments in establishing local solutions to the issue.

In the coming months, the Intergenerational Welfare Reform Commission and its Intergenerational Poverty Advisory Committee will utilize the data contained in this report to address the identified gaps. Only through the establishment of data-driven strategies that focus on outcomes will the Commission be able to meet its five- and 10-year goals. The adoption of those strategies will be included in the Commission's revised five- and 10-year plan, Utah's Plan for a Strong Future: Five- and 10-Year Plan to Address Intergenerational Poverty, which will be released in 2017.



ABOUT THE DATA: DATA SOURCES

Section 2

Federal Poverty Level: Federal Register, Department of Health and Human Services.

Utah Child Poverty Continues to Decline: U.S. Census Bureau, ACS 1-Year Estimates, 2007–2014.

33% of Utah Children At Risk of Remaining in Poverty: This data point was calculated as a percentage of Utah's total population of children between the ages of 0 and 17. The total population was provided from the U.S. Census Bureau, ACS, 1-year estimates, 2014.

Section 3

EARLY CHILDHOOD DEVELOPMENT DATA

Prenatal Care for Healthy Child Development: Utah Department of Health, analysis of Medicaid utilization in CY 2015.

Medical Care in Early Childhood: Utah Department of Health, analysis of Medicaid utilization in CY 2015.

Increased Utilization Among Young IGP Children: Utah Department of Health, analysis of Medicaid utilization in CY 2015.

87% in Licensed Child Care: Utah Department of Workforce Services, Office of Child Care and Care About Childcare.

Only 44% Kids in QRIS Programs: Care About Childcare and Utah Department of Workforce Services.

More Children in Level 3 Programs: Care About Childcare and Utah Department of Workforce Services.

Educational Attainment, Child Care Providers: U.S. Census Bureau.

EDUCATION DATA

29% in Juvenile Justice System: Utah Division of Juvenile Justice Services and Utah Juvenile Courts, CARE data.

Involvement with Juvenile Justice Services: Utah Division of Juvenile Justice Services and Utah Juvenile Courts, CARE data.

OEK Participation Increases Slightly: Utah State Board of Education and Utah Department of Workforce Services.

72% of Schools Serving High IGP Offer OEK: Utah State Board of Education and Utah Department of Workforce Services.

Chronic Absence in the Lower Grades: Utah State Board of Education and Utah Department of Workforce Services.

Third-Grade Language Arts Proficiency: Utah State Board of Education and Utah Department of Workforce Services.

Fourth-Grade MGP by Student Type: Utah State Board of Education and Utah Department of Workforce Services.

Eight-Grade Math Proficiency: Utah State Board of Education and Utah Department of Workforce Services.

Eight-Grade Math MGP by Student Type: Utah State Board of Education and Utah Department of Workforce Services.

Students Struggle to Score Above 18: Utah State Board of Education and Utah Department of Workforce Services.

“66 by 2020” Influences Graduation Rates: Utah State Board of Education and Utah Department of Workforce Services.

FAMILY ECONOMIC STABILITY DATA

72% Lack Education Beyond High School: Utah Department of Workforce Services, CY 2015.

Adults Enrolled in USHE Schools: Utah System of Higher Education and Utah Department of Workforce Services, enrollment data SY2014–2015.

USHE Awards, Adults and Young Adults: Utah System of Higher Education and Utah Department of Workforce Services, enrollment data SY2014–2015.

62% of IGP Adults Worked in 2015: Utah Department of Workforce Services.

67% of IGP Young Adults Worked in 2015: Utah Department of Workforce Services.

Wages Continue to Improve: Utah Department of Workforce Services.

Housing Burden for Food Stamp Recipients: Utah Department of Workforce Services.

Housing Mobility Among Children Declines: Utah Department of Workforce Services.

Homeless Supports for IGP Child Cohort: Utah Department of Workforce Services, Homeless Management Information System.

HEALTH DATA

94% Kids in IGP Have Medical Access: Utah Department of Health and Utah Department of Workforce Services.

Preventive Medical Limited Among IGP: Utah Department of Health and Utah Department of Workforce Services.

Gap Closing for Those Who Did not See Doctor in 2015: Utah Department of Health and Utah Department of Workforce Services.

Children Who Did Not See a Dentist in 2015: Utah Department of Health and Utah Department of Workforce Services.

Child Maltreatment Higher Among Intergenerational Poverty Individuals: Utah Department of Human Services, Division of Child and Family Services and Utah Department of Workforce Services.

Individuals with Mental Health Diagnosis, 2015: Utah Department of Health and Utah Department of Workforce Services.

IGP Receiving Mental Health Services at Higher Rate: Utah Department of Health, Utah Department of Human Services, Division of Substance Abuse and Mental Health and the Utah Department of Workforce Services.

Mental Health Provided Based on Need of Services: Utah Department of Health, Utah Department of Human Services, Division of Substance Abuse and Mental Health and the Utah Department of Workforce Services.

Need of Treatment of Substance Use: Utah Department of Health and the Utah Department of Workforce Services.

Substance-Use Treatment Low: Utah Department of Health, Utah Department of Human Services, Division of Substance Abuse and Mental Health and the Utah Department of Workforce Services.

Food Stamps Cover IGP Families: Utah Department of Workforce Services.

Decreased Enrollment in School Lunch Programs: Utah State Board of Education and Utah Department of Workforce Services.

APPENDIX A. I

INTERGENERATIONAL POVERTY WELFARE REFORM COMMISSION MEMBERS

NAME	TITLE
Spencer Cox, Chair	Lieutenant Governor, State of Utah
Jon Pierpont, Vice Chair	Executive Director, Department of Workforce Services
Joe Miner	Executive Director, Department of Health
Ann Silverberg-Williamson	Executive Director, Department of Human Services
Sydnee Dickson	State Superintendent of Public Instruction, Utah State Board of Education
Dawn Marie Rubio	Juvenile Court Administrator
H. 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	Benjamin Gibbs	Brigham Young University
Faith-based Organization that Addresses Childhood Poverty or Education	Rabbi David Levinsky	Temple Har Shalom
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. I

LIVING WAGE IN 12 COUNTIES

What is a living wage and how is it determined?

The living wage, as defined by this data, is the household income required to meet all basic expenses without outside assistance. It is derived from several federal expenditure surveys which quantify spending patterns by region. Estimates are then provided for 12 different household sizes.

Living wage estimates for the purpose of this document are for 2 adult, 2 child households only. For living wage estimates for different household sizes or documentation of methodology visit: <http://livingwage.mit.edu/counties/49007>

Sources: *Living Wage Calculator –Massachusetts Institute of Technology, Census Bureau ACS, Dept. Workforce Services*

COUNTY	HOUSING	FOOD	MEDICAL	CHILD CARE	OTHER	TRANSPOR-TATION	TAXES	MONTHLY LIVING WAGE	ANNUAL LIVING WAGE
Carbon	\$608	\$880	\$512	\$0	\$460	\$853	\$607	\$3,920	\$47,040
Grand	\$757	\$880	\$512	\$0	\$460	\$853	\$626	\$4,088	\$49,056
Iron	\$606	\$880	\$512	\$0	\$460	\$853	\$607	\$3,918	\$47,016
Kane	\$692	\$880	\$512	\$0	\$460	\$853	\$618	\$4,015	\$48,180
Millard	\$606	\$880	\$512	\$0	\$460	\$853	\$607	\$3,918	\$47,016
Piute	\$794	\$880	\$512	\$0	\$460	\$853	\$631	\$4,130	\$49,560
San Juan	\$606	\$880	\$512	\$0	\$460	\$853	\$607	\$3,918	\$47,016
Sanpete	\$637	\$880	\$512	\$0	\$460	\$853	\$611	\$3,953	\$47,436
Sevier	\$606	\$880	\$512	\$0	\$460	\$853	\$607	\$3,918	\$47,016
Utah	\$763	\$880	\$512	\$0	\$460	\$853	\$627	\$4,095	\$49,140
Washington	\$763	\$880	\$512	\$0	\$460	\$853	\$627	\$4,095	\$49,140
Weber	\$778	\$880	\$512	\$0	\$460	\$853	\$629	\$4,112	\$49,344

APPENDIX B.2—RISK FACTORS OF PUBLIC ASSISTANCE CHILDREN, AGES 0–9

	RISK FACTORS, IGP CHILD COHORT		
	2013	2014	2015
LIMITED ENGLISH PROFICIENCY	1%	1%	2%
PRESENCE OF 4 OR MORE CHILDREN	13%	13%	13%
PARENTS LACK HIGH SCHOOL DIPLOMA OR GED	26%	27%	26%
LIVING IN HH THAT CHANGED RESIDENCE 1 OR MORE TIMES FROM 1/1/2015 - 12/31/2015	4%	4%	3%
LIVING IN HH WITH UNMARRIED ADULT	62%	62%	62%
LIVING WITH ADULT FEMALE WHO WAS TEEN WHEN CHILD BORN	5%	5%	5%
LIVING IN HOMES WHERE ADULTS HAD NO EMPLOYMENT IN LAST 4 QTRS	20%	23%	21%

APPENDIX B.3—SCHOOLS WHERE 10% OR MORE STUDENTS ARE IGP

DISTRICT OR CHARTER	SCHOOL NAME	DATA			PROGRAMS			
		IGP Enrollment	Public Assistance Enrollment	Chronic Absence	Preschool Available	OEK Available	After-school Program	School Based Behavioral Health
SAN JUAN DISTRICT	BLUFF SCHOOL	45.7%	24.8%	24.6%	x	x	x	
WASHINGTON DISTRICT	POST HS SELF-CONT	42.3%	25.0%	≤5%				
SAN JUAN DISTRICT	MONTEZUMA CREEK SCHOOL	36.8%	21.9%	36.1%	x	x	x	
SAN JUAN DISTRICT	TSE'BII'NIDZISGAI SCHOOL	36.8%	30.5%	37.4%	x	x	x	
JORDAN DISTRICT	SOUTH VALLEY SCHOOL	35.3%	26.7%	30.1%				
GRANITE DISTRICT	GRANITE TECHNICAL INSTITUTE (GTI)	32.4%	30.3%	≤2%	N/A	N/A	x	
ALPINE DISTRICT	DAN W. PETERSON	29.0%	38.0%	35.8%				
ALPINE DISTRICT	HORIZON SCHOOL	28.6%	39.0%	≤2%	x			
CANYONS DISTRICT	JORDAN VALLEY SCHOOL	27.8%	45.4%	29.4%	x			
CANYONS DISTRICT	CANYONS TRANSITION ACADEMY	26.6%	40.5%	22.5%	N/A	N/A		
GRANITE DISTRICT	HARTVIGSEN SCHOOL	26.3%	46.3%	38.5%				
NEBO DISTRICT	BRIDGES NEBO TRANSITION CENTER	26.1%	15.2%	33.8%	N/A	N/A		
SAN JUAN DISTRICT	WHITEHORSE HIGH	25.4%	30.7%	28.2%	N/A	N/A	x	x
CARBON DISTRICT	CASTLE VALLEY CENTER	24.5%	36.7%	36.7%				
OGDEN CITY DISTRICT	JAMES MADISON SCHOOL	24.0%	49.5%	24.5%	x	x	x	x
OGDEN CITY DISTRICT	BONNEVILLE SCHOOL	23.1%	31.2%	16.9%		x		
DAVIS DISTRICT	RENAISSANCE ACADEMY	23.1%	29.2%	28.1%	N/A	N/A		
DUCHESNE DISTRICT	CON AMORE SCHOOL	22.6%	26.4%	27.8%	x			
CARBON DISTRICT	BRUIN POINT SCHOOL	22.3%	33.1%	9.3%	x	x	x	x
SAN JUAN DISTRICT	MONUMENT VALLEY HIGH	22.2%	33.8%	14.2%	N/A	N/A	x	x
SAN JUAN DISTRICT	BLANDING SCHOOL	21.0%	20.3%	18.0%	x		x	
PROVO DISTRICT	EAST BAY POST HIGH	21.0%	17.7%	≤5%	N/A	N/A		
SOUTH SANPETE DISTRICT	SOUTH SANPETE EDUCATION SUPPORT CENTER	20.9%	34.9%	≤5%	N/A	N/A		
SALT LAKE DISTRICT	WASHINGTON SCHOOL	20.8%	33.2%	33.0%	x	x	x	x
OGDEN CITY DISTRICT	ODYSSEY SCHOOL	20.5%	46.8%	17.7%	x	x	x	x
BOX ELDER DISTRICT	DALE YOUNG COMMUNITY HIGH	19.5%	24.8%	35.2%	N/A	N/A		
ALPINE DISTRICT	SUMMIT HIGH	18.7%	36.6%	23.6%	N/A	N/A	x	
OGDEN CITY DISTRICT	TAYLOR CANYON SCHOOL	18.4%	26.1%	16.4%				

DISTRICT OR CHARTER	SCHOOL NAME	DATA			PROGRAMS			
		IGP Enrollment	Public Assistance Enrollment	Chronic Absence	Preschool Available	OEK Available	After-school Program	School Based Behavioral Health
JORDAN DISTRICT	KAURI SUE HAMILTON	17.6%	50.6%	36.1%	x			
IRON DISTRICT	SOUTHWEST EDUCATIONAL ACADEMY	17.6%	31.2%	21.4%	N/A	N/A		x
DUCHESNE DISTRICT	MYTON SCHOOL	17.4%	20.8%	15.0%		x		
OGDEN CITY DISTRICT	POLK SCHOOL	16.9%	23.7%	19.9%			x	
OGDEN CITY DISTRICT	GRAMERCY SCHOOL	16.8%	39.3%	18.3%	x	x	x	x
OGDEN CITY DISTRICT	HILLCREST SCHOOL	16.8%	33.5%	12.6%		x		x
GRANITE DISTRICT	STANSBURY SCHOOL	16.7%	37.3%	14.2%	x	x	x	
OGDEN CITY DISTRICT	DEE SCHOOL	16.4%	44.7%	12.9%	x	x	x	x
SALT LAKE DISTRICT	LINCOLN SCHOOL	16.2%	39.0%	13.8%	x	x	x	x
GRANITE DISTRICT	MAGNA SCHOOL	16.1%	33.7%	15.1%		x	x	
CACHE DISTRICT	CACHE ALTERNATIVE HIGH	16.1%	21.9%	23.3%	N/A	N/A		
SALT LAKE DISTRICT	M LYNN BENNION SCHOOL	16.0%	33.6%	15.5%	x	x	x	x
WEBER DISTRICT	CLUB HEIGHTS SCHOOL	15.9%	37.2%	19.0%		x		x
SALT LAKE DISTRICT	HORIZONTE INSTR & TRN CTR	15.6%	23.3%	57.3%	N/A	N/A	x	x
DAVIS DISTRICT	DOXEY SCHOOL	15.6%	30.4%	8.6%	x	x	x	
UINTAH DISTRICT	LAPPOINT SCHOOL	15.4%	16.5%	26.1%		x		
OGDEN CITY DISTRICT	THOMAS O SMITH SCHOOL	15.4%	41.1%	15.4%		x	x	x
WASHINGTON DISTRICT	MILLCREEK HIGH	15.3%	24.4%	50.4%	N/A	N/A		x
CARBON DISTRICT	LIGHTHOUSE HIGH	15.0%	32.5%	31.3%	N/A	N/A		
OGDEN CITY DISTRICT	HERITAGE SCHOOL	14.9%	34.3%	18.3%		x	x	x
DAVIS DISTRICT	WHITESIDES SCHOOL	14.9%	30.1%	19.6%	x	x	x	x
IRON DISTRICT	CEDAR NORTH SCHOOL	14.9%	28.2%	12.9%		x	x	x
SEVIER DISTRICT	ASHMAN SCHOOL	14.7%	21.0%	14.8%	x	x		
TOOELE DISTRICT	HARRIS SCHOOL	14.7%	27.3%	16.2%	x	x		
DAVIS DISTRICT	SOUTH CLEARFIELD SCHOOL	14.7%	34.7%	22.1%	x	x	x	x
CARBON DISTRICT	CREEKVIEW SCHOOL	14.7%	13.5%	11.4%	x	x	x	x
OGDEN CITY DISTRICT	HORACE MANN SCHOOL	14.5%	29.0%	14.1%		x		x
SALT LAKE DISTRICT	RILEY SCHOOL	14.5%	37.0%	15.8%	x	x	x	x
GRANITE DISTRICT	ROOSEVELT SCHOOL	14.3%	46.7%	19.0%	x	x	x	
TOOELE DISTRICT	BLUE PEAK HIGH	14.3%	30.6%	45.5%	N/A	N/A		
SALT LAKE DISTRICT	JACKSON SCHOOL	14.2%	38.7%	12.1%	x	x	x	x
PINNACLE CANYON ACADEMY	PINNACLE CANYON ACADEMY	14.1%	32.9%	47.2%			x	x
UTAH SCHOOLS FOR DEAF & BLIND	NORTH REGION DEAF	14.0%	40.0%	18.2%				
SAN JUAN DISTRICT	ALBERT R LYMAN MIDDLE	14.0%	25.2%	14.7%	N/A	N/A	x	
GRANITE DISTRICT	JAMES E MOSS SCHOOL	13.9%	47.0%	19.1%	x	x	x	

DISTRICT OR CHARTER	SCHOOL NAME	DATA			PROGRAMS			
		IGP Enrollment	Public Assistance Enrollment	Chronic Absence	Preschool Available	OEK Available	After-school Program	School Based Behavioral Health
GRANITE DISTRICT	SOUTH KEARNS SCHOOL	13.9%	34.0%	12.7%	x	x	x	x
SALT LAKE DISTRICT	NEWMAN SCHOOL	13.8%	27.5%	7.8%	x	x	x	x
CANYONS DISTRICT	MIDVALLEY SCHOOL	13.7%	25.5%	11.4%				
OGDEN CITY DISTRICT	GEORGE WASHINGTON HIGH	13.7%	29.7%	69.2%	N/A	N/A	x	
UINTAH RIVER HIGH	UINTAH RIVER HIGH	13.7%	21.9%	60.2%	N/A	N/A		
OGDEN CITY DISTRICT	MOUND FORT JUNIOR HIGH	13.7%	36.7%	40.5%	N/A	N/A	x	x
DAVIS DISTRICT	VAEVIEW SCHOOL	13.6%	35.3%	12.3%	x	x	x	x
OGDEN CITY DISTRICT	LINCOLN SCHOOL	13.5%	35.6%	9.6%	x	x	x	x
CARBON DISTRICT	WELLINGTON SCHOOL	13.3%	20.4%	16.2%	x	x	x	x
WASHINGTON DISTRICT	SUNSET SCHOOL	13.1%	31.4%	12.2%	x	x	x	
WASHINGTON DISTRICT	CORAL CLIFFS SCHOOL	13.0%	31.1%	17.8%	x	x	x	x
GRANITE DISTRICT	REDWOOD SCHOOL	13.0%	42.1%	21.7%	x	x	x	
CARBON DISTRICT	SALLY MAURO SCHOOL	13.0%	19.1%	16.2%		x	x	x
IRON DISTRICT	CEDAR EAST SCHOOL	12.5%	34.9%	12.8%				x
GRANITE DISTRICT	LINCOLN SCHOOL	12.4%	51.7%	13.0%	x	x	x	
GRANITE DISTRICT	PLYMOUTH SCHOOL	12.4%	39.9%	14.8%	x	x	x	
DAVIS DISTRICT	MOUNTAIN HIGH	12.4%	17.7%	74.1%	N/A	N/A		
DAVIS DISTRICT	FREMONT SCHOOL	12.3%	24.7%	10.8%		x	x	
GRAND DISTRICT	HELEN M. KNIGHT SCHOOL	12.1%	23.6%	13.6%		x	x	x
GRANITE DISTRICT	GRANITE CONNECTION HIGH	12.1%	33.9%	21.9%	N/A	N/A		x
GRANITE DISTRICT	WESTERN HILLS SCHOOL	12.1%	37.8%	13.7%	x	x		
SALT LAKE DISTRICT	FRANKLIN SCHOOL	12.1%	37.3%	12.2%	x	x	x	x
LOGAN CITY DISTRICT	ADAMS SCHOOL	11.9%	41.8%	13.8%	x	x	x	
GRANITE DISTRICT	ACADEMY PARK SCHOOL	11.9%	32.6%	14.1%	x	x	x	
GRANITE DISTRICT	JOHN C FREMONT SCHOOL	11.8%	34.2%	11.6%	x	x	x	
NEBO DISTRICT	LANDMARK HIGH	11.8%	26.1%	59.1%	N/A	N/A	x	x
JORDAN DISTRICT	HEARTLAND SCHOOL	11.7%	24.8%	15.4%		x	x	
LOGAN CITY DISTRICT	BRIDGER SCHOOL	11.7%	38.5%	16.3%	x	x	x	
CANYONS DISTRICT	COPPERVIEW SCHOOL	11.6%	37.0%	9.6%		x	x	x
WEBER DISTRICT	NORTH PARK SCHOOL	11.6%	26.7%	11.6%				
SALT LAKE DISTRICT	PARKVIEW SCHOOL	11.6%	33.2%	12.9%	x	x	x	x
NORTH SANPETE DISTRICT	FOUNTAIN GREEN SCHOOL	11.6%	16.3%	≤2%				
DAVIS DISTRICT	SUNSET SCHOOL	11.5%	28.6%	13.4%	x	x	x	
GRANITE DISTRICT	LAKE RIDGE SCHOOL	11.5%	26.6%	13.2%			x	
GRANITE DISTRICT	MILL CREEK SCHOOL	11.4%	33.3%	15.7%	x	x		

DISTRICT OR CHARTER	SCHOOL NAME	DATA			PROGRAMS			
		IGP Enrollment	Public Assistance Enrollment	Chronic Absence	Preschool Available	OEK Available	After-school Program	School Based Behavioral Health
WASHINGTON DISTRICT	CORAL CANYON SCHOOL	11.4%	32.0%	17.0%	x	x		
FAST FORWARD HIGH	FAST FORWARD HIGH	11.4%	32.5%	52.3%	N/A	N/A		x
GRANITE DISTRICT	WOODROW WILSON SCHOOL	11.4%	49.6%	14.4%	x	x	x	
SALT LAKE DISTRICT	WHITTIER SCHOOL	11.4%	28.4%	13.6%	x		x	x
GRANITE DISTRICT	HARRY S. TRUMAN SCHOOL	11.4%	30.1%	17.5%	x			
TOOELE DISTRICT	NORTHLAKE SCHOOL	11.3%	28.8%	15.2%	x	x		
WEBER DISTRICT	MARLON HILLS SCHOOL	11.3%	17.9%	9.0%				
GRANITE DISTRICT	DOUGLAST. ORCHARD SCHOOL	11.3%	29.2%	12.4%		x	x	
PROVO DISTRICT	INDEPENDENCE HIGH	11.3%	28.9%	41.2%	N/A	N/A	x	x
SALT LAKE DISTRICT	EDISON SCHOOL	11.3%	38.9%	8.4%	x	x	x	x
SAN JUAN DISTRICT	SAN JUAN HIGH	11.2%	18.3%	11.0%	N/A	N/A	x	
SEVIER DISTRICT	MONROE SCHOOL	11.2%	18.4%	17.9%	x	x	x	
DAVIS DISTRICT	ANTELOPE SCHOOL	11.2%	25.0%	12.9%	x	x	x	
GUADALUPE SCHOOL	GUADALUPE SCHOOL	11.1%	44.4%	17.9%	x		x	
WASHINGTON DISTRICT	LA VERKIN SCHOOL	11.1%	36.5%	11.0%	x	x		
GRANITE DISTRICT	ARCADIA SCHOOL	11.0%	24.8%	12.6%	x			
NORTH SANPETE DISTRICT	FAIRVIEW SCHOOL	10.9%	12.9%	8.4%				
NORTH SANPETE DISTRICT	MORONI SCHOOL	10.9%	33.9%	2.8%	x	x		
BOX ELDER DISTRICT	MOUNTAIN VIEW SCHOOL	10.9%	24.8%	17.0%				x
IRON DISTRICT	FIDDLERS CANYON SCHOOL	10.9%	27.2%	12.9%		x		x
WEBER DISTRICT	ROY SCHOOL	10.9%	23.6%	18.1%		x		x
WEBER DISTRICT	TWO RIVERS HIGH	10.8%	20.7%	73.4%	N/A	N/A		
GRANITE DISTRICT	SILVER HILLS SCHOOL	10.8%	35.5%	13.5%	x	x	x	
GRANITE DISTRICT	ROLLING MEADOWS SCHOOL	10.8%	31.9%	16.9%	x	x	x	
UINTAH DISTRICT	ASHLEY SCHOOL	10.7%	22.8%	25.1%		x		
GRANITE DISTRICT	DAVID GOURLEY SCHOOL	10.7%	36.0%	13.3%	x	x		
CANYONS DISTRICT	EAST MIDVALE SCHOOL	10.6%	30.6%	12.2%	x	x	x	x
CANYONS DISTRICT	SANDY SCHOOL	10.6%	28.1%	11.8%	x	x	x	x
SEVIER DISTRICT	SALINA SCHOOL	10.6%	23.4%	11.1%	x	x		
OGDEN CITY DISTRICT	HIGHLAND JUNIOR HIGH	10.5%	30.9%	36.5%	N/A	N/A	x	
WASHINGTON DISTRICT	WASHINGTON SCHOOL	10.5%	34.5%	17.2%	x	x		
DUCHESNE DISTRICT	EAST SCHOOL	10.4%	17.2%	22.9%	x	x		
SALT LAKE DISTRICT	NORTH STAR SCHOOL	10.2%	37.4%	8.3%	x	x	x	

DISTRICT OR CHARTER	SCHOOL NAME	DATA			PROGRAMS			
		IGP Enrollment	Public Assistance Enrollment	Chronic Absence	Preschool Available	OEK Available	After-school Program	School Based Behavioral Health
WEBER DISTRICT	ROOSEVELT SCHOOL	10.1%	30.0%	15.7%		x		x
SALT LAKE DISTRICT	ROSE PARK SCHOOL	10.0%	34.5%	12.3%	x	x	x	x
EMERY DISTRICT	CASTLE DALE SCHOOL	10.0%	16.7%	18.0%				x
MILLARD DISTRICT	DELTA EARLY CHILDHOOD CENTER	9.9%	29.8%	19.5%	x			
GRANITE DISTRICT	OQUIRRH HILLS SCHOOL	9.9%	36.2%	10.4%	x	x	x	
GRANITE DISTRICT	PIONEER SCHOOL	9.9%	37.9%	14.4%	x	x	x	
WEBER DISTRICT	LAKEVIEW SCHOOL	9.9%	25.2%	19.3%		x		
GRANITE DISTRICT	ELK RUN ELEMENTARY	9.8%	19.1%	7.3%	x		x	x
GRANITE DISTRICT	CARL SANDBURG SCHOOL	9.8%	29.1%	11.5%			x	
DAVIS DISTRICT	CRESTVIEW SCHOOL	9.7%	34.3%	11.6%	x	x	x	x
GRANITE DISTRICT	YOUTH EDUCATIONAL SUPPORT SCHOOL	9.7%	43.0%	≤2%				
ALPINE DISTRICT	GENEVA SCHOOL	9.6%	29.7%	19.0%	x		x	
CARBON DISTRICT	HELPER JR HIGH	9.6%	20.9%	17.4%	N/A	N/A		
EMERY DISTRICT	BOOK CLIFF SCHOOL	9.6%	22.4%	10.7%	x	x	*X	
GRANITE DISTRICT	KEARNS JR HIGH	9.6%	27.5%	5.5%	N/A	N/A	x	
MURRAY DISTRICT	HORIZON SCHOOL	9.6%	24.3%	13.5%		x		
GRANITE DISTRICT	THOMASW BACCHUS SCHOOL	9.5%	26.9%	14.2%				
WASHINGTON DISTRICT	EAST SCHOOL	9.5%	45.1%	18.7%	x	x		x
PROVO DISTRICT	SPRING CREEK SCHOOL	9.5%	34.2%	15.5%	x	x	x	x
NORTH SANPETE DISTRICT	MT PLEASANT SCHOOL	9.5%	25.7%	8.5%	x	x		

NOTES:

* refers to afterschool programs operated by a community-based organization that offers afterschool to children attending the identified public school in a small community. These schools may not offer afterschool because there is a specific CBO that does.

N/A refers to “not applicable” because the schools are middle schools or high schools not serving young children eligible for preschool or optional extended day kindergarten.

APPENDIX B.4—COMMUNITY ELIGIBILITY PROVISION BY SCHOOL

LEA NAME	SCHOOL NAME	IGP Enrollment	Public Assistance Enrollment	Participating in Community Eligibility in Free School Breakfast/Lunch Program
OGDEN CITY DISTRICT	BONNEVILLE SCHOOL	23.1%	31.2%	x
OGDEN CITY DISTRICT	DEE SCHOOL	16.4%	44.7%	x
OGDEN CITY DISTRICT	GEORGE WASHINGTON HIGH	13.7%	29.7%	x
OGDEN CITY DISTRICT	GRAMERCY SCHOOL	16.8%	39.3%	x
OGDEN CITY DISTRICT	JAMES MADISON SCHOOL	24.0%	49.5%	x
OGDEN CITY DISTRICT	MOUND FORT JUNIOR HIGH	13.7%	36.7%	x
OGDEN CITY DISTRICT	ODYSSEY SCHOOL	20.5%	46.8%	x
OGDEN CITY DISTRICT	THOMAS O SMITH SCHOOL	15.4%	41.1%	x
SALT LAKE DISTRICT	LINCOLN SCHOOL	16.2%	39.0%	x
SALT LAKE DISTRICT	M LYNN BENNION SCHOOL	16.0%	33.6%	x
SAN JUAN DISTRICT	ALBERT R LYMAN MIDDLE	14.0%	25.2%	x
SAN JUAN DISTRICT	BLANDING SCHOOL	21.0%	20.3%	x
SAN JUAN DISTRICT	BLUFF SCHOOL	45.7%	24.8%	x
SAN JUAN DISTRICT	LA SAL SCHOOL	21-29%	30-39%	x
SAN JUAN DISTRICT	MONTEZUMA CREEK SCHOOL	36.8%	21.9%	x
SAN JUAN DISTRICT	MONTICELLO HIGH	≤2%	13.9%	x
SAN JUAN DISTRICT	MONTICELLO SCHOOL	7.2%	19.9%	x
SAN JUAN DISTRICT	MONUMENT VALLEY HIGH	22.2%	33.8%	x
SAN JUAN DISTRICT	NAVAJO MOUNTAIN HIGH	30-39%	11-19%	x
SAN JUAN DISTRICT	SAN JUAN HIGH	11.2%	18.3%	x
SAN JUAN DISTRICT	TSE'BII'NIDZISGAI SCHOOL	36.8%	30.5%	x
SAN JUAN DISTRICT	WHITEHORSE HIGH	25.4%	30.7%	x
TOOELE DISTRICT	ANNA SMITH SCHOOL	≤2%	31.7%	x
TOOELE DISTRICT	IBAPAH SCHOOL	20-29%	50-59%	x
TOOELE DISTRICT	WENDOVER HIGH	≤2%	17.5%	x

APPENDIX C.1—NATIONAL DATABASES OF EVIDENCE-BASED PROGRAMS

Name of the Clearinghouse	Areas of Child Well-Being	About the Clearinghouse	Web Address
Best Evidence Encyclopedia	Education	Provides educators and researchers fair and useful information about the strength of the evidence supporting a variety of programs available for students in grades K-12 through a free website created by the Johns Hopkins University School of Education's Center for Data-Driven Reform in Education (CDDRE).	http://www.bestevidence.org/
Blueprints for Healthy Youth Development	Early Childhood Development	Provides a registry of evidence-based positive youth development programs designed to promote the health and well-being of children and teens. Blueprints programs are family, school, and community-based and target all levels of need — from broad prevention programs that promote positive behaviors while decreasing negative behaviors, to highly-targeted programs for at-risk children and troubled teens that get them back on track.	http://www.blueprintsprograms.com/
California Evidence-Based Clearinghouse for Child Welfare	Health	Provides child welfare professionals with easy access to vital information about selected child welfare related programs. Each program is reviewed and rated utilizing the CEBC Scientific Rating scale to determine the level of evidence for the program. The programs are also rated on a Relevance to Child Welfare Rating Scale.	http://www.cebc4cw.org/
Evidence-Based Teen Pregnancy Prevention Programs	Early Childhood Development	Lists evidence-based programs demonstrating a positive impact on preventing teen pregnancies, sexually transmitted infections, or sexual risk behaviors. Over 35 evidence-based TPP programs have been identified.	http://www.hhs.gov/ash/oah/oah-initiatives/tpp_program/db/
Home Visiting Programs	Early Childhood Development	Lists all of the evidence-based home visiting programs funded through federal Maternal, Infant, and Early Childhood Home Visiting Program	http://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting
SAMHSA's National Registry of Evidence-Based Practices and Programs	Health	Provides a searchable online registry of more than 350 substance abuse and mental health interventions.	http://www.nrepp.samhsa.gov/01_landing.aspx

Name of the Clearinghouse	Areas of Child Well-Being	About the Clearinghouse	Web Address
Social Programs that Work	Multiple	Lists the relatively few interventions across the areas of social policy (K-12 education, crime prevention, international development assistance, etc.) meeting strong evidence criteria. Covers the full spectrum of social policy.	http://evidencebasedprograms.org/
The Campbell Library of Systematic Reviews	Multiple	Provides free online access to a peer-reviewed source of reliable evidence of the effects of interventions in the areas of education, criminal justice and social welfare.	http://www.campbellcollaboration.org/lib/
What Works Clearinghouse	Education	Inform researchers, educators, and policymakers of effective strategies as they work toward improving education for students.	http://ies.ed.gov/ncee/wwc/
Results First Clearinghouse	Multiple	Provides a one-stop online resource with an easy way to find information on the effectiveness of interventions as rated by 8 national research clearinghouses.	http://www.pewtrusts.org/en/multimedia/data-visualizations/2015/results-first-clearinghouse-database

APPENDIX C.2—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.

Child Welfare Category: The Child Welfare Referral category includes the number of DWS sample matches with an incident where the Child Welfare Flag on the incident was equal to “Y.”

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 Custody and 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.



UTAH INTERGENERATIONAL WELFARE REFORM COMMISSION ANNUAL REPORT 2016

Pursuant to Utah Code §35A-9-305, the following is the Utah Intergenerational Welfare Reform Commission Annual Report 2016. The Intergenerational Welfare Reform Commission (Commission) is chaired by the Utah Lieutenant Governor and includes the executive directors of Utah Department of Health (DOH), Utah Department of Human Services (DHS) and Utah Department of Workforce Services (DWS). In addition to those members, the Commission includes the Utah State Board of Education (USBE), 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 from October 2015 through September 2016. These dates correspond to the federal fiscal year (FFY) and are referred to as either FFY 2016 or FFY16

SECTION I: 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 2016 Annual Report will meet the following reporting requirements:

- Describe how the commission fulfilled its statutory purposes and duties during FFY16;
- 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;
- Provide a timeline for updating the Commission's five- and 10-year plan, including revised benchmarks and recommendations.

SECTION 3: 2015–2016 ACTIVITIES ADVANCING THE COMMISSION'S GOALS

In 2015, the Intergenerational Welfare Reform Commission established *Utah's Plan for a Stronger Future*, its five- and ten-year plan to reduce the number of Utah families in the cycle of poverty, thereby improving their quality of life and helping them become economically stable. Since that time, all Commission activities have focused on achieving those goals. In each area of child well-being, there are both a five-year goal and a 10-year goal. The following reports on Commission activities, organized within each of the goals.

In addition to engaging in activities focused on progressing toward achieving its goals, the Commission acknowledged that its ability to meet its goals is not entirely the role of state government. Rather, in FFY16, the Commission evaluated its data and targeted efforts in counties and communities in which 30 percent or more of the children are at risk of remaining in poverty as adults.¹ This comprehensive effort included providing these identified communities with local-level data and educating them on the impacts of intergenerational poverty. This began a community-led effort to leverage community strengths to improve outcomes that align with the Commission's goals for children at risk of remaining in poverty. The message shared was that intergenerational poverty cannot be reduced by the state utilizing a top-down approach; rather, local communities, familiar with local challenges and resources, are best positioned to leverage its community's strengths to ensure families become economically stable. Ultimately, all of these counties established locally-led working groups to begin addressing the issue through the development of evidence-based plans due for submission by June 2017.

Meanwhile, the state continued to meet its obligations established by the Intergenerational Poverty Mitigation Act (IGPA). The Commission continued its efforts to streamline service delivery by coordinating systems across various agencies. As Commission-agency leaders better understand the issue of intergenerational poverty, and as data sharing continues to improve, more ways have emerged to support customers served across multiple agencies. In addition, the Commission met its statutory obligations of establishing data-driven and evidence-based programs and policies through its increased involvement in the 2016 Utah Legislative Session.

In 2016, the Commission re-evaluated the benchmarks it established in the 2015 plan to ensure it is able to track progress toward its goals. Those benchmarks will be released in a revised five- and 10-year plan in early 2017. This revised plan will not only include the Commission's goals and benchmarks but also recommendations that could be adopted by state and local leaders to support those goals.

COMMISSION’S PRIMARY GOAL:

To reduce the number of Utah families in the cycle of poverty, thereby improving their quality of life and helping them become economically stable.

To ensure the Commission’s primary goal is met, there are both short- and long-term goals that must be achieved. In FFY16, the Commission and its agencies engaged in the following activities to ensure progress toward each of the goals.

EARLY CHILDHOOD DEVELOPMENT

Five-Year Goal: Align all systems involved in early childhood development to ensure Utah has the capacity to prepare for kindergarten children at risk of remaining in poverty.

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty as adults are emotionally, cognitively and developmentally prepared for kindergarten.

SUMMARY OF ACTIVITIES:

In the past year, the Commission used the data contained in the annual intergenerational poverty report within its respective agencies to increase efforts to support the needs of Utah’s youngest children. Several of these efforts were initiated by the Utah Legislature, while others evolved from the cross-agency coordination of services required of the Act. The increased efforts were in three broad categories: (1) supporting the healthy development of young children; (2) increasing access to high-quality preschool; and (3) increasing the professional development of early childhood educators. The following provides a summary of those efforts.

(1) Supporting the Healthy Development of Young Children

Coordination of Home Visitation Services

The availability of evidence-based home visitation services leads to improvements in child well-being among young families with newborns. One outcome of these visits is to reduce the incidence of child abuse and neglect, which is significantly higher among children experiencing intergenerational poverty. In Utah, DOH is responsible for funding three evidence-based home visitation programs throughout the state: Nurse-Family Partnership (NFP), Parents as Teachers (PAT) and Family Spirit, developed for Native American populations.

Both DOH and DWS utilized the intergenerational poverty data to expand the availability of home visitation programs. Through coordination of both data sharing and funding, DOH expanded its footprint of home visitation programs, which target high-risk parents in the cycle of poverty. Much of this expansion occurred in counties identified by the Commission as those with the highest rates of children at risk of remaining in poverty, including Millard, Piute, Sanpete and Sevier counties.²

As a result of the expanded home visitation services, more than 730 Utah families are participating in NFP and PAT evidence-based models. Further expansion of the home visitation programs to serve Native American populations utilizing the Family Spirit program is being considered in Salt Lake, San Juan and Tooele counties.

In addition to increasing resources for home visitation, DOH, DHS and DWS coordinated, and continue to coordinate, identifying eligible target clients served by any of those agencies.

Addressing Developmental Needs of Young Children

Although the data demonstrates that the overwhelming majority of children at risk of remaining in poverty have access to health insurance, it also reveals that the utilization of medical services is low. As a result, developmental delays experienced in young children may not be addressed early enough to mitigate the delays. These developmental delays, especially when not addressed, may impact the children's readiness for school.

As a result, both DWS and DOH are coordinating efforts to educate parents on identifying delays in their young children and connecting them to services to have developmental delays addressed. In 2016, DOH applied for and was awarded the *Early Childhood Comprehensive Systems Impact Grant*. The goal of the grant, administered by Health Resources and Services Administration (HRSA), utilizes a two-generation approach to increase developmental screening scores among young children in three communities with high rates of intergenerational poverty: Ogden, San Juan and South Salt Lake.

In addition, DWS's Office of Child Care established a plan to leverage its network of child care providers to notify all parents receiving child care of the importance of developmental screenings as well as available resources to obtain screenings have developmental delays addressed through Utah's Baby Watch program. Beginning in Fall 2016, these resources will be made available to child care providers and parents. Throughout the year, providers and parents will be reminded to complete developmental screenings and address any delays their young children may be experiencing.

Aligning Utah's Early Childhood System

In Utah, the needs of young children are addressed through multiple state agencies and systems, including DOH, DHS, DWS and USBE, as well as Early Head Start and Head Start. Although there is coordination among these agencies and systems through Early Childhood Utah (ECU), the network of early childhood services requires increased alignment and coordination to meet the Commission's five-year goal.

In addition to supporting the increased improvement in developmental screening scores, the Early Childhood Comprehensive Systems Impact Grant includes additional goals such as strengthening leadership and expertise in early childhood quality development; delivering cross-sector early childhood services through a two-generation lens; developing and adopting core early childhood indicators; and utilizing innovative ideas to change systems and sustain early childhood programs.

(2) Increasing Access to High-Quality Preschool

During the 2016 General Session, the Utah Legislature adopted the High Quality School Readiness Expansion provision. The law requires DWS and USBE to coordinate implementation of three provisions: (1) scholarships to four-year-old children experiencing intergenerational poverty to attend high-quality preschool; (2) grants to high-quality preschool programs to expand access for low-income four-year-old children; and (3) a training and scholarship program to increase the number of early childhood educators who have their Child Development Associate (CDA) credential.

Since adoption, DWS and USBE have hired staff responsible for implementing the components of the legislation, including conducting site visits to ensure all preschool programs serving children through either the grants or the scholarships are high quality. These site visits certified programs throughout the state in both the public and private sector, and as a result, 206 children will attend high-quality preschool through the intergenerational poverty scholarships, and an estimated 1,645 children will be served through the expansion grants.

(3) Increasing Professional Development of Early Childhood Educators

The data relating to the educational attainment of early childhood educators reveals that a majority of them lack an education beyond high school. As the role of early childhood educators expands and includes preparing children for kindergarten, the education level of early childhood educators increases in importance.

As a result, there is an increased effort to ensure that those providing child care to Utah's youngest citizens are qualified to support healthy child development. In FFY16, these efforts included coordination to implement Utah's T.E.A.C.H program and implement the training requirements included in the High Quality School Readiness Expansion program mentioned above.

The T.E.A.C.H. program, or Teacher Education Assistance for College and Higher Education, is a national, evidence-based model that provides grants to caregivers and teachers to obtain post-secondary education. During the 2017 school year, the program will provide grants to 30 child care directors, caregivers and teachers to obtain an associate degree in early childhood education. In exchange, these caregivers commit to work in communities serving low-income children. Both DOH and DWS are assisting in this program to ensure those serving children are skilled caregivers.

In addition to T.E.A.C.H., the Utah Legislature appropriated funds to DWS to increase the number of caregivers and teachers who obtain their Child Development Associate credential. In 2017, approximately 100 early childhood educators will obtain their CDA. The funds appropriated by the Legislature will offset the cost of books, materials, classes and applications while also providing the support necessary for caregivers to successfully obtain their CDA.

EDUCATION

Five-Year Goal: Align systems assisting with educational outcomes to ensure efforts are focused in schools disproportionately impacted by intergenerational poverty. These systems include all levels of governments, local schools, communities, businesses and nonprofit organizations.

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty as they become adults graduate from high school at a rate equal to the statewide rate.

SUMMARY OF ACTIVITIES:

In FFY16, Commission members focused efforts to advance education goals in two primary categories: (1) informing educational leaders of academic indicators identified by the Commission as well as the role of intergenerational poverty on academic achievement; and (2) addressing gaps in evidence-based programs and services in schools disproportionately impacted by intergenerational poverty.

(1) Informing Education Leaders of Intergenerational Poverty

It is clear that education plays an important role in reducing the number of children in the cycle of poverty. The data contained in the annual reports reveals that negative academic outcomes among children at risk of remaining in poverty are impeding that goal. As a result, it is necessary for the education community, in partnership with the Commission, to understand the data and determine the best approach to improving outcomes for Utah's students.

Over the past 12 months, Commission members made it a priority to inform the education community of the intergenerational poverty data revealing students experiencing academic challenges. This effort included meeting with the superintendents of Utah’s Local Education Agencies (LEA) and meeting regularly with members of the Utah State Board of Education. Superintendents in targeted districts were provided with local educational data informing them of the schools most impacted by intergenerational poverty. The information also included the availability or lack of resources that mitigate the impacts of poverty within the most affected schools. Access to this data allows local superintendents to evaluate whether the most impacted schools have the resources necessary to improve the educational outcomes for students at risk of remaining in poverty.

Finally, Commission members met with the deans of Utah’s colleges of education. These institutions are responsible for educating future teachers. The purpose of the meeting was to begin a discussion around whether future teachers are receiving the skills and training necessary to effectively educate children experiencing poverty. It is expected that the Commission will engage in an ongoing dialogue with higher education on this topic.

(2) Addressing Gaps in Evidence-Based Programs and Practices in Schools

There are several effective resources provided in Utah schools that mitigate the impacts of poverty. These programs include access to high-quality preschool, optional extended-day kindergarten and quality afterschool programs. Each of these programs demonstrated improved academic outcomes for children who participate in them.

In an effort to ensure that schools disproportionately impacted by intergenerational poverty provide programs demonstrated to mitigate the effects of poverty, Commission agencies are utilizing limited resources to properly target those schools to improve outcomes for their students. In FFY16, DWS, through its Office of Child Care, focused afterschool resources on communities with high rates of intergenerational poverty and children at risk of remaining in poverty. Those communities and schools received prioritization among several grants, and as a result, 116 programs received funding in the counties with the highest rates of children at risk of remaining in poverty.

In addition, USBE and DWS continue to implement the Intergenerational Poverty Interventions in Schools Act. As result of those efforts, afterschool programs will be offered in both Carbon School District and San Juan School District during the 2016–2017 school year. The past year has been devoted to providing the technical assistance and training necessary to these school districts to implement the afterschool programs across each of the districts. These programs will provide access to quality afterschool programs to an additional 270 students throughout the districts.

In addition to ensuring effective resources are targeted to the schools serving students experiencing intergenerational poverty, Department of Human Services (DHS) Division of Juvenile Justice Services (JJS) coordinated with DWS to extend mentoring services to youth at risk of entering the juvenile justice system.

In 2015, among the children experiencing intergenerational poverty between the ages of 10 and 17, 29 percent interacted with the juvenile justice system. Through the evidence-based approach of Positive Youth Development, it is expected that children at risk of being targeted by gang recruiters and drug dealers as well as those identified as “hard to reach” (e.g., failing to pass or attend school) will attain independence and become positive members of the community. The program is designed to connect with the identified youth at school, on the streets and at other locations identified by a community. The program begins by establishing a trusting relationship between youth and counselors through non-threatening, service-oriented contacts in familiar environments. Once a relationship is established, counselors help youth gain access to community resources and develop positive life skills.

As a result of the coordination between JJS and DWS, mentoring services are being provided in the communities of Price and St. George.

FAMILY ECONOMIC STABILITY

Five-Year Goal: Children at risk of remaining in poverty live in stable families that meet their basic needs (e.g., food, housing, health, safety and transportation).

Ten-Year Goal: Ensure that all children who are at risk of remaining in poverty live in families that are self-reliant.

SUMMARY OF ACTIVITIES

The data reveals that families are struggling to meet their basic needs. This data includes parents struggling to maintain employment, low annual wages and lack of housing stability. Commission members are working to address these challenges through increased coordination, policy and programmatic changes, and targeted funding. The efforts focus in primary areas: (1) stabilizing families, (2) addressing basic needs of families, (3) increasing job skills and employment, and (4) removing barriers to employment.

(1) Stabilizing Families

To improve outcomes for family economic stability, there was increased delivery of family-centered, two-generation approaches. These strength-based approaches intentionally and simultaneously serve both parents and children together and evaluate outcomes for both generations as well as for the family unit. The outcomes for families served in this manner are increasingly positive and demonstrate an evidence-based approach to reducing intergenerational poverty. As a result, Commission members continue to adjust service delivery to incorporate family-centered approaches in various programs, including those within DHS and DWS.

Families experiencing intergenerational poverty have significantly higher rates of substantiated cases of childhood abuse or neglect. These rates not only exist among children experiencing intergenerational poverty; the data reveals that their parents were victims of abuse or neglect when they were children. The lasting implications for children experiencing abuse or neglect are well recognized and include poor academic outcomes, increased engagement in risky behaviors and behavioral health challenges.

Throughout FFY16, DHS continued its focus on keeping individuals and families safely together in their homes, schools and communities. Among other activities, DHS, through its Division of Child and Family Services (DCFS), continued to implement HomeWorks, a statewide, title IV-E child welfare demonstration project to enhance in-home services for families whose children experienced abuse or neglect. A key goal of HomeWorks is to strengthen parents' capacity to safely care for their children at home, which ultimately reduced the need for foster care and further risks to intergenerational poverty.

In FFY16, DWS continued evaluating the effectiveness of its two-generation approach to case management. It began this approach through its demonstration project, "Next Generation Kids," in Ogden and includes families in Kearns and Glendale. The evaluated outcomes included improvements for both children and their parents and revealed the effectiveness of family-focused case management. The services already being delivered by DWS are more effective when incorporated in a family plan that includes the four areas of child well-being: early childhood development, education, family economic stability and health. The family-focused case management model empowers and strengthens the family by addressing their needs through a full family assessment and family plan that is created to focus on the needs of the parents and their children simultaneously. This occurs

through collaboration and coordination among state agencies and community partners, including the case manager and licensed clinical therapist provided through DWS's Family Employment Program (FEP).

Throughout FFY16, DWS continued to ensure its staff is familiar with delivering its traditional case management services through a family-focused, two-generational lens.

(2) Addressing Basic Needs of Families

In an effort to advance the Commission's goals to ensure families are meeting the basic needs of their children, agencies have been engaged in reducing homelessness and increasing access to affordable housing and food.

Throughout FFY16, DWS participated in several efforts around housing. Although the efforts are not specifically focused on families experiencing intergenerational poverty, the data reveals that 50 percent of the families experiencing intergenerational poverty who receive Food Stamps are paying more than 30 percent of their income to housing. For these families, housing is not affordable. Additionally, families experiencing intergenerational poverty are utilizing homeless services at high rates, including emergency shelter care. As a result of the interrelated nature of housing and poverty, DWS' involvement in addressing housing affordability included developing county-level data on the availability of affordable housing. These coordinated efforts will ensure that strategies established to address housing-related issues include improving outcomes for families experiencing intergenerational poverty.

In addition to participating in housing efforts, DWS targeted additional resources through Temporary Assistance for Needy Families (TANF) to evidence-based, supportive-service program for families experiencing homelessness. During the summer of 2016, DWS provided funding to programs through a competitive grant process.

Housing is not the only basic need of families experiencing poverty. Among children, access to proper nutrition is important for healthy development as well as positive educational outcomes. In 2016, the need to ensure children have access to quality nutrition led to a tri-agency agreement between DWS, DOH and USBE to streamline the process of determining eligibility for free or reduced lunch in schools. Beginning in September 2016, children enrolled in Medicaid will be automatically eligible for free or reduced lunch at their school. This streamlined eligibility leads not only to increased access to food for vulnerable children but reduces the administrative burden on agencies determining eligibility for multiple programs with similar eligibility requirements.

(3) Increasing Job Skills and Employment

It is clear that parents experiencing intergenerational poverty lack the education and job skills necessary to obtain employment in job sectors paying a wage sufficient to meet the basic needs of their children. Nearly three-quarters of the adults lack an education beyond high school, are unable to obtain year-round employment and are largely employed in low-skilled occupations. As a result, Commission agencies continue to address these outcomes through existing programs and funding resources.

In FFY16, DWS, Utah System of Higher Education and the Governor's Office of Economic Development (GOED) continued to provide resources through the Utah Cluster Acceleration Partnership (UCAP). The partnerships, which includes education, business and economic development, provides funding to post-secondary educational institutions to develop, implement or enhance educational programs responsive to regional and statewide industry needs. Through these partnerships, schools develop career pathway programs not only for adults but also for high school students. These programs serve the dual purpose of addressing industry needs while improving the job skills and education of the labor force. Several of the pathway programs and other grant recipients target DWS customers who face intergenerational poverty.

(4) Removing Barriers to Employment

The goal of reducing intergenerational poverty cannot be achieved without obtaining and maintaining employment. Barriers to employment exist and must be addressed for many families utilizing public assistance. One of the most significant barriers to employment is child care, which can cost as much as 24 percent of one's income. As a result, many parents remain home rather than obtain employment.

In an effort to address the child care barrier to employment, the Office of Child Care division within DWS reviewed several policies to reduce the likelihood that lack of child care prevents parents from working. It made the following policy changes: (1) established Job Search Child Care, (2) reduced the child care "cliff effect" to minimize the disincentive to work, (3) established Upfront Child Care to expedite child care eligibility determinations and (4) reduced child care co-payments for working families receiving child care subsidies. Together, these policy changes encourage parents with child care needs to work while also reducing the share of income that is used to pay for child care.

HEALTH

Five-Year Goal: Ensure that all children experiencing intergenerational poverty have access to quality physical health, mental health and dental care, regardless of where their family resides in Utah.

Ten-Year Goal: Ensure that all children experiencing intergenerational poverty are receiving physical, mental and dental care at the same rate as their peers in statewide rates, regardless of where their family resides in Utah.

SUMMARY OF ACTIVITIES

In 2015, among children experiencing intergenerational poverty, 94 percent had access to health care through either Medicaid or the Children's Health Insurance Program (CHIP). This is similar to the rate of coverage among children at risk of remaining in poverty. Although the rate of health insurance coverage is high among children, it is significantly lower among their parents. This gap between parents and children may explain the limited use of health care services among children, given that the parents' health insurance coverage influences health care utilization for children.

As a result of this relationship between health care coverage of parents and health care utilization for children, the Commission expanded efforts to ensure that there was increased access to health care throughout the state. This included coordination among agencies to effectively target resources to expand access to health care throughout the state as well as efforts undertaken by the Department of Health (DOH).

(1) Expanded Access to Health Care

In 2016, DOH was responsible for implementing House Bill 437, *Health Care Revisions*. One aspect of this law allows more parents with children to access full Medicaid benefits by expanding the income eligibility guidelines for parents from less than 50 percent of the federal poverty level (FPL) to up to 60 percent of the FPL. Based on current DOH estimates, an additional 3,000 to 4,000 parents will qualify for Medicaid.

In accordance with the legislation, DOH submitted a waiver request to the Centers for Medicare and Medicaid Services (CMS) to permit modifications to the Medicaid program. Although currently under review by CMS,

DOH is working with CMS on approval of the waiver, which will provide comprehensive coverage of physical and behavioral health to more parents in the IGP cohort.

In addition, Utah Medicaid implemented a number of other initiatives, including a CMS Oral Health Initiative, the coverage of services for children with autism spectrum disorder from ages 0–21, and an expansion of Accountable Care Organizations (ACOs) to nine rural counties, which may encourage more care coordination of health and behavioral health services.

The intergenerational poverty data also reveals a lack of utilization of behavioral health services despite higher rates of behavioral health challenges for both IGP adults and IGP children. In an effort to increase utilization to ensure behavioral health issues are addressed as early as possible, DHS and DWS coordinated data and funding to place School-Based Behavioral Health services in schools with the highest rates of children at risk of remaining in poverty. The program influences academic outcomes for children experiencing behavioral health challenges through improvements in the Dynamic Indicators of Basic Early Literacy Skills (DIBELS) and improvements in grade point averages among older students.

In FFY16, as a result of this effort, behavioral health services were expanded to include 217 schools throughout Utah.

(2) Efforts by Department of Health

In 2016, DOH embraced its role in advancing the Commission’s five- and 10-year goals for health. It did this by creating a department-wide, internal IGP Steering Committee. The committee meets quarterly and is comprised of representatives from each DOH division to review programs and policies to address intergenerational poverty. Through this Steering Committee, DOH will assist the Commission in developing strategies to advance its health goals.

PRIMARY GOALS RELATED TO COMMISSION PURPOSE

Five-Year Goal: Agencies serving same families coordinate case management of these families, ensuring aligned case management plans and reduced burden on families.

Ten-Year Goal: Eliminate duplication of services across state agencies and ensure case managers serving the same families collaborate on the best services necessary to serve the needs of the children.

SUMMARY OF ACTIVITIES

Given the interrelated nature of the challenges confronting children and their parents experiencing intergenerational poverty, it is not uncommon for families to be served by multiple state agencies and divisions within agencies. As a result of this overlap in services, Commission members continue to work toward the goal of improved case management coordination. The very nature of this requires increased coordination among Commission members and their agencies.

In FFY16, efforts continued to meet the five-year goal adopted by the Commission through an executed data-sharing agreement between DHS and DWS. The agreement allows DWS and DHS to share individual case information across multiple programs while protecting the privacy of these individuals in accordance with

applicable federal law. Although the agreement was executed, the technology systems are not yet allowing the information to be shared between agencies.

Once the information is available, DWS and DHS caseworkers will know when a family is interfacing with the other state agency. This shared information will allow caseworkers across agencies to facilitate compliance with each other's case management plan while effectively supporting the families receiving the case management services.

In addition to the cross-agency case management coordination, DHS continued its efforts to address the risks of families experiencing intergenerational poverty through its System of Care approach to high-level case management.

The data 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 several areas of state services. In 2014, DHS was awarded a federal grant for establishing a System of Care approach.

System of Care offers services in a coordinated, local and individualized manner. Families of children with serious emotional and behavioral conditions receive increased access to DHS's four child-serving divisions, as well as with DWS, DOH, the Utah courts and community-based services. In 2015, DHS launched the System of Care delivery with dedicated staff in DCFS Western, Northern, Eastern and Southwestern Regions. Each region has a community-based working group that includes DWS, DOH and USBE working in partnership to guide employee training, measurable outcomes and case management, among other key elements of the human services approach.

Additionally, the approach advances the goals of the Commission by identifying common families receiving multiple services across commission-member agencies, although it is important to note that not all served by System of Care receive public assistance through DOH or DWS. In 2017, System of Care will be implemented statewide through federal funding sources, including TANF.

Additional Goals

In addition to the five- and 10-year goals outlined above, the Commission established five-year goals to further meet the requirements of the Act. Those goals include the following:

- (1) Increase communication among social services providers, state agencies, local governments and faith-based organizations so they will learn what each is doing to end poverty and develop best practices from all entities fighting to end poverty, ensuring coordination and alignment across systems and levels of government.*
- (2) Determine the data needed to develop measurable indicators to monitor the progress on the established goals.*
- (3) Educate Utah's public of the impact of intergenerational poverty not only on the children experiencing it but also on Utah's economy and quality of life.*

In the past 12 months, the Commission met these additional short-term goals largely through engagement with targeted counties. In 2016, the Intergenerational Welfare Reform Commission focused on activities that ensured progress was made on educating and empowering communities with high levels of intergenerational poverty and at-risk children. The Commission engaged local leaders around the state with an emphasis placed on creating local plans for local solutions. The message shared was that intergenerational poverty cannot be solved by the state with a top-down approach, nor is there a one-size-fits-all solution.

The effort to engage counties with high rates of children experiencing intergenerational poverty included several coordinated strategies that will continue over the next nine months and culminate with a comprehensive plan to address intergenerational poverty within the counties. Each plan will be developed locally and align with the Commission’s five- and 10-year goals outlined above.

In 2016, the strategies to engage and educate counties—largely rural—of the impacts of intergenerational poverty included the following:

- (1) Provide county-level data revealing the impacts of intergenerational poverty.
- (2) Meet with county leaders, including county commissioners and mayors, to review the data and understand the issue.
- (3) Organize a roundtable discussion regarding intergenerational poverty with the following attendees:
 - Local organizations representing each area of child well-being
 - Commission Chair Lieutenant Governor Spencer Cox
 - Vice Chair DWS Executive Director Jon Pierpont
 - State agencies involved in the Commission
- (4) Provide resources to communities to allow them to develop a county-wide plan that addresses intergenerational poverty.
- (5) Provide training and technical assistance resources to provide a roadmap for developing a county-wide plan to address intergenerational poverty.

DWS led the efforts to engage counties in the work of meeting the goals of the Commission. DWS was largely responsible for organizing one-page data summaries containing local-level data for each county; coordinating county-level meetings; designing and releasing a community-planning grant opportunity; and coordinating with Utah State University-Extension to develop a series of online training modules for communities interested in addressing intergenerational poverty. The modules will include topics assisting counties in creating an effective community initiative.

As a result of these county efforts, 13 counties established committees consisting of mandatory partners representing early childhood, kindergarten thru 12th-grade education, higher education, economic development, workforce development, public health, behavioral health, juvenile courts and families experiencing poverty. These committees will develop and submit local plans by June 2017. The final plans will include data-driven strategies to address intergenerational poverty that will allow the Commission to monitor progress toward achieving its goals.

Additional Activities Required by IGPA

In addition to the Commission’s efforts to achieve its goals, the IGPA requires it to engage in additional activities. The following outlines those requirements and summarizes the corresponding activities.

- 1. 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 Fifth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance***

2016. Both the Advisory Committee and the Research Subcommittee were actively involved in the development of the report. Several members of the Research Subcommittee were responsible for the gathering and submitting data for the 2016 report.

- **Community stakeholders increased involvement.** In FFY16, community involvement increased significantly through the Commission's local efforts with 12 counties engaged in addressing intergenerational poverty. This effort also increased engagement among state agencies at the local level through participation on local committees established to develop local plans to address the issue.
- **The Commission increased involvement in 2016 General Session.** The Commission became more involved in the 2016 General Session by reviewing and evaluating several pieces of legislation to ensure proposals were data driven and aligned with the Commission's goals.
- **National leaders were engaged to remove barriers for Utah's efforts to reduce intergenerational poverty.** Over the past twelve months, increased attention has been placed on Utah's unique approach to reducing poverty. Given that some of the barriers to reducing poverty among Utah children evolve from federal policies, Utah has leveraged opportunities to share these challenges with national leaders.

Both Governor Gary R. Herbert and DWS Executive Director Jon Pierpont, who serves as vice chair of the Intergenerational Welfare Reform Commission, shared Utah's work on intergenerational poverty. In November 2015, Pierpont accepted an opportunity to testify before the Finance Committee of the United States Senate to explain Utah's intergenerational poverty initiative and discuss the federal government's role in the issue.³ In July 2016, Herbert presented at the National Governors Association (NGA) summer meeting. He spoke about Utah's efforts to address intergenerational poverty through the use of extensive data sharing and analysis across state agencies. This presentation also included the work of a DWS family success coach who works with several families stuck in the cycle of poverty.

Both national presentations elevated the awareness of intergenerational poverty, and Utah's unique approach to addressing it, on the national level.

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

- **Data was shared to produce *Utah's Fifth Annual Report on Intergenerational Poverty, Welfare Dependency and the Use of Public Assistance 2016*.** Agency members engaged in ongoing efforts to share data to evaluate the barriers and challenges facing children at risk of remaining in the cycle of poverty as they become adults. This included sharing data in the report in the following areas not previously reported: housing burden, post-secondary education and involvement with Utah Department of Corrections.
- **Data was shared to produce local data snapshots of counties with the highest rate of children at risk of remaining in poverty.** During FFY16, data was analyzed to determine the top 10 counties in Utah with the highest rate of children at risk of remaining in poverty as adults. These counties were Beaver, Carbon, Grand, Iron, Kane, Millard, San Juan, Piute, Sanpete, Sevier and Washington. In addition, snapshots were developed for Salt Lake, Utah and Weber counties to support their proactive local efforts.

CONCLUSION

Throughout FFY16, the Intergenerational Welfare Reform Commission continued to meet the purpose of the Intergenerational Poverty Mitigation Act and make progress toward its five- and 10-year goals. The activities made by each Commission agency create continued progress toward reducing the incidence of Utah children living in poverty and welfare dependency as they become adults.

By engaging local leaders throughout the state, ongoing discussions on the impact of intergenerational poverty on a local level are occurring among key community members. The Commission is relying on county leaders to determine local concerns and create solutions. This tailored approach for each county is encouraged in order to drive area-specific results.

As the Commission continues its work in 2017, it will remain focused on evaluating gaps in the data and ensuring progress is made toward the goals contained in the five- and 10-year plan. The Commission will continue to analyze evidence-based programs to improve outcomes supporting its goal of reducing the number of Utah families in the cycle of poverty, improving their quality of life and helping them become economically stable. In early 2017, the Commission will release its updated five- and 10-year plan, including revised benchmarks and data-driven strategies to reduce intergenerational poverty in Utah.

(Endnotes)

- 1 The data utilized to target communities was from CY2014.
- 2 Home visitation also expanded to Juab and Wayne counties.
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ENDNOTES

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- 8 Kathleen Short, The Supplemental Poverty Measure: 2014, U.S. Census Bureau, Community Population Reports, September 2015, <https://www.census.gov/content/dam/Census/library/publications/2015/demo/p60-254.pdf>.
- 9 Massachusetts Institute of Technology, Living Wage Calculator, <http://livingwage.mit.edu/counties/49007>, U.S. Census Bureau and the Utah Department of Workforce Services.
- 10 Several states study child poverty. At this time, only Washington is beginning to study intergenerational poverty, although its legislature rejected legislation modeled on Utah’s Intergenerational Poverty Mitigation Act.
- 11 Utah Code §35A-9-102.
- 12 In research, the traditional use of the term, “cohort,” refers to a specific group of individuals that are followed through time. The individuals in the cohort remain the same, year-to-year. In this report, the term “cohort,” is used simply to identify all of the individuals meeting the characteristics of the particular group for the 2015 calendar year. These are not necessarily the same individuals identified in previous reports.
- 13 The 2016 report analyzes data from calendar year (CY) 2015. Since the 2014 report, the data analyzed is from the previous calendar year. Prior to 2014, the reports used data based on the state fiscal year. As result, 2011 and 2012 data included in this report is from the state fiscal year not calendar year.
- 14 It should be noted that the 12-month threshold has received scrutiny since it was established in 2012. Research suggests that children receiving public assistance for even one month received about as much public assistance as adults as those beyond the 12-month threshold. There is a positive correlation between child months and adult months, but it is more gradual than the 12-month demarcation suggests. That just one month of public assistance received as a child correlates to the number of months an adult

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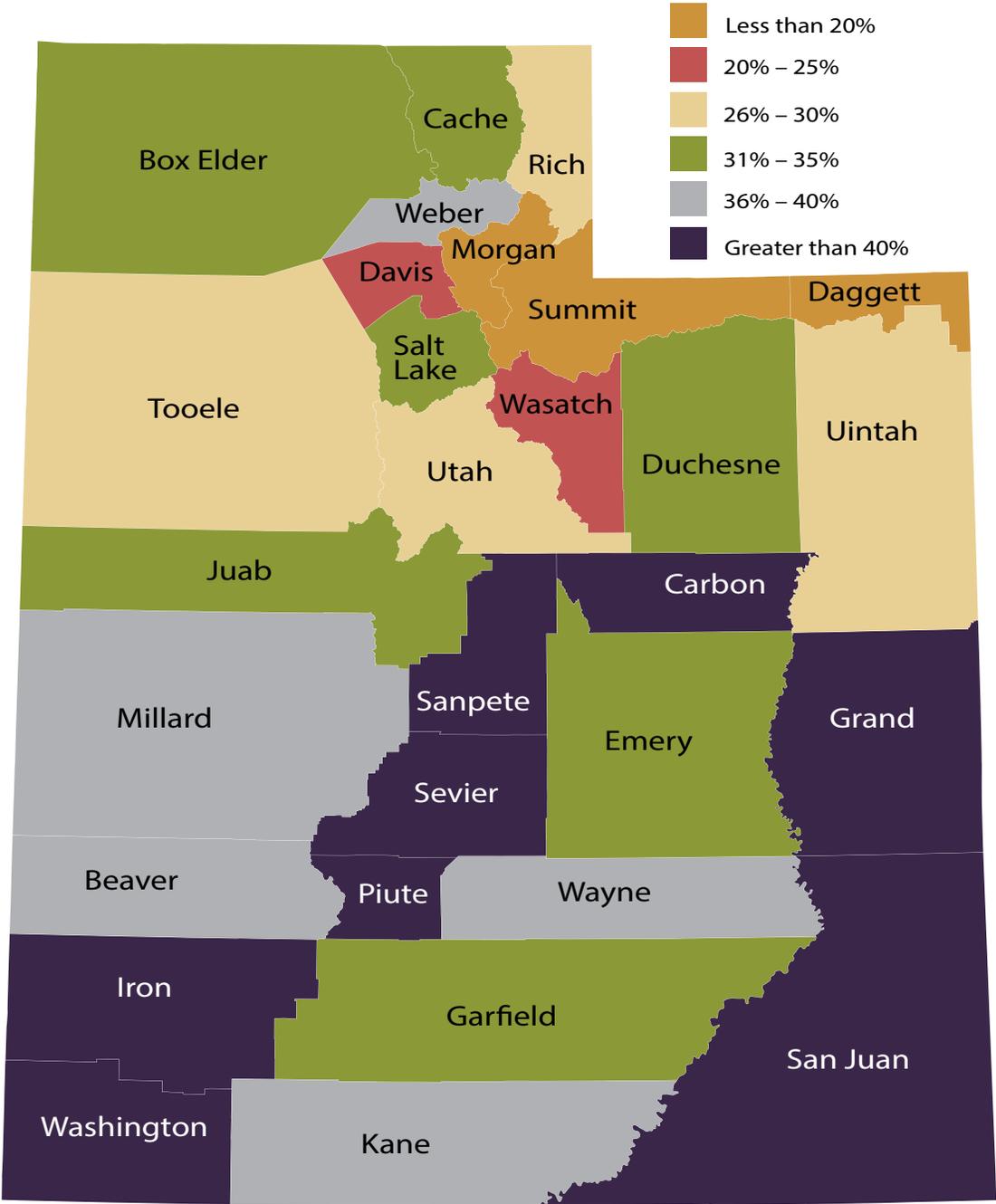
30 American Academy of Pediatrics, 2014 Recommendations for Pediatric Preventive Health Care, 2014, <http://pediatrics.aappublications.org/content/pediatrics/133/3/568.full.pdf>.

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Children At Risk of Remaining in Poverty



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UTAH'S FIFTH ANNUAL REPORT

ON INTERGENERATIONAL POVERTY, WELFARE DEPENDENCY
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AND

UTAH INTERGENERATIONAL WELFARE REFORM
COMMISSION ANNUAL REPORT

2016



utah department of
human services

UTAH JUVENILE COURTS



Department of
Workforce Services

