Systems Transformation Guide to Disability Economic Justice: Public Benefits
Executive Summary

The intersections of disability and gender justice have long been ignored in framing economic policy.

At the National Partnership for Women & Families, we recognize the deep history of interactions between disability and gender justice through institutionalization, stripped autonomy and further marginalization. Ultimately, ableism, racism, sexism, imperialism, colonialism and other forms of eugenic thinking have framed economic policies.
Our country’s economic system was not designed to allow disabled people, particularly disabled women of color, to survive and secure basic needs, let alone to thrive. A person’s value is largely determined by their contributions to capitalism and the workplace. However, many disabled people are unable to or choose not to work. But their lives are also valuable — they are deserving of full, beautiful lives and the promise of economic security.

A patchwork of public benefit programs provides support to disabled women, but strict eligibility requirements, administrative burdens and access concerns prevent uptake. Further, these benefits often are insufficient to reasonably cover all necessary costs and needs or do not address the systemic barriers to disabled women’s access to economic security.

In this installment of the “Systems Transformation Guide to Disability Economic Justice,” the National Partnership for Women & Families makes the following recommendations:

- **Congress should pass the SSI Savings Penalty Elimination Act and the SSI Restoration Act.** More specifically, Congress should:
  - Eliminate, or raise, the asset limit requirement for Supplemental Security Income (SSI) recipients and tie it to inflation by, at a minimum, passing the SSI Savings Penalty Elimination Act.
  - Increase benefit amounts, particularly for SSI recipients.
  - Eliminate the marriage penalty related to asset limits and benefit amounts for SSI recipients.
- **Congress should eliminate SSI in-kind support and maintenance and gifting provisions** to eliminate the Social Security Administration’s (SSA) requirement to consider these types of unearned income.
- **Congress should adjust income and substantial gainful activity requirements** to keep pace with inflation.
- **Congress should increase funding to the SSA** to ensure adequate support for disabled applicants and prevent backlogs.
• Congress should increase funding for local and state navigators to help people with their benefit applications.

• Congress should eliminate the five-month waiting period for Social Security Disability Insurance (SSDI).

• Congress should pass the Social Security Expansion Act, which would increase Social Security Disability Insurance benefits by $2,400 per year.

• Congress should remove the requirement of continuing disability reviews (CDRs) every seven years for people enrolled in Social Security benefits in instances where individuals have severe medical cases with no opportunities for significant improvement.

• The SSA should finalize rules eliminating food and shelter from in-kind support and maintenance calculations, as well as address other unearned income regulations within its authority.

• The SSA must overhaul its wage reporting system to ensure that 1) wage reports are updated in a timely manner; 2) all overpayments that are a result of the SSA’s reporting delays are automatically waived; 3) wage reporting requirements are always clear and consistent for all benefit recipients; 4) the definition of “without fault” in overpayment waiver processes is broadened and clarified to take into account the vast number of disabled SSA benefit recipients; and 5) there is a time limit on how far back SSA can go to collect overpayments.

• Given the discretion granted to the SSA, the SSA should reform processes to ensure that applicants can easily understand what is required and to reduce applicant burdens to the greatest extent possible.

• The SSA should abandon proposed rules or efforts that call for earlier and additional CDRs.

• Congress should establish a federally mandated minimum Temporary Assistance for Needy Families (TANF) benefit that is tied to an automatic cost-of-living adjustment to help address inequities.

• Congress should eliminate work requirements on the whole to increase equity, particularly for disabled women and single mothers who are unnecessarily and arbitrarily penalized for failing to meet strict TANF requirements.

• Congress must more narrowly tailor how TANF funds may be used to address state mismanagement, lack of oversight and use of funds predominantly for non-basic assistance costs.
• Congress should direct states to spend at least 50 percent of their TANF funds, on cash assistance for families in need.

• Congress must invest further in TANF and eliminate the inflexible and nonpermanent block grant structure.

• Congress must extend the five-year time limit for receipt of TANF benefits and prohibit states from shortening that time limit.

• The Administration for Children and Families should adopt a final rule that better ensures states are spending TANF money in accordance with TANF’s purpose and on increased cash assistance.

• States should allocate more TANF dollars toward monthly cash assistance for families.

• States should remove full-family sanctions on TANF benefits.

• States should remove time limits on TANF benefits.

• States should permit TANF beneficiaries to partake in the full range of activities that are countable under federal work requirements.

• Where possible — when state requirements are being met — states should allow TANF beneficiaries to engage in activities beyond the 12 countable activities under federal law.

• States should create more flexible exemptions to the work requirements for disabled TANF recipients.

• States should repeal — or refuse to implement — TANF family cap policies.

• States should allow for child support pass-through to families.

• States should reduce the administrative burden of applying for the Low Income Home Energy Assistance Program (LIHEAP) and streamline applications for benefits to ensure that residents are receiving critical resources such as LIHEAP.

• States should ensure that agencies are engaged in data-sharing to conduct affirmative outreach to disabled residents who may be eligible for LIHEAP, such as those who receive benefits from the Supplemental Nutrition Assistance Program (SNAP), TANF and other programs.

• The Administration for Children and Families should engage in data-sharing with agencies such as the SSA to conduct affirmative outreach to disabled residents who may be eligible for LIHEAP.
• **Congress must renew and expand funding** for the Affordable Connectivity Program (ACP).

• **The Biden administration should continue to prioritize and facilitate broadband expansion** in rural, Tribal and low-income communities, particularly communities with a larger population of people of color and disabled residents.

• **The Federal Communications Commission must expand and prioritize enforcement of anti-discrimination provisions** related to broadband access under the Infrastructure Investment and Jobs Act and its regulations, which prohibit discrimination based on race, ethnicity and income level.

• **The National Telecommunications and Information Administration (NTIA) should not automatically prioritize unserved communities over underserved communities.** It should also 1) focus on affordability and access challenges, including in urban areas; and 2) consider the populations affected by specific funding choices. Under current funding priorities, low-income, majority non-white communities may be left behind, harming disabled people as well.

• **The NTIA should widely grant cost-sharing waivers** for projects that would significantly expand internet access for low-income, racially diverse and disabled populations — not simply high-cost project areas.

• **The administration must reduce administrative burdens** to ensure eligible Americans are able to access the ACP, should it receive funds to continue, and other energy-saving programs.

Recommendations on food insecurity programs such as SNAP and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) can be found in our second “Systems Transformation Guide” on food insecurity, housing and transportation. Recommendations on health care benefits will be explored in a future publication.
Introduction

In the United States, there are an estimated 42,485,034 people with a disability, or 13 percent of all people.\(^1\)

Indigenous and Black adults are more likely to be disabled: 30 percent of American Indian/Alaska Native adults have a disability, while 25 percent of Black adults have one.\(^2\) Women are more likely than men to live with a
disability, according to Census Bureau data. But the story the data tells becomes even more complex when looking at the number of disabled people who face economic challenges because they are disabled.

Disabled people are more than twice as likely to experience poverty as nondisabled people. Disabled women are even more likely to live in poverty, with disabled women of color experiencing particularly high rates of poverty. These disparities are the result of deliberate policy choices that are designed to keep disabled people, particularly disabled women and disabled women of color, in poverty.

The National Partnership for Women & Families is committed to improving the lives of women and families by achieving equality and equity for all women and people of marginalized genders. This work cannot be achieved without also focusing on disabled women and families, particularly disabled women of color and multi-marginalized disabled women.

In order to plot a more intentional course toward systemic change that achieves the inclusion, access, liberation and economic health and well-being of disabled women and families, the National Partnership has developed “Systems Transformation Guides” for disability economic justice public policy. Our goal is to shape economic policy decisions and discussions among federal, state and local legislators, fellow advocates, think tanks and other partners to ensure that the needs of disabled women, particularly disabled women of color, are not only considered but also prioritized.

This piece is the fourth in a series and focuses on public benefits. This installment will address critical public benefit programs — such as Social Security, TANF, LIHEAP, the ACP, SNAP, WIC, Medicaid and Medicare — their impacts on disabled women and the improvements that would enhance the economic security of disabled women, particularly disabled women of color.
Social Security

Disabled people who have not reached retirement age may receive two types of benefits administered by the Social Security Administration: SSI and SSDI. These benefits are extremely important for the economic security of disabled adults and their families — as well as for disabled children. SSI is a means-tested program for children and adults with disabilities who have low incomes and minimal assets. The maximum SSI benefit for 2024 is $943 per month for an eligible individual; for an eligible couple in 2024, it is $1,415 per month. SSDI is a federal
insurance program funded through a payroll tax. Only workers who contribute from their earnings can receive SSDI. Women may disproportionately rely on SSI benefits, rather than SSDI benefits, because they are more likely not to have earned enough credits to qualify for SSDI benefits, whether because they take time off from work to care for their families or because they are employed in jobs for which they do not receive credits.\(^8\) While the definition of disability is the same for both SSI and SSDI, the maximum benefit for SSDI recipients is higher — $3,822 per month in 2024 — and there are no asset limits. Additionally, SSDI may come with benefits for a spouse and/or dependents. Some individuals may be eligible for both SSI and SSDI, particularly if their SSDI benefits are minimal.

SSI is especially critical for disabled women of color and disabled LGBTQI+ people. Across all race and ethnicity categories, disabled women and girls were more likely than all women to receive SSI in 2022.\(^9\) People who are Black and American Indian/Alaska Native are more than twice as likely to receive SSI as people who are white.\(^10\) In 2022, 17.9 percent of Black disabled women and girls, 18.2 percent of disabled Asian women and girls, 14 percent of disabled Hispanic women and girls, 17.7 percent of disabled American Indian/Alaska Native women and girls, and 13.6 percent of multiracial women and girls received SSI, compared with 10.3 percent of white disabled women and girls.\(^11\) Further, in a 2020 Center for American Progress survey, 34 percent of disabled LGBTQI+ respondents received SSI benefits, while only 7 percent of nondisabled LGBTQI+ respondents received SSI benefits.\(^12\) These disparities are the result of deliberate policy choices that are designed to keep disabled people, particularly disabled women and disabled women of color, in poverty.

With benefits at a maximum of just $943 per month for an individual and $1,415 per month for an eligible couple in 2024, most SSI beneficiaries remain within 150 percent of the federal poverty level.\(^13\)
Additionally, strict income limits; strict asset limits of $2,000 for an individual and $3,000 for a couple; and work disincentives, discussed in the National Partnership’s “Systems Transformation Guide to Economic Justice for Disabled People: Jobs and Employment,” make it difficult to save.

For couples, there is even a marriage penalty when accessing benefits. Marriage penalties are especially and uniquely harmful for people with disabilities and their families. They stem from a history of eugenic laws prohibiting disabled people from marrying one another to prevent them from creating families. Disabled people, women and people of color are disproportionately affected by these penalties. For example, while the maximum SSI benefit for a disabled individual is $943 per month in 2024, the maximum for a couple is less than double that — only $1,415. A similar punishment applies to the asset limit. While the SSI asset limit is $2,000 for an individual, it is only $3,000 for a couple.
Limits on both earned and unearned income (such as dividends, interest and cash from friends and family) exacerbate these concerns. SSI counts unearned income, including gifts, toward eligibility and benefit calculations.\(^\text{18}\) SSDI does not.\(^\text{19}\) These practices disproportionately affect disabled people who are ineligible for SSDI benefits due to not having a work history or having an inadequate work history. Although those on SSDI are more than twice as likely to live in poverty as nonrecipients,\(^\text{20}\) SSDI recipients and recipients of multiple types of benefits (multi-recipient) are less likely to live in poverty than those who solely receive SSI benefits.\(^\text{21}\) These restrictions make it even more difficult for SSI recipients to exit the cycle of poverty.

Unlike other federal benefit programs, SSI has also traditionally counted in-kind income, which includes food or shelter that someone may provide for free or at a reduced cost, as unearned income.

This policy has been particularly problematic for disabled adults, who may be dependent on support and care from family, chosen family or friends.\(^\text{22}\) There is a disparate impact on adults with intellectual and/or developmental disabilities, about 75 percent of whom are estimated to live with a parent or other family member.\(^\text{23}\) However, in 2023, the Social Security Administration announced several proposed rules that would address the in-kind support and maintenance policies relating to food\(^\text{24}\) and shelter.\(^\text{25}\)

SSDI beneficiaries who are women are also more likely to live in poverty than SSDI beneficiaries who are men.\(^\text{26}\) On average, women’s SSDI benefits are lower than men’s,\(^\text{27}\) primarily because SSDI benefits are based on earnings history, further perpetuating the wage gap that women, and particularly women of color, experience. Therefore, women SSDI beneficiaries are also more likely to be eligible for SSI benefits.\(^\text{28}\) It is critical to reform the basis and calculation of SSDI benefits to promote equity and cease perpetuating sexism, racism, ableism and other forms of discrimination that contribute to lower wages. While SSDI beneficiaries do not have any asset or income limits, there are limits on monthly earnings that the SSA considers to be “substantial gainful activity.”\(^\text{29}\) These limits can make it difficult to work and save.
Barriers to Access of SSI, SSA, and SSDI

Accessing these modest benefits is extremely difficult. In February 2023, the national approval rate for initial disability applications was only 38 percent. Applying for these benefits is a burdensome process involving a tremendous amount of confusing and misleading paperwork. Many applicants need the assistance of legal counsel to successfully obtain Social Security benefits, despite concerns about access to and affordability of counsel. Navigators serve as an additional source of support for individuals applying for benefits, but access to navigator support can also be challenging. There is not nearly enough support at the local or state levels to help disabled people apply for these benefits and navigate this draconian system. Additionally, doctors are required to fill out and provide extensive forms and records. In-person, phone and other appointments are scheduled with little flexibility or notice to the applicant. Getting in touch with a caseworker when issues such as these arise can be incredibly difficult, depending upon the caseworker. As it is, the definition of “disability” to receive these benefits is incredibly narrow.

Applicants also experience long waits for disability determinations to receive benefits. New applicants who received a decision in November 2023 had to wait, on average, 225 days — more than seven months. Delays at the SSA are a systemic concern resulting from a lack of funding and understaffing. On top of these administrative wait times, there is a five-month waiting period before beneficiaries can receive their first SSDI payment, which is another issue for those who rely on these benefits. Obtaining benefits is not the final administrative burden either. Applicants face CDRs after a specific number of years, depending on the nature of their disability. These reviews require beneficiaries to compile ample doctor’s notes and are rife with delays.

Overpayments are often also a result of administrative delays. Overpayments happen when benefits are paid to an individual but a government agency later claims the benefits should not have been paid. An overpayment can happen when someone exceeds asset limits, when income changes or when eligibility for benefits changes, among other circumstances. A benefit recipient may then owe money back to a government agency they cannot afford to pay. Overpayments can happen as a result of the SSA not processing wage updates in a timely manner. As a result, benefit recipients are essentially punished due to the SSA’s processing lag. Some overpayment notices are even sent years after the overpayment occurs.
Women are more likely to be overpaid than men; Black and Hispanic recipients are also more likely to be overpaid. These delays, therefore, disproportionately affect women of color.

The administrative barriers SSI and SSDI recipients face make it difficult for disabled women and disabled women of color to access critical benefits. Women are more likely to have child care responsibilities, and applicants have expressed difficulty securing child care for inflexible appointments and long wait times. Racial disparities have also been shown in benefit approval: the U.S. Government Accountability Office (GAO) found that a lower percentage of Black applicants are granted benefits than white applicants. An updated GAO report noted that the SSA has failed to address any potential inequities or to adequately assess data in racial disparities. The evidentiary requirements throughout the process also disparately affect applicants of color. Racism and racist structures within the U.S. health care system pose barriers to accessing the required paperwork and specificity the SSA often requires, among other concerns. The National Partnership makes the following recommendations for Congress:

- **Pass the SSI Savings Penalty Elimination Act and the SSI Restoration Act.** More specifically:
  - Eliminate, or raise, the asset limit requirement for SSI recipients and tie it to inflation by, at a minimum, passing the SSI Savings Penalty Elimination Act.
  - Increase benefit amounts, particularly for SSI recipients.
  - Eliminate the marriage penalty related to asset limits and benefit amounts for SSI recipients.
- **Eliminate SSI in-kind support and maintenance and gifting provisions** to eliminate the SSA’s requirement to consider these types of unearned income.
- **Require the SSA to adjust income and substantial gainful activity requirements** to properly and adequately keep pace with inflation and limit work disincentives.
- **Increase funding to the SSA** to ensure adequate support for disabled applicants and prevent backlogs.
- **Increase funding for local and state navigators** to help people with their benefit applications.
• **Eliminate the five-month waiting period** for SSDI.
• **Pass the Social Security Expansion Act**, which would increase Social Security Disability Insurance benefits by $2,400 per year.
• **Remove the requirement of CDRs every seven years** for people enrolled in Social Security benefits in instances where individuals have severe medical cases with no opportunities for significant improvement.\(^{47}\)

We make the following recommendations to the administration:

• **The SSA should finalize rules eliminating food and shelter from in-kind support and maintenance calculations**, as well as address other unearned income regulations within its authority.

• **The SSA should overhaul its wage reporting system** to ensure that 1) wage reports are updated in a timely manner; 2) all overpayments that are a result of the SSA’s reporting delays are automatically waived; 3) wage reporting requirements are always clear and consistent for all benefit recipients; 4) the definition of “without fault”\(^ {48}\) in overpayment waiver processes is broadened and clarified to take into account the vast number of disabled SSA benefit recipients; and 5) there is a time limit on how far back SSA can go to collect overpayments.

• Given the discretion granted to the SSA, **the SSA should reform processes** to ensure that applicants can easily understand what is required and to reduce applicant burdens to the greatest extent possible.

• **The SSA should use its ample discretion to adjust substantial gainful activity limits** to adequately and properly adjust for inflation and to limit work disincentives.

• **The SSA should abandon proposed rules or efforts that call for earlier and additional CDRs.**\(^ {49}\)

• Consistent with President Joe Biden’s Executive Order on Transforming Federal Customer Experience and Service Delivery to Rebuild Trust in Government\(^ {50}\) and pending SSA proposals,\(^ {51}\) **the SSA must streamline processes and adopt appropriate policies and procedures** to ensure improved service and enhance online application capabilities. This will ensure greater access to benefits, fewer delays and diminished administrative burdens on SSA and benefit recipients.

• **The GAO should reexamine denials broken down by race, gender and other factors** given the length of time since its last report, similar to the 2023 GAO report on racial disparities in Veterans Affairs (VA) disability benefits.\(^ {52}\)
The TANF program provides temporary cash assistance to families with children and low incomes. TANF block grants are provided to states to administer their programs. The benefit provides critical support to approximately 1 million families and serves as a lifeline for disabled women of color and their families. Among adult beneficiaries, women, and single mothers in...
particular, are more likely to be TANF recipients than men. An estimated 84 percent of adult recipients are women, while an estimated 31.3 percent of recipients are Black, 33.4 percent Latino/Hispanic, 27.1 percent white, 1.1 percent American Indian/Alaska Native, 2.9 percent Asian, 0.9 percent Native Hawaiian/Pacific Islander, and 2.1 percent multi-racial. Prior estimates have suggested that between one in ten and one in four adult TANF recipients has a disability, and 1.7 percent of adult TANF recipients and 1.6 percent of child TANF recipients are also receiving some form of disability benefits. However, the program fails to provide economic stability for many families it is meant to support.

TANF has a number of strict limits and requirements. Many of these requirements are rooted in eugenic ideologies about controlling the reproductive, parenting and other decisions made by Black women, including those with disabilities.

Most states have asset limits, and many states have income limits below the federal poverty line. Benefit levels, which are at the discretion of states, are also extremely low. According to the Center on Budget and Policy Priorities, in July 2021, the maximum monthly benefit a family of three could receive is as low as $204 in Arkansas, and even the highest maximum benefit — $1,098 in New Hampshire — is still just 60 percent of the federal poverty line. The limited nature of these benefits disproportionately harm families of color. According to the Center on Budget and Policy Priorities, “a majority of Black children live in the 16 states with benefit levels below 20 percent of the federal poverty line.” For further context, the median rent is $846 per month in Arkansas and $1,396 in New Hampshire. We recommend the following:

- **Congress should establish a federally mandated minimum TANF benefit** that is tied to an automatic cost-of-living adjustment to help address inequities between states.
- **States should increase the TANF monthly benefit to, at a minimum, 50 percent of the federal poverty level** so that monthly cash assistance benefits are closer to the cost of living.
For people with long-lasting disabilities or chronic illnesses who may face especially onerous barriers that cause them to drop in and out of poverty, limitations on the total amount of time for which benefits can be received can be devastating. In general, there is a five-year limit on benefits for families with adult recipients receiving federal TANF funds.\(^{63}\) Even with that federal requirement, several states impose shorter lifetime limits on TANF funds and time limits for receiving TANF at one time.\(^ {64}\) For example, in Virginia, a family generally can only receive TANF benefits for 24 months (or two years) at one time.\(^ {65}\) Once the two years are up, the family must wait another two years before being eligible to receive TANF funds again.\(^ {66}\)

Not only do states impose their own limitations, but they also have great flexibility in how they spend TANF funds.\(^ {67}\) States spent only about one-fifth of these funds on basic assistance for families in need in 2021.\(^ {68}\) In Mississippi, TANF funds were misused for purposes such as constructing a volleyball stadium and paying for unperformed motivational speeches by former National Football League quarterback Brett Favre.\(^ {69}\)

While states and the federal government tout TANF as a program to encourage and prepare people for work, it is only guaranteed as a temporary form of assistance. In 2021, states only spent about eight percent of TANF funding on work-related activities.\(^ {70}\)

About 30 percent of states’ TANF spending went to programs and areas other than basic assistance or work-related activities, including 13 percent on “other areas,” including nonevidence-based abstinence programs and marriage promotion.\(^ {71}\)

TANF spending also goes toward programs that encourage marriage and stigmatize single mothers.\(^ {72}\) However, some TANF recipients also receive SSI,\(^ {73}\) meaning there is a conflict of messages. SSI imposes a marriage penalty, whereas TANF improperly frames marriage as a solution to poverty.\(^ {74}\)
There are also federal requirements that states must meet to hit work participation rate targets.⁷⁵ Further, federal law requires states to reduce or terminate benefits when a family member does not comply with work requirements and there is no good cause.⁷⁶ States get to decide what constitutes good cause,⁷⁷ which is particularly problematic for disabled women who may struggle to meet work requirements while caring for their children, or for parents who have disabled children — especially in single-parent households. The required number of work hours for single-parent households is still 30 hours per week, which is quite significant. There are limited “countable activities” that may contribute toward work requirements; there are 12 categories of countable activities under federal law.⁷⁸ While there are work requirement exemptions for disabled recipients, states can set the standard for what it considers a disability, as well as decide whether to exempt someone who is caring for a disabled or incapacitated person.⁷⁹ Nearly all states offer the option for an exemption or a work requirement modification for these populations, but the policy and paperwork requirements vary by state, leaving some people with more stringent requirements.⁸⁰ Research shows that those TANF recipients who are sanctioned, and those who remain on TANF for longer periods of time, are often those with a disability.⁸¹ In addition, Black and brown women are also more likely than white women to be sanctioned.⁸² States may impose sanctions not just on individuals but also on entire families,⁸³ a particularly problematic result for households with disabled family members.

If Congress mandated an exception specifically for disabled TANF recipients, the biggest concern is, similar to SNAP, how narrowly disability would be defined.

Additionally, state investment in work programs is inadequate, and TANF does not guarantee stable work upon exiting the program.⁸⁴ We propose the following recommendations:

- **Congress should eliminate work requirements on the whole to increase equity**, particularly for disabled women and single mothers, both of whom are unnecessarily and arbitrarily penalized for failing to meet strict TANF requirements. Should work requirements remain, countable activities under federal law must be expanded.
• **Congress must more narrowly tailor how TANF funds may be used** to address state mismanagement, lack of oversight and use of funds predominantly for non-basic assistance costs.

• **Congress should direct states to spend at least 50 percent of their TANF funds on cash assistance** for families in need.\(^8^5\)

• **Congress must invest further in TANF** and eliminate the inflexible and nonpermanent block grant structure.

• **Congress must extend the five-year time limit** for receipt of TANF benefits and prohibit states from shortening that time limit.

• **The Administration for Children and Families should adopt a final rule** that better ensures states are spending TANF money in accordance with TANF’s purpose and on increased cash assistance.\(^8^6\)

States can implement the following recommendations:

• **Allocate more TANF dollars** toward monthly cash assistance for families.

• **Abolish sanctions that affect entire families** when only one family member is at the center of the concern.

• **Remove time limits** on TANF benefits.

• **Permit TANF beneficiaries to partake in the full range of activities** that are countable under federal work requirements.

• Where possible — when state requirements are being met — **allow beneficiaries to engage in activities beyond the 12 countable activities** under federal law.

• **Create more flexible exemptions to the work requirements** for disabled TANF recipients.

One final concern is related to policies that implicate reproductive health and justice. First, there is a family cap on benefits in several states.\(^8^7\) Family cap policies deny increased cash benefits to families that grow after initial TANF eligibility is determined. These policies are a blatant attack on the reproductive choices of TANF beneficiaries, particularly people of color, disabled people and women. These policies are firmly based in eugenics. Further, following the *Dobbs v. Jackson Women’s Health Organization* decision, people in states that have banned abortion may be forced to bear children while being denied additional resources and benefits to keep their children safe and healthy — a hypocritical and cruel result. National Partnership for Women & Families analysis shows that one year after
Dobbs, more than 36 million women of reproductive age live in states that have or are likely to ban abortion, 2.9 million of whom are disabled women.88 Second, families who would otherwise receive child support from a noncustodial parent often do not receive these payments if they receive TANF. States may keep child support payments while families receive TANF — and even after they stop receiving TANF — to recover TANF costs.89 However, child support payments can help families pay for necessities that contribute to the health and safety of their children. Additionally, those payments could help lift families out of poverty.90 The National Partnership recommends the following to ensure that families are not penalized for their reproductive choices:

- **States should repeal — or refuse to implement — TANF family cap policies.**
- **States should allow for child support pass-through to families.**
Low Income Home Energy Assistance Program (LIHEAP)

LIHEAP assists eligible low-income households with energy costs.

It particularly targets households with members who are disabled, aging or young children.91 Forty-one percent of households that receive LIHEAP have at least one disabled member.92 In 2021, 57.8 of those receiving energy aid...
were female. Disabled women are more likely than white nondisabled men to live in poverty, with disabled women of color experiencing particularly high rates of poverty. Because disabled women and disabled women of color are more likely to experience poverty, LIHEAP is a particularly critical resource for them.

The average energy burden (or the percentage of gross household income spent on energy costs) on people of color, disabled people and older adults is 15 percentage points higher than the national average.

The median energy burden on Black households is 43 percent higher than on white households. The median energy burden on Hispanic households is 20 percent higher than on white households. These disparities are largely due to gender, racial, and disability wage and income gaps, and exacerbated by the fact that people with low incomes are more likely to live in homes that are not energy efficient or that have inadequate, unsafe or poor conditions.

Disabled people rely on energy for their safety and to live and work in their communities. Ventilators, electric wheelchairs, oxygen tanks, feeding tube pumps, refrigerators for certain critical medications and other types of durable medical equipment require electricity. Without affordable energy, the lives of disabled people are at risk.

Unfortunately, there are significant numbers of unserved residents eligible for LIHEAP. LIHEAP can be difficult and confusing to access, and lack of awareness of the program is an additional barrier. We recommend the following:

- **States should reduce the administrative burden of applying** for LIHEAP and streamline applications for benefits to ensure that residents are receiving critical resources such as LIHEAP.

- **States should ensure that agencies are engaged in data-sharing** to conduct affirmative outreach to disabled residents who may be eligible for LIHEAP, such as those who receive SNAP, TANF and other benefits.

- **The Administration for Children and Families should engage in data-sharing with agencies** such as the Social Security Administration to conduct affirmative outreach to disabled residents who may be eligible for LIHEAP.
Affordable Connectivity Program (ACP)

The ACP is a benefit that provides discounts on internet service. It also provides one-time discounts on computers and tablets to eligible households. Eligible households are at or below 200 percent of the federal poverty guidelines or have a household member who has received certain types of assistance.
of benefits or funds, including SSI, SNAP, Medicaid, WIC, federal housing assistance and other benefits on which a disproportionate number of disabled people rely. Eligible households may receive a discount of up to $30 per month — or up to $75 per month for households on qualifying Tribal lands — toward internet services. With disabled people — particularly disabled women and disabled women of color — more likely to experience poverty, these benefits are critical for keeping disabled women connected. Unfortunately, ACP is winding down due to a lack of renewed funding. The winding down of the ACP will be devastating for the financial inclusion of disabled women of color in particular.

Disabled people are less likely to have broadband and internet access. Between 2015 and 2019, only 78.4 percent of disabled people had access to an internet subscription compared with 91.5 percent of nondisabled people. Areas with high rates of SSDI recipients are also less likely to have access to broadband services, internet and computers. Black and Hispanic/Latino households are also less likely than white households to have internet access, even within the same income bracket. Additionally, AT&T, CenturyLink and Verizon disproportionately exclude low-income and racially and ethnically diverse neighborhoods from high-speed internet access. Expanded broadband and internet access for disabled people is critical. Broadband access can improve health care options and access (for example, in receiving telehealth services), promote social inclusion and promote independence and the ability to live and work in one’s community. The internet also allows Deaf and Hard of Hearing people to communicate via teleconference — a notable advancement. It can also help disabled people pursue an education. There is a need for more disabled doctors, researchers, policymakers and other experts in professions that require access to equal and equitable education. Internet access is also critical for women and girls more broadly. With the internet, women can better access critical information about their health and health care options — including reproductive health options.

For disabled people, and disabled women in particular, internet literacy and access is also critical for expanding employment opportunities.
We support President Biden’s efforts to prioritize and facilitate broadband expansion in rural, Tribal and low-income communities, particularly communities with a large population of people of color and disabled residents. The National Telecommunications and Information Administration (NTIA), an agency located within the U.S. Department of Commerce, also plays an important role in expanding broadband access, particularly in unserved and underserved communities. The Online for All campaign and administrative efforts to secure commitments from providers to offer high-speed internet plans fully covered by the ACP are also a good start.

While the ACP and other energy-saving programs are a helpful resource, there is still much to be done to ensure equity and access to broadband, internet and technology for disabled women. This is particularly true with the winding down of ACP. We recommend the following:

- **Congress must renew and expand funding** for the ACP.
- **The Biden administration should continue to prioritize and facilitate broadband expansion** in rural, Tribal and low-income communities, particularly communities with a larger population of people of color and disabled residents.
- **The Federal Communications Commission must expand and prioritize enforcement of anti-discrimination provisions** related to broadband access under the Infrastructure Investment and Jobs Act and its regulations, which prohibit discrimination based on race, ethnicity and income level.
- **The NTIA should not automatically prioritize unserved communities** over underserved communities. It should also 1) focus on affordability and access challenges, including in urban areas; and 2) consider the populations affected by specific funding choices. Under current funding priorities, low-income, majority non-white communities may be left behind, harming disabled people as well.
- **The NTIA should widely grant cost-sharing waivers** for projects that would significantly expand internet access for low-income, racially diverse and disabled populations — not simply high-cost project areas.
- **The administration must reduce administrative burdens** to ensure that eligible Americans are able to access the ACP, should it receive funds to continue, and other energy-saving programs.
Food Insecurity Benefits

There are several programs that provide disabled people with critical nutrition.

They are the Supplemental Nutrition Assistance Program (SNAP) and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). SNAP is a means-tested (based on need or certain eligibility requirements) federal program that provides nutrition and food purchasing assistance to low- and no-income households.
WIC is another program established to address food insecurity. This program is for income-eligible pregnant, postpartum and breastfeeding/chestfeeding people, as well as infants and children at nutritional risk. Medical and dietary restrictions may qualify as nutritional risk, including disabilities such as anemia, gastrointestinal disorders, diabetes, and food allergies, among others.

In 2021, households with a disabled working-age adult were more than twice as likely to face food insecurity than were nondisabled adults.¹¹⁵

Thirteen percent of people ages 16 through 59 in the United States live in households that receive SNAP benefits, compared with 33 percent of disabled women in that age group.¹¹⁶ For more information about the importance of these programs for disabled women, please reference our second piece in this series on food insecurity, housing and transportation.
Health Care Benefits

Medicaid is a means-tested program with strict eligibility requirements.

While eligibility requirements vary by state, Medicaid eligibility is generally accompanied by strict income and/or asset requirements. More than 10 million Americans qualify for Medicaid on the basis of disability. Many disabled people rely on Medicaid home- and community-based service (HCBS) waivers to access vital long-term
services and supports. Medicare is a federally managed health insurance program that requires a certain number of work credits and payment into the program. Medicare is available to eligible disabled and older Americans. In 2022, about 12 percent of all Medicare beneficiaries, or 7.7 million beneficiaries, were under age 65 and eligible on the basis of disability.

While improvements in Medicaid and Medicare are necessary for the health and safety of disabled people, Medicare and Medicaid are critical programs that ensure disabled people can access the — often lifesaving — health care they need.

The National Partnership for Women & Families will address disability and health justice in a future report. More information about the importance of Medicaid and HCBS waivers can also be found in our “Systems Transformation Guide to Economic Justice for Disabled People: Jobs and Employment.”
Conclusion

While public benefits are critical to the health and safety of disabled women and their families, there are myriad barriers to accessing public benefits.

Additionally, receipt of public benefits is far from a promise of economic security. Barriers related to public benefit access and design are deliberate policy choices that were made to keep disabled women, particularly...
disabled women of color, in poverty. However, this report has charted a path to address these systemic barriers. By addressing the inequities that target disabled and multi-marginalized women, policymakers will uplift everyone.

This series will continue to shine a light not only on the specific issues that disabled women and multi-marginalized disabled women face but also on the need to center the perspectives of disabled women and multi-marginalized disabled women in policy discussions and ensure that the National Partnership is prioritizing intersectionality in our work. The unique concerns that disabled women experience are often overlooked. However, we hope that this installment and the remainder of this series provide some helpful action items and initiate important and necessary conversations to ensure this work continues.
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This report was authored by the following National Partnership for Women & Families staff:

• Marissa Ditkowsky, Disability Economic Justice Counsel

The following staff of the National Partnership for Women & Families contributed to this report (in alphabetical order):

• Anwesha Majumder, Economist
• Gail Zuagar, Senior Communications Specialist for Economic Justice
• Jessica Mason, Senior Policy Analyst, Economic Justice
• Katherine Gallagher Robbins, Senior Fellow, Research
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Endnotes


3. See note #1.


5. Author’s calculation using University of Minnesota. (n.d.). IPUMS USA: 2017–2021 American Community Survey. Retrieved 29 June 2023, from IPUMS website. People are identified as having a disability if they responded that they have difficulty in one or more of the following realms: vision, hearing, cognitive, ambulatory, self-care, and independent living. This is a limited definition of disability that excludes a portion of disabled people. For more information on how disability is measured in the American Community Survey, please see U.S. Census Bureau. (2021, November 2). How Disability Data are Collected From The American Community Survey. Retrieved 29 June 2023.

6. Overall, the disability community has reclaimed identity-first language (i.e., “disabled”) to acknowledge disability as a critical part of identity in which to take pride. However, not all members of the disability community prefer identity-first language. Others may prefer person-first language (i.e., “person with a disability”). Preferences may also vary by disability. This report uses identity-first and person-first language interchangeably. However, the National Partnership will always honor the language a disabled person chooses for themselves.

There are also several definitions of disability. The Americans with Disabilities Act (ADA), for example, defines disability as “(A) a physical or mental impairment that substantially limits one or more major life activities of such individual; (B) a record of such an impairment; or (C) being regarded as having such an impairment.” 42 U.S.C. § 12102. Major life activities include major bodily functions. 42 U.S.C. § 12102(2)(B). This definition is quite broad. Different models of disability also affect the ways disability is defined and viewed. The medical model, for example, focuses on disability as an impairment and prioritizes a cure. The social model views disability as something constructed by the barriers that society establishes. Other models of disability also exist to address the complexities of the disabled experience. Disabled World. (2010, September 10). Models of Disability: Types and Definitions. Retrieved 12 February 2024. No one definition or model is perfect.

7. The National Partnership often uses gendered language to acknowledge and communicate the disproportionate effect that specific policies have on women. However, gendered language has its shortcomings. Individuals of other marginalized genders, particularly nonbinary and transgender individuals, may also disproportionately experience the effects of certain policy decisions. This report recognizes those impacts and attempts to use both gendered language and language that is more inclusive of all marginalized genders. It is also important to recognize that data also are not always inclusive of transgender and nonbinary individuals. We are therefore limited to the often binary data sets that are not reflective of the entire disabled population.


9. Unpublished calculations by the National Partnership for Women & Families based on the number of people receiving SSI in the U.S. Census Bureau American Community Survey 1-Year Data for 2022, available via IPUMS USA, University of Minnesota. Data retrieved December 8, 2023 from IPUMS website.


11. Unpublished calculations by the National Partnership for Women & Families based on the number of people receiving SSI in the U.S. Census Bureau American Community Survey 1-Year Data for 2022, via IPUMS USA, University of Minnesota.


60 Ibid.

61 Ibid.


63 In general, a family may not receive federal TANF funds if it includes an adult who received TANF benefits as the head of household or spouse of the head of household for a cumulative total of more than 60 months. Office of Family Assistance. (2024, February). Temporary Assistance to Needy Families: 13th Report to Congress Fiscal Years 2016 through 2021 (p. 21). U.S. Department of Health & Human Services Publication. Retrieved 13 February 2024.

64 See note #59.

65 Va. Code § 63.2-612.

66 Ibid.


68 See note #67, Center on Budget and Policy Priorities.


75 See note #59.

76 Ibid.

77 Ibid.


79 See note #47, p. 9.


82 See note #59.


84 See note #59.

85 See note #71.


90 Ibid.


97 Ibid.

98 See note #14.


102 Ibid.


105 This is true even after controlling for relevant factors including rural/ non-rural status, age, race and housing prices. Butrica, B., & Schawbish, J. (2022, October). Technology and Disability: The Relationship Between Broadband Access and Disability Insurance Awards (pp. 7–8). Retrieved 13 February 2024, from Center for Retirement Research website.


116 Author’s calculations regarding living in households that received SNAP using University of Minnesota. (n.d.). IPUMS USA: 2017–2021 American Community Survey. Retrieved 5 September 2023. Racial categories exclude women who identify as Latina and/or Hispanic, who are analyzed separately. These data, which come from a survey, may be lower than U.S. Department of Agriculture administrative data of SNAP recipient rates. Ages 16 to 59 correspond to the ages eligible for SNAP work requirements.


118 See note #14, p. 18.

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to advancing gender and racial equity in the workplace, improving access to affordable, quality health care that authentically meets the needs of all women and families and reduces inequities in health, and promoting reproductive freedom and justice, access to contraception and abortion care, and elimination of the stigma associated with abortion.

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