

Uplifting Courageous Voices:

*From the Frontline
of Poverty in
Westchester County*



Prepared by

**WESTCHESTER
CHILDREN'S
ASSOCIATION**

Children's Champions Since 1914

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www.wca4kids.org



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A special thank you...

A special thank you to the Robin Hood Foundation for funding and supporting our data and advocacy efforts. We also thank the Westchester Community Health Center and Open Door Family Medical Center for helping us to identify and elevate the voices of community members.

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Executive Summary

In response to the Child Poverty Reduction Act of 2021, the Child Poverty Reduction Advisory Council (CPRAC) was established to address child poverty in New York. To understand the challenges faced by families, Westchester Children's Association (WCA) conducted focus groups in partnership with Open Door Family Medical Center and Westchester Community Health Center's low-income parents in Mount Vernon,

"We didn't ask to be homeless. We just want to be seen as humans and not for our circumstances."

Ossining, Port Chester, and Greenburgh to hear from individuals who have been impacted by low-income and participate in one or more government sponsored programs. The study aimed to explore concerns regarding food security, housing, and healthcare.

The findings reveal significant hardships endured by families navigating support systems. Conducting these focus groups vividly illustrated the challenges families face, including reliance

on SNAP (Supplemental Nutrition Assistance Program) benefits, difficulties in securing stable housing, and navigating healthcare systems.

Food Security

Many of our participants depend heavily on SNAP benefits, yet the enrollment and renewal process can be overwhelming due to stringent documentation requirements and a scarcity of Spanish-speaking staff. **Increasing food prices frequently deplete SNAP benefits** before the month's end, prompting families to turn to food pantries and community churches for assistance. However, inadequate awareness of aid locations and their operating hours presents additional challenges. Fear of potential immigration-related consequences discourages some from applying for SNAP benefits for their children, worsening food insecurity, especially during school breaks.

Housing

Housing emerged as the most pressing issue, with families facing extensive waiting periods, discriminatory practices, and unsupportive interactions with housing program administrators. Navigating the housing search entails unexpected fees, extensive documentation, and discriminatory criteria, with some landlords refusing to rent to families with children. Immigrants facing legal obstacles endure a heart-wrenching dilemma, unable to secure housing while navigating uncertain immigration statuses, often resorting to shelters or street vending to meet their financial needs.

Healthcare

While navigating the healthcare system is easier, **challenges arise during Medicaid plan completion or renewal**, accessing essential medications, and overcoming language barriers. Renewal requirements catch many off guard, leading to denied medical services

and battles with insurance providers for effective medications. The demand for mental health resources becomes evident through narratives describing school-related behavioral issues resulting from inconsistent access to necessary medication, highlighting the vital connection between healthcare and education.

The narratives captured underscore the urgent need for holistic solutions to alleviate family burdens in Westchester County. Increased income for families and removing administrative barriers are effective poverty-fighting tools.

LEGISLATIVE RECOMMENDATIONS

Enhance the **Earned Income Tax Credit (EITC)** to ensure that every working New Yorker, including those who file with an Individual Tax Identification Number (ITIN), have access to the credit.

Strengthen the **Empire State Child Credit** by removing the current income phase-in and raising the credit amount to make a more substantial impact on a family's budget.

Establish and Fund the **Healthy School Meals for All Program**, ensuring that schools taking part in the National School Lunch Program offer both breakfast and lunch to all students at no charge.

Ensure **continuous enrollment in Medicaid and Child Health Plus** health coverage for all eligible children, keeping coverage from birth through age 6.

Increase income limits to reduce stress imposed by benefit restrictions and establish the **Mothers & Infants Lasting Change (MILC)** direct cash transfer pilot, to provide financial support to parents of infants at a critical period in their lives.

Through joint efforts and policy reforms, a more supportive and equitable landscape can be created, offering solutions to families striving for stability amidst poverty and systemic challenges.

Introduction



Some of us are able to enjoy many of life's luxuries. Some of us have everything we need and half of what we want. But, even in one of the most affluent counties in the US, some of us find ourselves stuck in cycles of poverty. In Westchester, one out of five children and youth ages 0-24 live in poverty or low-income households. Across New York State 700,000 children are living at or below the federal poverty line.

In 2021, New York took a significant step by enacting the Child Poverty Reduction Act, pledging to reduce child poverty by 50% in the next decade, with a dedicated focus on racial equity. This commitment necessitates a focus on evidence-informed policy actions that can promptly aid children and families experiencing poverty in the state. To spearhead these efforts, the Child Poverty Reduction Advisory Council (CPRAC) was established with the primary purpose of tackling and alleviating child poverty in New York.

To hear directly from people affected by low-income, Westchester Children's Association (WCA) explored the pressing concerns surrounding food security, housing, and healthcare in the communities of Mount Vernon, Ossining, Port Chester and Greenburgh. The qualitative research approach revealed a myriad of challenges and systemic complexities mothers encountered as they navigated various support systems in their quest to support their families. It is important to note that participation was not limited to mothers, however, not surprisingly, the response to WCA's invitation to parents was largely from women. The following report explores the narratives and difficulties faced by families.

We extend our gratitude to the Robin Hood Foundation for funding our advocacy work on child poverty. We also thank our community partners at Open Door Family Medical Center, Westchester Community Health Center, and our valued participants who generously shared their emotional experiences and journeys while navigating government-sponsored programs in Westchester County.

Methodology

The qualitative research approach of focus groups was used to delve into the multifaceted experiences of individuals impacted by low-income and those engaged in government-sponsored programs. We looked for participants at the Westchester Community Health Center and Open Door Family Medical Center (See Invitation in Appendix A). Our primary objectives were to:

1. Listen to the Voices of Experience

Focus groups were conducted in both English and Spanish, as we recognized the power of firsthand experiences given in the language someone is most comfortable in, and we prioritized the collection of authentic narratives.

- A. Mt. Vernon, NY – English
- B. Port Chester, NY – Spanish
- C. Ossining, NY - Spanish
- D. Greenburgh, NY (2 separate groups) – English & Spanish

2. Create an Atmosphere of Inclusivity and Respect

We committed to engaging respectfully and openly with individuals who faced hardships, ensuring that their voices were central to our research. Each participant was compensated for her time.

To collect personal and demographic information on participants, a survey was disseminated beforehand (See Survey in Appendix B). To guide our conversations, a comprehensive outline of questions was created to capture the authentic narratives from individuals dealing with the challenges of low-income (See Outline in Appendix C). To ensure diverse perspectives, each group consisted of six to ten participants.

The findings and responses from all five focus groups have been summarized under topic headings: food security, housing, and health. A critical outcome of this report is ensuring that the perspectives and insights gathered will reach decision-makers who can bring about impactful change. The final report and findings will be shared extensively, including distribution to the NY State Child Poverty Reduction Advisory Council (CPRAC), elected officials, and various community stakeholders.

Participant Demographics

AGE OF MOTHER

Age	Total	Percentage (Out of 49 Participants)
18 to 24	1	2.04%
25 to 34	10	20.41%
35 to 44	30	61.22%
45 to 54	5	10.20%
55 to 59	1	2.04%
60 to 64	1	2.04%
65 over	1	2.04%

CHILDREN PER MOTHER

Number of Children	Number of Mothers	Percentage (Out of 49 Participants)
1 child	9	18.37%
2 children	22	44.90%
3 children	9	18.37%
4 children	5	10.20%
5 children	4	8.16%

INCOME LEVEL

Income Level	Total	Percentage (Out of 49 Participants)
Under \$15,000	31	63.27%
\$15,000 to \$24,999	11	22.45%
\$25,000 to \$34,999	5	10.20%
\$35,000 to \$49,999	1	2.04%
\$50,000 to \$74,999	1	2.04%

Findings

The findings vividly portray the struggles encountered by families: reliance on SNAP (Supplemental Nutrition Assistance Program) benefits and food pantries, hurdles in securing stable housing, and complexities surrounding healthcare access. Each focus group highlighted unique obstacles in the community. This report presents a comprehensive overview of the challenges and emphasizes the urgent need for targeted interventions and systemic changes to support these families in navigating essential support systems.



“By the end of the month, the [SNAP money is] gone because of how expensive everything is currently.”

Food Security

Most mothers, although not all, reported a heavy reliance on SNAP benefits to sustain their families. In Ossining, many mothers discovered SNAP benefits for the first time through our discussion. Navigating the enrollment and renewal process proved challenging for many due to the additional documentation often needed, which can be difficult to obtain from service providers. Participants voiced skepticism and difficulties in proving their circumstances, expressing frustration with the lack of understanding for special-needs children and their dietary restrictions, limited Spanish-speaking staff and non-compassionate assistance while navigating various supportive food programs. Disparities in the amount of SNAP benefits received became evident as participants shared that the benefits they received are contingent

upon case managers' decisions.

In Ossining, undocumented participants expressed apprehension about applying for SNAP on behalf of their children, fearing potential repercussions because of their immigration status.

Due to rising food costs, SNAP benefits were often depleted before the end of the month, leading families to seek aid from food pantries and local resources. However, lack of awareness of pantry locations, operational hours, and access proved challenging. Disparities in what individuals received appeared to be based on time of arrival and place in line. Inconsistencies in the amount of food provided proved frustrating as well. Larger families would receive the same quantity of food as those with fewer family members. Many voiced a preference for fresher produce, meat and fish. There were also culturally unfamiliar items and a lack of essential child-friendly items.

Additionally, many rely on free school lunch and enrolling their children in the program was relatively straightforward. However, during school breaks, accessing community food pantries became a necessity for several mothers.

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Housing

Housing emerged as the most pressing issue for all. The experiences shared underscored the daunting challenges and systemic barriers within housing programs like subsidized housing: extensive waiting periods, lack of available housing options, burdensome upfront fees, lack of consistent help from the Department of Social Services (DSS), landlord bias towards families with children and other potential influencing factors that may appear unfair. Mothers residing in shelters expressed dissatisfaction with the strict curfew rules, which they felt compromised their mental well-being. This situation left them feeling dehumanized and infantilized.

For many mothers, living in Section 8 housing, where landlords accept vouchers on behalf of tenants became a reality after enduring extensive waiting periods ranging from five to nine years. Other participants shared that they live in public housing, which restricts their housing options to government-operated buildings.

Navigating the housing search became a maze of unexpected fees and discriminating criteria. In Greenburgh, many felt DSS employees were sometimes unsupportive and biased. This results in a lack of clarity regarding necessary housing documents and abrupt closures of their cases without prior notice, requiring them to restart the housing application process. In Mt. Vernon, many shared concerns with calculating mistakes made by DSS that affected how and to whom help was provided. For those who secured Section 8 housing, often vacant units were in areas with high rates of community violence.

Participants reported instances of being forced to leave their homes due to unsatisfactory conditions, including unsanitary environments and experiences with eviction. Accessibility to housing posed a significant challenge for participants with young children with disabilities, leading to increased exposure to landlord aggression based on their children's conditions. Suitable apartments for larger families also proved to be challenging with landlords demanding high security payments, substantial deposits, and upfront rent. Additionally, a systemic flaw that impacted their housing support was revealed: restricting their ability to work for more pay which could leave them slightly over the income limit for subsidies. Researchers refer to this as the “benefit cliff”- sudden and often unexpected decrease in public benefits that can occur with a small increase in earnings

Immigrants who were hindered by legal processes also found themselves in a bind between an inability to afford legal aid or secure housing and navigating uncertain



“I could not throw away my children. I was desperate and everywhere I went, I was told ‘no children, no children’.”

immigration statuses. Some resorted to shelters and turned to street vending to make ends meet. This housing struggle was also an emotional story of sacrifice, with parents working excessively long hours, limiting time spent with their children, leaving parents with the undesirable choice between providing for and being present for their families.

Health

Despite dealing with food and housing challenges, participants unanimously agreed that navigating the healthcare system was easier. We recognize this may be a bias as participants connected to WCA through community health centers. Participants did identify hurdles when it came to completing or renewing their Medicaid health plans. In Mt. Vernon, families struggled to access needed medications for their children's health and mental well-being when their Medicaid was discontinued. This adverse effect flowed into other areas of their lives, influencing children's performance in school, interactions with peers, and ability to complete daily activities, making the connection between healthcare and education clear.



“The psychologists who speak Spanish are not covered by my insurance. It is chaos to find a psychologist.”

The pressing need for mental health resources became apparent through narratives describing school-related behavioral issues stemming from inconsistent access to necessary medication. Adding to these challenges, families faced difficulty in meeting with service providers, as they looked to find providers who accepted their insurance and did not have extensive waiting lists.

In Ossining, every participant acknowledged that their child had Medicaid, yet they were unaware of the distinction between it and Children's Health Insurance Program (CHIP) which is income- and citizenship-based. A few participants shared that their health insurance did not cover prescribed medication, forcing them to bear the expense or navigate the challenging

task of requesting the doctor to prescribe an alternative medication. In Port Chester, language surfaced as a significant barrier among all participants.

The limitations imposed on income put families in an uncertain balance between losing insurance benefits and working additional hours to further support their families. As stated in the Housing section, this income threshold dilemma arises due to a slight pay increase, which, in turn, decreases the level of support provided, even though they still do not have enough to care for their families.

In Conclusion

The narratives captured in the Mount Vernon, Ossining, Port Chester, and Greenburgh communities unravel the intricate challenges participants face daily while navigating food security, housing, and healthcare systems. This report uncovers the hardships and systemic obstacles faced by these families, underlining the pressing need for holistic solutions to alleviate their burdens. Despite the unique experiences within each area, a resounding thread of resilience shines through amidst systemic complexities.

Our qualitative research, grounded in the voices of those directly affected, emphasized the critical importance of engaging respectfully and inclusively with individuals familiar with these challenges. We aimed to not just document their stories but also elevate their voices to decision-makers capable of effecting change.

Within this context lie important recommendations for change, encompassing community-wide awareness initiatives, streamlined application processes, and advocacy for expanded income limits. These recommendations aim to dismantle systemic barriers and offer tangible relief to families embedded in these cycles of adversity.

This report serves as a rallying call for collaboration among stakeholders, policymakers, and the community at large. Through joint efforts and policy reforms, we can create a more supportive and equitable landscape, offering hope and substantive solutions to families striving for socio-economic stability amidst the complexities of poverty and systemic challenges.



Our Recommendations

Based on the courageous voices of our focus group participants, key recommendations are outlined below. These recommendations are aimed at addressing the challenges faced navigating essential support systems. They highlight strategies for improved information dissemination, streamlined application processes, community engagement, and legislative advocacy to foster tangible changes for families in need.

1. Improved Information Dissemination:

- A. Develop community-wide campaigns to enhance awareness of food pantries and aid programs in various languages.
- B. Create user-friendly guides on SNAP benefits, housing assistance, and healthcare programs in languages appropriate for the community served.

2. Streamlined Application Processes:

- A. Advocate for simplified and accessible application processes for SNAP benefits, Section 8, and healthcare plans that are uniform throughout the state.
- B. Collaborate with government agencies to reduce bureaucratic hurdles in obtaining essential services. Train government agency staff in effective and supportive communication and Trauma-Informed Care.
- C. Limit application renewals.

3. Community Engagement:

- A. Foster community dialogues to share experiences and discuss potential solutions.
- B. Collaborate with local organizations and stakeholders to address systemic issues affecting families.

4. Legislative Advocacy:

- A. **Enhance the Earned Income Tax Credit (EITC)** to ensure that every working New Yorker, including those who file with an Individual Tax Identification Number (ITIN), have access to the credit.
- B. **Strengthen the Empire State Child Credit** by removing the current income phase-in and raising the credit amount to make a more substantial impact on a family's budget.
- C. **Establish and Fund the Healthy School Meals for All Program**, ensuring that schools taking part in the National School Lunch Program offer both breakfast and lunch to all students at no charge.
- D. **Ensure continuous enrollment in Medicaid and Child Health Plus** health coverage for all eligible children, keeping coverage from birth through age 6.
- E. **Increase income limits** to reduce stress imposed by benefit restrictions and establish the Mothers & Infants Lasting Change (MILC) **direct cash transfer pilot**, to provide financial support to parents of infants at a critical period in their lives.

Appendix A – Invitation

WESTCHESTER CHILDREN'S ASSOCIATION

Children's Champions Since 1914

JOIN OUR FOCUS GROUP

Ossining Focus Group

Thursday, October 26, 2023

10 am – 12 pm

Location:

2 Church Street, Suite 101
Croton Point Meeting Room
Ossining, NY 10562

Port Chester Focus Group

Friday, October 27, 2023

10 am – 12 pm

Location:

5 Grace Church Street
Port Chester, NY 10573

Contact Angel Gray: agray@wca4kids.org | 914.505.6738

WE ARE LOOKING FOR:

1. Experience: Parents or guardians of school-aged children who are low-income and have participated in government programs (Medicaid, CHIP, SNAP, school lunch, Section 8, child care subsidies, etc.)
2. Diverse Perspectives: Focus groups at Open Door will be conducted only in Spanish. English-speaking groups will be held at Westchester Community Health Center's Greenburgh and Mt. Vernon locations.
3. Willingness to Share: We welcome people from various cultures and backgrounds to share their experiences. We invite one adult per household.

A focus group brings people together to discuss questions guided by a professional.

Two hour time commitment with compensation (\$200) provided-only one adult per household.

Thank you to our partners:



OPEN DOOR
FAMILY MEDICAL CENTER
AND FOUNDATION

ROBIN HOOD

Building Strong, Healthy Communities



WESTCHESTER
COMMUNITY
HEALTH CENTER

Appendix B – Survey



Westchester Children's Association Focus Groups

Westchester Children's Association Focus Groups to be conducted at Open Door's Port Chester and Ossining locations in Spanish, Westchester Community Health Center's Mt. Vernon location in English, and the Greenburgh location in both languages.

Contact Information

These questions will help us contact you if needed.

1. Name

2. Cell Phone Contact

3. Email Contact

4. What Focus Group are you attending?

- ☐ Open Door – Port Chester
- ☐ Open Door – Ossining
- ☐ Westchester Community Health Center – Greenburgh
- ☐ Westchester Community Health Center – Mt. Vernon

Demographics

These questions will help us learn more about you.

1. What town/city in Westchester are you from?

2. What is your primary language?

3. What is your race/ethnicity?

- ☐ Asian
- ☐ Black
- ☐ Hispanic/Latino
- ☐ Multiracial
- ☐ White (Non-Hispanic)

4. What is your income level?

- ☐ Less than \$15,000
- ☐ \$15,000 to \$24,999
- ☐ \$25,000 to \$34,999
- ☐ \$35,000 to \$49,999
- ☐ \$50,000 to \$74,999

5. Choose your age range

- ☐ Under 18
- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 59
- ☐ 60 to 64
- ☐ 65 and over

6. How many children do you have?

7. What are the ages of your children?

Needs and Support:

These questions will help us know what services support you and your children.

1. What programs do you currently use? Check all that apply.

- ☐ SNAP/ EBT
- ☐ School lunch
- ☐ WIC
- ☐ Affordable Housing/Section 8
- ☐ Medicaid
- ☐ CHIP
- ☐ PICHHC

2. What other services do you use within the health center? Check all that apply.

- ☐ Doctor (primary or other)
- ☐ Patient Advocacy Service
- ☐ Discounted Prescription Program 340B
- ☐ On-Site Pharmacy
- ☐ On-Site Laboratory
- ☐ Patient Transportation
- ☐ Food Programs
- ☐ Wellness & Education
- ☐ Other: _____

Appendix C – Outline

Westchester Children's Association Focus Group Questions

Introduction / Greetings

Ice Breaker: ***pick one***

- **Common ground:** Encourage parents to find common ground by discussing their shared concerns, hopes, or experiences related to child poverty.
- **Parenting Wish List:** Ask participants to share one thing they wish they had known or had access to when they first became parents, related to addressing child poverty.

Food:

First, we would like to talk about how you feed your family.

- Let's first talk about SNAP:
- Who here participates in SNAP or a school lunch program?
 - How did you hear about this program?
- Was it easy or difficult to enroll?
 - What were the difficulties in enrolling?
 - How can the process of enrolling be made easier?
- Was anyone here ever dropped from the program? If so, why?
- For those whose children get school lunch, what do you do when school is not in session?
- Do these programs help you enough? When it does not provide for your needs, what do you do?
- How can this program be improved to meet your needs?
- Is there anything else you'd like to share that we have missed?

Housing:

- Who participates in Section 8 / Affordable Housing / Housing Voucher Programs?
- How did you hear about the program?
- Was it difficult to access the housing programs?
 - What were some of the difficulties?
- How can the process of enrolling be made easier?
- Have you ever been dropped from the program?
 - If so, why?
- How can this program be improved to meet your needs?
- Is there anything else you'd like to share that we have missed?

Health:

- Who participates in CHIP or Medicaid for Children?
- How did you hear about the program?
- Was it difficult to enroll?
- How can the process of enrolling be made easier?
- Have you ever been dropped from the program?
- How can the program be improved to meet your needs?
- Is there anything else you'd like to share that we have missed?

Notes:

At the end of each section, provide a short summary and ask if anyone else has anything else they would like to share.

At the end of the focus group ask:

- Did we miss anything?
- Does anybody want to add something else about this these programs, and how they can be improved?