

JAN 24 2019

A BILL FOR AN ACT

RELATING TO POVERTY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The department of human services has one of the
2 largest operating budgets of any state department, and is
3 responsible for a majority of all the executive branch's federal
4 funds. The department provides benefits and services to one in
5 four Hawaii residents or nearly 360,000 individuals. The
6 State's medicaid program provides medical insurance coverage for
7 nearly one-half of Hawaii's children.

8 The department's programs and services include: protection
9 of vulnerable children and adults; vocational rehabilitation and
10 financial assistance to the disabled; the supplemental nutrition
11 assistance program; financial assistance; job training and
12 placement; housing and services for the homeless; medicaid
13 services for the State's medically needy population; and
14 prevention, treatment, and housing for the State's youthful
15 offenders.

16 To provide these benefits and services to Hawaii's
17 vulnerable individuals and families, the department manages
18 significant federal and state funds and processes vast amounts
19 of information on a daily basis. Initiated by the Patient

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1 Protection and Affordable Care Act of 2010, the department
2 continues to invest in the development of an enterprise
3 eligibility system that will support the integration of services
4 that will lead to improved individual and program outcomes
5 through more efficient service delivery and data analytics.

6 As part of the department's continuous improvement efforts,
7 in 2016 the department embarked on its 'Ohana Nui effort by
8 adopting a multigenerational approach to transform the way
9 services are provided to individuals and families to improve
10 outcomes and well-being. By providing programs and services
11 that maintain a high level of service integration, quality, and
12 intensity across multiple generations, the department intends to
13 reduce intergenerational poverty in the State, and the human and
14 financial costs associated with poverty.

15 The human and financial costs associated with poverty are
16 well-documented. The 2009 paper "Childhood and
17 Intergenerational Poverty: The Long Term Consequences of Growing
18 up Poor," by Robert L. Wagmiller, Jr., and Robert M. Adelman,
19 found that "individuals who grow up in poor families are much
20 more likely to be poor in early adulthood. Moreover, the
21 chances of being poor in early adulthood increase sharply as the
22 time spent living in poverty during childhood increases." Our

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1 programs must focus on reducing the time children, families, and
2 individuals spend in poverty, and supporting every person's
3 ability to meet his or her human and economic potential.

4 Furthermore, other studies link adverse social and economic
5 conditions in childhood to health problems in adulthood. The
6 original 1998 Adverse Childhood Experiences (ACE) study
7 conducted by the Centers on Disease Control & Prevention and
8 Kaiser Permanente, surveyed nearly 17,000 adults in southern
9 California. The primary conclusion of the ACE study was the
10 finding of a strong relationship between "exposure to abuse or
11 household dysfunction during childhood and multiple risk factors
12 for several leading causes of death in adults," such as heart
13 disease, cancer, chronic lung disease, fractures, and liver
14 disease. While adverse childhood experiences occur across all
15 races and economic classes, there is a higher prevalence of ACEs
16 for those who also live in poverty.

17 A similar conclusion was again found in a 2014 Swedish
18 study that "showed social and economic disadvantages in
19 childhood were associated with an earlier onset and faster
20 progression of functional health problems from midlife into old
21 age." See Agahi N, et al., "Social and economic conditions in
22 childhood and the progression of functional health problems from

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1 midlife into old age," J Epidemiol Community Health 2014; 0:1-7.
2 doi:10.1136/jech-2013-20369.

3 The Swedish study also concluded that "creating equal
4 opportunities for educational attainment may help reduce the
5 long-term effect of disadvantaged childhood conditions and
6 postpone functional health problems." Transitioning the
7 department's service delivery to a multigenerational approach
8 will refocus the department's efforts to provide available
9 resources and support to reduce the time a child and family
10 spends in poverty, stabilize the child's basic needs and
11 environment to enhance their ability to learn, improve all
12 recipients' economic security, and ultimately reduce
13 intergenerational poverty in Hawaii.

14 The purpose of this Act is to require the department of
15 human services to use an integrated and multigenerational
16 service delivery approach to reduce the incidence of
17 intergenerational poverty and dependence on public benefits
18 consistent with the nationally recognized best practices.

19 SECTION 2. Section 26-14, Hawaii Revised Statutes, is
20 amended by amending subsection (b) to read as follows:

21 "(b) The department shall administer programs through an
22 integrated and multigenerational approach designed to improve

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1 the social well-being, economic security, and productivity of
2 the people of the State[-], and to reduce the incidence of
3 intergenerational poverty and dependence upon public
4 benefits. Without limit to the generality of the foregoing, the
5 department shall concern itself with problems of human behavior,
6 adjustment, and daily living through the administration of
7 programs of family, child and adult welfare, economic
8 assistance, health care assistance, rehabilitation toward self-
9 care and support, public housing, and other related programs
10 provided by law."

11 SECTION 3. Statutory material to be repealed is bracketed
12 and stricken. New statutory material is underscored.

13 SECTION 4. This Act shall take effect upon its approval.

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INTRODUCED BY: 

16

BY REQUEST

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Report Title:

Department of Human Services; Integrated and Multigenerational Approach; Reduction of Intergenerational Poverty

Description:

Requires the Department of Human Services to use an integrated and multigenerational approach to delivering human services to reduce the incidence of intergenerational poverty and dependence on public benefits.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

JUSTIFICATION SHEET

DEPARTMENT: Human Services

TITLE: A BILL FOR AN ACT RELATING TO POVERTY.

PURPOSE: To require the Department of Human Services to use an integrated and multigenerational service delivery approach to reduce intergenerational poverty and dependence on public benefits.

MEANS: Amend section 26-14(b), Hawaii Revised Statutes (HRS).

JUSTIFICATION: The Department of Human Services has the largest operating budget of any state department, approximately \$3.3 billion, including seventy-nine percent of all federal funds in the executive branch. The Department provides benefits and services to 1 in 4 Hawaii residents, or approximately 360,000 individuals. The Department provides medical insurance coverage for nearly one-half of Hawaii's children.

The Department is part of the national movement to improve the delivery of human services lead by the National Governors' Association, the American Public Human Services Association, Ascend of the Aspen Institute, and others. The Department is adopting a service integration and multigenerational approach, is redesigning its business processes, and continues to improve its technology systems.

The Department is also engaged in its first departmental strategic plan to improve overall program outcomes and establish outcome measures of services for children, parents, and families geared to reduce adverse risks and increase protective factors that promote educational attainment and wage progression that lead to economic self-sufficiency. Through service integration and addressing the needs of

multiple generations in a family concurrently, efforts and resources will be better targeted to support the well-being of individuals and families. Investment is also being directed to improving the human services workforce by supporting professional development to improve the work environment, encourage retention, and renew employees' dedication to helping Hawaii's vulnerable residents reach their human and economic potential. Ultimately, the goals of transformation are to improve well-being of individuals, families, and the community, reduce intergenerational poverty, reduce dependence on public benefits, and reduce the human and fiscal costs of poverty. The proposed amendment will underpin the department's transformation from a silo-ed service delivery model to an integrated and multi-generational model.

Multiple studies identify the consequences of growing up in poverty: "individuals who grow up in poor families are more likely to be poor in early adulthood;" and "the chances of being poor in early adulthood increases sharply the longer the time spent in poverty in early childhood." See, Robert L. Wagmiller, Jr., and Robert M. Adelman, "Childhood and Intergenerational Poverty: The Long Term Consequences of Growing up Poor." The groundbreaking 1988 Adverse Childhood Experiences (ACE) Study showed clear linkage of the number of ACEs a child experienced to negative health outcomes in adulthood.

Further, a 2015 Swedish study, similarly confirmed the findings of the ACE study using Swedish population data, and also concluded that "creating equal opportunities for educational attainment may help to reduce the long-term effect of a disadvantaged childhood and postpone functional health problems." See N. Agahi, B. Shaw, S. Fors, "Social and economic conditions in childhood and the progression

of functional health problems from midlife into old age," J Epidemiol Community Health 2014; 0:1-7. doi:10.1136/jech-2013-20369.

Preliminary analysis of data from Hawaii's Supplemental Nutrition Assistance Program (SNAP) show that a percentage of Hawaii's SNAP recipients experience intergenerational poverty. For those born from 1987-1996 (currently, 21-30 years old), over 35,000 received SNAP benefits in childhood and as adults, or 21 percent of (166,081) the total number of those born from 1987-1996 who received SNAP benefits during their lifetime. For those born, during the period 1977-1986 (currently, 31-40 years old), more than 33,000 received SNAP benefits in childhood and as adults, or 23.5 percent of (140,930) the total number of those born during the period 1977-1986 who ever received SNAP.

Of particular concern is that individuals in the above age groups represent parents of young children. To change the trajectory of these families and individuals, the Department must transform its practices and provide services more effectively in a way that will support the child's, parent's and other individual's social capital, educational and economic potential to become self-sufficient, and reduce their dependence on public benefits.

Impact on the public: More effective and efficient administration and delivery of human services will result in better outcomes and improved well-being for children, individuals and families. If successful, individuals, and families will achieve their social capital, education and economic potential, and reduce their dependence on public benefits.

Impact on the department and other agencies: The Department is in the process of realigning its business processes to become

more efficient across divisions, and also needs to rethink its service outcomes to incorporate a multigenerational approach. Other departments that serve the same individuals and families may be impacted in terms of making their services and systems more navigable and transparent.

GENERAL FUND: None.

OTHER FUNDS: None.

PPBS PROGRAM
DESIGNATION: None.

OTHER AFFECTED
AGENCIES: None.

EFFECTIVE DATE: Upon approval.