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Poor children: the walking wounded

"[Jesus] said to them, 'Let the little children come to me, and do not hinder them, for the kingdom of God belongs to such as these.'"

– Mark 10:14 (NIV)

Toby and Tina grew up poor. As young children in Virginia, they moved frequently between rented cheap apartments and homeless shelters. Sometimes their mother, Mary, would keep a job for several months and they would stay in one place for awhile. Then she'd lose the job, stop paying the bills, and the electricity or heat would be turned off. Toby would try to do his homework by the light of the street lamp outside their windows. Tina never did much homework. With a severe reading disability, school was frustrating for her.

Meals were scarce in their house. Especially when the utilities were off, a cold can of Spaghetti-Os was a typical dinner. Kids at school teased them, calling them "trash diggers" because their mom found some of their clothes in the dumpster behind their apartment building. It was hard to keep the few friends they had, because each move meant starting over at a new school.

Their mother Mary had a ninth-grade education and severe mental and physical disabilities. The children didn't have much relationship with their father, who lived in a different state.

When Toby and Tina were in their early teens, the family moved into a long-term housing program for homeless families. There they received the kind of comprehensive care their family needed – counseling for the entire family, tutoring for Tina, life-



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skills classes, volunteer assistance to help the teens learn how to prepare family dinners. Toby got a part-time job after school and opened his own savings account. For three or four years, the family was stable.

But Mary's health continued to decline, and recently, she died. Now 18, Toby has dropped out of school and is living with his friend's family. He is still working part-time and studying for his GED. Tina, 16, is living in a residential foster care program for adolescents with emotional problems.

Tina and Toby's story illustrates a stark reality, but not a rare one. In this country, 13 million children live below the federal poverty line – nearly 18% of all children.¹ A larger percentage of children are poor in the United States than in any other developed country.² Children under 18 are much more likely to be poor than adults.³

poverty line,⁶ which was \$16,090 annually for a family of three in 2005.

INTRICATE WEB OF CONDITIONS

But poverty is more than simply living below a certain income threshold. Children who are poor almost always live in families with a host of other exacerbating issues: parents with low education levels; families led by young, single women; violence both within the family and the surrounding community; medical problems and disabilities; parental substance abuse; and emotional problems such as depression. So it is hard to isolate the effects of income poverty, but there is no doubt that lack of income makes all of the other problems in poor children's lives more difficult to handle. Lack of money compounds an intricate web of other social conditions.

But whether the problems are caused by poverty itself, or by the family and community factors that typically accompany it, most low-income children have more negative outcomes than their middle- and upper-income peers in four areas: physical, emotional, social and educational.

PHYSICAL EFFECTS OF CHILDHOOD POVERTY

According to a multi-site study of more than 20,000 low-income children under 3 years of age, one in five children

does not consistently have enough food for an active and healthy lifestyle.⁷ A wealth of health data collected since the 1960s has demonstrated that some of the most striking physical effects of poverty result from hunger and malnutrition.

The following story, reported by a doctor, illustrates childhood hunger in America:



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African American children are most likely to be poor, with 36% living below the poverty line. American Indian/Alaskan Native and Latino children follow closely at 31% and 29% respectively.⁴ High poverty rates and persistent poverty are disproportionately found in rural areas.⁵ Among poor children, 37% are extremely poor, meaning their family's income is less than 50% of the

In Boston, a face like Maura’s is called “map of Ireland” – pale skin, straight red hair and a scattering of freckles across the nose and cheeks. If she weren’t so terribly thin, she could be in a travel poster, but at 4 years old, Maura weighs only 27 lbs., the weight of a normal little girl not much past her second birthday. ...Her face still retains some roundness, but her ribs protrude through her skin.

Maura’s mother gets up every morning at 3 a.m. and dresses her sleepy 4-year-old. Together, they walk through the dark streets to a nearby fast food outlet where mother works the breakfast shift. Maura goes back to sleep under the table in the staff room. On mother’s 8 a.m. “lunch break,” they get on a bus to take Maura to family daycare, eating forbidden crumbs from the fast food restaurant during the ride. At 12:30 p.m., when mother’s shift is over, she retrieves Maura and rushes down to the local woman and children’s shelter for free lunch.

Depending on when mother’s paycheck comes, she buys food at the local convenience store and cooks it over the electric hot plate in their one-room apartment for supper. Sometimes instead, she and Maura share a “super-sized” cup of French fries and a large soda from the fast food restaurant.⁸

Like Tina and Toby, Maura’s story of hunger and poverty is not unique. In fact, it is typical. Households with children are extremely vulnerable to food insecurity and hunger, which means sometimes not knowing where they will get their next meal. While nearly 12% of all U.S. households experience food insecurity or hunger, the

rates are much higher for households with young children (18.5%) and for female-headed households, which report the highest rates of food insecurity in the nation (33%).⁹ For single mothers, ensuring that there is consistently enough food on the table to feed themselves and their children is no easy task.

When children do not get enough healthy food on a regular basis, they suffer much more than hunger pangs. A lack of proper nutrition during the critical period between birth and 3 years can leave lasting physical and mental impairments. Too few or the wrong types of calories during the early stages of life set the course for the rest of the child’s life. Growth stunting due to inadequate nutrition is twice as likely to occur in poor children¹⁰ and can lead to decreased mental capacities. Malnutrition can cause learning disabilities that increase the risk of having to repeat a grade. The physical and cognitive damage caused by infant and toddler malnutrition is only partly reversible.¹¹

Mothers with inadequate nutritional intake during pregnancy are more likely to give birth to a child with a low birth weight. Poor mothers are 80% more likely to have a low birth weight baby than middle- and upper-income mothers.¹² Every year, 250,000 low-birth-weight children are born in the United States.¹³ Low birth weights increase the likelihood of serious physical disabilities such as blindness, deafness or cerebral palsy, and can even cause infant mortality. Severe malnutrition in pregnant women has also been linked to an increased risk of schizophrenia when the children reach adulthood.¹⁴

The problem of hunger in the United States, even among children, is not a new phenomenon. In the 1930s, pictures of bread lines snaking around city blocks helped to catalyze the federal response to

The physical and cognitive damage caused by infant and toddler malnutrition is only partly reversible.

hunger. In the 1960s, a civil rights worker named Marian Wright, who later founded the Children’s Defense Fund, led a group of U.S. senators into the Mississippi Delta to show them some of the harshest realities of hunger in America. The 1968 documentary *Hunger in America* shocked viewers with graphic images of starving children – images viewers were more inclined to associate with African and Asian nations than their own country.

More recently, obesity has emerged as a problem of malnutrition far different but just as damaging as a lack of food. Obesity has reached epidemic proportions in the United States. Although the rate of obesity is only slightly worse among low-income children than other children, the problem affects poor adolescent girls and women disproportionately. One study found that 57% of women below the poverty level were overweight, compared to only 38% of women earning the highest incomes.¹⁵

The causes seem to be twofold. First, in the United States, foods that are high in starch, fats and sodium are less expensive than healthy foods such as whole grains, fish, and fresh fruits and vegetables. Second, because many low-income families juggle numerous responsibilities and have a “poverty of time” in addition to a poverty of income, it is faster and easier to eat at a fast-food restaurant or heat up a ready-to-eat frozen dinner than to cook a healthy meal.

Potential problems also arise from how food is consumed among low-income populations, especially by women. When a woman receives her paycheck or food stamps, she over-consumes food because she has been experiencing hunger. But as the month wears on and food begins to become scarce in the household, women are typically the first to go without eating. A mother will feed men and children and skip meals herself, sometimes going days without signifi-

cant caloric intake. This cycle unbalances her metabolism, causing her body to store large amounts of fat during times of plenty as a way to safeguard against starvation later. Thus, the “feast/famine” cycle common among low-income families can cause biological changes that make the maintenance of a healthy weight more difficult.

The result is that poor women more often suffer serious health problems associated with obesity, including Type 2 diabetes, hypertension, cardiovascular disease and several forms of cancer.¹⁶ When Mom is unable to work due to health problems, and some of the household’s limited financial resources must be spent on her health care, clearly the children suffer, as we saw in the case of Tina and Toby.

Lack of safe, affordable housing also has negative health consequences for children. One of the leading causes of death among poor children is house fires. When families cannot afford to pay for utilities, they are forced to turn to unsafe alternatives such as hot plates, space heaters and candles. The dangers posed by faulty wiring and cheap building materials are often compounded by a lack of functioning fire alarms. Children in low-income housing are also at greater risk of disease due to vermin, mildew, overcrowding, and inadequate heat. The experience of homelessness tends to leave children and their families even more vulnerable to stress-related health problems and physical violence.

Poor families also have limited options when their homes are found to have lead paint. Inhaling the dust from lead paint is particularly damaging to low-income children, because often they are also iron deficient and anemic due to food insecurity, conditions that make a child more susceptible to the effects of poisoning. One study found that 16.3% of poor children have elevated levels of lead in their blood, which causes growth stunting, hearing loss,

A woman will feed men and children and skip meals herself, sometimes going days without significant caloric intake.

Vitamin D metabolism damage, impaired blood production, kidney damage and lower intellectual capacity.¹⁷

POVERTY AND EMOTIONAL DEVELOPMENT

Poor children are vulnerable to two types of emotional problems: external behaviors such as aggression, fighting and acting out, and internal difficulties such as anxiety, social withdrawal and depression.¹⁸

Sonya Lorelle is the children's therapist at ForKids, the program for homeless families in Norfolk, VA, where Toby and Tina experienced a measure of stability. She counsels the formerly homeless children in ForKids' residential and after-care programs, using play and music therapy techniques in addition to traditional methods.

Lorelle describes the biggest barrier facing many of the children she encounters as attachment disorder. She explains that all children are born with the need to bond with other human beings through eye contact, smiles, touch and being "cooed at" and talked to. Not receiving this kind of attention can permanently affect a child's emotional development.

The formerly homeless mothers at ForKids have been in a state of crisis. They are usually overwhelmed by survival issues and have sometimes been abused. So, while they love their children deeply, they often do not have the time, energy or skills to start babies off with a stable foundation for emotional well-being.

Lorelle describes a cyclical effect: often the moms did not get the necessary attention when they were young children and so never learned how to provide it for their own kids. She says, "There is a pool inside them that was supposed to be filled up, but it is empty."

As a result, poor children may feel hopeless and have a negative worldview. Children with secure attachments have high self-esteem, can cope with stress and generally believe that even when things are bad, they will get better. Children with poor attachment are more likely to be clingy,

less empathetic, less resilient or anti-social. They often act out aggressively because they would rather have negative attention than no attention. If they are punished for their behavior, it only reinforces their belief that the world is bad and they are bad.

The hope for overcoming this cycle is that attachment is a skill that can be learned. At ForKids, parenting classes that address children's development and needs are mandatory. Lorelle comments, "If we could fix what is going on between the mom and the child, their lives would be better whether they are poor or not."

THE SOCIAL EFFECTS OF POVERTY: TWO CASE STUDIES

Enjoying healthy emotional and intellectual development is difficult when much of an individual's or family's time is spent simply coping with crises and trying to survive. These problems are exacerbated when people in poverty are isolated in resource-deprived places such as urban slums and remote rural areas. Poor neighborhoods often lack political power and public services. A community is also weakened if many of its people face serious problems such as substance abuse, domestic violence and mental illnesses.

Griffin Centers offers after-school programs in several locations for children living in public housing in East St. Louis, IL, a city with exceptionally high poverty and crime rates. One of the aims of this program, directed since 1986 by Sister Julia Huiskamp, is to teach social skills through recreation programs that focus on cooperation.

Sr. Julia describes the mentality that so many children bring to her program: "The mores of the street tend to stress retribution, tough language, getting even, and a general lack of politeness." Sr. Julia says that many low-income people in her community have low self-esteem, so when they feel even slightly disrespected by their neighbors and relatives, they may retaliate with violence, sometimes seriously wounding or even killing people. When teens and young adults lack the social skills and flexibility necessary

to succeed in the business world, they sometimes resort to selling drugs, prostitution or panhandling.

As children participate over time, they learn coping skills and their manners improve. “We give it our best,” Sr. Julia observes. “But the street is such a pull, so powerful.”

Francis Ford is the health care coordinator of Sowing Seeds of Hope, sponsored by the Cooperative Baptist Fellowship in Perry County, AL. Perry County is located in an area of the South called the Black Belt – originally because of its rich, black soil and later because a majority of the population is African-American. Ford paints a picture of a community without many social opportunities for children, especially the 50% who

persistently poor counties in rural America leave the majority of children who live there without opportunities for healthy social interaction and development. This means fewer positive role models, less hope for the future and diminished motivation to strive for a better life.

POOR CHILDREN AND EDUCATION

Poor children are twice as likely to drop out of school, be held back a grade or be suspended or expelled as non-poor children.¹⁹ Poverty in early childhood has the greatest effects on a child’s educational attainment. An increase of \$10,000 in mean family income during a child’s first five years is associated with almost one full additional year of schooling.²⁰ Children living in poverty are

more likely to have lower math and reading achievement scores.²¹ Research shows that the educational level of a child’s parents and parental support for education have a strong impact on how far the child goes in school, providing another example of how poverty cycles from parent to child.

At ForKids, where Sonya Lorelle works, most children are a grade level or two behind because frequent

moves have caused them to change schools and miss important instruction. Excessive absences are particularly a problem for homeless children.

Sr. Julia Huiskamp reports that in one high school in her district, only 11% of the seniors “made standards” on their achievement tests last year. Many children drop out before graduation, some as early as the fifth grade, often because education is not a priority for their families. Even those who graduate from high school have often received a substandard education, in part because a low tax base does not pay for highly trained teachers, computers or up-to-date materi-



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live below the poverty level.

Ford says that 30 years ago, the county had several grocery stores, pharmacies, restaurants and a Greyhound bus station. But now the two major factories have shut down and most businesses have left. A few years ago, the only hospital in the county closed. Except for two fast food restaurants, there are not many places to socialize in the evenings. The environment does not expose children to people or ideas that could broaden their horizons and stimulate their minds.

The lack of after-school activities, gathering places and cultural venues in many

als. Many graduates have to take a year or two of remedial classes before they are ready to start the regular curriculum at the local junior college.

**THE FAITH-BASED RESPONSE:
GETTING OUR PRAYERS STRAIGHT**

How are Christians in the United States called to respond to children in poverty and the host of challenges they face? Perhaps the most illuminating answer can be found in a story told by Bread for the World founder the Rev. Art Simon about an encounter with current Bread for the World president the Rev. David Beckmann. About 20 years ago, Art approached David, then an economist described as a “rising young star” at the World Bank, for his ideas about how to end poverty. What “magic bullet” would make a significant difference in the lives of poor people? Despite all his education and experience as an economist, David answered: “We need to get our prayers straight. If we can do that, everything else will fall in line.” To end poverty, we have to pray for hungry and poor people and for the wisdom and strength to work for justice.

So prayer must be the bedrock of our work. And even as we petition God to intervene in the world, the effect on those of us who are praying may be equally necessary. Our worldview and our priorities will be transformed if we pray for hungry and poor people every day.

We must also take action by using our influence as American citizens. We can urge our elected representatives to champion policies that help address the root causes of poverty. For example, the federal nutrition programs – including WIC, food stamps and the school breakfast and lunch programs – are the most direct way to combat food insecurity. They are also proven to increase school attendance, improve academic performance and decrease behavior problems in the classroom. Although these programs do not meet all the nutritional needs of poor children, millions more would suffer from physical and educational problems without them. In 2005, Christians were the lead-

ing voices in stopping proposed cuts to the Food Stamp Program by writing letters, making phone calls and visiting their members of Congress.

Direct service is another important way of helping poor children. Tutoring in a low-income school, mentoring a child, working in a local food bank or a free health clinic are just a few examples of the many opportunities to make a difference. Most churches and denominations offer opportunities for Christians to respond to those in need by giving volunteer time and funds to support effective initiatives.

Pray, advocate, serve – these three actions done in conjunction will have a powerful impact. Thirteen million children are waiting.

ENDNOTES

1. 2004 U.S. Census Bureau.
2. David Wood, “Effect of Child and Family Poverty on Child Health in the United States,” *Pediatrics*, Vol. 112 No. 3 (September 2003), p.707.
3. 2004 U.S. Census Bureau, Current Population Reports, Series P60-222, Detailed Poverty Tables, Table 3.
4. 2006 Kids Count Data Book: State Profiles of Child Well-Being (The Annie E. Casey Foundation, 2006), p. 28.
5. Bruce Weber, Leif Jensen, Kathleen Miller, Jane Mosley and Monica Fisher, “A Critical Review of Rural Poverty Literature: Is There Truly a Rural Effect?” Institute for Research on Poverty, Discussion Paper 1309-05 (October 2005).
6. “Child Poverty in 21st Century America, Who are America’s Poor Children?: Fact Sheet No. 2, September 2005” National Center for Children in Poverty, Columbia University, Mailman School of Public Health
7. Deborah Frank, “Child Hunger in the United States: A Doctor’s View,” *Frontline Issues in Nutrition Assistance: Hunger Report 2006* (Bread for the World Institute, 2006), p. 67.
8. *Ibid*, p. 66-67.

9. M. Nord, M. Andrews, and S. Carlson, Household Security in the United States, 2004 (Washington, D.C.: USDA, 2005), p. 9.
10. Jeanne Brooks-Gunn and Greg J. Duncan, "The Effects of Poverty on Children," *The Future of Children, Children and Poverty*, Vol. 7 No. 2 (Summer/Fall 1997), p. 58.
11. Ibid, p. 80.
12. Ibid, p. 60.
13. Ibid, p. 78.
14. Deborah A. Frank, Statement Before the Subcommittee on Education Reform Committee on Education and the Workforce, U.S. House of Representatives, 16 July 2003.
15. Patricia M. Crawford, Marilyn S. Townsend, Diane L. Metz, Dorothy Smith, Gloria Espinosa-Hall, Susan S. Donohue, Anna Olivares and Lucia L. Kaiser, "How Can Californians be Overweight and Hungry?" *California Agriculture*, Vol. 58 No. 1 (January-March 2004), p. 13.
16. Frontline Issues in Nutrition Assistance, p. 70.
17. Ibid.
18. Brooks-Gunn and Duncan, "The Effects of Poverty on Children," p. 62.
19. Ibid, p. 58.
20. David Wood, "Effect of Child and Family Poverty on Child Health," p.709.
21. www.irp.wisc.edu/publications/dps/pdfs/dp130505.pdf.

I Will Not Die an Unlived Life

Dawna Markova

I will not die an unlived life.
 I will not live in fear
 of falling or catching fire.
 I choose to inhabit my days,
 to allow my living to open me,
 to make me less afraid,
 more accessible,
 to loosen my heart
 until it becomes a wing,
 a torch, a promise.
 I choose to risk my significance,
 to live so that which came to me as seed
 goes to the next as blossom,
 and that which came to me as blossom,
 goes on as fruit.

Source: I Will Not Die an Unlived Life