



We have a road map to help thousands of hard working people in N.J. living near the edge, United Way says

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By [Star-Ledger Guest Columnist](#)

By Kiran Handa Gaudio

Consider this scenario: You've worked for more than two decades as a child-care teacher, you earn \$29,300 annually and you're raising a teenage daughter.

You received a 26-cent-an-hour raise this year and your monthly rent went up \$30.

Then you got hit with a surprise \$700 health care bill for an exam you needed, and you've also been told your daughter needs braces. Your health insurance doesn't cover either. What are your options?

This scenario is real life for Jaime, a 40-year-old mom who lives in Morris County, among the top 10 wealthiest counties in the state and country. What she decided was this: "I'm not going to the doctor anymore."

Jaime is someone United Way of Northern New Jersey calls ALICE – Asset Limited, Income Constrained, Employed, and there are 896,000 households like Jaime's across the state – living in every community, wealthy and poor. While ALICE households don't qualify as "poor" by the outdated federal poverty standards, they can barely afford the basics, including health care.

According to a new Robert Wood Johnson Foundation report, nearly 6,400 New Jerseyans die each year because they cannot access the essentials for a healthy life. Called, "[Building a Culture of Health: A Policy Roadmap to Help All New Jerseyans Live Their Healthiest Lives](#)," the report underscores what we've known about ALICE households – that they have few good options in the face of a stunning array of daily challenges.

This report offers New Jersey a blueprint for helping ALICE find better options than skipping preventive health care or living in substandard housing or choosing unqualified child-care providers. With this report, the foundation has put forward a comprehensive set of policy options that cut across housing, employment, education and health care, recognizing that there is no one single solution that will make life better for ALICE. This highlights that the struggles before ALICE are interconnected, requiring that we break out of our siloes and confront this problem together.

The 13 policy priorities the report outlines are on the right track, with three that stand out as critically important.

First, we should leverage programs with a proven track record of success, such as the Earned Income Tax Credit (EITC), which is the strongest pro-work, antipoverty policy that also boasts bipartisan support. One way we can make sure that everyone who is eligible accesses this credit is by supporting the Volunteer Income Tax Assistance (VITA) program.

Annually, our United Way joins with partners to deploy some 140 IRS-certified volunteers to help ALICE families prepare their taxes for free, claim eligible credits and get back any refunds they are owed.

We receive a \$79,000 federal VITA grant that makes it possible for 5,800 households to get their taxes prepared and filed for free. Last year, those families received more than \$6.4 million in refunds, including \$1.5 million in EITC.

Given that off-the-charts return on investment, we'd like to see the state match the federal investment so more families can benefit. These refunds get pumped back into our economy and our local communities, helping to pay for goods and services like groceries, medical bills and down payments on a home.

Second, let's continue to make high-quality education available in more communities across the state, including those with high percentages of ALICE households so that workers don't have to choose between paying for a car repair or giving their child the right start in life.

Third, health-care providers, public health agencies and social service systems need to partner for the "whole person" care approach espoused by the report. We know that a person's physical and mental health is directly tied to their socio-economic status.

Across all policy decisions that affect health, let's listen to what Jamie and other ALICE households are telling us. When, even with health insurance, ALICE can't afford routine health screenings and basic health care, treatable health issues become emergency room crises – or worse for the 6,400.

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