

Chair Reynolds, Vice Chair Anderson and Members of the Committee:

Thank you for allowing me to testify today in support of SB 694 to increase the amount and income limits of the child tax credit.

My name is Teri Mills. Currently I am a registered nurse emeritus, currently volunteering in many health care settings, including a second grade classroom. I have decades of work experience in nursing education and the public health arena.

Despite the best efforts of Oregon leaders on both sides of the aisle, current policies are failing Oregonian children. [In 2023, about 12.2% of Oregon's population, including children, lived in poverty.](#) This is slightly higher than the previous year and is unacceptable.

You may or may not be familiar with the [Center of Disease Control \(CDC\) list](#) providing examples of the social determinants of health (SDOH), which can influence health equity in positive and negative ways. These include

- Income and social protection.
- Education.
- Unemployment and job insecurity.
- Working life conditions.
- Food insecurity.
- Housing, basic amenities and the environment.

SDOH have been shown to have a greater influence on health than either genetic factors or access to healthcare services. A common thread for all of these is poverty. It is no secret that poverty contributes to poor health outcomes.

Here are a few examples, beginning with food insecurity, defined by the United States Department of Agriculture as the lack of access, at times, to enough food for an active, healthy life. Food insecurity is associated with numerous adverse social and health outcomes and is increasingly considered a critical public health issue. Key drivers of food insecurity include unemployment, poverty, and income shocks, which can prevent adequate access to food.

In 2022, 144,210 Oregonian children live with food insecurity- that number is slightly over 17% of all of our kids.

When children go to bed hungry or start their day without adequate nutrition, they have trouble concentrating and are poor learners. Although Oregon is in the top 25% of states for supporting child health – as measured by health insurance coverage, birth weight, childhood death and obesity rates – the state ranks near the bottom in education, at 43rd among the 50 states.

Hunger is not the only contributor to poor learning. Children may have increased absenteeism due to homelessness, inaccessible transportation, or even needing to be care providers for other members of their families. Low income children are also more at risk for behavioral problems, due to a higher risk of abuse and neglect at home.

The evidence points to the fact that the Child Tax Credit that was expanded as part of the American Rescue Plan Act of 2021 was a huge win. Child poverty in the United States had the greatest reduction ever recorded, falling nearly in half (9.7% to 5.2%) After the expansion expired in January 2022, child poverty spiked by 41%. Today, Oregon has a chance to restore this reduction.

Reducing child poverty matters in the short-term; it will decrease the dependence of children and their families on state-led programs. But it will also help in the future because healthier, happier and better educated children are more likely to work when they reach adulthood, making positive contributions to our state's economy and well-being.

I strongly urge a YES vote on SB 694. Thank you for your time and consideration.

Respectfully submitted,

Teri Mills MS, RN Emeritus