

Single mothers spend more on children's health in hard times

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When money is tight, single mothers spend more of their health care dollars on their children than themselves, while two-parent families are less likely to make changes, according to a Rutgers study.

In a study in the journal *Review of Economics of the Household*, lead author Alan Monheit examined how an [economic shock](#) – the loss or reduction in employment, income, wealth and [health insurance](#) – affects [family](#) health security for parents and children in single-mother and two-parent families.

"In particular, we were interested in whether parents sacrifice their own health care spending in favor of spending for children during such times," said Monheit, a professor of health economics and [public policy](#) at Rutgers School of Public Health and a research professor at the Center for State Health Policy at Rutgers Institute for Health, Health Care, and Aging. "We sought to identify family types whose health care spending was especially vulnerable to changes in their [economic status](#), and whether particular family members' health care spending was at risk due to a loss in economic status." The study was co-authored by Irina B. Grafova and Rizie Kumar both of the Rutgers School of Public Health.

Monheit and co-authors looked at total health care spending data from 8,960 families from the 2004 to 2012 in the Medical Expenditure Panel Survey (MEPS). He found that both realized income losses and expectations of a decline in economic status, such as an increase in the national unemployment rate, has a significant impact on health care spending decisions of single mothers compared to two-parent families.

"Single mothers shift health spending away from themselves and to their children," he said. "This shift occurs in single families with regard to total family [health care spending](#), and in some cases with regard to spending for ambulatory care, physician office-based care and dental care. We find no such shifts in spending in two-parent families."

He said these findings are consistent with altruistic behavior by [single mothers](#) toward their children, and speaks to the vulnerability of single-mother families compared to two-parent families.

"Our findings may reflect the constrained economic circumstances of many single-mother families, and the difficult tradeoffs such families must make to maintain the welfare of their children," Monheit said.

When families can't afford regular health care, it can cause delayed treatment, declining health and greater reliance on hospital emergency departments, which increases overall [health care](#) costs for society.

"Our research raises two important questions," Monheit noted. "First, is the shift in spending in single-mother families in response to an economic shock is likely to be transitory or longer-term in nature? Second, are existing public policy interventions, such as the Affordable Care Act's Medicaid expansion and Medicaid/CHIP programs in non-expansion states, sufficient to address the health spending consequences of an income loss by single-mother families?"

More information: Alan C. Monheit et al. How does family health care use respond to economic shocks? realized and anticipated effects, *Review of Economics of the Household* (2018). [DOI: 10.1007/s11150-018-9438-9](#)

Provided by Rutgers University

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