



In Focus: *Economic and Social Vulnerabilities for Women*

In a pluralistic society made up of various social groups, the needs of each group differ. For example, children, women, elderly and disabled people have unique group features that may add to their vulnerabilities in particular situations. Vulnerable populations include the economically disadvantaged, racial and ethnic minorities, the uninsured, low-income children, the elderly, the homeless, those with human immunodeficiency virus (HIV), and those with other chronic health conditions, including severe mental illness. The vulnerability of these individuals is enhanced by race, ethnicity, age, sex, and factors such as income, insurance coverage (or lack thereof). This report focuses on vulnerable women, presenting information on the multi-dimensional

characteristics - including physical, social, and economic - that define vulnerability. Gender is a significant dimension of vulnerability as it is intrinsically linked to other factors associated with socio-economic well-being.

The report presents analysis of vulnerable women in Miami-Dade, with examination of various aspects including income and poverty levels, employment, household information, and a variety of other factors needed to understand fully the specific vulnerabilities of the population. It is only with that understanding that a course of action can be devised and implemented to address the needs of the vulnerable community effectively.

Poverty

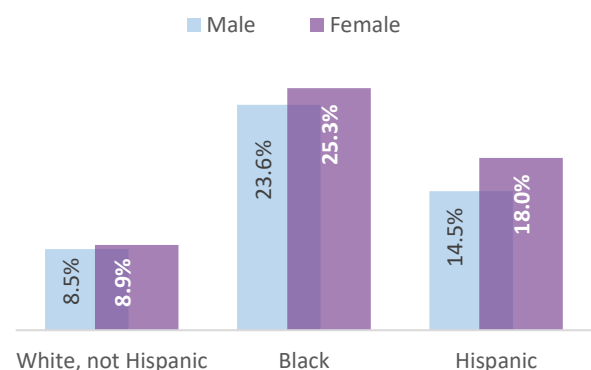
At the root of vulnerability stands income inequality. Economic inequality generally refers to the disparity of wealth or income between different groups or within a society. Inequality can be a signal of lack of income mobility and opportunity—a reflection of persistent disadvantage for particular segments of the society. The most economically disadvantaged in society are those living in poverty. Poverty correlates with negative consequences in other areas, including health, education, political engagement, social mobility, and general well-being. Women's poverty rate has always been higher than men's. The poverty rate is higher for the more vulnerable groups. The poverty rate for women under 18 years of age was 22% and 21% for women 65 and over. Almost 60,000 female children and 52,000 elderly women were living in poverty.

Race and ethnicity also contribute to social vulnerability through a lack of access to resources, the economic marginalization that is often associated with racial and ethnic disparities and age. Black and Hispanic women have a significantly higher poverty rate than White women, and in comparison to men. One in four Black women and men in Miami-Dade live in poverty. The poverty

In 2017, over 250,000 Miami-Dade women (18.1%) had income below the poverty line.

rate is the lowest among White women – 8.9%. The higher proportion of Black and Hispanic residents in poverty is linked to their employment status. In 2017, only 41.8% of male Black residents and 36.9% of female Black residents over the age of 16 worked full-time, year-round. For comparison, 55.6% of male Hispanics and 38.7% of female Hispanics had full-time employment.

Poverty Rates by Gender and Race, 2017





Family Structure

While vulnerability is most often associated with poverty, it can also arise when people are isolated, insecure and defenseless in the face of risk, shock or stress. Family structure and single parenting also create circumstances that may create vulnerabilities for women, especially when these family circumstances intersect with other vulnerability factors. In 2017, there were almost 185,000 women who were separated, divorced or widowed, and *not* participating in the labor force.

Miami-Dade had almost 158,000 family households with a female householder, no husband present, and over 120,000 nonfamily households with a female householder living alone in 2017. Since these households are usually single-income, they have a diminished capacity, or diminished resources available to them to cope with a threat or to resist the impact of a crisis.

Non-family households have a householder who lives alone or with nonrelatives, i.e. not related by birth, marriage, or adoption, including foster children. A female-headed householder living alone with no relatives had a median household income of \$19,799; however, for female

householders not living alone, the median income was \$56,647. A female-headed household with no spouse had a median income of \$36,136, compared to \$68,230 for male-headed households with no spouse. These income characteristics demonstrate the negative consequences of the lack of a male breadwinner in a household. It should be noted that although it remains well below male household income, the median income of female-headed households has increased over time.

In 2017, a female-headed householder living alone with no relatives had a median household income of \$19,799, which corresponds to a wage of \$9.5 per hour of work for a 40-hour week.

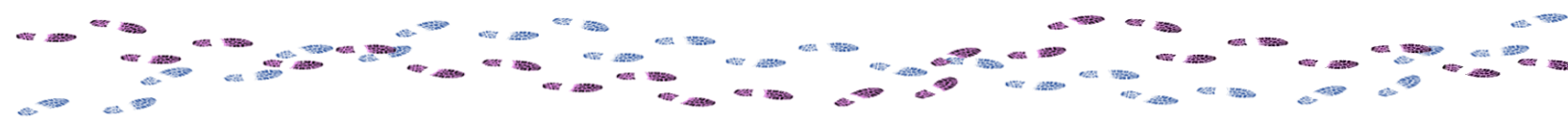
Families with vulnerabilities are often under financial or time pressures. In a large percentage, the vulnerability is also transferred to children present in the household. In 2017, there were almost 71,000 families with a female householder, no husband present, with children under 18 years. Over a third of these families (33.9%) were in poverty.

Health Insurance

Gender may have a significant impact on health, as a result of both biological and gender-related differences. Poverty is an important barrier to positive health outcomes for both men and women, but because of its higher prevalence among women, it may create a bigger burden on women and girls' health by decreasing knowledge, access and resources. Approximately 23.3% of men and 18.4% of women in Miami-Dade did not have health insurance in 2017. The uninsured are less likely than those with insurance to receive preventive care and services for major health conditions and chronic diseases. The uninsured often face unaffordable medical bills when they do seek care. Conversely, health insurance is associated with more appropriate use of health care services and better health outcomes.

In 2017, Miami-Dade had 219,437 female and 249,028 residents without health insurance.

Reliance on public health insurance or having no health insurance of any form is more common among racial/ethnic minorities as compared to white Americans. While this pattern in insurance coverage appears consistently, racial/ethnic minority populations in the U.S. with large numbers of immigrants encounter additional obstacles to accessing insurance, such as ineligibility for government-sponsored programs and language barriers. In Miami-Dade, approximately 335,000 Hispanic and 98,000 Black residents do not have health insurance. Approximately 17.9% of Hispanic and 21.2% of Black residents have no insurance, compared to 9.8% of White, non-Hispanics residents. Over 323,000 foreign-born residents do not have health insurance.





Disability

Vulnerability is also increased by disability. Disability may lead to loss of income, but people with disabilities may also be particularly vulnerable to crimes, because as a population—regardless of age or gender—they may not be able to recognize danger, to protect themselves, and to obtain assistance within the criminal justice system. In 2017, there were 156,840 women with a disability.

The majority of them, 92,619 or 59.1% were in the 65 and over age group. Almost 45,000 adult women had self-care difficulty, while approximately 74,000 had independent living difficulty.

In 2017, almost 157,000 Miami-Dade women had a disability, and their median earnings were \$18,300.

Veteran Status

After a tour, many soldiers face physical, mental, and social issues that make them a vulnerable population. In addition to potential difficulty adjusting to civilian life, many veterans also experience specific health-related issues such as brain damage, depression, Post-Traumatic Stress Disorder (PTSD), anxiety, substance abuse etc., as well as social challenges related to homelessness, unemployment, family and interpersonal problems.

In 2017, there were 47,921 veterans in Miami-Dade County, of whom 4,801 or approximately 10% were women. Of the over 28,000 veterans in the 18 to 64

age group, 79.4% were in the labor force. Almost 1,700 were unemployed, and 2,455 had income below the poverty level. Of the 18,856 veterans in the 65+ age group, 1,985 had incomes below the poverty line. The median total income for veterans in 2017 was \$35,000.

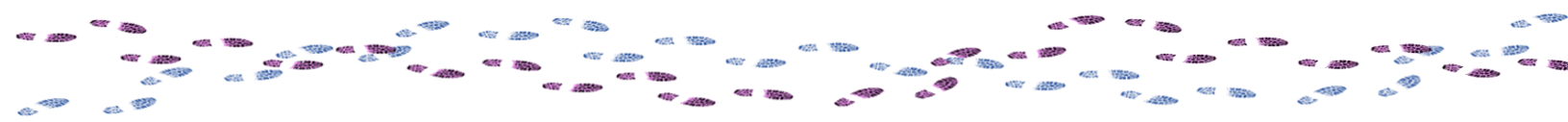
At \$59,412, the average income of male veterans was significantly higher than the median income of female veterans - \$41,069. Some of the reasons for that difference may be the small number of female veterans and their relatively recent service. The average age of female veterans is 52, compared to 62 for men.

Criminal Justice

According to the Miami-Dade County Corrections and Rehabilitation Department, as of February 2019, there were almost 5,200 inmates in Miami-Dade, of whom 457 were women. Incarceration rates have declined for both men and women over the last two decades. They peaked in 1997, with 965 per 100,000 residents ages 15-64 for males and 89 for females. As of 2015, the rates were 402 for males and 32 for females. (*Vera Institute of Justice*) It is estimated that there are 15,000 children in Miami-Dade County whose parents are behind bars (*Service Network for Children of Inmates*). Parental incarceration has a negative impact on children's well-being and development, including

psychological strain, antisocial behavior, suspension or expulsion from school, economic hardship, and criminal activity.

In 2016 alone, there were 150,100 inmates released in Florida on probation, and another 6,155 who were paroled (Bureau of Justice Statistics). A 2018 analysis of precinct demographic data estimated that there were 158,485 felons whose voting rights would be restored in Miami-Dade, as a result of Florida passing Amendment 4 (Tampa Bay Times/Miami Herald). In addition to political exclusion, incarceration also has implications related to health, social inclusion and economic participation.





Language Proficiency

The majority of residents in Miami-Dade speak a language other than English at home (75.4%). Over a third of them (35.4%) speak English less than “very well”.

In 2017, 72% of female residents indicated they speak a language other than English. Overall, 17.3% of women in Miami-Dade did not speak English well

or 13.1% did not speak English at all. Lack of English proficiency may also be related to overall lack of education. There are almost 32,000 women in Miami-Dade without any schooling completed, and almost 160,000 with less than high school. The majority of these women, over 80%, are Black or Hispanic.

Health and Safety

While women as a group are not considered a vulnerable population, there are certain risk factors that are higher among women. The health domains of vulnerable women can be divided into 3 categories: physical, psychological, and social. Those with physical needs include high-risk mothers and infants, the chronically ill and disabled, and persons living with HIV/acquired immunodeficiency syndrome. In 2017, 27.1% of infants in Miami-Dade were born to overweight mothers. Approximately one in four women (26.1%) were diagnosed as obese.

Miami-Dade County has the largest number of people who are HIV-positive than any other county in Florida. In 2017, there were 27,969 Miami-Dade residents living with HIV, of whom 7,192 women.

In the psychological domain, vulnerable populations include those with chronic mental conditions, such as schizophrenia, bipolar disorder, major depression, and attention-deficit/hyperactivity disorder, as well as those with a history of alcohol and/or substance abuse and those who are suicidal or prone to homelessness. There has been a steady decline over time of some risky behaviors including smoking and drinking. Only 10.8% of women in Miami-Dade engage in heavy drinking, and 6.5% smoke tobacco products.

Both of these figures are lower than men. However, women are nearly twice as likely as men to be diagnosed with depression. In 2016, 11.7% of Miami-Dade adults reported they had been diagnosed with a depressive disorder at some point in their life; however, there was higher prevalence of depressive disorders among women - 15.7% compared to 7.7% for men.

In the social realm, vulnerable populations include those living in abusive families, the homeless, immigrants, and refugees. According to the 2017 homeless count, there were 3,847 homeless individuals in Miami-Dade County, of whom approximately 25% were women. (Miami-Dade County Homeless Trust)

Another gender-related vulnerability is the higher likelihood for women to suffer from abusive home situations. While domestic violence counts are not reported by gender, violence against women accounts for the biggest portion of violence reporting. In 2017, there were 9,137 reported domestic violence offenses and 1,270 forcible sex offenses in Miami-Dade. Domestic violence offenses have declined steadily in the last two decades. Both of these figures may be imprecise measures of the occurrence of these crimes as the official statistics only show *reported* crimes.

