



UC San Francisco • UC Berkeley • UCANR Nutrition Policy Institute
**THE ASSESSING CALIFORNIA COMMUNITIES' EXPERIENCES WITH SAFETY NET
SUPPORTS (ACCESS) STUDY**

RESEARCH SUMMARY

The earned income tax credit (EITC) is the largest U.S. poverty alleviation program for families with children. It has well-documented positive impacts on health. California also has its own supplemental CalEITC. However, less than 80% of eligible families receive the EITC benefits for which they qualify.

The Assessing California Communities' Experiences with Safety Net Supports (ACCESS) Study interviewed a diverse sample of 497 Californians with young children to understand the reasons for low take-up of the EITC and CalEITC and families' experiences with other safety net programs.

The [survey](#) included 16 sections with closed-ended questions and two sections with open-ended questions, which covered topics such as EITC awareness, filing tax returns, housing, pandemic-related social stressors, adult and child health, discrimination, food insecurity, and healthcare access. Interviews were conducted in English or Spanish.

Improving our understanding of low EITC take-up is crucial, as it could inform interventions and policies that could enhance poverty alleviation and improve health equity. The ACCESS Study generated several new findings, which fall into two major themes:

- EITC take-up
- Safety-net stressors and supports during the COVID-19 pandemic

Below is an overview of completed and forthcoming publications from the ACCESS Study addressing these topics.

PUBLICATIONS: EITC TAKE-UP

Understanding take-up of the Earned Income Tax Credit among Californians with low income as a barrier to health equity. *Health Affairs.* 2022; 41(12): 1715-1724. <https://doi.org/10.1377/hlthaff.2022.00713>

The ACCESS Study is among the first to survey EITC-eligible families directly, going beyond administrative data to obtain a richer picture of determinants of EITC take-up. It also directly verified EITC receipt from participants' tax forms, avoiding errors in self-reported receipt of benefits.

Findings:

- About two-thirds of those who did not file taxes had heard of the EITC, and 59% perceived themselves to be eligible.
- Of those who filed taxes and received the EITC, about a third were not aware that they had received the benefit, indicating low awareness.
- CalEITC awareness was much lower, with only 18% of non-filers and 30% of filers having heard of the program, and only 34% of those who had received it reporting awareness.
- Although most participants were likely eligible for free tax preparation services, 60% reported paying for tax preparation services.

- A lower likelihood of receiving the EITC was associated with being younger, not speaking English as a primary language, and not having heard of the EITC. For the CalEITC, not speaking English as a primary language was also associated with not receiving the tax credit.

Recommendations:

- The IRS and California Franchise Tax Board should simplify EITC eligibility requirements and rules.
- The IRS and California Franchise Tax Board and non-profit organizations should improve connections with free tax preparation services to ensure participants are aware of and can access benefits, including services in multiple languages.
- The government and non-profit organizations can improve EITC messaging and communications to increase awareness and take-up of the EITC.

Potential mechanisms linking poverty alleviation and health: an analysis of benefit spending among recipients of the U.S. earned income tax credit. (Under review.)

Previous studies have found that EITC participation is associated with improved health. By exploring ways that EITC recipients spend their tax refunds, we contributed to understanding why EITC participation has positive effects on health.

Findings:

- The largest spending category was housing (55.6%), followed by 37.3% on vehicles, and 36.1% on bills and debt. These are all important social determinants of health.
- There was limited spending (3.3%) on healthcare and health insurance, indicating that this is not a main mechanism through which the EITC improves health.
- Spending was similar across most racial/ethnic, educational, age, and income subgroups.

Conclusions:

- By providing granular details on EITC spending, this study helps to clarify the mechanisms linking the EITC with health.
- Future studies should examine whether other more regular income supplements—such as minimum wage increases or the 2021 child tax credit monthly payments—result in different spending patterns with varying impacts on health.

The association of safety net program participation with government perceptions, welfare stigma, and discrimination: a cross-sectional study of low-income families in California. (Under review.)

Similar to the EITC, the Supplemental Nutrition Assistance Program (SNAP) is also a means-tested safety net program with proven health benefits. This study sought to examine the associations of perceptions about the role of government, welfare stigma, and everyday discrimination with participation in SNAP and receipt of the EITC among eligible individuals.

Findings:

- Participation in SNAP and receipt of the EITC were associated with increased welfare stigma (particularly social stigma and judgment from others).
- There was no association of SNAP and EITC participation with perceptions of government or discrimination.

Recommendations:

- Stigma around safety net programs continues to persist and needs to be addressed; for example, there could be improved public messaging and outreach to eligible groups.
- Prior studies have not found that EITC participation is associated with stigma, and it may be that our participants were experiencing stigma related to their participation in other programs.

Characterizing the Landscape of Safety Net Programs and Policies in California during the COVID-19 Pandemic. *International Journal of Environmental Research and Public Health.* 2022; 19(5):2747. <https://doi.org/10.3390/ijerph19052747>

This study systematically describes the federal and California policy landscape during which the ACCESS Study took place, with a special focus on policies affecting disadvantaged families.

Findings:

- Researchers created a dataset that includes 39 public health, economic, housing, and safety net programs and policies implemented at both the federal level and in California.
- The dataset provides details of this complex and multifaceted policy landscape from March 2020 to November 2021.

Conclusions:

- There were numerous policies passed to provide income support for families, like the child tax credit expansion and unemployment insurance, but fewer policies to address the lack of childcare during the pandemic and more generally.
- The dataset is publicly available and can be used by future investigators to rigorously assess the short- and long-term effects of these policies, to inform future preparedness response plans in California and beyond.

Social and Economic Factors Related to Healthcare Delay Among Low-Income Families During COVID-19: Results from the ACCESS Observational Study. *Journal of Health Care for the Poor and Underserved.* 2022; 33(4), 1965-1984. <http://doi.org/10.1353/hpu.2022.0148>

This study used data from the ACCESS Study to assess the correlates of healthcare delay among adults and children in families with low income during the COVID-19 pandemic.

Findings:

- Delaying healthcare for children was associated with a lack of childcare and the child having pre-existing conditions.
- Delaying healthcare for adults was associated with a lack of childcare, experiences of racism, government mistrust, and perceptions of welfare stigma.

Recommendations:

- Healthcare access may be improved through a focus on supporting childcare systems and reducing experiences of discrimination and racism.

Pandemic-related socioeconomic disruptions and adverse health outcomes: a cross-sectional study of female caregivers. *BMC Public Health.* 2022; 22(1), 1893.2022 <https://doi.org/10.1186/s12889-022-14287-2>

This study assessed the extent to which pandemic-related disruptions in three socioeconomic factors – employment, childcare, and housing – were associated with depressive symptoms, self-rated health, and food security among a diverse sample of female caregivers with low-income and young children.

Findings:

- Childcare disruptions were strongly associated with more depressive symptoms and, to a lesser extent, lower self-rated health and higher food insecurity.
- The risk of depressive symptoms among caregivers reporting childcare disruptions exceeded that of caregivers reporting major housing disruptions.
- Employment disruptions were not associated with worsened health.

Recommendations:

- The strong effects of childcare disruptions on poor health suggest that pandemic-related assistance was insufficient, particularly given the pre-existing poor childcare infrastructure in the U.S.
- The null effects of the employment models suggest that it was not driving the associations observed between childcare disruption and adverse health outcomes among this sample.
- Policies and other supports for those facing childcare and housing disruptions during the pandemic were less adequate than policies around employment and cash assistance.

A qualitative study of pandemic disruptions and perceived gaps in government supports among mothers of young children. (Under review).

This qualitative study examined the challenges experienced by low-income families with young children during the COVID-19 pandemic and their perceptions of economic alleviation strategies.

Findings:

- Even before the pandemic, families were already stretched thin in terms of time and physical space, which are limited resources that higher-income families could access or purchase more easily.
- Pandemic circumstances further constrained time and space, but support programs that focused only on replacing lost income and food security failed to address these critical needs.
- This resulted in worsened emotional and economic well-being of low-income families with children.

Conclusions

- Although expansions to food security programs were well-received, caregivers expressed the need for expanding government supports for housing and childcare, and counseling services to improve the well-being of families with young children.
- Addressing these concerns with structural supports is critical for protecting families' health and well-being during future crises as well as non-crisis periods.