

Work Requirements Will Hurt Latino Families Most

There are 57.4 million Latinos in America, representing 18% of the national population.¹ By 2030, Hispanics are expected to make up 22% of the nation's population and their contributions to our nation's economy will continue to grow. While Latinos have the highest labor force participation rate* of all racial or ethnic groups, they too often do not earn enough to cover basic necessities like health care, healthy, nutritious food, and housing. Faced with stagnant wages, a federal minimum wage that is too low, and a growing racial wealth gap, benefit programs like Medicaid, the Supplemental Nutrition Assistance Program (SNAP), and affordable housing initiatives help Latino families stay healthy, put food on the table, and keep a roof over their heads.²

Despite the clear benefits of these programs, congressional Republican leadership and President Trump aim to make it harder for people to stay healthy and keep working. For example, in addition to proposed budget cuts, they enabled states to add work requirements on Medicaid enrollees for the first time in the program's 53-year history. This could cause hardworking Americans to lose access to Medicaid, not because they do not work, but because of the additional administrative burden created by these new work requirements.³ There are also proposals to add work requirements to federal housing assistance programs, like Housing Choice Vouchers and Public Housing, and make SNAP's existing work requirements even more stringent.⁴ The requirements do nothing more than create artificial barriers to these programs, threatening to leave more Latino families sick, hungry, and homeless.

Latinos Are Working

Almost 27 million Latinos are working today, with a labor force participation rate of 66.2% compared to a rate of 63% overall.⁵ While the vast majority of Latinos are working and the unemployment rate has declined significantly as the economy recovers, Latino workers are

* Share of the population over the age of 16 that is in the labor force.

overrepresented in low-wage jobs, often have unpredictable hours or wages, lack employer-sponsored benefits, and are engaged in seasonal or part-time work.

Consequently, Latino workers are more likely than White workers to be considered “working poor,” meaning they spent at least 27 weeks in the labor force but had incomes falling below the federal poverty level. In 2015, about 8.6 million individuals were among the “working poor” and Latinos were twice as likely to be in this category than Whites (10% versus 5%).⁶

Federal Programs and Working Latinos

The nature of low-wage work means that many workers rely on federal benefits like Medicaid, SNAP, and affordable housing programs to make ends meet. In fact, Latinos relying on federal benefits are more likely to be working than other groups. For example, Latinos enrolled in Medicaid are more likely to work themselves (63% compared to 60% for all groups) or live in a working family (81% compared to 79% overall) than all other recipients.⁷

Federal programs help millions of Americans every day, lifting families out of poverty. These programs are of crucial importance to Latino working families:

- An estimated 32% of Latinos are covered by Medicaid and 30% of Medicaid enrollees are Latino.⁸
 - More than half (54%) of Latino children are covered by Medicaid.⁹
- In 2016, approximately 21% of Latino households received SNAP in the past year.¹⁰
- Of the 4.5 million households receiving federal rental assistance in FY 2015, approximately 8% were Latino households.¹¹

Barriers to Verifying Employment

Most working-age SNAP participants work, and those who do not (and are not exempt) can only access SNAP for three months out of a 36-month period. Verifying employment is already burdensome for Latino workers and many enrolled in SNAP report difficulty documenting hours, which can lead to families wrongly losing benefits.

This is due, in part, to Latinos’ reduced access to resources necessary to make verification appointments or submit forms online, as fewer have access to a vehicle, compared to the overall population (89% versus 91%) and fewer have access to the internet at home (77% versus 81%).

Source: Urban Institute, *Work Requirements in Social Safety Net Programs*, 2017, https://www.urban.org/sites/default/files/publication/95566/work-requirements-social-safety-net-programs_4.pdf; Brynne Keith-Jennings and Raheem Chaudhry, *Most Work-Age SNAP Participants Work, But Often in Unstable Jobs*, (Washington, DC: Center on Budget and Policy Priorities, 2018), <https://www.cbpp.org/research/food-assistance/most-working-age-snap-participants-work-but-often-in-unstable-jobs> and U.S. Census Bureau American Community Survey, 1-Year Estimates, 2016.

These programs effectively work together to lift millions out of poverty. In 2015, SNAP, Medicaid and housing assistance lifted 6.3 million Latinos above the poverty line, including three million Latino children.¹² Eroding federal programs like SNAP, Medicaid, affordable housing, and energy assistance threatens to push millions, including children, into or deeper into poverty.

Latinos are already less likely than their eligible peers to enroll in Medicaid, SNAP, and housing assistance programs. For example, studies show that administrative barriers in Medicaid and the Children's Health Insurance Program (CHIP) are more likely to cause eligible Latinos to either lose access or not participate in the first place.¹³ In 2013, two-thirds of uninsured Latino children were estimated to be eligible for Medicaid or CHIP but remained uninsured.¹⁴ Further, Latinos have historically been overrepresented in eligible nonparticipants in SNAP due to confusion about complex restrictions and concerns about immigration consequences.¹⁵

Effect on Children

Many factors have been consistently identified over the last three decades as barriers to accessing health care services among eligible Latino children, including parents being unaware of their child's eligibility, language access challenges, the complex application process, worries about immigration-related consequences for family members, and lack of adequate culturally-competent outreach and enrollment programs. The Affordable Care Act's Medicaid expansion program provided a 'welcome mat' effect for Latino children, who were enrolled in coverage when their parents became aware of benefits and enrolled themselves. Conversely, as Latino parents lose access to Medicaid, their children likely will as well.*

Source: UnidosUS and Georgetown University Health Policy Institute, *Historic Gains in Health Coverage for Hispanic Children in the Affordable Care Act's First Year*, 2016, <http://publications.nclr.org/handle/123456789/1456>; and Center on Budget and Policy Priorities, *Medicaid Work Requirements Will Reduce Low-Income Families' Access to Care and Worsen Health Outcomes*, 2018, <https://www.cbpp.org/research/health/medicaid-work-requirements-will-reduce-low-income-families-access-to-care-and-worsen>.

Work Requirements Do Not Ease Poverty

Research shows that work requirements do little to nothing to alleviate poverty, and could push working families into or deeper into poverty.¹⁶ Even when a recipient is working, the volatility of low-wage work includes weekly and monthly fluctuations in work hours and wages that can mean the difference between eligibility and ineligibility.¹⁷ With little control over their schedules, earnings and benefits, additional barriers to or an outright loss of Medicaid not only punishes workers for their employer's decisions but also threatens their ability to stay healthy enough to work.

Putting up barriers for people, many of whom are working, to access health care, stay in their home, and feed their families does nothing to improve job quality, promote workforce development, or raise wages. Policymakers must reject attempts at both the state and federal level to kick hardworking families off federal benefits and instead should focus on ensuring employers pay all workers fair wages and invest in programs that have been proven to promote work and lift Americans out of poverty.

All sources accessed April 2018.

¹ U.S. Census Bureau American Community Survey, 1-Year Estimates, 2016.

² UnidosUS, “Federal Programs Lift Millions of Latinos Out of Poverty” (Washington, DC: UnidosUS, 2017) <http://publications.unidosus.org/handle/123456789/1748>.

³ Hannah Katch, Jennifer Wagner, and Aviva Aron-Dine, *Medicaid Work Requirements Will Reduce Low-Income Families’ Access to Care and Worsen Health Outcomes*, (Washington, DC: Center on Budget and Policy Priorities, 2018), <https://www.cbpp.org/research/health/medicaid-work-requirements-will-reduce-low-income-families-access-to-care-and-worsen>.

⁴ Will Fischer, “Housing Work Requirements Would Harm Families, Including Many Workers,” (Washington, DC: Center on Budget and Policy Priorities, 2018), <https://www.cbpp.org/research/housing/housing-work-requirements-would-harm-families-including-many-workers>.

⁵ UnidosUS, “U.S. Employers Add 313,000 Jobs,” (Washington, DC: UnidosUS, 2018), http://publications.unidosus.org/bitstream/handle/123456789/1835/latinojobsreport_3918.pdf?sequence=3&isAllowed=y.

⁶ Bureau of Labor Statistics, “A Profile of the Working Poor, 2015,” <https://www.bls.gov/opub/reports/working-poor/2015/home.htm>.

⁷ Rachel Garfield et al., *Understanding the Intersection of Medicaid and Work* (Washington, DC: Kaiser Family Foundation, 2018), <http://files.kff.org/attachment/Issue-Brief-Understanding-the-Intersection-of-Medicaid-and-Work>.

⁸ U.S. Census Bureau Current Population Survey, 1-Year Estimates, 2017.

⁹ Ibid.

¹⁰ U.S. Census Bureau American Community Survey, 1-Year Estimates, 2016.

¹¹ Center on Budget and Policy Priorities tabulation of Department of Housing and Urban Development (HUD) 2016 administrative data, produced by arrangement with HUD.

¹² UnidosUS analysis of 2016 data from Census Bureau Current Population Survey, Annual Social and Economic Supplement & Supplemental Poverty Measure public use files (Washington, DC: U.S. Census Bureau, 2016) <https://www.census.gov/programs-surveys/cps.html>.

¹³ Ruth Zambrana and Olivia Carter-Pokras, “Improving Health Insurance Coverage for Latino Children: A Review of Barriers, Challenges and State Strategies,” *Journal of the National Medical Association* 96 (2004), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2594984/pdf/jnma00304-0116.pdf>.

¹⁴ UnidosUS and Georgetown University Health Policy Institute, *Historic Gains in Health Coverage for Hispanic Children in the Affordable Care Act’s First Year*, 2016, <http://publications.nclr.org/handle/123456789/1456>

¹⁵ UnidosUS, *Latino Participation in the Supplemental Nutrition Assistance Program*, Issue Brief 11 (Washington, DC: UnidosUS, 2015), https://www.unidosus.org/Assets/uploads/Publications/Nutrition-Profiles/2015plh_issue11_72815.pdf.

¹⁶ Center on Budget and Policy Priorities, *Work requirements don't cut poverty evidence shows* (Washington, DC: Center for Budget and Policy Priorities, 2018), <https://www.cbpp.org/research/poverty-and-inequality/work-requirements-dont-cut-poverty-evidence-shows>.

¹⁷ Economic Policy Institute, *Irregular Work Scheduling and its Consequences*, Briefing Paper 394 (Washington, DC: EPI, 2015), <https://www.epi.org/files/pdf/82524.pdf>.