Material Hardship: Diaper Need and Period Poverty

Material hardship is when families struggle to afford basic needs. Research from the Center on Budget and Policy Priorities shows that families with young children--especially Latino and Black families--have experienced more material hardship throughout the pandemic. Those faced with material hardship have higher levels of toxic stress and emotional distress which can be detrimental to child development.

Two areas of material hardship are diaper need and period poverty. Diaper need is when families struggle to afford diapers. Period poverty is when individuals struggle to afford menstrual products. Lacking access to these necessities can force people to seek alternative solutions, such as reusing diapers or menstrual products, which can lead to infections and other health problems.

Note: Material hardship = difficulty paying for basic needs such as food, rent, utilities, or child care.
Source: Authors’ analysis of Rapio-Early Childhood survey response data
The costs of diapers and menstrual products exacerbates the material hardship. Despite many other necessities having lower or no tax, diapers and menstrual products often are still taxed at standard rates (7% in Tennessee). **Tennessee is one of 27 states with a sales tax on menstrual products and one of 36 with one on diapers (except for sales tax holiday).** Material Hardship can be mitigated by emotional and financial support. Families were able to receive financial support through TANF cash assistance and the expanded Child Tax Credit. Sadly, most other public benefit programs (WIC, SNAP, and Medicaid/CHIP) do not cover menstrual products or diapers. TennCare covers diapers only when medically necessary.

Email Marsha Blackburn and other members of Congress and ask them to help families afford basic necessities by extending the child tax credit expansion.

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**New Katie Beckett Flyer!**
Demographics of Children with Gaps in Coverage

A recent report from the Georgetown Center for Children and Families shows more than 1 in 9 children in the South experience a gap in coverage. Gaps in coverage are more likely to impact children in communities of color.
Nationwide, 14% of Latino children experienced a gap in coverage over the course of a year and nearly 12% of Black children had a gap in coverage. When children lose coverage, they have more trouble accessing the health care they need when they need it the most. More than one in four children with a gap in coverage lack a usual source of care, more than three times the rate of children who are covered year-round. Learn more about how gaps in coverage affect children's access to care.

**Figure 3. Children Who Are Uninsured for All or Part of a Year by Race and Ethnicity**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Children</td>
<td>9.9%</td>
</tr>
<tr>
<td>Non-Hispanic White*</td>
<td>7.3%</td>
</tr>
<tr>
<td>Non-Hispanic Asian</td>
<td>9.9%</td>
</tr>
<tr>
<td>Non-Hispanic Other/Multiple Races</td>
<td>10.3%</td>
</tr>
<tr>
<td>Non-Hispanic Black</td>
<td>11.7%</td>
</tr>
<tr>
<td>Hispanic*</td>
<td>13.9%</td>
</tr>
</tbody>
</table>

Source: Georgetown University Center for Children and Families analysis of Agency for Healthcare Research and Quality 2018-2019 Medical Expenditure Panel Survey data. *Estimate is significant at the 90 percent confidence level relative to "All Children."

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**Recent News**

- Potential in Congress to Close TN Health-Coverage Gap
- How the juvenile justice system can protect our children from the negative impact of ACEs | Opinion
- A thousand Tennessee families are benefiting from new medical coverage for middle class households, and there’s no waiting list
- COVID Harmed Kids’ Mental Health—And Schools Are Feeling It

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**Health Justice Rally**

On November 20th, TJC hosted a virtual statewide rally through Zoom and Facebook Live. The rally was a success and we are grateful to every attendee, cosponsor, speaker, and TJC staff member who contributed. We had several performances and speakers. Our keynote speakers, Leslie E. Redmond and Rose McGee, spoke about what led to their activism, the importance of intergenerational partnership within the movement, and the power of
sweet potato pie. To hear their discussion, watch the video on the TJC YouTube channel. Also, check out the stories of individuals who have experienced health inequities and disparities in our Health Justice Rally Story Book!

COVID-19 Vaccine Available for 5-year-old and Up

The COVID-19 vaccine is now available for kids ages 5 –11. This is their shot! Vaccinating kids and teens against COVID will help them get safely back to the things that make them happy and healthy! Also, individuals 16 years and older are eligible to get COVID-19 booster shots. COVID-19 vaccines are available to everyone regardless of health insurance or immigration status. Watch the recording of TJC’s Vaccines for Kids: Facts v. Fiction* webinar featuring pediatricians Dorothy Sinard and Barbara Dentz here and Learn more here.

How ECF CHOICES Can Help Your Family

Last month, we hosted a webinar with Family Voices of Tennessee and gave an overview of the ECF CHOICES program including who it serves, the different groups, and the application process. Check out the recording.

ECF CHOICES ENROLLMENT TIERS

- There are a limited number of slots and thousands of people on the waitlist (also called the referral list)
- There are five different group numbers, each with different eligibility criteria and available services. Each also have their own cap of open slots

FEDERAL UPDATES

Doula Care and Medicaid

Black pregnant people are three times more likely than other pregnant individuals to die from complications both in Tennessee and nationwide. The United States has a maternal mortality crisis. One strategy being explored to
address this is improving access to doula care. Doulas are non-medical professionals who provide emotional, physical, and informational support and guidance to pregnant and postpartum people to help advocate for them and ease their stress.

Build Back Better includes most of the Black Maternal Health Momnibus Act provisions including one to grow and diversify the perinatal workforce. $275 million is allocated to grow and diversify the perinatal health workforce, which includes nurses, midwives, physicians, doulas, and mental health professionals. An additional $50 million is dedicated specifically to doulas.

Additionally, the National Health Law Program has the Doula Medicaid Project which is an effort to improve health outcomes for pregnant Medicaid enrollees. The goal is for all pregnant Medicaid enrollees who want a doula to have access to one. Currently, nine states (including Florida and Georgia) either cover doula care in their Medicaid programs or provide coverage in a similar program. Eight states are actively pursing legislation to get it covered. Tennessee state representative London Lamar sponsored a bill to get doula care covered under TennCare, but the bill did not pass in the 2021 legislative session. The Nashville Strong Babies Project received $125,000 in funding to recruit and train doulas to support families in their program.

Take the Black Health Matters pledge to show support for making the maternal mortality crisis a to priority in our state moving forward.

Build Back Better Update

We applaud the U.S. House of Representatives for stepping up to prioritize kids’ health in the Build Back Better reconciliation bill. The House bill will strengthen health coverage and access to care for kids and families nationwide, improving lives now and in the long term.

BUILD BACK BETTER WILL...

☑ Temporarily fill the coverage gap in non-expansion states
☑ Provide 12-month continuous eligibility to children
☑ Permanently fund CHIP (Children’s Health Insurance Program)
☑ Provide 12-month postpartum coverage to new moms

The next step is the Senate. We all should urge Congress to see this process through and pass the bill. We need Congress to act now! Our communities have suffered far too long. They are parents and youth, cooks and teachers, caretakers and essential workers. For too many, this is a matter of life and death. Congress must give people peace of mind and pass the Build Back Better Act.

By filling the coverage gap in non-expansion states, providing 12-month continuous eligibility to children and 12-month postpartum coverage to new moms, and permanently funding CHIP, Congress is showing that health coverage for all kids and families is a priority. Join us in thanking the House Democrats in TN's delegation for prioritizing healthcare and taking this historic step to provide healthcare for all. Send your appreciation now!

TN UPDATES

https://email.everyaction.com/EmailMessage/PreviewMessage/a21b5fe3-c2e0-eb11-a7ad-501ac57b8fa7
Katie Beckett

Over 1000 children have been enrolled in the Katie Beckett program since November 2020. If your child was approved for Katie Beckett Part B but denied Part A, you have the option to allow your child's treating physician to speak directly with TennCare's designated physicians so that your child's doctor can present more information about why your child should get Part A. You can do this by submitting a Request for Peer to Peer Review. Click here to review the request form. Be sure to sign up for our Katie Beckett Webinar tomorrow at 11am CT to learn more about the program and its benefits.

Families First/TANF

Yesterday, the Families First Community Advisory Board (21 members) convened to review and vote on 47 proposed applications from organizations and agencies across the state. The chosen organization will receive $5 million in planning grants. This is the first phase of the Tennessee Opportunity Pilot Initiative included in the TANF (Tennessee's Temporary Assistance for Needy Families) Opportunity Act. This legislation emerged because the TANF program, also known as Families First, accumulated a surplus of $732 million, which has since climbed to $741 million. The act capped TANF’s reserve, increased the monthly maximum cash assistance, and created the Families First Advisory Board.

Additionally, the Act includes $180 million towards the Tennessee Opportunity Pilot Initiative. There is $5 million devoted to planning grants to assist organizations in developing proposals. An additional $175 million will be rewarded over the next four years to implement seven public-private partnerships focused on improving Families First for individuals pursuing educational opportunities.

If you work with families who participate in the TANF program and would like to share your insights on the program with other advocates, you’re welcome to join our monthly TANF Stakeholders meeting. Please reply to this email to request meeting details.

Maximum SNAP Allotment Ending in December

SNAP participants will continue to receive the full SNAP benefit for their household size during December (see chart). However, December will be the last month that participants will receive the maximum benefit. As of January 2022, benefits will go back to being determined on a case-by-case basis like they were before the pandemic.
SNAP Benefits by Household Size

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Maximum Monthly Benefit, Fiscal Year 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$250</td>
</tr>
<tr>
<td>2</td>
<td>$459</td>
</tr>
<tr>
<td>3</td>
<td>$658</td>
</tr>
<tr>
<td>4</td>
<td>$835</td>
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<tr>
<td>5</td>
<td>$992</td>
</tr>
<tr>
<td>6</td>
<td>$1,190</td>
</tr>
<tr>
<td>7</td>
<td>$1,316</td>
</tr>
<tr>
<td>8</td>
<td>$1,504</td>
</tr>
<tr>
<td>Each additional person</td>
<td>$188</td>
</tr>
</tbody>
</table>

JOIN US

The Ins and Outs of Tennessee's Katie Beckett Program

Thursday, December 16th
11:00am - 12:00pm

Free Webinar

REGISTER
Build Back Better Postcard Campaign

Monday, December 20th
5:00pm - 7:00pm
*Free Webinar*

**Build Back Better Postcard Campaign**

**CHOICES Workshop: A Medicaid Eligibility Master Class**

Thursday, August 20th
10:00am - 12:00pm
*A Virtual Interactive Event*

**CHOICES Workshop: A Medicaid Eligibility Master Class**

{{Disclaimer}}

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