

The Status of Women and Girls in West Virginia



About This Report

Since 1996, the Institute for Women's Policy Research has produced reports on the status of women and girls in states and localities throughout the United States. Status of Women reports have been written for all 50 states and the District of Columbia and have been used throughout the country to highlight women's progress and the obstacles they continue to face and to encourage policy and programmatic changes that can improve women's opportunities. Created in partnership with local advisory committees, the reports have helped state and local partners achieve multiple goals, including educating the public on issues related to women's and girls' well-being, informing policies and programs, making the case for establishing commissions for women, helping philanthropists establish investment priorities, and inspiring community efforts to strengthen economic growth by improving women's status.

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The Institute for Women's Policy Research (IWPR) conducts rigorous research and disseminates its findings to address the needs of women, promote public dialogue, and strengthen families, communities, and societies. The Institute works with policymakers, scholars, and public interest groups to design, execute, and disseminate research that illuminates economic and social policy issues affecting women and their families, and to build a network of individuals and organizations that conduct and use women-oriented policy research. IWPR's work is supported by foundation grants, government grants and contracts, donations from individuals, and contributions from organizations and corporations. IWPR is a 501(c)(3) tax-exempt organization that also works in affiliation with women's studies, and public policy and public administration programs at The George Washington University.

About The West Virginia Women's Commission

The West Virginia Women's Commission is an agency of the state government created by the Legislature in 1977. The Commission seeks to improve the legal, social, economic, educational, and political status of women by working with businesses, policymakers, government agencies, and nonprofit groups. The Women's Commission is the only state agency mandated to bring women's concerns and issues to the attention of legislators and other government officials. The Commission highlights and advocates for women's needs to the executive and legislative branches of government. Eleven citizen members, appointed by the governor, serve as commissioners for three-year terms. Seven state department heads or designated representatives advise and support the Commission as ex-officio commissioners.

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The Status of Women and Girls in West Virginia

Cynthia Hess, Ph.D. Ariane Hegewisch Claudia Williams





In early 2009, the West Virginia Women's Commission began an evaluation of its purpose, goals, and service to the women of the state; after long discussions, debates, and heartfelt reflection, the group decided to revisit the mission of the organization. This led to the development of this project, which would not have been possible without the support of many people. Thanks should begin with the commissioners who are no longer on the commission but gave support to a direction refocused on research, advocacy, education, and growing the partnerships of the commission at the local, state, and national level: Cheri Heflin Callaghan, Kelly Davis, Gina Dahlia, Shida Jamie, and Dr. Kathie Williams. This update of the 2002 *Status of Women in West Virginia* data book also would not have been possible without the leadership of our current commission members: Barbara Kyle, Chair, Kameron Miller, Vice-Chair, Belinda Biafore, Diana Bell, Jean Ford, Kathleen McDermott, Stacy North, Linda Waybright, and Robin Young.

Without the medium of Facebook this project may not have come to fruition. The West Virginia Women's Commission thanks Dr. Heidi Hartmann, President of the Institute for Women's Policy Research, for responding to an Executive Director from West Virginia with limited funding and even less knowledge of how big this project would be; Dr. Hartmann and IWPR's phenomenal staff have given the Women's Commission knowledge, power, and insight to keep up the good fight for women in the beautiful state of West Virginia. The Women's Commission and IWPR also are deeply grateful to the Advisory Committee (see list below) for their contributions and offer a special thanks to the leaders in this project, Dr. Anne Oberhauser and Megan Popp, both of whom dedicated time when they did not have any more to give, making this project better than expected and offering so much insight. Dr. Oberhauser's collaboration with the West Virginia Geographic Information Science Technical Center staff to create interactive maps for this project is an invaluable contribution to educating so many in the state. Frank Lafone, West Virginia Geographic Information Science Technical Center, and Allyssa Sobey, West Virginia University, were instrumental in creating the maps to display key findings.

The West Virginia Women's Commission also thanks Dr. Cynthia Hess, whose professionalism and leadership could never receive enough accolades. The Women's Commission is grateful to Dr. Hess and the staff of IWPR for keeping the project always moving forward and making great strides for West Virginia through this research.

The Institute for Women's Policy Research appreciates the West Virginia Women's Commission's generous support for this project and is especially grateful to Tara Martinez, Executive Director of the West Virginia Women's Commission and Co-Chair of the project's Advisory Committee, for her intensive work on the project. Ms. Martinez provided invaluable support in serving as the project's primary point of contact and coordinating committee input. Heidi Hartmann, IWPR President, and Barbara Gault, Vice President and Executive Director, provided helpful guidance and review throughout the project. Jeff Hayes, Senior

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Research Associate, offered statistical advising. Valuable research assistance was provided by Althea Arnold, Research Associate; Justine Augeri, Research Fellow; Rhiana Gunn-Wright, Mariam K. Chamberlain Fellow; Youngmin Yi, Research and Program Coordinator; and Research Interns Angela Edwards, Rosemary Mwaura, Maureen Sarna, and Alicia Sheares.

PREFACE

This report on the status of women and girls in West Virginia is a collaborative effort by policymakers, academics, citizens, and activists who are committed to the advancement of women and girls in the state. The goal of this report is to measure and analyze the social, economic, and health status of women and girls in West Virginia. The data and information contained in this document provide an extremely useful resource to inform policymakers and to make recommendations that will improve the lives of women, children, families, and communities in West Virginia.

The report is organized around three themes that reflect important aspects of women's lives and their ability to support themselves and their families. Specifically, employment and earnings, economic security and poverty, and health and well-being are critical to understanding the status of women in the state and the Appalachian Region as a whole. This analysis is based on the concept of gender, which explains how socialization affects women's and men's roles and status in society. Gender is based in cultural norms, stereotypes, and learned behavior that is contextual and dynamic. For example, occupational segregation in West Virginia is very evident among women and men. In 2010, over half of women and only one-fifth of men worked in the service industry—e.g., in restaurants, health services, and child care—whereas one-fifth of men and less than two per cent of women worked in the mining and construction industries. These occupations reflect traditional gender roles of men and women that in turn affect their status in the workforce.

The challenges that women in West Virginia face stem not only from traditional values about gender, but also from the rural geography of the state. The rural nature of West Virginia makes it difficult for many women to access social services such as child care, health care, and domestic violence shelters. It also makes it difficult to access adequate transportation that is needed to seek employment and engage in other economic activities.

The inclusion of maps in this report illustrates important spatial aspects of the social and economic indicators highlighted below. For example, uneven development in West Virginia affects the provision of services and access to resources for many people, especially women. Certain regions in the central and southern part of the state are especially vulnerable to economic marginalization and poverty. Other regions, such as the Eastern and Northern Panhandles, tend to have higher socio-economic status, reflecting greater economic activity and more opportunities in general.

This report will be widely distributed and used by government agencies, political organizations, state legislatures, and institutions of higher education. The wealth of data, information, and analysis of women and gender in many aspects of this state will assist in policy and decision making, education, government planning, and business development. The outcomes and objectives of this report are to advance the status of women and girls, which will, in turn, lead to greater resources and improved quality of life for everyone. As noted below, enhancing education for women reinforces the importance of school for families. Expanding job opportunities for both men and women benefit communities and raise living standards for everyone. Finally, the health and well-being of all West Virginians are important priorities for this state due to its increased attention to health care and vulnerable populations.

The West Virginia Advisory Committee is a group of activists, professionals, and academics who have collaborated on this project. They are committed to improving the status of women and girls in the state through their tireless efforts and expertise in the areas of gender-based violence, health care, employment, education, and policy. The report provides important recommendations that are informed by their wealth of experiences and backgrounds in these areas. We hope that the report reflects our dedication and contribution to helping all West Virginians maintain healthy and fulfilling lives.

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Women and girls in West Virginia have made some social and economic progress in recent decades, but the need for further improvements remains. Many female residents in the state are vulnerable to challenges such as poverty, limited access to child care, the gender wage gap, and adverse health conditions. In addition, women and girls in West Virginia face stubborn disparities in opportunities and outcomes—including disparities that exist among women and girls from different racial and ethnic groups as well as among those from various geographic areas in the state. Addressing these challenges and disparities is essential to promoting the well-being and vibrancy of West Virginia's many communities.

This report provides comprehensive data to assess the progress of women and girls in West Virginia and identify places where additional improvements are still needed. The report analyzes issues that profoundly affect the lives of women and girls in the state, including employment, earnings, and education; economic security and poverty; and health and well-being. The report also tracks trends in progress in West Virginia (between 2000 and 2010) by comparing its findings with the 2002 report, *The Status of Women in West Virginia* (IWPR 2002). In addition, the report examines the status of women and girls in five regions of the state (Northern Panhandle, North Central, Eastern Panhandle, South Central, and Southern) as well as in the nation as a whole. The data on women's and girls' status that it presents can serve as a resource for advocates, community leaders, policymakers, and other stakeholders who seek to develop community investments, program initiatives, and public policies that will lead to positive change for women and girls in West Virginia and the nation as a whole.

Key findings in the report include the following.

Employment, Earnings, and Education

- Women in West Virginia are less likely to be in the labor force than women in any other state in the nation. In 2010, 50 percent of women in West Virginia were in the labor force—either working or actively looking for work—compared with 59 percent of women in the United States as a whole. Women's labor force participation rates in West Virginia vary considerably across the state's different regions: women in the Southern region have the lowest labor force participation rate at 41 percent, and women in the Eastern Panhandle have the highest at 60 percent. In all regions, women's labor force participation rate is substantially lower than men's, as it is in the United States as a whole.
- The comparatively low labor force participation rates of women and men in West Virginia may stem partly from high disability rates among West Virginia's workers. Between 2009 and 2011, 15.2 percent of women and 17.0 percent of men aged 15 or older in the

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state experienced a disability or health problem that limited or prevented work, compared with 10.2 percent of women and 9.5 percent of men in the nation as a whole.

- In 2011, unemployment in West Virginia was lower than in the United States overall. The unemployment rate for women was 6.9 percent in the state compared with 8.5 percent nationally. African Americans in West Virginia were disproportionately affected by unemployment: in 2011, the unemployment rate for African American women in the state was 3.5 times as high as the rate for white women (22.4 percent compared with 6.4 percent).
- On average, women in West Virginia who work full-time, year-round earn considerably less than their male counterparts (\$29,000 for women compared with \$42,000 for men). Women's median annual earnings in the state are also less than women's earnings in the United States overall (\$36,000).
- Women in West Virginia face a higher gender wage gap than women in all other states in the nation except Louisiana and Wyoming. In 2010, the gender earnings ratio in West Virginia was 69 percent, compared with 79 percent for the nation as a whole: for every dollar earned by men in West Virginia, women earned only 69 cents. The last decade has seen no improvement in the gender wage gap in West Virginia; in fact, the gender wage gap in the state increased slightly between 1999 and 2010, after narrowing considerably during the 1980s and 1990s.
- The proportion of West Virginia women who hold a bachelor's degree or higher increased from 11 percent in 1990 to 18 percent in 2010. As of 2010, however, West Virginia ranked 51st out of the 50 states and the District of Columbia for its proportion of women with a four-year college degree. In 2010, more than half of women in West Virginia (56 percent) had a high school diploma or less.
- For both women and men in West Virginia, having higher levels of education leads to higher earnings. Women in the state, however, earn less than men at every educational level. Women with some college education or an associate's degree in West Virginia have median annual earnings that are \$10,500 less than those of men with only a high school diploma or the equivalent. Women with a bachelor's degree or higher earn \$2,500 less than men with only some college education or an associate's degree.
- Between 1997 and 2007, both the number and proportion of women-owned businesses in West Virginia increased. In 1997, women owned 30,321 businesses in the state (27 percent of all businesses) compared with 33,785 businesses in 2007 (28 percent of all businesses). While West Virginia's growth in the number of women-owned firms is relatively modest compared with the overall growth in these firms in the nation as a whole, one recent study shows that the state has experienced faster-than-average growth in the revenues women-owned firms contribute to the economy.

Economic Security and Poverty

- Women in West Virginia are more likely than their male counterparts to live at or below the federal poverty line. Nearly one in five women (18 percent) aged 18 and older in the state are poor, compared with 14 percent of comparable men. Poverty rates among women vary considerably across the state's different regions: women in the Southern region have the highest poverty rate at 21 percent, and women in the Eastern Panhandle have the lowest at 13 percent.
- Poverty rates in West Virginia also vary considerably by levels of educational attainment. Women in the state with less than a high school diploma are more than twice as likely as women with a high school diploma or the equivalent to be poor, and six times as likely as women with a bachelor's degree or higher to live in poverty.
- In West Virginia, the poverty rates among women reflect substantial disparities between racial and ethnic groups. More than one in four African American and Hispanic women (27 percent and 28 percent, respectively) aged 18 and older live at or below the federal poverty line, compared with 17 percent of white women in the state.
- In West Virginia, as in the nation as a whole, families headed by single women with children are also extremely vulnerable to economic hardship. The median annual income of single-mother families in West Virginia is just \$17,119, which is 27 percent of the median income of families headed by married couples with children and 60 percent of the median income of families headed by single men with children.
- More than one in five single women (21 percent) in West Virginia who live at or below 200 percent of the federal poverty line and have children under five receive cash assistance from West Virginia Works, the state's Temporary Assistance for Needy Families (TANF) program. In the United States as a whole, cash assistance is received by 16 percent of comparable households headed by single women.

Health and Well-Being

- More than one in five women (21 percent) aged 18–64 in West Virginia lack health insurance coverage, which is a higher proportion than in the nation as a whole (19 percent). In addition to lacking health insurance, many women and men in West Virginia have limited access to health care providers and services. More than 215,000 people–12 percent of West Virginia's total population–live in an area that has a shortage of primary care health professionals.
- Diabetes is a serious problem for many women in West Virginia. As of 2010, 12 percent of women and men aged 18 years and older in West Virginia reported having ever been told they have diabetes, which is a higher percentage than in the United States as a whole (9 percent). Women's age-adjusted mortality rate for diabetes in the state is also much higher than in the nation as a whole (29.1 per 1,000 compared with 19.8 per 100,000). For African American women in West Virginia, the mortality rate for diabetes is more than twice as high as the rate for white women (59.9 percent per 100,000 and 28.4 per 100,000, respectively).

- Between 2005 and 2009, women in West Virginia had lower age-adjusted mortality rates for lung and bronchial cancer than men in the state (51.9 per 100,000 compared with 87.5 per 100,000), but considerably higher mortality rates for these types of cancers than women in the United States overall (who had a mortality rate of 39.6 per 100,000). Twenty-five percent of women aged 18 and older in West Virginia report smoking either every day or on some days, compared with just 15 percent in the nation as a whole.
- Substance abuse is a significant problem for women and men in West Virginia. In particular, prescription drug abuse has soared in recent years: West Virginia experienced a 214 percent increase in the number of prescription drug overdoses from 2001 to 2010.
- In 2011, West Virginia had the highest overweight and obesity rate in the nation for adults. More than six in ten women (65.8 percent) and seven in ten men (72.1 percent) aged 18 and older in the state are overweight or obese. In the United States as a whole, 56.6 percent of women and 69.9 percent of men are overweight or obese. Nutritional intake probably contributes to the comparatively high overweight and obesity rates in West Virginia: 81 percent of women and 87 percent of men in the state report that they do not consume five or more servings of fruits or vegetables per day. In the United States as a whole, 72 percent of women and 81 percent of men say their diet does not include at least five servings of fruits or vegetables every day.
- In 2010, the birth rate for teens aged 15–19 in West Virginia was 44.8 per 1,000, which is considerably higher than the birth rate for teens in the United States as a whole (34.2 per 1,000).
- Women and girls in West Virginia are less likely than their counterparts in the nation as a whole to contract a sexually transmitted infection. In 2010, the incidence rate of chlamydia for women and girls of all ages in West Virginia was 305.3 per 100,000, compared with 610.6 for women and girls in the United States as a whole. The incidence rate of gonorrhea among the female population in West Virginia was 35.1 per 100,000, compared with 106.5 per 100,000 for women and girls in the nation overall.

Recommendations

Changes to public policies and program initiatives provide opportunities to create a better future for women and girls in West Virginia. Recommended changes include:

- **encouraging** employers to follow the lead of the state as an employer and remedy gender wage inequities by monitoring hiring, selection, and promotions and by reviewing pay and grading decisions to identify potential gender and race disparities;
- **educating** policymakers and funders about the important role that workforce supports play in ensuring that women can participate successfully in their local economy;
- offering outreach and support services for women interested in setting up a business and monitoring state-led contracts to ensure that women-owned businesses are receiving a fair share of federal and state contracts;

- **supporting** programs that provide essential services such as child care, job training, and transportation, especially for households headed by single women;
- **ensuring** that all families who need it receive assistance from West Virginia Works, the state's cash assistance program for low-income individuals;
- **exploring** options for increasing the number of health care providers and services, especially in rural areas; and
- **improving** outreach, education, and resources to promote healthy diets and preventive health.

The data in this report show that women in West Virginia have varying needs and concerns. The disparities they experience reveal the need to promote public policies and programs that will further advance women's and girls' status in the state and the United States as a whole. As the nation struggles to move beyond an economic recession in which women experienced significant losses, it is critical that women's interests fully inform policymaking and service provision, as well as advocacy, research, and program initiatives. *The Status of Women and Girls in West Virginia* aims to provide information that key stakeholders can use to build on women's successes and more effectively address the concrete realities of women's and girls' lives.

INTRODUCTION

The status of women and girls in West Virginia is a key component of the state's overall health, well-being, and economic standing. When women and girls thrive, whole communities thrive.

In West Virginia, as in other states across the nation, women and girls make invaluable contributions to their communities. Many women who live in West Virginia are active in the workforce, head local organizations, run businesses, volunteer in local schools, participate in social justice movements, and get involved in politics. Women work to transform and strengthen the state in many ways.

At the same time, women and girls in West Virginia, as in the nation as a whole, continue to experience challenges that reveal the slow nature of change. Compared with women in the United States as a whole, women in West Virginia have lower incomes, are less likely to be employed, have lower levels of education, and are less likely to be healthy. In this state, barriers to women's education, healthy living, and full participation in the workforce are exacerbated by the high proportion of women who live in rural areas—which, in general, are less well served by public transportation, offer fewer economic opportunities, and have more limited access to support services such as child care, health services, or elder care.

Those working to improve women's and girls' circumstances in West Virginia need reliable data on the status of women and girls. This report analyzes how the state's female residents fare on indicators in three topical areas that profoundly shape their lives: employment, education, and earnings; economic security and poverty; and health and well-being. (Basic demographic data are also provided.) The analysis of these indicators provides information that can be used to assess women's and girls' progress in achieving rights and opportunities, identify persistent barriers to gender and racial equality, propose promising solutions for overcoming these barriers, and consider how women's and girls' status in West Virginia compares with their status in the nation as a whole.

The report also seeks to compare how women and girls in West Virginia fare relative to their counterparts in other states across the nation by providing state-by-state rankings for selected indicators, including labor force participation, median earnings and the gender wage gap, poverty, educational attainment, access to health insurance, the percent of employed women in managerial or professional occupations, and women's business ownership. These rankings help to highlight areas where women and girls have made progress and places where progress appears to have slowed or stalled. In all states across the nation, women continue to face barriers to social and economic advancement. This report seeks to foster deeper understanding of these challenges and suggest policy changes that would help to address them.

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The Status of Women and Girls in West Virginia: From 2002 to 2013

This report updates a 2002 report by the Institute for Women's Policy Research (IWPR), *The Status of Women in West Virginia*. The updated report (IWPR 2013) highlights the areas of progress, and lack of progress, for women in West Virginia by analyzing key indicators on employment and education, economic security, and health that were included in the 2002 report (IWPR 2002). In many ways, the news in 2013 is not good: West Virginia ranks at or near the bottom compared with other states in the nation for most indicators on women's status—a pattern that also held true in 2002. On a few indicators—such as the percent of women who hold a bachelor's degree or higher and the percent of employed women who work in managerial or professional occupations—the state has made progress but still lags behind most of the rest of the nation. These findings point to the need for changes to public policies and increased community investments designed to create a better future for women and girls in West Virginia.

Analysis of Regional Diversity

This study also moves beyond the 2002 Status of Women report by examining the circumstances of women and girls across five geographic areas within the state. (For a map representing these five areas, see Appendix III.) This focus on sub-state data reveals substantial differences in the status of West Virginia's female population in different regions across the state. For example, labor force participation rates for women range from 41 percent in the Southern region to 60 percent in the Eastern Panhandle; median annual earnings for women who work full-time and year-round also vary considerably, with women in the Southern region earning just \$25,320 compared with \$30,492 for those in the Eastern Panhandle. Given southern West Virginia's very low labor force participation rate for women and low earnings, it is not surprising that this region has the highest poverty rate for women aged 18 and older (21 percent), while the Eastern Panhandle has the lowest (13 percent). Only 13 percent of women in the Southern region have a bachelor's degree or higher, compared with 23 percent in the Eastern Panhandle. These differences point to the more limited economic opportunities for women in certain parts of West Virginia, as well as to specific challenges that many women in the state encounter. The challenges that women in West Virginia face, along with the racial and ethnic disparities that persist in the state, point to the need to consider the multiplicity of women's experiences when proposing policy and programmatic changes.

The five regions analyzed in IWPR 2013 together comprise the entire state of West Virginia. These regions are:

- The Northern Panhandle, including the counties of Brooke, Hancock, Marshall, Monongalia, Ohio, Preston, and Wetzel;
- North Central West Virginia, including the counties of Barbour, Braxton, Calhoun, Doddridge, Gilmer, Harrison, Jackson, Lewis, Marion, Pleasants, Randolph, Ritchie, Roane, Taylor, Tucker, Tyler, Upshur, Wirt, and Wood;
- The Eastern Panhandle, including the counties of Berkeley, Grant, Hampshire, Hardy, Jefferson, Mineral, Morgan, and Pendleton;

- South Central West Virginia, including the counties of Boone, Cabell, Clay, Fayette, Greenbrier, Kanawha, Mason, Nicholas, Pocahontas, Putnam, and Webster; and
- Southern West Virginia, including the counties of Lincoln, Logan, McDowell, Mercer, Mingo, Monroe, Raleigh, Summers, Wayne, and Wyoming.

In assessing the status of women and girls in West Virginia's many communities, the report aims to provide critical data that can help to build economic security and overall wellbeing among the state's women and families. In the past, data from IWPR's status of women in the states reports have been used to achieve multiple goals, including educating the public on issues related to women's well-being, informing policies and programs, making the case for establishing commissions for women, helping donors and foundations establish investment priorities, and inspiring community efforts to strengthen economic growth by improving women's status. Data on the status of women and girls give citizens the information they need to address the key issues that women and girls encounter and to allow their interests and concerns to fully inform policymaking, service provision, advocacy, and program initiatives. This report aims to provide information that can be used to help ensure that these goals become a reality.

Key Findings

- Women's work matters: women make up close to half of West Virginia's workforce (47 percent), and in three out of ten households with children and work-related earnings, women are the main or equal breadwinners.
- Although women's work is vital to many families' economic security, only 50 percent of women in West Virginia are in the workforce, which is the lowest labor force participation rate for women in the nation.
- The low labor force participation rates for women in West Virginia may stem partly from the state's high disability rates. In West Virginia, 15.2 percent of women have a disability or health condition that limits or prevents work, compared with 10.2 percent of women in the United States as a whole.
- In 2011, the unemployment rate for women in West Virginia was 6.9 percent compared with 8.5 percent nationally. African Americans in the state were disproportionately affected by unemployment: the unemployment rate for African American women in West Virginia was 3.5 times as high as the rate for white women in the state (22.4 percent compared with 6.4 percent).
- Women in West Virginia face the largest gender wage gap in the nation. Median annual earnings for women who work full-time, year-round are only 69 percent of men's earnings, which is ten percentage points lower than the gender earnings ratio for the United States overall.
- Between 1990 and 2010, the share of women in West Virginia who did not finish high school fell from 34 percent to 16 percent, and the share of women with at least a bachelor's degree increased from 11 percent to 18 percent. Nonetheless, West Virginia has the smallest proportion of women with a bachelor's degree or higher among all states in the nation and the District of Columbia.

Introduction

Women make up almost half of the labor force in West Virginia and work in all sectors of the economy, and their earnings make an important contribution to the economic security and well-being of many families in the state. Yet, compared with women in the nation as a whole, women in West Virginia do not fare well on numerous economic indicators. They are less likely to be in the workforce, face a larger gender wage gap, and are less likely to have gone to college or to work in professional and managerial occupations than women elsewhere in the nation. These facets of working life in West Virginia have changed little in recent decades.

Women in the Labor Force

Women in West Virginia are less likely to be in the labor force than women in any other state in the nation. In 2010, one in two women in West Virginia was in the workforce—ei-ther working or actively looking for work—compared with 59 percent of women in the United States as a whole (Figure 1.1). While West Virginia men are more likely to be in the workforce than their female counterparts, men in the state also have a lower labor force participation rate than men in the nation overall. Both women's and men's labor force participation rates in West Virginia are about ten percentage points lower than the rates for their counterparts nationwide (Figure 1.1).

Women in West Virginia have had comparatively low labor force participation rates for many years (Pudup 1990). Between 1980 and 2000, women's labor force participation in the state increased from 37 percent to 51 percent; the rate for women in the nation during this time period rose from 50 to 60 percent (U.S. Bureau of the Census 1983; IWPR 2002). In both West Virginia and the nation as a whole, women's labor force participation dropped one percentage point between 2000 and 2010 (IWPR 2002; Figure 1.1).

In West Virginia, women's labor force participation does not vary much across the largest racial and ethnic groups. Fifty percent of white and Hispanic women and 51 percent of African American women are in the workforce.¹

Labor force participation rates in the state vary considerably, however, across its different regions, although in each region—as in the United States as a whole—women are less likely to be active in the workforce than men. Women's and men's labor force participation is lowest in the Southern region (41 percent; Figure 1.1). The Southern, South Central, and North Central regions have the largest gap between women's and men's participation rates at 11 percent each (Figure 1.1).

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¹ IWPR analysis of 2008–2010 American Community Survey microdata from the Integrated Public Use Microdata Series (IPUMS) provided by the Minnesota Population Center at the University of Minnesota (Ruggles et al. 2010).

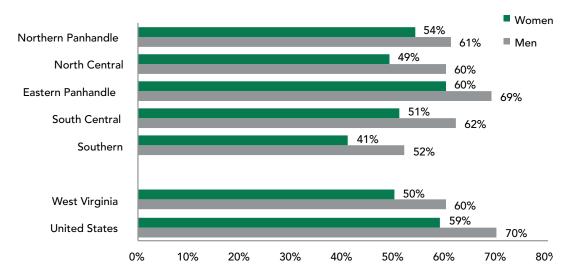


Figure 1.1. Labor Force Participation Rates for Women and Men Aged 16 and Older in West Virginia Regions, West Virginia, and the United States, 2008– 2010

Notes: Data for the state of West Virginia and the United States are for 2010 only. See Appendix III for a map showing the counties included within each region. Source: IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Workforce participation in West Virginia, as elsewhere, varies across the life cycle. Among the age groups shown in Figure 1.2, the highest participation among women occurs for those aged 18–44 years (68 percent), followed by women aged 45–64 (56 percent). Labor force participation rates are also relatively high for women with children; more than six in ten mothers with children under five in West Virginia are in the workforce (62 percent), compared with just 50 percent of all women in the state. For mothers with children under 18, the labor force participation rate is even higher (69 percent). Parenthood, however, has a stronger effect on the labor force participation of fathers in West Virginia; fathers with children under age five have the highest rate of labor force participation (90 percent), followed by those with children under 18 (88 percent). Parents with children under five have the largest gender gap in workforce participation, suggesting that women are more likely than men to reduce their time at work when they have children.

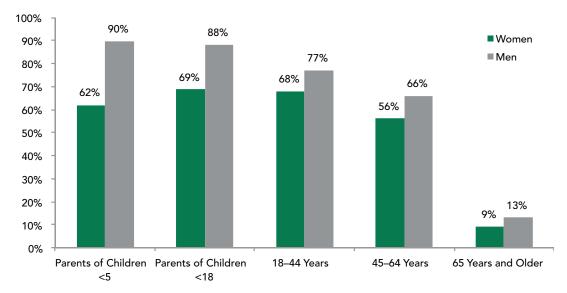


Figure 1.2. Labor Force Participation Rates by Parenthood Status, Gender, and Age, West Virginia, 2010

Note: Rates for parents are for women and men aged 16 and older. Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

While women's labor force participation rate declines as women grow older, nearly one in ten women aged 65 and older in West Virginia (nine percent) are active in the workforce (Figure 1.2). The share of older women in the state's labor force has increased in recent years, from 6.5 percent in 1999 (IWPR 2002). In the nation as a whole, 12 percent of women aged 65 and older are in the labor force.²

In West Virginia, several factors probably contribute to the low labor force participation rates for women. To some degree, these relatively low rates may be due to a lack of economic opportunity; people may have stopped actively searching for work not only because they do not want to or cannot work, but also because they have given up hope of finding a job. In addition, official labor force participation measures do not fully capture work performed in the informal economy, which for many women involves activities such as home-based work, informal subsistence agriculture to supplement family resources, or working "off the books" as child care providers or housecleaners (Oberhauser 1995).

Low labor force participation rates probably also reflect West Virginia's largely rural population. Lack of affordable child care or transportation constrains many women's labor force participation, but these challenges are often worse for women in rural areas where the problems go beyond the affordability of such services to an absolute lack of these resources. As Henderson and Tickamyer (2008) suggest, rural labor markets are also much less likely to offer employment opportunities for older women, particularly those with comparatively low educational credentials who spent much of their working life as homemakers. Whereas in urban areas past experience working in the retail sector or in clerical jobs, even if inter-

² IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

mittent, might help women seeking employment, in rural labor markets with fewer jobs overall, older women may find few opportunities because of age discrimination (Henderson and Tickamyer 2008).

These factors, however, do not fully explain why women's labor force participation rates in West Virginia have stalled after increasing for several decades. The lack of further progress in women's labor force participation, particularly among working mothers, began in the late 1990s, before the 2001 recession and well before the Great Recession of 2007 to 2009 (Cohany and Sok 2007). Some observers suggest that women's labor force participation has reached a plateau (e.g., Williams 2007): without significant investments in child care, school hours aligned with the working day, and better caregiving supports for the elderly and adults in need of care, families simply may be unable to put more hours into the labor market.

Labor Force Participation and Disability

High disability rates among West Virginia's workers may also contribute to the lower labor force participation rates of women and men in the state. In general, states with relatively high disability rates also have relatively low labor force participation rates (Boettner, Wilson, and Cormier 2008).

IWPR analysis of data from the 2009–2011 Current Population Survey Annual Social and Economic Supplement indicates that in West Virginia, 15.2 percent of women and 17.0 percent of men aged 15 and older in the state experience a disability or health problem that limits or prevents work, compared with about one in ten women (10.2 percent) and men (9.5 percent) in the nation as a whole (Table 1.1).

Table 1.1. Disability or Health Problems That Limit or Prevent Work byGender, West Virginia and the United States, 2009–2011

	West Virginia	United States
Women	15.2%	10.2%
Men	17.0%	9.5%
Overall	16.1%	9.9%

Note: For women and men aged 15 and older. Includes only those who experienced a disability or health problem that limits or prevents work at the time of the survey.

Source: IWPR analysis of microdata from the 2009–2011 Current Population Survey Annual Social and Economic Supplement (King et al. 2010).

Part-Time Work

Women and men in West Virginia not only have quite different labor force participation rates, but also tend to work different numbers of hours. The majority of employed women in the state work full-time (at least 35 hours per week), but a much higher proportion of women than men work part-time (Table 1.2). In West Virginia, nearly three in ten women (28 percent) who are employed work part-time, which is more than double the share of employed men with part-time jobs (13 percent; Table 1.2). In the United States, the same pattern emerges: 29 percent of employed women and 16 percent of employed men work part-time (Table 1.2).

Table 1.2. Percent of Part-Time and Full-Time Workers by Gender in West Virginia and the United States, 2010

	West Virginia		United States	
	Part-Time	Full-Time	Part-Time	Full-Time
Women	28%	72%	29%	71%
Men	13%	87%	16%	84%

Notes: For employed women and men aged 16 and older. Part-time work is defined as fewer than 35 hours per week.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

The majority of women who work part-time do so voluntarily, but a substantial number do not. In 2010, 9,000 women (12.5 percent of women usually working part-time) and 6,000 men (17.0 percent of men usually working part-time) in West Virginia did so because of slack work or business conditions; an additional 3,000 women and 4,000 men in the state reported working part-time in the week of the survey but said they normally worked full-time. Approximately 5,000 women and 3,000 men in West Virginia said they worked part-time because that was the only job they could find.³ Another 4,000 women said they worked part-time because of child care problems (there are too few men in that category in West Virginia to provide an estimate), and 18,000 women said they worked part-time for "other personal or family obligations," compared with 1,000 men.⁴

Many married couples with children decide that the lower earner should cut back at work or not work altogether for a while. Given women's lower average earnings than men's (see Figure 1.5 below), it is more often mothers than fathers who make this change. While the decision to reduce hours of paid work or withdraw from the labor force may make shortterm economic sense within the family, it can threaten women's longer-term economic security. Withdrawing from the labor force or cutting back on hours of paid work damages women's earnings potential and quite likely reduces the amount of their Social Security and pension benefits in retirement.

³ IWPR calculations using published Current Population Survey (CPS) data from the U.S. Department of Labor (2011), Table 23. Other reasons for voluntary part-time work, such as education and training or partial retirement, do not differ much between women and men.

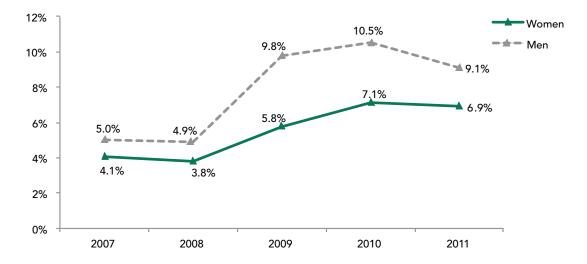
⁴ IWPR calculations using published CPS data from the U.S. Department of Labor (2011), Table 23.

In addition to having lower earnings (and hence lower contributions to Social Security), part-time workers are also much less likely than full-time workers to have access to work-place benefits such as paid vacations, paid sick leave, and health insurance or employer-supported pension schemes (Society for Human Resource Management 2011). They are also less likely to qualify for unemployment insurance. Such a disadvantageous treatment of part-time workers is illegal in almost all other high-income countries, including in all European Union member states where part-time workers have been entitled to pro-rata benefits for more than a decade (Hegewisch and Gornick 2008).

Unemployment

The rate of unemployment in West Virginia increased sharply between the beginning of the Great Recession in 2007 and 2010. Although unemployment was higher for men than women throughout this period, the trajectory of change for men and women has been rather different. Men's unemployment rate doubled between 2008 and 2009, reached a peak in 2010, and then decreased more than one percentage point in 2011. Women's unemployment rate rose more gradually between 2008 and 2009, also peaked in 2010, and then in 2011 decreased by 0.2 percentage points (Figure 1.3).

In 2011, unemployment in West Virginia was lower than in the United States overall. The unemployment rate for women was 8.5 percent nationally compared with 6.9 percent in West Virginia, and 9.4 percent in the nation compared with 9.1 percent in the state for men (Figure 1.3 and U.S. Department of Labor 2012a). The lower unemployment rate in the state compared with the nation as a whole is probably at least partly due to West Virginia's lower labor force participation and higher disability rates. Yet, the gender differences in change of unemployment over time, with women's unemployment rates rising and falling later, are also found nationally (Hartmann, Fischer, and Logan 2012).





Source: IWPR compilation of data from the U.S. Department of Labor (2012a).

Note: For individuals aged 16 and older.

The rate of unemployment differs substantially for different groups within West Virginia's population (Figure 1.4). Most affected by unemployment were the youngest workers (aged 16–19), who had estimated rates of 28.4 percent in West Virginia and 25.9 percent in the United States in 2011.⁵ Young women and men in this age group face the dual disadvantages of having limited or no prior work experience and a lack of higher educational credentials, and thus are particularly hard hit by the slack labor market.

African Americans of all ages are also disproportionately affected by unemployment.⁶ In 2011, the unemployment rate for African American women in West Virginia was 3.5 times as high as the rate for white women in the state (22.4 percent compared with 6.4 percent; Figure 1.4). For African American men, the rate was more than double that of white men in the state (20.9 percent compared with 8.5 percent; Figure 1.4). Between 2007 and 2011, unemployment rose more dramatically for African Americans than whites in West Virginia; in 2007, the rate for African Americans was 6.1 percent—not much higher than total unemployment in the state—and too few African American women and men were unemployed to provide separate estimates (U.S. Department of Labor n.d.). By 2009, unemployment had increased so much that it was possible to give estimates for both African American women and men; the unemployment of African American women was estimated to have reached 7.0 percent and more than doubled to 15.0 percent in 2010. It increased further in 2011 (U.S. Department of Labor n.d.).

Female household heads, the large majority of whom are single mothers, are also much more likely to be affected by unemployment than other household heads. The rate of unemployment for women in this group is more than double the rate for married women and men (Figure 1.4).

⁵ The U.S. Department of Labor (n.d.) publishes rates separately for young women and men in the state (22.7 and 34.0 percent, respectively), but these estimates are based on small sample sizes, with large variance, and hence are not included in the figures provided in the text.

⁶ Estimates for Hispanics and Asian Americans are not available because of small sample sizes.

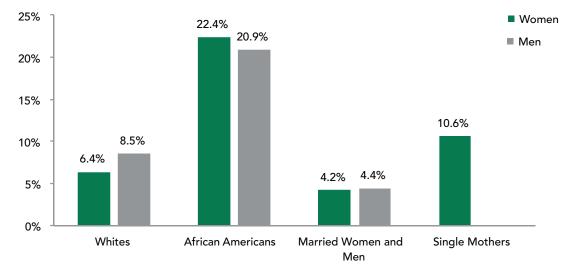


Figure 1.4. Unemployment Rates by Marital Status and Gender and Among Largest Racial Groups, West Virginia, 2011

Notes: For individuals aged 16 and older.

Racial categories are not defined as exclusive. Hispanics may be included in the data for whites and African Americans, since those whose ethnicity is identified as Hispanic may be of any race. Sample sizes are insufficient to provide rates for other racial and ethnic groups and for single fathers. Single mothers are "women who maintain families."

Source: IWPR compilation of data from the Current Population Survey (CPS) based on U.S. Department of Labor (n.d.).

Unemployment rates also vary across West Virginia's different regions. The Southern region has the lowest rates for both men and women.⁷ As discussed above, this region also has the lowest labor force participation rate in West Virginia, suggesting that many people in this area may have either withdrawn from active participation in the labor market or left the region to move other places with greater perceived opportunities for employment.

Earnings and the Gender Wage Ratio

On average, women in West Virginia earn much less than men: women's median annual earnings⁸ in the state are \$29,000, compared with \$42,000 for men. Women's median annual earnings in West Virginia are also less than women's and men's median annual earn-

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⁷ IWPR analysis of 2008–2010 IPUMS American Community Survey microdata (Ruggles et al. 2010). Unemployment estimates based on the American Community Survey (ACS) are not directly comparable to the official unemployment estimates published by the U.S. Department of Labor that are cited elsewhere in this section. Official U.S. unemployment figures published by the U.S. Department of Labor are based on the Current Population Survey (CPS) and the Local Area Unemployment Survey (LAUS), which have insufficient sample sizes to provide estimates of unemployment for women and men separately at the sub-state regional level. IWPR's regional comparisons draw, therefore, on the ACS. Since ACS definitions of unemployment are not directly comparable to CPS and LAUS definitions, this report will not provide the ACS-based rates of unemployment for the regions but will only use the ACS to describe relative differences among these areas.

⁸ The U.S. Census defines median earnings as "the amount which divides the income distribution into two equal groups, half having incomes above the median, half having incomes below the median" (U.S. Department of Commerce 2012a).

ings in the United States overall (\$36,000 and \$45,500, respectively; Figure 1.5).⁹ These data include only full-time, year-round workers. If the earnings of part-time workers or workers employed for fewer than 50 weeks a year were included, the differences in women's and men's earnings would be even larger, since women are more likely to reduce their time in the workforce for family caregiving reasons.

The median earnings of women in each region of West Virginia are lower than median earnings of women in the United States overall, and in each region women have lower earnings than men. Nonetheless, earnings vary considerably among West Virginia's different regions (Figure 1.5). Women in the Eastern Panhandle have the highest earnings at \$30,492; women in the Southern region have the lowest earnings at \$25,320.

Northern Panhandle North Central South Central 5 0 60 Miles Southern

Map 1. Median Annual Earnings of Women Employed Full-Time/Year-Round, West Virginia Regions, 2008–2010

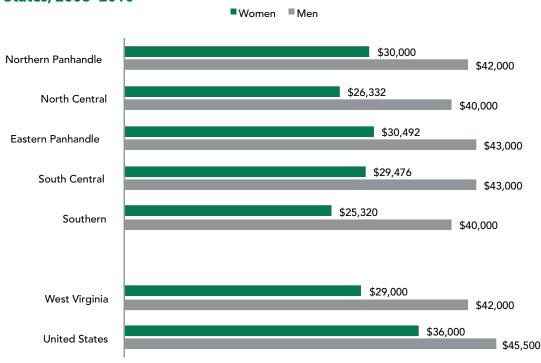
Source: IWPR analysis of 2008–2010 IPUMS American Community survey microdata (Ruggles et al. 2010); map provided by the West Virginia Geographic Information Science Technical Center.

⁹ These estimates are based on the 2010 IPUMS ACS and differ slightly from officially published ACS estimates of median annual earnings for full-time workers that can be accessed through American Fact Finder. In 2010, the officially published median annual earnings for women in West Virginia who work full-time, year-round was \$29,651, compared with \$42,126 for men. These earnings result in a wage ratio of 70.4 percent for the state. Officially published ACS estimates for the nation show a wage ratio of 78.6 percent for 2010 (based on an estimate of median annual earnings of \$36,551 for women and \$46,500 for men in the nation as a whole; U.S. Department of Commerce 2012b).

Not only do women in West Virginia have lower earnings than women in the United States as a whole, they also face a higher gender wage gap than women in all other states except Louisiana and Wyoming (Appendix II). In 2010, the gender wage ratio (all women's earnings as a percent of all men's earnings) in West Virginia was 69 percent: for every dollar earned by men in West Virginia, women earned only 69 cents. In the United States as a whole, the gender earnings ratio was 79 percent, resulting in a wage gap of 21 percent for the nation compared with 31 percent for the state.10

In West Virginia, the gender wage gap has not improved over the last decade. During the 1980s and 1990s, it narrowed significantly, but in recent years the gender wage gap in the state has actually increased slightly. According to IWPR analysis of Decennial Census data, the gender earnings ratio in West Virginia was 50.6 percent in 1979, 58.9 percent in 1989, 70.0 percent in 1999, and 69.0 percent in 2010 (IWPR 1996; IWPR 2002). In 1999, the earnings ratio in West Virginia was almost at the same level as in the United States (72.7 percent); since then, however, the difference between West Virginia's and the United States' earnings ratios has widened, reaching 10 percentage points in 2010 (Figure 1.6).

Figure 1.5. Median Annual Earnings of Women and Men Employed Full-Time/Year-Round in West Virginia Regions, West Virginia, and the United States, 2008–2010

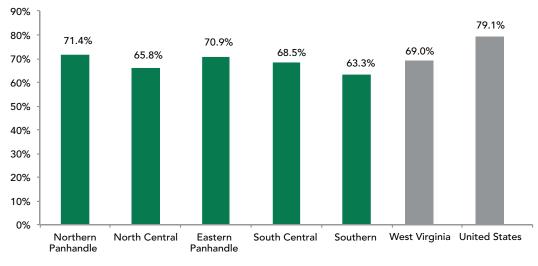


Not only do women in West Virginia have lower earnings than women in the United States as a whole, they also face a higher gender wage gap than women in all other states except Louisiana and Wyoming. In 2010, the gender wage ratio in West Virginia was 69 percent: for every dollar earned by men in West Virginia, women earned only 69 cents.

Notes: For women and men aged 16 and older who worked full-time, year-round. Full-time is defined as 35 or more hours of work per week, and year-round is defined as 50 or more weeks of work per year. Data for the state of West Virginia and the United States are for 2010 only. See Appendix III for a map showing the counties included within each region. Source: IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

¹⁰ Because these data are based on the 2010 file of the American Community Survey, they are not strictly comparable to IWPR's standard calculation of the gender wage gap, which is based on the Current Population Survey (CPS). In 2010, the national earnings gap based on the CPS was 22.6 percent (Hegewisch and Williams 2011).

Figure 1.6. Gender Earnings Ratio for Women and Men Employed Full-Time/Year-Round in West Virginia Regions, West Virginia, and the United States, 2010



Notes: Based on median annual earnings for women and men aged 16 and older. Includes those who are self-employed. Full-time is defined as 35 or more hours of work per week, and year-round is defined as 50 or more weeks of work per year.

Data for the state of West Virginia and the United States are for 2010 only.

See Appendix III for a map showing the counties included within each region.

Source: IWPR analysis of 2008–2010 and of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

The gender earnings ratio is lowest (and, correspondingly, the wage gap highest) in the Southern and North Central regions (63.3 percent and 65.8 percent, respectively; Figure 1.6), which also have the lowest median earnings for women overall. The gender earnings ratio is slightly higher—and higher than the earnings ratio for West Virginia overall—in the Northern and Eastern Panhandle regions, which both have median earnings for women that are above the median earnings for women in the state as a whole (Figure 1.5).

Median earnings also vary among women from the largest racial groups. Between 2008 and 2010, white women in the state had higher earnings (\$28,400) than African American women (\$25,410), a pattern that held true in the United States as well. Table 1.3 illustrates the gap in earnings for women and men by race in two ways: by comparing earnings within each racial group, and by comparing the gap between the earnings of women from each racial group with those of white men, the largest group in the labor market. African American women earn 96.5 percent of African American men's median annual earnings, while white women earn only 68.4 percent of white men's earnings. Both African American women and African American men, however, have much lower earnings than white men in the state, which explains why the earnings gap between African American women and men is much smaller than the gap between white women and white men. When earnings for African American American women are compared with white men's, the ratio is only 61.2 percent (Table 1.3).

Table 1.3. Median Annual Earnings of Women and Men Employed Full-Time/Year-Round and Gender Earnings Ratio by Race in West Virginia and the United States, 2008–2010

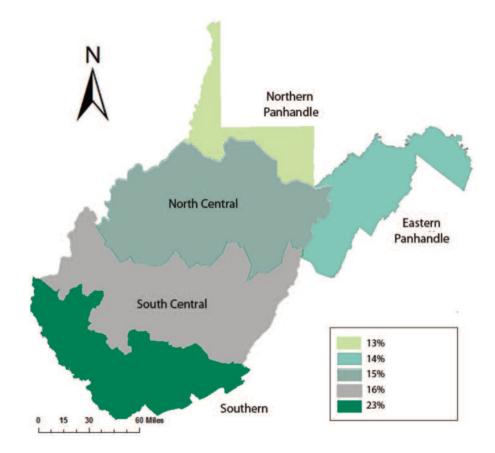
		West V	'irginia		United States			
	Women	Men	Women's Earnings as % of White Men's Earnings	Women's Earnings as % of Earnings of Men from Same Racial Group	Women	Men	Women's Earnings as % of White Men's Earnings	Women's Earnings as % of Earnings of Men from Same Racial Group
White	\$28,400	\$41,524	68.4%	68.4%	\$38,486	\$50,639	76.0%	76.0%
African American	\$25,410	\$26,332	61.2%	96.5%	\$32,000	\$37,000	63.2%	86.5%

Notes: For women and men aged 16 and older. Includes those who are self-employed. Full-time is defined as 35 or more hours of work per week, and year-round is defined as 50 or more weeks of work per year. Racial categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. Sample sizes are insufficient in West Virginia to report estimates for other racial and ethnic groups. Source: IWPR analysis of 2008–2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Education and Earnings

Education is a major factor in allowing individuals to access better paying jobs and careers. Women in West Virginia, however, are much less likely than women in the United States overall to have a four-year college degree or to have any college education. In 2010, West Virginia ranked 51 out of 50 states and the District of Columbia for its share of women with a bachelor's degree or higher (Appendix II). Nationally, 28 percent of women aged 25 and older in 2010 had at least a bachelor's degree, compared with only 18 percent of women in West Virginia (Figure 1.7). More than half of women in West Virginia have only a high school diploma or less, compared with 42 percent nationally (Figure 1.7).

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Map 2. Percent of Women Aged 25 and Older with Less Than a High School Diploma, West Virginia Regions, 2008–2010

Source: IWPR analysis of 2008–2010 IPUMS American Community survey microdata (Ruggles et al. 2010); map provided by the West Virginia Geographic Information Science Technical Center.

The share of women with at least a bachelor's degree has increased in West Virginia during the last two decades, from 11 percent in 1990 (IWPR 2002) to 18 percent in 2010. Even with this increase, however, the state has not caught up with the rest of the nation. The restricted opportunities in West Virginia for well-paid professional jobs for women mean that many well-educated women move out of the state, and that West Virginia has a comparatively low share of young women (O'Leary and Boettner 2012). A study prepared for the West Virginia Higher Education Commission found that just over half of recent graduates from West Virginia institutions of higher education worked in the state (Hammond and Hoffer 2011).

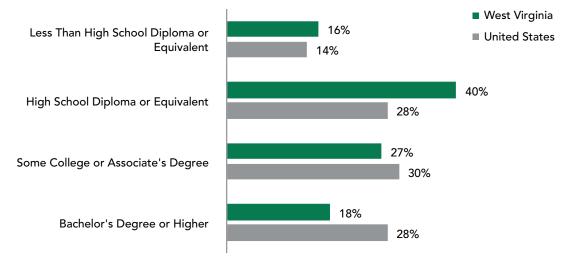


Figure 1.7. Highest Level of Educational Attainment for Women Aged 25 and Older in West Virginia and the United States, 2010

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Education is vital to women's economic security in West Virginia, as it is in other jurisdictions across the nation. Table 1.4 shows median annual earnings for women and men at each level of highest educational attainment. Women's (and men's) earnings increase with each step up the educational ladder; in West Virginia, women with a bachelor's degree or higher earn almost twice as much as women who have only a high school diploma or the equivalent (in 2010, \$42,500 compared with \$24,000).

Table 1.4. Median Annual Earnings for Women and Men Employed Full-Time/Year-Round by Educational Attainment, Aged 25 Years and Older, West Virginia and the United States, 2010

	v	Vest Virgini	а	United States			
Educational Attainment	Women	Men	Earnings Ratio	Women	Men	Earnings Ratio	
Less Than High School Diploma	N/A	\$34,000	N/A	\$20,000	\$27,000	74.1%	
High School Diploma or Equivalent	\$24,000	\$40,000	60.0%	\$28,000	\$38,000	73.7%	
Some College or Associate's Degree	\$29,500	\$45,000	65.6%	\$35,000	\$46,000	76.1%	
Bachelor's Degree or Higher	\$42,500	\$57,000	74.6%	\$53,000	\$75,000	70.7%	
Total ^a	\$29,000	\$42,000	69.0%	\$36,000	\$45,500	79.1%	

Notes: alncludes workers aged 16 years and older.

N/A indicates insufficient sample size.

Full-time is defined as 35 or more hours of work per week, and year-round is defined as 50 or more weeks of work per year.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Health Sciences and Technology Academy

Since 1994, the Health Sciences and Technology Academy (HSTA) has provided yearround academic enrichment and professional mentorship in health sciences to 9th– 12th graders from underserved backgrounds. Thirty-six percent of HSTA students are from a minority racial/ethnic group, 53 percent are low-income, 58 percent are first-generation college students, and 70 percent are female. HSTA is led by local communities in partnership with West Virginia University, Marshall University, West Virginia School of Osteopathic Medicine, West Virginia State University, and Glenville College with funding from the Legislature, National Institutes of Health, and the Benedum Foundation. Students participate in weekly meetings led by HSTA-trained teachers who guide students in research and community-based projects. The objective is to grow the next generation of scientists and health professionals from underserved communities while making health information easily accessible to underserved populations.

To date, HSTA has graduated 1,717 students from high school. The HSTA graduate college-going rate is 96 percent, and 92 percent of HSTA students go on to graduate from college. HSTA students choose science and math careers at a higher rate (49 percent) than the total West Virginia college population (38 percent) and have earnings that are approximately \$26,000 per year more than their highest-earning parent. Ninety-one percent of HSTA students stay in West Virginia to work.¹¹

Women in West Virginia, however, do not benefit as much economically as men from achieving higher levels of education. In West Virginia, the median annual earnings of men who did not finish high school are higher than those of women with some college education or an associate's degree, and the median earnings of men with only a high school diploma are almost as high as those of women with a four-year college degree. At the same time, earnings for men with a bachelor's degree or higher are much lower in West Virginia than in the nation overall; men with this level of education experience a larger wage gap compared with their counterparts nationwide than women, leading to a narrower gender wage gap among college-educated men and women in the state compared with the wage gap among all West Virginians. Nationally, the gender wage gap is largest among those with a bachelor's degree or higher (Table 1.4).

A national analysis of earnings for different college level occupations shows just how much choosing the right occupation can increase earning power. It is not just the decision to get a college degree, but the field in which that degree is obtained (or rather, the occupational field that the college degree leads to) that helps to decide the level of one's earnings. Occupations that are primarily done by women, such as library science and social work, have much lower earnings than occupations done primarily by men, such as those in the Science, Technical, Engineering, and Math (STEM) fields (Carnevale, Smith, and Melton 2011). In 2010, in occupations requiring at least a four-year college education, the estimated hourly earnings of women working in a male-dominated occupation (where four in

In West Virginia, the median annual earnings of men who did not finish hiah school are higher than those of women with some college education or an associate's degree, and the median earnings of men with only a high school diploma are almost as high as those of women with a four-year college degree.

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¹¹ Data are based on HSTA's internal evaluations.

five workers were men) were \$29.00 compared with \$23.30 per hour for those working in an occupation where four in five workers were women. For men, the differences in hourly earnings between working in female-dominated and male-dominated occupations were even greater (although they had higher levels of earnings in each occupation; Hegewisch

Pay Equity for State Employees and the West Virginia Equal Pay Commission

To address the problems of implicit bias and the undervaluation of women's work, the West Virginia legislature passed the Equal Pay for State Employees Act in 1998. The Act had the objective of addressing "wage differentials between equivalent jobs segregated by gender" because such differentials depress "wages and living standards," prevent "the maximum utilization of the available labor resources," and constitute "an unfair method of competition."¹² The law established the Equal Pay Commission to oversee state efforts at systematically addressing wage disparities among state employees (West Virginia Women's Commission and the Women Lawyers Committee of the West Virginia State Bar 2009).

The Commission hired consultants to analyze the bases for earnings and wage differentials between male and female state employees, a process that resulted in base salary increases for women and men working in female-dominated occupations that were valued less than male-dominated occupations requiring similar levels of skills and responsibilities. An evaluation of the impact of the Equal Pay Commission in its first 10 years shows a significant narrowing in the gender earnings ratio for state employees, from 78 percent in 1998 to 89 percent in 2008 (Alkadry 2009). The state is an important employer of women in West Virginia; in 2010, 9.1 percent of all employed women, compared with 6.8 percent of all employed men, were state employees. Nationally, only 5.7 percent of employed women and 3.6 percent of employed men worked for the state.¹³

Unlike most other developed nations, women in the United States, and women in the private sector in West Virginia, do not have a systematic right to challenge the underpayment of skills and tasks that are primarily done by women.¹⁴ Pay equity in the public sector is strengthened by the greater transparency in relation to pay decisions. The skill and educational requirements for a position are typically publicly available, as are the pay rates that come with a position. Women and men in the private sector often find it more difficult to learn how much their colleagues may earn. More than 60 percent of private sector workers in a national survey said they were either contractually prohibited from discussing their pay with their colleagues or were strongly discouraged from doing so (Hegewisch, Williams, and Drago 2011).

¹² See Chapter 21. Labor. Article 5E. Equal Pay for Equal Work for State Employees; §21-5E-1, <http://www.legis.state.wv.us/wvcode/code.cfm?chap=21&art=5E> (accessed January 15, 2013).

¹³ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

¹⁴ The International Labor Organization's *Convention No. 100 Concerning Equal Remuneration for Men and Women Workers for Work of Equal Value*, 1951 (equal value is another term for comparable worth) has been signed by 168 countries worldwide. The United States is the only high-income country not to have signed the convention.

and Liepmann forthcoming). Women with an associate's degree who worked as "Engineering Technicians–except Drafters"–a field where women are 14 percent of full-time workers– had median earnings of \$42,226. Women with an associate's degree who worked in "Agricultural and Food Science Technicians"–a field where more than nine in ten workers are women–had median annual earnings of \$32,163 (Moughari, Gunn-Wright, and Gault 2012).

Many factors contribute to this persistent gender pay gap, including direct discrimination (which entails paying a woman and a man differently for the same work); discrimination in hiring and promotions (which reduces women's access to higher-paying jobs); and lower earnings in jobs that are primarily done by women compared with those primarily done by men, so that a child care worker, for example, earns less than a bus driver (Blau, Ferber, and Winkler 2009; Hegewisch and Liepmann 2013). Such lower earnings in predominantly female jobs reflect an undervaluation of "women's work" and social assumptions about more and less valuable work (England 1992). For example, caring for children or the elderly, which traditionally was unpaid and done in the home, is often regarded as work that requires no special skills-a perception that leads care workers to receive minimal rewards in the formal economy (England, Budig, and Folbre 2002). The undervaluation of work typically done by women also reflects other historical factors, including long-held assumptions that women were not primary earners but were simply supplementing the household income provided by their husbands. Such a "male breadwinner" model has become increasingly far removed from the reality of many families' lives, yet it continues to depress women's earnings (Blau, Ferber, and Winkler 2009).

Gender Differences in Employment by Industry and Occupation

Women and men often work in starkly different sectors, types of firms, and occupations, which has a major impact on earnings. There are two ways of looking at these differences. The first examines the gender distribution across *industry* sectors, which measures everyone who works in a particular sector—for example, in education, regardless of whether they are secretaries, janitors, technicians, or accountants. The second considers the gender distribution across *occupations* by examining the share of women and men in particular jobs and careers, such as those employed as electricians, human resource managers, or sales representatives, in whichever industry they are employed.

A glance at the industry sectors in which women and men work in West Virginia shows major gender differences. Women are more than twice as likely as men in the state to work in the services sector (such as in health care, elder care, finance, or leisure and tourism). Men are more than ten times as likely as women to work in mining or construction and three times as likely to work in transportation, communications, and utilities or in manufacturing (Figure 1.8). A substantial share of both employed women (22.0 percent) and employed men (19.5 percent) in the state work in wholesale and retail trade. In 2009, Wal-Mart was the largest employer in West Virginia (Workforce West Virginia 2009).

Median annual earnings in West Virginia differ across industries, with the industry sectors in which men are more commonly employed having higher earnings. In 2011, median earnings were \$76,576 in natural resources and mining, \$51,729 in manufacturing, and \$47,016 in construction compared with \$37,418 in the professional and business service sec-

tor, \$27,041 in "other services," and only \$15,585 in leisure and hospitality (O'Leary and Boettner 2012). While employment in coal mining has been declining dramatically during the last few decades, it still provides access to good family-sustaining wages for workers without any college education; the same is true for the shale gas sector, which has grown rapidly in recent years and is predicted to have strong job growth in the future (O'Leary and Boettner 2012). Such jobs also typically come with other benefits, such as paid sick leave or retirement plans, and are more likely than other jobs in the state to be covered by a union collective bargaining contract.

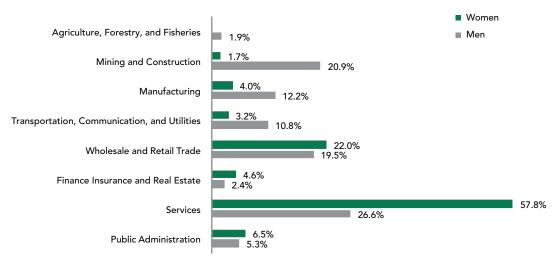


Figure 1.8. Distribution of Employed Women and Men Across Industries in West Virginia, 2010

Notes: For employed women and men aged 16 and older. Includes part-time and full-time workers. "Services" includes health care, education, and social care. Sample sizes are too small to provide estimates for armed services and for the proportion of employed women working in agriculture, forestry, and fisheries.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Among waged and salaried workers, women (60.3 percent) are also less likely than men (70.2 percent) to be employed in the private sector, but more likely than men to be employed in the nonprofit sector (10.7 percent of women compared with 4.9 percent of men) or by the local, state, or federal government (23.0 percent of women compared with 16.1 percent of men). Women in West Virginia are less likely than men to be self-employed (5.4 percent compared with 8.4 percent).¹⁵

Strong gender differences also exist in the occupations and careers in which men and women work. The Index of Occupational Gender Segregation measures the number of women and men who would need to change their careers so that the share of women and men in each occupation would be the same as the share of women and men in all jobs in the state (a value of 0 means complete integration, and a value of 1 means complete segre-

¹⁵ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

gation). In 2009, West Virginia ranked 50th of 50 states and the District of Columbia for its gender segregation in occupations (Hegewisch et al. 2011). The only state with a worse value than West Virginia was Wyoming, which has the highest gender wage gap in the nation. The District of Columbia, which has the lowest value for the Index/the greatest integration of occupations, was also the jurisdiction with the lowest gender wage gap.

In West Virginia, women are most commonly employed in professional and related occupations (26.6 percent), followed by service occupations (24.1 percent) and office and administrative support occupations (22.7 percent). For men, the most common broad occupational group is natural resources, construction, and maintenance occupations (23.8 percent), followed by production, transportation, and material moving occupations (21.2 percent) and service occupations (14.6 percent; Figure 1.9).

Women have made major in-roads in professional and managerial jobs; these two occupational groups accounted for more than one-third of all jobs held by employed women (36.3 percent) in 2008–2010, compared with just over one-quarter of all jobs held by employed women in 1994 (25.9 percent; Appendix II and IWPR 1996). Women, however, still have not achieved parity as workers in managerial and higher-level occupations in business and finance; in 2010, they were 42 percent of all workers employed in those jobs in the state and 44 percent nationally.¹⁶

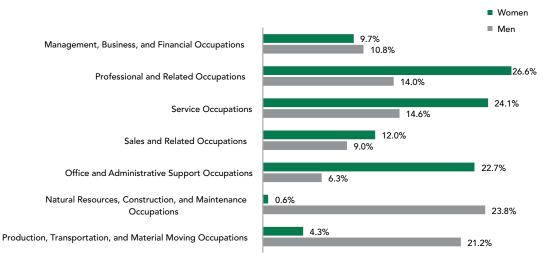


Figure 1.9. Distribution of Employed Women and Men Across Broad Occupational Groups in West Virginia, 2008–2010

Notes: For women and men aged 16 and older. Sample sizes are too small to provide estimates for armed services. Service occupations include support occupations in health care, education, personal care, and cleaning and janitorial occupations.

Source: IWPR analysis of 2008–2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

¹⁶ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Only a small number of women in West Virginia–less than one percent of all employed women–work in natural resources, construction, and maintenance occupations. These occupations are filled by workers employed as electricians, carpenters, or heating and air conditioning technicians, for example–all jobs that offer the potential for good earnings without the need for four-year college degrees. For many individuals, apprenticeship programs provide an affordable pathway to skills and qualifications that lead to such jobs by offering an opportunity to become qualified while working–and earning–in the field.

West Virginia Women Work

West Virginia Women Work (WV Women Work) is a nonprofit organization that was set up in 2000 as a bridge for women into non-traditional careers, particularly skilled trades occupations in highway or building construction. It offers introductory programs of eight- to twelve-week durations that provide basic skills and orientation for women interested in trying a career in construction.¹⁷ WV Women Work has training centers in three areas in the state and has provided training to more than 800 women during the last decade; the majority of program participants are women in their thirties and forties—many with children—who are looking for better earning opportunities.¹⁸ The organization's staff work with employers in the construction industry to ensure that the programs' graduates have relevant entry-level gualifications, such as Occupational Safety and Health Administration (OSHA) certification, and that graduates have high placement rates into jobs with higher earnings than more typical jobs for women in retail or catering provide. In Morgantown, WV Women Work has set up its own company, Eight Penny Construction, which is licensed as a residential construction company and provides employment and training opportunities for some of the graduates from the WV Women Work introductory program.

Women-Owned Businesses

Owning a business can bring women increased control over their working lives and create important financial and social opportunities for them as well as for others whom they employ. Nationally, 29 percent of businesses are women-owned; the large majority of these businesses are owner-operated and have no other employees (88 percent), which is also true for men-owned businesses, although the share of men-owned firms with no other employees is lower (77 percent; U.S. Department of Commerce 2010).

Between 1997 and 2007, both the number and proportion of women-owned businesses in West Virginia increased. In 1997, women owned 30,231 businesses in the state (27 percent of all businesses) compared with 33,785 businesses in 2007 (28 percent of all businesses). In the United States during this same time period, the proportion of women-owned businesses increased somewhat more substantially, from 5,417,034 businesses or 26 percent in 1997 to 7,792,115 businesses or 29 percent in 2007 (IWPR 2002 and U.S. Department of

¹⁷ See West Virginia Women Work at http://wvwomenwork.org/about> (accessed December 15, 2012).

¹⁸ Interview with Janis Gunel, project director of WV Women Work, September 2012.

Commerce 2012c).¹⁹ As of 2007, West Virginia ranked 22nd in the nation for its proportion of businesses owned by women (Appendix II), which is a lower ranking than the state held in 1997, when it was 12th in the nation (IWPR 2002).

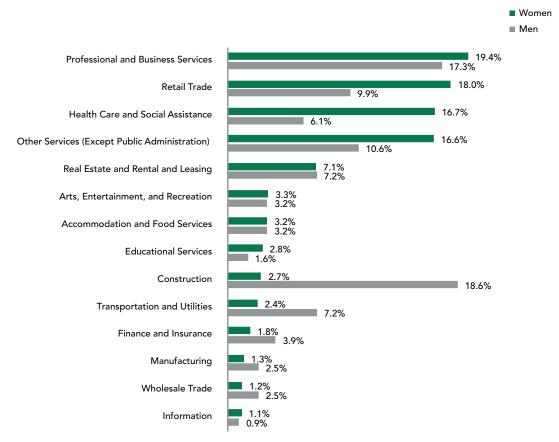
While West Virginia's growth in the number of women-owned firms is relatively modest compared with the overall growth in these firms in the nation, the state's revenue growth from women-owned businesses has been quite substantial in recent years. According to one study that estimates growth in the number and economic clout of women-owned firms from 1997 to 2012, West Virginia has experienced faster-than-average growth in the revenues that these firms are contributing to the economy. During this time period, the state's revenues from women-owned businesses grew by 85.3 percent, resulting in a ranking of 11th on this indicator for West Virginia among all 50 states and the District of Columbia. While the state's growth in revenues during this period was faster than the national average, its growth in the numbers of women-owned firms between 1997 and 2012 was 22 percent, placing the state ahead of only Alaska (11 percent) and Iowa (21 percent; American Express Open 2012).

West Virginia's distribution of women's and men's business ownership across different sectors of industry mirrors the broader occupational differences between women and men discussed above. The majority of the state's women-owned businesses are in the service sector. Close to one-fifth of these firms (19.4) offer "professional and business services," compared with 18.0 percent in the retail sector, 16.7 percent in health care and social assistance, and 16.6 percent in "other services" (Figure 1.10). Women in West Virginia are much less likely than men to own businesses in construction (2.7 percent compared with 18.6 percent), transportation (2.4 percent compared with 7.2 percent), finance and insurance (1.8 percent compared with 3.9 percent), manufacturing (1.3 percent compared with 2.5 percent), and wholesale trades (1.2 percent compared with 2.5 percent; Figure 1.10). The sectors in which women-owned businesses are underrepresented nationally are the sectors with higher annual revenues and more employees (U.S. Department of Commerce 2010).

Between 1997 and 2012, West Virginia experienced faster-thanaverage growth in the revenues that womenowned businesses are contributing to the economy. During this time period, the state's revenues from these businesses grew by 85.3 percent.

¹⁹ The Survey of Business Owners (SBO) includes nonfarm businesses filing Internal Revenue Service tax forms as individual proprietorships, partnerships, or any type of corporation, and with receipts of \$1,000 or more. The SBO covers both firms with paid employees and firms with no paid employees.

Figure 1.10. Distribution of Women-Owned and Men-Owned Firms Across Industries in West Virginia, 2007



Notes: Industries representing less than one percent of all women-owned businesses are not shown. A women- owned business is one where a woman owns at least 51 percent of the interests or stock of the business (U.S. Department of Commerce 2010).

"Other services" include those that do not fall into the other business categories used in the Survey of Business Owners. Examples include personal care services, dry cleaning and laundry services, equipment repair, death care services, pet care services, temporary parking services, and grantmaking and advocacy. Source: IWPR compilation of data from the 2007 U.S. Survey of Business Owners (U.S. Department of Commerce 2012c).

Recommendations for Employment and Earnings

Women in West Virginia have made progress during the last two decades, but their status continues to lag behind women's in the United States overall in terms of labor force participation, education, and earnings. While men in West Virginia also do not fare as well as their counterparts nationwide on these indicators, women in the state have much lower earnings than men and face one of the worst gender wage gaps in the nation, even though they have higher educational credentials than their male counterparts. While West Virginia women's underrepresentation in higher-paying sectors and occupations contributes to this disparity, the lack of opportunities for higher-paying professional jobs overall in the state, particularly for women in its more rural areas, also plays an important role. Recommendations to promote women's further advancement in the workforce include:

- encouraging employers to follow the lead of the state as an employer and remedy gender wage inequities by monitoring hiring, selection, and promotions and by reviewing pay and grading decisions to identify potential gender and race disparities;
- educating policymakers and funders about the important role that work supports play in ensuring that women can participate successfully in their local economies;
- facilitating access to further education by providing child care supports for student parents and explicitly addressing the learning needs of older women;
- encouraging girls and women to pursue careers in higher-paying technical fields and monitoring vocational education and training programs to ensure that there is active outreach and support for girls and women pursuing non-traditional careers;
- offering outreach and support services for women interested in setting up or growing a business; and
- monitoring state-led contracts to ensure that women-owned businesses are receiving a fair share of federal and state contracts.

Key Findings

- In West Virginia, families headed by single women with children have the lowest median annual income of all family types at \$17,119. The income of these families is only 27 percent of the median income of those headed by married couples with children and 60 percent of the income of families headed by single men with children.
- Women in West Virginia are more likely than their male counterparts to live at or below the federal poverty line. Nearly one in five women (18 percent) aged 18 and older in the state is poor, compared with 14 percent of comparable men. Both women and men in West Virginia are more likely than their counterparts nationwide to live in poverty. In the United States as a whole, 15 percent of women and 12 percent of men are poor.
- The poverty rates for women in West Virginia vary substantially by region. The Southern region has the highest poverty rate for women aged 18 and older at 21 percent, and the Eastern Panhandle has the lowest at 13 percent.
- In West Virginia, the poverty rates among women reflect substantial disparities between racial and ethnic groups. More than one in four African American women (27 percent) and Hispanic women (28 percent) aged 18 and older live at or below the federal poverty line, compared with 17 percent of white women in the state.
- In 2008–2010, approximately one in five single women in West Virginia with young children and income at or below 200 percent of the federal poverty line received assistance from West Virginia Works, the state's Temporary Assistance for Needy Families (TANF) program.
- Social Security provides an important economic base for older adults in West Virginia, but older women receive considerably less in benefits from the system than older men. Women aged 65 and older in the state receive an average monthly benefit of \$965, compared with \$1,312 for comparable men.

Introduction

Women's economic security depends on having enough income and financial resources to cover their expenses and save for retirement. Many women find, however, that multiple factors make it difficult for them to make ends meet and save for the future. The gender wage gap, women's prevalence in low-paid occupations, and women's fewer hours of paid employment compared with men's make women more vulnerable to poverty and more likely to face economic insecurity. In addition, due to family caregiving responsibilities, women often take time out of the labor force, which diminishes their lifetime earnings and leaves them with lower incomes and fewer assets in their later years (Rose and Hartmann 2004). Marriage to a man with good earnings can certainly help women achieve economic security, but women generally spend a substantial portion of their adult lives as single women.

Many women in West Virginia encounter barriers to economic security and stability. One in six adults in the state aged 18 and older (16 percent) live in poverty, and women are more likely than men to be poor, despite achieving higher levels of education than men.²⁰ Among women, single women with children are especially likely to experience economic vulnerability, which is often compounded by the high costs of child care and lack of access to social safety nets such as Temporary Assistance for Needy Families (TANF), or West Virginia Works. A close look at the economic status of women in the state and its regions–focusing on women's income, poverty status, and use of public programs–helps to identify women's specific challenges. It also reveals the need to expand and implement new policies and programs that help to ensure the economic well-being of women and families.

Median Family Income

Women's economic security is directly linked to their family income, which includes not only earnings from jobs but also income from other sources, such as investments, retirement funds, government benefits such as Temporary Assistance for Needy Families (TANF), and Social Security. In West Virginia, the median annual income for all families is \$48,927, which is considerably lower than the median annual income for all families in the United States (\$60,609).²¹ Married-couple families, which often benefit from two incomes, have the highest median annual income in both the state and nation (\$64,070 for the state and \$77,443 for the nation; Figure 2.1).²²

In West Virginia, as in the nation as a whole, single women with children and single men with children have incomes that are substantially lower than the incomes of married couples with and without children, suggesting that many single parents in the state face significant economic hardship. Single women with children have the lowest median annual income of all family types at \$17,119, which is less than the median annual income of comparable families nationwide (\$23,184). Single men with children have a somewhat higher median annual income (\$28,344 in West Virginia and \$35,051 in the nation). For all family types in West Virginia, however, the median income is below the median income for comparable family types in the United States overall—a pattern that held true in 1999 as well (Figure 2.1 and IWPR 2002).

In West Virginia, single women with children have the lowest median annual income of all family types at \$17,119, which is less than the median annual income of comparable families nationwide (\$23,184).

²⁰ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

²¹ IWPR compilation of 2010 American Community Survey data accessed through American Fact Finder (U.S.Department of Commerce 2012b).

²² In the American Community Survey, a distinction is made between family and nonfamily households. Family households consist of a household head and one or more persons who are related to the household head by birth, marriage, or adoption and who are living together in the same household. Family households are classified as either married-couple families or families headed by a man or woman without a spouse present. They do not include same-sex married couples even if the marriage was performed in a state issuing marriage certificates for same-sex couples; same-sex couple households are included as family households only if there is at least one additional person related to the householder by birth or adoption. Nonfamily households include individuals who live alone as well as those who live together but are not related through blood, marriage, or adoption.

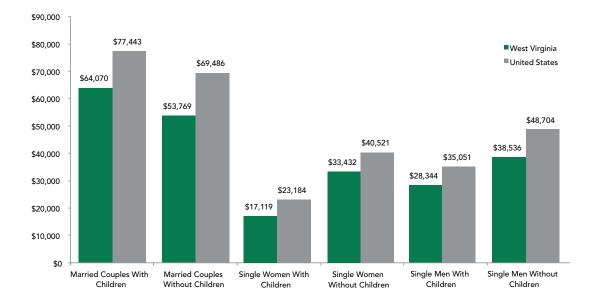


Figure 2.1. Median Family Income by Family Type, West Virginia and the United States, 2010

Notes: "Single women" and "single men" refer to women and men who are single/never married, divorced, widowed, separated, or married with an absent spouse. Families with children are those with children under age 18. Source: IWPR compilation of 2010 American Community Survey data accessed through American Fact

Finder (U.S. Department of Commerce 2012d).

The income of many families headed by single women in West Virginia falls well below the living wage, or amount of money required to support a family in the state. Although the standard for the living wage in West Virginia varies across the state's different geographic areas, the overall standard for West Virginia indicates that a family with one adult and two children needs an annual income of \$43,451 to cover basic living expenses, including food, child care, medical, housing, transportation, and taxes.²³ This standard is more than twice the median annual income for single women with children (Figure 2.1).

The relatively low median incomes of families in West Virginia compared with families in the nation as a whole reflects the state's higher-than-average share of jobs that pay poverty-level wages. One report finds that in 2009, nearly one-third of workers in West Virginia earned wages that were too low to keep a family of four out of poverty. One-fourth of workers in the nation as a whole earned such low wages (Boettner et al. 2010).

²³ IWPR calculation based on the Living Wage Calculator in Glasmeier and Massachusetts Institute of Technology (2012).

Poverty

Women are more likely than men to be poor. While labor force participation and earnings help many women achieve financial security, employment itself is not a fail-safe route to economic security. The gender wage gap and women's concentration in low-paid occupations hinder many women's ability to achieve economic stability for themselves and their families.

In 2010, 18 percent of women and 14 percent of men aged 18 and older in West Virginia were poor (living with incomes at or below 100 percent of the federal poverty threshold). An additional 22 percent of women and 20 percent of men in the state were *near poor* (living with incomes between 100 and 200 percent of the federal poverty line; Figure 2.2).

45% 40% 35% Near Poverty 30% At or Below Povertv 25% 19% 17% 20% 15% 10% 18% 15% 14% 12% 5% 0% Women in the Women in Men in Men in the **United States** West Virginia West Virginia United States

Figure 2.2. Poverty Status by Gender, Aged 18 Years and Older, West Virginia and the United States, 2010

Note: Those who live at or below poverty have family incomes *at or below* 100 percent of the federal poverty line. Those who live *near poverty* have family incomes between 100 and 200 percent of the federal poverty line.

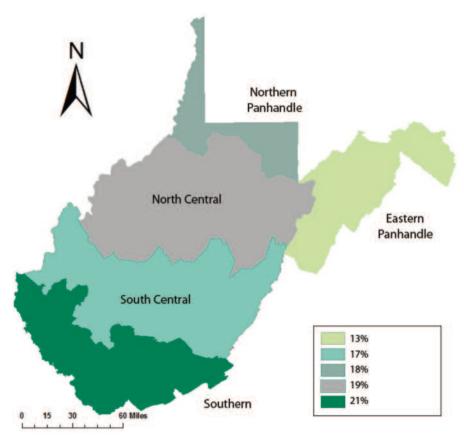
Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

While the overall poverty rates for women in West Virginia are higher than in the United States as a whole, poverty rates vary considerably among women in the state's different regions. Between 2008 and 2010, women in the Eastern Panhandle had the lowest poverty rate at 13 percent, while women in the Southern region had the highest at 21 percent. In each of the state's five regions, women had higher poverty rates than men (Figure 2.3).

and 2010, women in the Eastern Panhandle had the lowest poverty rate at 13 percent, while women in the Southern region had the highest at 21 percent.

Between 2008





Source: IWPR analysis of 2008–2010 IPUMS American Community survey microdata (Ruggles et al. 2010); map provided by the West Virginia Geographic Information Science Technical Center.

Although these data indicate that poverty remains a serious problem for many women in West Virginia, poverty rates alone do not fully capture the extent of the hardship that women face. Established by the federal government in the 1960s, the federal poverty threshold was derived by multiplying the cost of a minimum diet times three; at that time, the typical family spent about one-third of its income on food (National Research Council 1995). Since the 1960s, the poverty threshold has been adjusted for inflation but not for other changes in the basic costs of living. For example, the poverty threshold does not distinguish between the costs incurred by families in which both parents do or do not work outside the home, nor does it take into account differences in living costs in various regions of the country (National Research Council 1995). A family is considered poor if its pre-tax cash income falls below the poverty threshold; in 2011, the poverty line for a single person with two children was \$18,123 (U.S. Department of Commerce 2013)—an amount that is not enough for this type of family to make ends meet. Given that the poverty

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threshold has fallen well behind median incomes, the proportion of women and men in West Virginia who face economic hardship is probably much higher than the proportion living in poverty as calculated based on the federal poverty threshold.²⁴

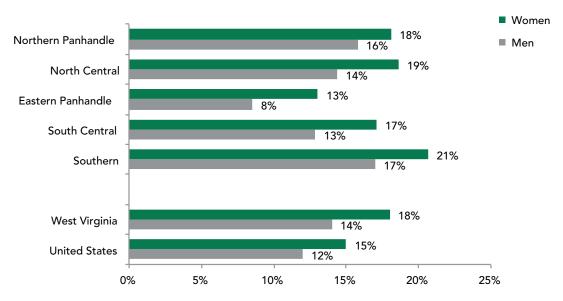


Figure 2.3. Poverty Rates for Women and Men Aged 18 Years and Older in West Virginia Regions, West Virginia, and the United States, 2008–2010

Notes: Includes women and men with family incomes at or below 100 percent of the federal poverty line. Data for the state of West Virginia and the United States are for 2010 only.

See Appendix III for a map showing the counties included in each region.

Source: IWPR analysis of 2008–2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Poverty and Family Type

Poverty rates in West Virginia also vary substantially by family type, as they do around the country. West Virginia families headed by single women and single men with dependent children (under age 18) are much more likely to live below the federal poverty line than other family types. Nearly half of families headed by single women with children (49 percent) and one in three comparable families headed by men (34 percent) in West Virginia are poor. By comparison, only one in ten families headed by married couples with children is poor. Families of all types in West Virginia are more likely to be poor than comparable families nationwide–a pattern that held true in 1999 as well (Figure 2.4 and IWPR 2002).

²⁴ Some cash benefits or cash-like assistance (e.g., the Earned Income Tax Credit and food stamps) are not counted as income when the Census Bureau calculates the official poverty rate; in this sense, the actual poverty rate may be somewhat lower than the official estimates. The new Supplemental Poverty Measure that was recently developed by the Census Bureau does account for the effects of important government benefits, as well as for taxes, work expenses, and medical expenses on households' standards of living (Short 2011). Poverty rates for women and men are higher overall under the Supplemental Poverty Measure than under the official measure, but the difference between men's and women's poverty is smaller with the new measure (IWPR 2012).

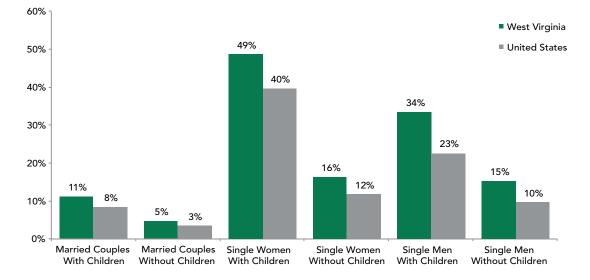


Figure 2.4. Percent of Families with Income Below the Poverty Threshold by Family Type, West Virginia and the United States, 2010

Notes: "Single women" and "single men" refer to women and men who are single/never married, divorced, widowed, separated, or married with an absent spouse.

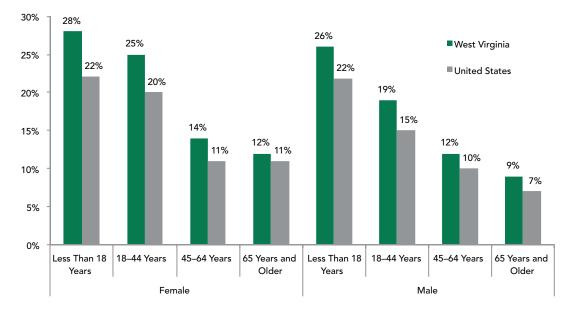
Families with children are those with children under age 18.

Source: IWPR analysis of 2010 American Community Survey data accessed through American Fact Finder (U.S. Department of Commerce 2012e).

Poverty and Age

The poverty rates among West Virginia's female population vary across the life span. Of the age groups shown in Figure 2.5 below, girls under age 18 have the highest poverty rate at 28 percent, followed by women aged 18–44 (25 percent). In every age group, women have a higher poverty rate than men and a higher poverty rate than comparable women in the nation as a whole (Figure 2.5)

Figure 2.5. Poverty Rates by Gender and Age, West Virginia and the United States, 2010



Note: Those living in poverty have family incomes at or below 100 percent of the federal poverty line. Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

While women aged 18–44 have the highest poverty rate among adult women, a substantial proportion of women from the older two age groups also live in poverty. Fourteen percent of women aged 45–64 and twelve percent of women aged 65 and older are poor (Figure 2.5).

The economic vulnerability of older women poses a particular concern in West Virginia in light of the demographics of the state as a whole. Women constitute slightly more than half (52 percent) of adults aged 65–74 in West Virginia and nearly seven in ten adults (68 percent) aged 85 and older (Paulhus and Pore 2012). Between 2012 and 2035, the share of the elder population in West Virginia is expected to grow rapidly, while the number of children and people of working age will decrease substantially–a shift that could make it more difficult to support programs that help older women and men to achieve economic security and stability (Paulhus and Pore 2012).

Older women in West Virginia, and in the nation as a whole, remain economically vulnerable for various reasons, including women's greater longevity than men's and lower lifetime earnings due to the gender wage gap, occupational segregation, and time taken out of the workforce to care for family members. In addition, women are more likely than men to develop chronic health conditions at older ages that require long-term care (Hartmann and English 2009), which significantly increases their living expenses. For older adults in West Virginia, home and community-based long-term care for one individual costs between \$6,014 and \$31,574 per year, depending on the type of care required (Gerontology Institute, University of Massachusetts Boston, and Wider Opportunities for Women 2010).

As the poverty rates for older women indicate, many women aged 65 and older in West Virginia struggle to afford these costs. The full extent of economic hardship for those in this age group (and for others), however, is probably not reflected in the poverty rates. The poverty threshold for elderly people (\$10,788 for an individual aged 65 and older in 2011; U.S. Department of Commerce 2013) on which these estimates are based falls far short of the cost of living for older women in West Virginia. Wider Opportunities for Women (WOW) has developed the Elder Economic Security Standard Index to measure the income required to meet basic needs for persons aged 65 and older in the United States. This index shows that although expenses vary widely across geographic areas within West Virginia and depend, in part, on the circumstances of older adults–including their household size, housing situation, and health status–the 2009 statewide annual average for basic living expenses for older single adults was \$14,832 for a home owner with no mortgage, \$17,460 for a single renter, and \$20,616 for an owner with a mortgage (Gerontology Institute, University of Massachusetts Boston, and Wider Opportunity for Women 2010).²⁵

Given the economic vulnerability of many older women and men in the United States, Social Security provides an important economic base, especially for women, whose longer life expectancy often means that they rely on the system for a longer period of time. In 2010, 154,671 women and 118,148 men in West Virginia aged 65 and older received Social Security benefits. Due to women's lower lifetime earnings, however, the benefits that women received from Social Security were considerably less, on average, than men's benefits. Women aged 65 and older in the state received an average monthly benefit of \$965, compared with \$1,312 for men of the same age range (Figure 2.6).

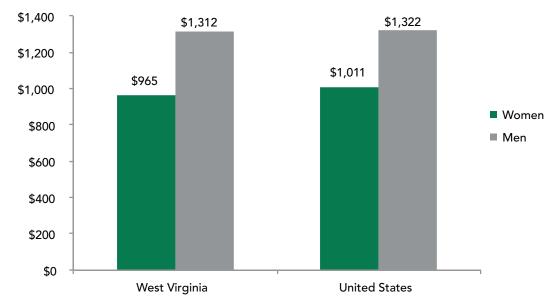


Figure 2.6. Average Monthly Amount of Social Security Benefits by Gender, Aged 65 and Older, West Virginia and the United States, 2010

Source: IWPR calculations based on data from the Social Security Administration (2011).

²⁵ These costs include housing, food, transportation, health care (assuming good health), and miscellaneous expenses.

In addition to receiving lower average benefits from Social Security than men, West Virginia's women are much less likely than men to have retirement income from employerbased pensions and retirement accounts. Less than one-quarter of women aged 65 and older in the state have income from these sources, compared with more than half of men of the same age range (Paulhus and Pore 2012). Women's relatively limited access to these forms of retirement income stems, in part, from their lower labor force participation rates throughout their working years as well as their higher concentration in part-time jobs that often do not come with benefits such as pension plans and employer-based retirement accounts (Paulhus and Pore 2012).

Poverty and Race/Ethnicity

In West Virginia, the poverty rates among women reflect substantial disparities between racial and ethnic groups. African American and Hispanic women are considerably more likely than their white counterparts to face economic hardship. More than one in four African American and Hispanic women aged 18 and older live at or below the federal poverty line, compared with 17 percent of white women in the state (Figure 2.7). Among men in West Virginia, African Americans are more likely to be poor (24 percent) than whites (13 percent; sample size is insufficient to provide an estimate for Hispanic men).

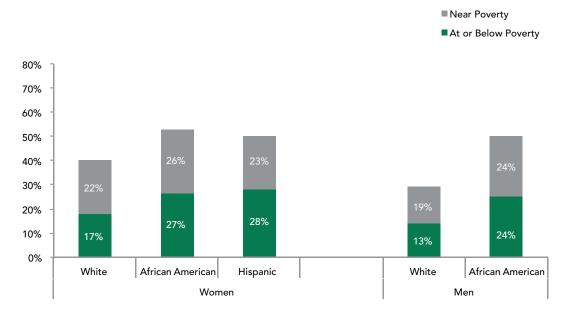


Figure 2.7. Poverty Status by Gender and Race/Ethnicity, Aged 18 and Older, West Virginia, 2008–2010

Notes: Racial and ethnic categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. Those whose ethnicity is identified as Hispanic may be of any race. Sample sizes are insufficient to report estimates for Hispanic men and for Asian American and Native American women and men. Those who live *at or below poverty* have family incomes at or below 100 percent of the federal poverty line. Those who live *near poverty* have family incomes between 100 and 200 percent of the federal poverty line. Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

More than one in four African American women and Hispanic women aged 18 and older live at or below the federal poverty line, compared with 17 percent of white women in the state.

Poverty and Education

A close look at the poverty rates for women and men with varying educational levels indicates that education is crucial to women's (and men's) basic economic security. In West Virginia, women with less than a high school diploma are more than twice as likely as those with a high school diploma or the equivalent and six times as likely as women with a bachelor's degree or higher to live in poverty (Figure 2.8). The same pattern holds true among men: men without a high school diploma are also more than twice as likely to live in poverty as men with a high school diploma and seven times more likely than men with at least a bachelor's degree to be poor (Figure 2.8).

The strong correlation between low levels of education and high rates of poverty is a particular concern in West Virginia, which is the state in the nation with the lowest proportion of women who have completed at least a bachelor's degree (Appendix II). Women with a bachelor's degree or higher outnumber women who do not have educational qualifications beyond high school (119,425, or 18 percent compared with 105,063, or 16 percent),²⁶ but only by a small margin.

While having higher levels of education is critical to the economic security of both women and men, the economic risks of not completing secondary education are far greater for women. Women in West Virginia who do not have a high school diploma are 29 percent more likely than comparable men to be poor (Figure 2.8). In the United States as a whole, the same pattern exists, although the difference in the poverty rates for women and men with the lowest level of education is smaller. In the nation, women without a high school diploma or the equivalent are 18 percent more likely than comparable men to be poor. At every educational level in both the state and nation, women are more likely than men to live at or below the federal poverty line (Figure 2.8). Women in West Virginia who do not have a high school diploma are 29 percent more likely than comparable men to be poor.

²⁶ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

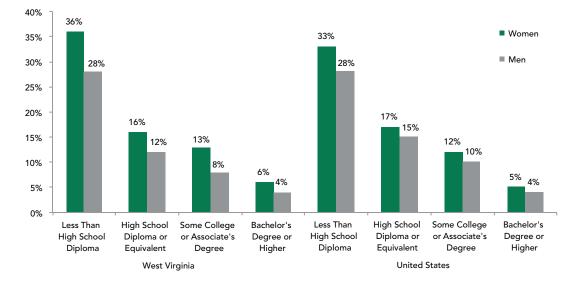


Figure 2.8. Poverty Rates for Women and Men Aged 25 Years and Older by Educational Attainment, West Virginia and the United States, 2010

Note: Those living in poverty have family incomes at or below 100 percent of the federal poverty line. Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

The low earnings and high poverty rates of women with lower levels of education make it especially important to ensure that all women and girls have access to higher education and the support necessary to succeed in achieving their educational goals. Women who are parents, in particular, often encounter distinctive challenges in pursuing their educational goals, including the need for child care and for greater and more specialized student services for those raising children (Miller, Gault, and Thorman 2011).

The Status of Children and Early Care and Education

Early care and education programs provide an important workforce support for mothers and fathers. Affordable, quality child care makes it possible for parents to do their jobs while knowing their children are receiving adequate care and a good education. For many women, this care offers a critical form of support: of the 23 million working mothers with children under 18 in the United States, nearly three-quarters work full-time (74 percent).²⁷

In West Virginia, there are a total of 47,576 working mothers with children under age 6 who potentially need child care (Child Care Aware of America 2012). Since the school day does not cover the full working day, quality after school care for children is also crucial. According to one study, in West Virginia approximately 13 percent of K-12 children (36,792) participate in afterschool programs and 21 percent (59,609) take care of themselves after school. An estimated 30 percent who are not in after school care (74,526) would probably participate if their community had an after school program (Afterschool Alliance 2009).

²⁷ "Full-time" work is defined as 35 hours or more per week. IWPR calculation based on U.S. Department of Labor (2012b).

Unfortunately, for many families the cost of early care and education for younger children is prohibitively expensive. For families in West Virginia, the average annual fees for fulltime care in a family child care home are \$6,269 for an infant and \$5,730 for a four-yearold child. The average annual fees for full-time care in a center are slightly higher at \$6,932 for an infant and \$5,806 for a four-year-old (Child Care Aware of America 2012). In the state as a whole, the cost of full-time child care in a center for an infant is 11 percent of the median family income for married couples and 40 percent of the median family income for single women with children (Child Care Aware of America 2012; Figure 2.1). For some families, particularly those headed by single women with children, these costs are simply unaffordable.

Food Security

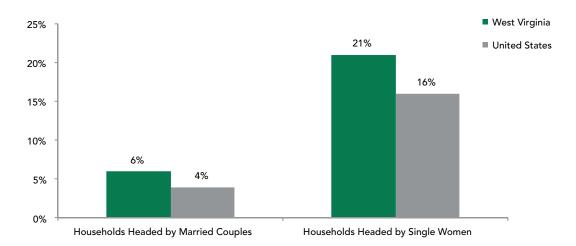
Food security—having access to enough food for healthy, active living—reflects how well a population is faring economically and is a key factor in determining whether adults and children can thrive at work, school, and in other activities of daily life. Unfortunately, many households in West Virginia experience food insecurity. Data collected in a supplement to the Current Population Survey conducted in December 2011 found that among 1,626 households interviewed in the state, 14.1 percent experienced low or very low food security at some point in the 12 months prior to the interview. Those who experienced *low food security* (9.0 percent) reported having multiple problems in accessing food but did not have their food intake reduced or disrupted, while those who reported *very low food security* (5.1 percent) experienced problems in accessing food as well as disruption in their normal eating patterns due to their household's limited financial and other resources for food (Coleman-Jensen et al. 2012). In the United States as a whole, a similar proportion of households (14.7 percent) reported experiencing food insecurity between 2009 and 2011 (Coleman-Jensen et al. 2012).

Programs such as the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and free or reduced-price school lunches reduce food insecurity among some households in West Virginia and the nation as a whole. In the state, children in grades K-12 whose parents' income is below 130 percent of the poverty line are eligible for free meals, and those whose parents' income is between 130 percent and 185 percent of poverty qualify for reduced-price meals (Annie E. Casey 2012). In 2010, more than half of children in the state (53.5 percent) who were enrolled in grades K-12 applied and were approved for free or reduced meals. The proportion of children who applied and were approved varied across the state's counties, with the lowest proportion in Monongalia (36.3 percent) and the highest in McDowell (82.9 percent; Annie E. Casey 2012).

Social Safety Nets

Public programs that provide cash assistance to low-income families such as Temporary Assistance for Needy Families (TANF)–called "West Virginia Works" in West Virginia–can play a vital role in assisting women and families who struggle to provide meals for their families and lack basic economic security. While such programs do not alone alleviate poverty for many families, the benefits they offer can lessen the financial hardship some families face and enable them to make ends meet during difficult economic times. Many women and men who live in or near poverty, however, do not receive any welfare cash assistance. In West Virginia, only six percent of married couple households and 21 percent of households headed by single women with children under five and incomes at or below 200 percent of the poverty line receive cash assistance. These proportions are higher than in the nation as a whole, where four percent of comparable married couple households and 16 percent of comparable single women households receive TANF benefits (Figure 2.9).

Figure 2.9. Percent of Households Living At or Below 200% Poverty Line with Children Under Five That Receive Cash Assistance, West Virginia and the United States, 2008–2010



Notes: "Single women" refers to women who are single/never married, divorced, widowed, separated, or married with an absent spouse.

Sample size is too small to report estimates for households headed by single men.

Source: IWPR analysis of 2008–2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

In general, food stamps are a more reliable form of support for low-income households than TANF. Research indicates that for low-income families of all types in West Virginia, this program provided an especially important form of assistance during and immediately after the Great Recession of 2007–2009. Between the start of the recession in November 2007 and September 2010, the number of households in West Virginia receiving SNAP benefits grew by 43 percent (from 107,431 to 153,764). During this same time period, the number of households receiving food stamps in the nation as a whole increased by 62 percent (from 12,313,466 to 19,979,197; Boettner et al. 2010).²⁸

In West Virginia in 2010, 15 percent of all households received food stamps. The share of households receiving food stamps, however, varies considerably by household type. Households headed by a single woman are the most likely to receive food stamps (39 percent), followed by households headed by a single man (32 percent). Only 10 percent of house-

²⁸ Unlike TANF, which is a block grant that has funding fixed at a certain amount, SNAP is an entitlement program, which means that funding for the program increases as the number of eligible households grows.

holds headed by a married couple and 14 percent of nonfamily households received food stamps (Figure 2.10). Among all household types, the proportion receiving food stamps is larger in West Virginia than in the nation as a whole (Figure 2.10).

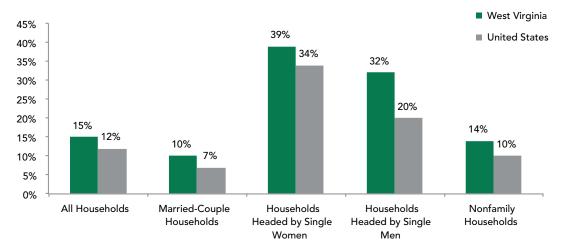


Figure 2.10. Percent of Households Receiving Food Stamps by Household Type, West Virginia and the United States, 2010

Notes: "Single women" and "single men" refer to women and men who are single/never married, divorced, widowed, separated, or married with an absent spouse. Nonfamily households include individuals who live alone as well as those who live together but are not related through blood, marriage, or adoption.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Recommendations for Economic Security and Poverty

Many women in West Virginia face economic hardship, a circumstance that can stem from multiple factors, including women's low levels of participation in the labor market, the gender wage gap, and women's prevalence in female-dominated occupations that pay less than male-dominated occupations. For many women, education provides an important form of protection against poverty; in West Virginia, however, women are less likely to hold a bachelor's degree or higher than in any other state in the nation. Public benefits such as cash assistance and food stamps help many families to make ends meet during difficult economic times, but only a relatively small proportion of families that struggle economically receive such forms of assistance. Recommendations to improve the economic security of women and families include:

- advocating with policymakers so they adopt and sustain policies that support women's economic security;
- supporting programs that provide essential services—especially for households headed by single women—such as child care, job training, counseling, transportation, and affordable housing;
- gathering knowledge about the needs of family care providers in providing high-quality early care and education;

- ensuring that all families who need it receive assistance from West Virginia Works, the state's Temporary Assistance for Needy Families Program; and
- encouraging discussion in local communities about how best to decrease poverty and increase economic security among women and girls.

Key Findings

- More than one-fifth (21 percent) of women aged 18–64 in West Virginia are without basic health insurance, which is a slightly higher proportion than in the United States overall (19 percent).
- Many women in West Virginia live in counties with limited access to health care practitioners and services such as dental and maternity care. In addition, the large majority of women in the state (84 percent) live in a county without an abortion provider.
- Diabetes is a serious problem for many women in West Virginia. More than one in ten women and men aged 18 and older in the state report having ever been told they have diabetes. Moreover, women in the state have a higher age-adjusted mortality rate from diabetes than their counterparts nationwide (29.1 per 100,000 compared with 19.8 per 100,000). Mortality rates from diabetes for African American in West Virginia are more than twice as high as mortality rates for white women (59.9 per 100,000 compared with 28.4 per 100,000).
- Women in West Virginia are much more likely to smoke than women in the United States as a whole (25 percent compared with 15 percent). They also have a higher mortality rate from lung and bronchial cancer than their counterparts nationwide.
- In 2010, the proportion of babies born with low birth weight in West Virginia was higher than in the nation overall (9.2 percent and 8.1 percent, respectively). The infant mortal-ity rate was also higher in the state than in the nation as a whole in 2009 (7.7 per 1,000 live births compared with 6.4 per 1,000 live births).
- Women and girls in West Virginia are considerably less likely to contract a sexually transmitted infection than their counterparts in the nation as a whole. The incidence rate for chlamydia among women and girls in the state was half the rate for women and girls in the United States overall. The incidence rate for gonorrhea among West Virginia's female population was approximately one-third the rate for the female population in the nation overall.
- The overweight and obesity rate for women in West Virginia is higher than the national rate for women (65.8 percent compared with 56.6 percent). Nutrition may contribute to the relatively high proportion of women in the state who are overweight or obese: more than eight in ten women (81 percent) in West Virginia report that they do not consume at least five servings of fruits and vegetables per day.

Introduction

Health is an important component of women's and girls' overall well-being that is closely connected to other key indicators of their status, including poverty and educational attainment. Research shows that women who have low incomes and low levels of education are more likely than their counterparts with higher incomes and levels of education to experience negative health outcomes, in part because they are more likely to have limited access to health insurance and preventive services (Mead et al. 2001).

Women in West Virginia have, in some ways, better health outcomes than their male counterparts. Their age-adjusted mortality rates for heart disease and diabetes are considerably lower than men's in the state, and the rate of newly diagnosed AIDS cases for women in West Virginia is also dramatically lower than the rate for men. Still, women in West Virginia have higher age-adjusted mortality rates than men for stroke and other cerebrovascular diseases and experience far higher rates of sexually transmitted infections such as chlamydia and gonorrhea.

Women in West Virginia also fare worse than women in the nation as a whole on many health indicators. For example, women in the state are more likely than their counterparts nationwide to smoke and to die from lung or bronchial cancer. They are also more likely than women in the United States as a whole to be overweight or obese, to say they have not exercised in the past 30 days, and to report experiencing poor mental health. These findings suggest that the health care needs of women in West Virginia are an important aspect of their status that must be examined and addressed.

Access to Health Care

Health insurance coverage helps women to access health care and maintain good health. In West Virginia, however, 21 percent of all women aged 18–64–an estimated 120,400 women–live without basic health insurance. While women in the state are slightly more likely than men to have health insurance coverage, they are less likely than women nationwide to have coverage (Figure 3.1). West Virginia's 79 percent of women with coverage places the state 35th out of 51 in the nation on this indicator (Appendix II).²⁹

Women's slightly higher rate of health insurance coverage in West Virginia compared with men's stems partly from their higher coverage rates through an employer or union. Sixty percent of women in the state aged 18–64 have employer- or union-sponsored health insurance, compared with 58 percent of men from this age range.³⁰ This difference probably results from women's higher employment rates in the public sector, which typically provides health insurance coverage. Women in West Virginia aged 18–64 are also more likely than their male counterparts to have private insurance (65 percent compared with 63 percent)

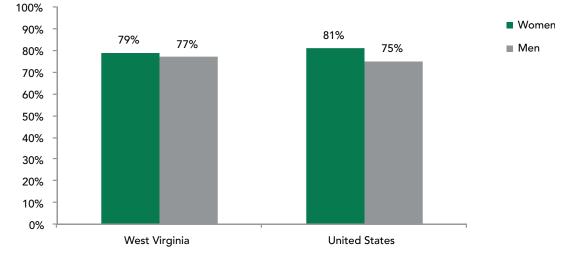
²⁹ Those with health insurance were covered by one of the following options at the time the American Community Survey data were collected: (1) employer-provided insurance; (2) privately purchased insurance; (3) Medicare; (4) Medicaid or other governmental insurance; (5) TRICARE or other military care; or (6) Veterans Administration-provided insurance. The Census Bureau does not consider respondents to have coverage if their only coverage is from Indian Health Services (IHS), since IHS policies are not always comprehensive.

³⁰ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

and to be covered through Medicaid. Fourteen percent of women and 11 percent of men in West Virginia have Medicaid coverage, which is higher than the proportion of women and men in the United States as a whole (12 percent and 9 percent, respectively).³¹ The higher rates of Medicaid coverage for both women and men in West Virginia are an indication of the comparatively high poverty rates in the state.

In West Virginia, the proportion of women with health insurance coverage varies only slightly among the state's five regions. The Northern Panhandle has the highest proportion of women with health insurance coverage at 83 percent, and the North Central and Southern regions have the lowest at 78 percent each (Appendix IV, Table 10).





Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Access to Health Services

In addition to lacking health insurance, many women and men in West Virginia have limited access to health care providers and services. In 2009, West Virginia had 26.1 practicing physicians per 10,000 people, compared with 27.4 physicians per 10,000 people in the nation as a whole (Centers for Disease Control and Prevention 2012b). More than 215,000 people in the state–12 percent of its total population–live in an area identified as having a shortage of primary care health professionals (Kaiser Family Foundation 2012a).³² Many residents of West Virginia also have limited access to dental care: in 2008, the state had 4.7 dentists per 10,000 people, compared with 6.0 dentists per 10,000 in the United States as a whole (Centers for Disease Control and Prevention 2012b). As of 2006, the proportion of

³¹ IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

³² A primary care health professional shortage area (HPSA) can be a geographic region, population group, or health care facility. Geographic regions qualify if the population to provider ratio is greater than 3,500:1; population groups qualify if socioeconomic, cultural, or linguistic barriers inhibit access to care; and health care facilities qualify if they lack the resources needed to adequately provide care to the local population (Kaiser Family Foundation 2012a).

women aged 65 and older in West Virginia who had lost all their natural teeth was the highest in the nation at 41.7 percent, which is more than double the median percentage of older women in the nation without any natural teeth (20.2 percent; West Virginia Department of Health and Human Resources 2009).

Many women in West Virginia, particularly those living in rural areas, also lack access to maternity care services. According to a needs assessment conducted by the West Virginia Department of Health and Human Services, only six out of fifty-five counties in the state have a sufficient number of obstetrics and gynecology (OB/GYN) physicians and other maternity care practitioners (West Virginia Office of Maternal, Child, and Family Health 2011). A 2006 West Virginia perinatal study conducted by West Virginia Community Voices and the West Virginia Healthy Kids and Family Coalition found that this shortage of services stems from a number of factors, including a reduction in the number of hospitals and birthing facilities, a lack of birthing attendants, a decline in the number of physicians in family medicine, and the prohibitive cost of medical liability insurance (West Virginia Community Voices 2006).

Women in West Virginia also have limited access to abortion services. In 2008, 84 percent of women in West Virginia lived in a county without an abortion provider, compared with one-third of women in the United States overall (Guttmacher 2013a). West Virginia is also among 35 states in the nation that require a woman seeking an abortion to be given counseling, which, according to the West Virginia Department of Health and Human Resources, is designed to ensure that women are fully educated on fetal development and pregnancy termination.³³ West Virginia is one of 26 states with a mandatory 24-hour waiting period between the counseling and the abortion (Guttmacher 2013b). West Virginia does, however, provide Medicaid payment for abortion if the pregnancy is a result of rape, incest, or is a medical necessity pursuant to a court order (Guttmacher 2013c).

Chronic Disease

Chronic diseases pose a serious concern for many women in West Virginia. In particular, available data suggest that diabetes, heart disease, stroke and other cerebrovascular diseases, and cancer affect the health and well-being of many women in the state and across the nation.

Diabetes

As of 2010, 12 percent of women and men aged 18 years and older in West Virginia reported having ever been told they have diabetes (excluding during pregnancy). This is a higher proportion than in the United States as a whole, where nine percent of women and ten percent of men aged 18 and older say they have been told they have diabetes.³⁴

³³ Email communication from the West Virginia Department of Health and Human Resources, December 20, 2012.

³⁴ IWPR compilation of data from the Centers for Disease Control and Prevention (2012d).

When using an age-adjusted mortality rate, which accounts for distributional age differences among population groups, women in West Virginia have a higher mortality rate from diabetes than women in the United States overall. Between 2005 and 2009, the average annual mortality rate for women in the state was 29.1 per 100,000 compared with 19.8 per 100,000 women in the nation. African American women in West Virginia were more than twice as likely as white women to die from diabetes (59.9 per 100,000 compared with 28.4 per 100,000), a pattern that exists in the United States as a whole, where from 2005 to 2009 the average annual mortality rate from diabetes was 40.8 per 100,000 for African American women and 16.8 per 100,000 for white women (Figure 3.2). While diabetes is a serious problem for many women in West Virginia, mortality rates from this disease were lower among women than men in the state (29.1 per 100,000 compared with 38.5 per 100,000).³⁵

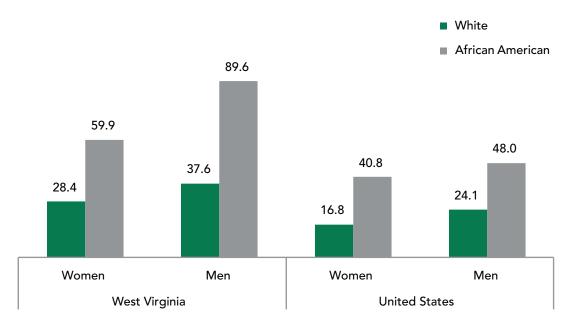


Figure 3.2. Average Annual Mortality Rates (per 100,000) from Diabetes by Gender and Race, West Virginia and the United States, 2005–2009

Notes: Racial categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. Sample sizes are insufficient in West Virginia to provide estimates for other racial and ethnic groups. Rates are age-adjusted to the total U.S. population in 2000. For individuals of all ages.

Source: IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

³⁵ IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

Heart Disease

Between 2005 and 2009, the age-adjusted average annual mortality rate for heart disease among women in West Virginia was considerably higher than among women in the United States as a whole (194.8 per 100,000 compared with 161.0 per 100,000).³⁶ The mortality rate for heart disease was slightly higher among African American women (209.5 per 100,000) in West Virginia than white women (195.5 per 100,000). This difference in the mortality rates of women from these two racial groups is much smaller than in the nation as a whole, where the mortality rates for heart disease between 2005 and 2009 were 214.5 per 100,000 for African American women and 159.3 per 100,000 for white women (Figure 3.3). As with diabetes, women in West Virginia have a lower mortality rate due to heart disease than men (194.8 per 100,000 compared with 286.8 per 100,000).³⁷

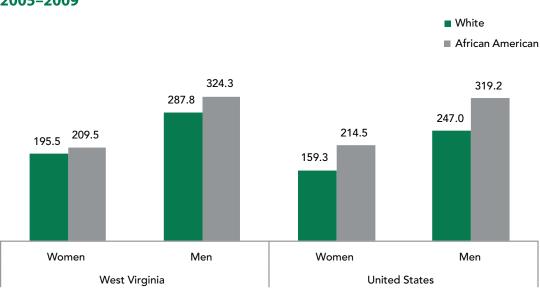


Figure 3.3. Average Annual Mortality Rates (per 100,000) from Heart Disease by Gender and Race, West Virginia and the United States, 2005–2009

Notes: Racial categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. Sample sizes are insufficient in West Virginia to provide estimates for other racial and ethnic groups. Rates are age-adjusted to the total U.S. population in 2000.

For individuals of all ages.

Source: IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

Cerebrovascular Disease

Between 2005 and 2009, women in West Virginia had a higher age-adjusted average annual mortality rate for stroke and other cerebrovascular diseases than women in the United

³⁶ IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

³⁷ IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

States as a whole (49.2 per 100,000 compared with 42.7 per 100,000).³⁸ Among women in West Virginia, rates were much higher for African American women (64.6 per 100,000) than they were for white women (49.0 per 100,000), a pattern that also held true at the national level, where African American women had an annual average mortality rate of 57.4 per 100,000 and white women had a rate of 41.5 per 100,000.³⁹

Cancer

In recent decades, the nation has made considerable progress in the prevention, detection, and treatment of certain forms of cancer. Nevertheless, cancer is the second leading cause of death for all women in the United States, after heart disease (Centers for Disease Control and Prevention 2011a). Lung and breast cancer are the forms of cancer from which women are most likely to die (Centers for Disease Control and Prevention 2012c).

Between 2005 and 2009, women in West Virginia fared slightly better than women in the nation as a whole on breast cancer incidence rates, with an average annual rate of 112.2 per 100,000 compared with 122.0 per 100,000 for the United States as a whole (U.S. Cancer Statistics Working Group 2012a).⁴⁰ During this same time period, however, women in West Virginia had an average annual mortality rate for breast cancer that was almost identical to the rate among women in the United States overall (23.6 per 100,000 compared with 23.0 per 100,000). African American women in the state had a higher mortality rate for breast cancer than non-Hispanic white women (30.8 per 100,000 compared with 23.6 per 100,000; U.S. Cancer Statistics Working Group 2012b).

For several other types of cancer, women in West Virginia fare less well than their counterparts nationwide. Between 2005 and 2009, women in the state had a higher average annual incidence rate for cervical cancer at 9.8 per 100,000 compared with 8.0 per 100,000 for women in the nation as a whole (U.S. Cancer Statistics Working Group 2012a). Women in West Virginia, however, had a mortality rate for cervical cancer that was similar to the rate for women in the nation as a whole (2.5 per 100,000 compared with 2.4 per 100,000; U.S. Cancer Statistics Working Group 2012b).

Between 2005 and 2009, women in West Virginia also had a considerably higher incidence rate for lung and bronchial cancer (73.6 per 100,000) than women in the United States overall (55.7 per 100,000), which probably stems partly from the high smoking rates for women in the state. In addition, women in West Virginia had a higher mortality rate for these types of cancers than men in West Virginia (87.5 per 100,000)⁴¹ and women in the United States overall (Figure 3.4). Among women in West Virginia, African Americans had a lower mortality rate for lung and bronchial cancer than non-Hispanic white women (43.0 compared with 52.6 per 100,000; Figure 3.4). The same pattern held true in the United States as a whole, where African American women had a mortality rate for lung and bronchial cancer of 38.0 per 100,000 compared with 43.1 per 100,000 for non-Hispanic

Between 2005 and 2009, women in West Virginia had a considerably higher incidence rate for lung and bronchial cancer (73.6 per 100,000) than women in the United States overall (55.7 per 100,000).

 $^{^{38}}$ IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

³⁹ IWPR compilation of data from the Centers for Disease Control and Prevention (2012a).

⁴⁰ All cancer incidence and mortality rates are age-adjusted to the 2000 U.S. standard population.

⁴¹ IWPR compilation of data from the U.S. Cancer Statistics Working Group (2012b).

white women. In the nation, Hispanic and Asian American women had the lowest rates at 14.0 and 18.5 per 100,000, respectively (U.S. Cancer Statistics Working Group 2012b).

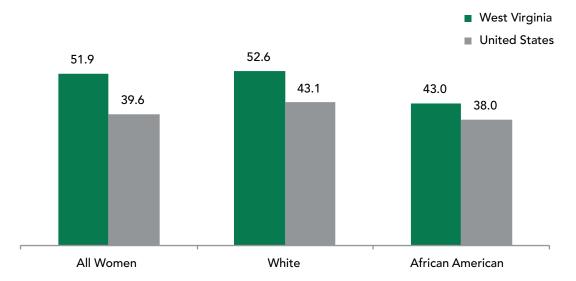


Figure 3.4. Average Annual Mortality Rates (per 100,000) from Lung and Bronchial Cancer Among Women by Race, West Virginia and the United States, 2005–2009

Notes: Only whites are defined as exclusive: white, not Hispanic. Sample sizes are insufficient in West Virginia to provide estimates for other racial and ethnic groups. For individuals of all ages.

Rates are age-adjusted to the total U.S. population in 2000.

Source: IWPR compilation of data from the U.S. Cancer Statistics Working Group (2012b).

HIV/AIDS

Although men in the United States represent the majority of those with HIV infections and with newly diagnosed AIDS cases, women are also profoundly affected by HIV/AIDS. Between 1985 and 2010, women's share of new AIDS diagnoses in the United States increased from eight to twenty-five percent (Kaiser Family Foundation 2012b).

In West Virginia, women and girls make up a much smaller share of those with newly diagnosed cases of HIV and AIDS than men and boys. In 2010, there were 88 diagnosed cases of HIV among adults and adolescents in the state and 71 diagnosed cases of AIDS; women and girls comprised 18 percent of those with diagnosed cases of AIDS (Kaiser Family Foundation 2012c). In 2010, the estimated rate of AIDS diagnoses among female adolescents and adults in West Virginia was 1.6 per 100,000 compared with 7.7 per 100,000 for male adolescents and adults (Kaiser Family Foundation 2012c).

West Virginia's rates for diagnosed cases of AIDS are much lower than in the United States as a whole. In the nation in 2010, female adolescents and adults had an estimated rate for AIDS diagnoses of 6.4 per 100,000 and their male counterparts had an estimated rate of 20.0 per 100,000 (Kaiser Family Foundation 2012c).

Reproductive Health

Maternity Care and Infant Health

Women who receive adequate care during and after pregnancy are, in general, more likely to have good health themselves and to have healthy babies (U.S. Department of Health and Human Services 2009). Many women in West Virginia, however, face specific barriers that prevent them and their newborns from receiving adequate care. These barriers include a shortage of obstetrical health care providers in certain areas, a shortage of neonatal intensive care unit beds, and difficulty in securing timely prenatal appointments with providers because of their full schedules (West Virginia Office of Maternal, Child, and Family Health 2011).

Due in part to these barriers, women in West Virginia fare worse than their counterparts nationwide on several indicators related to infant health. In 2010, women in the state were somewhat more likely than their counterparts nationwide to have babies with low birth weight (9.2 percent compared with 8.1 percent; Martin et al. 2012). West Virginia also had a higher infant mortality rate in 2009 (7.8 per 1,000 live births) than the nation overall (6.4 per 1,000 live births; Annie E. Casey 2012). The preterm birth rate in West Virginia, however, is nearly identical to the rate in the United States as a whole (12.1 percent and 12.0 percent, respectively; Martin et al. 2012).

Research suggests that smoking and drug use may contribute to West Virginia's relatively poor newborn outcomes. In 2008, West Virginia had the highest proportion in the nation of women who smoked during the last three months of their pregnancy among the 29 states for which data are available (28.7 percent compared with a national rate of 12.8 percent; Centers for Disease Control and Prevention 2011b). In addition, a 2007 study that surveyed perinatal providers in West Virginia found that 50 percent of all providers responding perceived that drug and alcohol use among pregnant women was a major factor affecting the health of infants in the state. The same study found that the demand for the detoxification of newborns in West Virginia was a "recent and increasing occurrence," although the reasons for this change remained unknown (West Virginia Community Voices 2007).

Fertility Rates

Fertility rates in West Virginia are lower than the national average (Martin 2012). In 2010, the fertility rate for women aged 15–44 in West Virginia was 59.9 per 1,000, compared with 64.1 per 1,000 for women in the United States as a whole (Martin et al. 2012). The percentage of children born to unmarried mothers, however, was higher in West Virginia than in the nation overall in 2010 (44 percent compared with 41 percent; Figure 3.5). The percentage of children born to unmarried mothers was higher for both white and African American women in West Virginia than in the United States as a whole, but somewhat lower in the state than in the nation for Hispanic women (Figure 3.5).

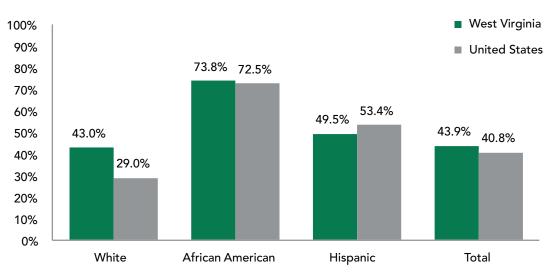


Figure 3.5. Percent of Babies Born to Unmarried Women, West Virginia and the United States, 2010

Note: Racial and ethnic categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. Persons whose ethnicity is identified as Hispanic may be of any race. Sample sizes are insufficient in West Virginia to report estimates for Asian Americans and Native Americans. Source: IWPR compilation of data from the National Center for Health Statistics (Martin et al. 2012).

Unintended pregnancies pose a challenge for many women and girls in West Virginia. In 2006, 50 percent of pregnancies in West Virginia were unintended; there were 14,000 unintended pregnancies to women and girls aged 15–44 in the state, resulting in a rate of 39.0 per 1,000 women and girls (Guttmacher 2012). While West Virginia has one of the lowest rates of unintended pregnancies in the nation, its costs from unplanned pregnancies that are covered by public dollars is much higher than in the United States overall: 72 percent of births in the state that resulted from unintended pregnancies are paid for by public funding, compared with 64 percent in the nation as a whole (Sonfield et al. 2011).

Teenage Pregnancy

Teenage pregnancy can derail the educational and economic prospects of mothers and children. Nationally, teen birth rates have declined in recent years, but they nonetheless remain a significant concern for many states and localities (Martin et al. 2012). In 2010, the birth rate for teens aged 15–19 in West Virginia was 44.8 per 1,000, which is considerably higher than the birth rate for teens in the United States as a whole (34.2 per 1,000; Martin et al. 2012). Mothers in West Virginia under the age of 20 are also more likely to have had unintended pregnancies than older women (68 percent compared with 47 percent for women aged 20–29 and 34 percent for women aged 30 and older; West Virginia Department of Health and Human Resources 2010).

Following the national trend, the teen birth rate in West Virginia declined between 1991 and 2005, dropping 25 percent in the state during this time period. In both West Virginia and the United States, the teen birth rate increased between 2005 and 2007, but the pattern between the state and nation then diverged in the subsequent two years. For the United States as a whole, the teen birth rate experienced an 8 percent drop between 2007 and

2009, while for West Virginia it did not statistically change during these years (Martin et al. 2011). Between 2009 and 2010, the West Virginia birth rate among teens aged 15–19 fell by 7 percent, compared with 10 percent at the national level (Martin et al. 2012).

Access to Contraception

Access to contraception can vary depending on various factors, including a woman's age and health insurance coverage. Along with 29 other states in the nation, West Virginia requires teens to have parental permission to receive contraceptive services, with exceptions made only if the teen is married or demonstrates maturity (Guttmacher 2013d). West Virginia also joins 27 other states in requiring insurance policies that cover prescription drugs to include coverage for FDA-approved prescription contraceptive drugs and devices (Guttmacher 2013e). West Virginia does, however, allow religious institutions—including some hospitals—to be exempt from covering contraceptive drugs and devices to have an exemption for dependent minors (Guttmacher 2013e).

Sexually Transmitted Infections

National data show that women are more likely than men to get a sexually transmitted infection (STI; U.S. Department of Health and Human Services 2012). While the exact causes behind women's higher reported rates are unclear, it is probably due in part to their increased risk; women are biologically more susceptible to certain STIs than men (Centers for Disease Control and Prevention 2011c). In addition, women visit the doctor more often than men–and, therefore, may be more likely to be screened for STIs (Centers for Disease Control and Prevention 2011c).

In keeping with the national trend, rates of sexually transmitted diseases are higher among the female population in West Virginia than among the male population. In 2010, the incidence rate of chlamydia for women and girls of all ages in the state was 305.3 per 100,000, compared with 117.0 per 100,000 for comparable men and boys (Centers for Disease Control and Prevention 2011d). These rates are lower than for the United States as a whole, where the chlamydia rates were 610.6 per 100,000 for women and girls and 233.7 per 100,000 for men and boys. The same pattern holds true for gonorrhea rates: the incidence rate of gonorrhea among the state's female residents (35.1 per 100,000) was considerably higher than among its male residents (28.4 per 100,000). In the United States, however, both the female and male populations have much higher incidence rates for gonorrhea than in West Virginia (106.5 per 100,000 for women and 94.1 per 100,000 for men; Centers for Disease Control and Prevention 2011d).

Preventive Care

In West Virginia, three in four women aged 50 and older (75 percent) reported having had a mammogram in the past two years, which is a slightly smaller proportion than in the United States as a whole (78 percent).⁴² In addition, nearly eight in ten women (79 percent) aged 18 and older reported having had a pap test in the past three years in the state. In the

⁴² IWPR compilation of data from the Centers for Disease Control and Prevention (2012d).

United States as a whole, a slightly higher proportion of women (82 percent) aged 18 and older said they had a pap test during this same time period (Centers for Disease Control and Prevention 2012d).

A greater proportion of women (82 percent) than men in West Virginia (79 percent) reported having had their blood cholesterol checked between 2005 and 2009. African American women in the state were slightly less likely than white women to say they had their cholesterol checked (79 percent compared with 82 percent). Eightly percent of women and 75 percent of men in the United States as a whole reported having had their blood cholesterol checked during this same time period (Centers for Disease Control and Prevention 2012d).

Mental Health

Many women face gender-specific circumstances that may contribute to their higher incidences of anxiety and depression, such as higher rates of poverty (Heflin and Iceland 2009), more intense pressure to balance work and family responsibilities (Mental Health Foundation 2012), greater responsibility in caring for children and aging relatives (Cannuscio et al. 2002), and trauma from gender-based violence (Rees et al. 2011). A survey administered in 2010 found that women in West Virginia were slightly more likely than men (16 percent and 14 percent, respectively) to report having mental health that was not good—which the survey defined as experiencing stress, depression, and problems with emotions for 14 or more days in the previous 30 days (Centers for Disease Control and Prevention 2012d). In the United States as a whole, 12 percent of women and 9 percent of men reported experiencing mental health that was not good for at least 14 days in the 30-day period before the survey was administered (Centers for Disease Control and Prevention 2012d).

Despite their higher reported rates of poor mental health, women and girls in West Virginia have substantially lower suicide rates than men and boys. In 2010, the state's female residents had an age-adjusted suicide rate of 3.7 per 100,000, compared with 25.6 per 100,000 for the state's male residents (Centers for Disease Control and Prevention 2011e). Women and girls in West Virginia also had slightly lower age-adjusted suicide rates than their female counterparts in the United States as a whole, who had a rate of 5.4 per 100,000 in 2010 (Centers for Disease Control and Prevention 2011e).

Diet and Exercise

A healthy diet and regular exercise can help women to avoid some of the adverse health conditions discussed above, including diabetes, stroke, and low birth weight for babies. In West Virginia, however, a comparatively low proportion of women and men eat enough fruits and vegetables and exercise regularly. Eighty-one percent of women and 87 percent of men aged 18 and older report that they do not consume five or more servings of fruits or vegetables every day. Among women, a higher proportion of African American women than white women say they do not eat the recommended amount of fruits and vegetables (90 percent compared with 81 percent). Both women and men in West Virginia are less likely to report eating five or more servings of fruits or vegetables per day than their counterparts in the United States as a whole, where 72 percent of women and 81 percent of men

In West Virginia, 81 percent of women and 87 percent of men aged 18 and older report that they do not consume five or more servings of fruits or vegetables every day. Both women and men in the state are less likely to report having a diet with the recommended amount of fruits or vegetables than their counterparts in the United States as a whole.

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say their diet does not include at least five servings of fruits or vegetables every day (Table 3.1).

	West V	irginia	United	States
Race/Ethnicity	Women	Men	Women	Men
All	81%	87%	72%	81%
White	81%	87%	72%	81%
African American	90%	N/A	75%	80%

Table 3.1. Percent of Women and Men Who Do Not Consume Five or More Servings of Fruits or Vegetables per Day, Aged 18 and Older, 2009

Notes: Racial categories are defined as exclusive: white, not Hispanic; and African American, not Hispanic. N/A indicates insufficient sample size.

The United States includes the 50 states, DC, Guam, Puerto Rico and the Virgin Islands.

Source: IWPR compilation of data from the Centers for Disease Control and Prevention (2012d).

Women (and men) in West Virginia are also less likely than their counterparts in the nation as a whole to report having exercised in the past 30 days. In the state, one-third of women (34 percent) and three in ten men (31 percent) say they have not exercised in the last month, compared with 27 percent of women and 22 percent of men in the United States as a whole (Centers for Disease Control and Prevention 2012d).

West Virginia has one of the highest obesity rates in the nation for children and adults (the highest rate for adults in 2011 and eighth highest for children; Kaiser Family Foundation 2012d). The overweight and obesity rate for women aged 18 and older in West Virginia is 65.8 percent, which is lower than the rate for comparable men in the state (72.1 percent) but considerably higher than the national average for women (56.6 percent). In the nation, 69.9 percent of men are overweight or obese (Kaiser Family Foundation 2012d).⁴³

Smoking, Binge Drinking, and Substance Abuse

In 2010, West Virginia had the highest percentage of adults in the nation who reported smoking cigarettes (McBee and Walker 2012). Twenty-five percent of women aged 18 and older in the state were smokers, which is a considerably higher proportion than in the United States as a whole (15 percent; Centers for Disease Control and Prevention 2012d).⁴⁴ In 2006, West Virginia ranked second highest in the nation for its proportion of women aged 18–44 who reported smoking (34.0 percent; West Virginia Department of Health and Human Resources 2009). In 2011, just under half of all high school-aged girls (46.2 percent)

⁴³ Data represent adults who reported having a body mass index (BMI) greater than or equal to 25.0 kilograms/meters squared. Percentages are weighted to reflect population characteristics. Data for children represent those aged 10–17 who had BMIs at or above the 85th percentile of CDC growth charts by age and gender (Kaiser Family Foundation 2012d).

⁴⁴ A smoker is defined as someone who smokes either every day or on some days (Centers for Disease Control and Prevention 2012d).

and boys (48.0 percent) had ever tried smoking, which are slightly higher shares than in the nation as a whole, where 42.9 percent of girls and 46.3 percent of boys have ever smoked.⁴⁵

While a similar proportion of women and men in West Virginia report smoking (28 percent of men aged 18 and older say they smoke), women in the state are much less likely to engage in binge drinking than their male counterparts (Centers for Disease Control and Prevention 2012d). Five percent of women and 14 percent of men binge drink (which is defined for women as having four or more alcoholic drinks on one occasion, and for men as having five or more alcohol drinks on one occasion). Women in the United States as a whole are twice as likely as women in West Virginia to engage in binge drinking (10 percent; Centers for Disease Control and Prevention 2012d).

Like smoking, substance abuse is a significant problem in West Virginia. While street drugs–including heroin and ecstasy–and more common drugs such as marijuana are abused,⁴⁶ a particularly pressing problem in the state is prescription drug abuse. In recent years, the abuse of prescription drugs in West Virginia has increased substantially: the state experienced a 214-percent increase in the number of prescription drug overdoses from 2001 to 2010. In 2010, the West Virginia Poison Control received over 500 reports related to Opioid (including morphine, oxycodone, and methadone) exposure, compared with only 115 reports for cocaine, heroin, methamphetamines, and marijuana combined. During this same year, opiates were the state's number one cause of death associated with drug overdoses (McBee and Walker 2012).

National Center of Excellence in Women's Health: Women on Wellness (WOW)

West Virginia University was designated a National Center of Excellence in Women's Health (CoE) in 2004. The Center's major outreach program, Women on Wellness (WOW), is led by a community partnership with the CoE that includes influential leaders in the community from health care facilities, community colleges, and other local and state agencies and businesses. WOW aims to help women make lasting, positive lifestyle changes through a one-day behavioral change retreat that focuses on prevention by working through a guidebook developed for the program, *Make "It" Happen*. The retreat addresses all aspects of health—including mental, physical, social, intellectual, spiritual, and emotional well-being—and strives to help each retreat participant develop and prioritize her own set of goals and strategies. Each woman leaves with her own personal lifestyle plan, results from health screenings, and connections to resources in her community to help her pursue her healthy lifestyle plan. According to the CoE, more than 90 percent of the women who attend WOW retreats believe that the day deepened their motivation to change their lifestyle and take responsibility for their own health.

In recent years, the abuse of prescription drugs in West Virginia has increased substantially: the state experienced a 214-percent increase in the number of prescription drug overdoses from 2001 to 2010.

⁴⁵ IWPR compilation of 2009 data from the Centers for Disease Control and Prevention (2013).

⁴⁶ The proportion of youth in West Virginia who report using marijuana has declined since 1999, but the rate is still higher in West Virginia than in the nation overall (McBee and Walker 2012).

Lesbian, Gay, Bisexual, and Transgender (LGBT) Rights

Lesbians and other sexual minorities face unique challenges to maintaining good health. For example, employers often do not offer health insurance coverage for their employees' same-sex partners, leaving many individuals in same-sex relationships to pay the higher costs of private insurance or to go without health insurance coverage at all.⁴⁷ In addition, members of the LGBT community often struggle to find health care providers who offer care that is sensitive to their needs and face discrimination from providers based on their sexual orientation or gender identity. In some instances, these challenges lead them to put off seeking treatment or avoid treatment altogether (Gay and Lesbian Medical Association 2001).

West Virginia lacks several policies that would protect the rights of LGBT individuals, including statutes prohibiting discrimination on the basis of sexual orientation and hate crime legislation to address crimes against LGBT residents (Human Rights Campaign 2007). Until recently, the state legislature also had no LGBT members. This changed in November 2012, when Stephen Skinner was elected to represent the 67th District. Rep. Skinner, who is the founder and former board president of Fairness West Virginia, a statewide LGBT advocacy group, is the first openly gay state legislator in West Virginia's history (*State Journal* 2012).

Gender-Based Violence: A Threat to Women's and Girls' Health

Feeling safe in our communities, schools, and neighborhoods is essential to the health and well-being of women and girls. Without a sense of safety, the ability to thrive is compromised. Unfortunately, many women, men, and children in West Virginia and the United States as a whole live with the threat or reality of violence on an ongoing basis. Their experiences of violence can have profound consequences, leading to short- and long-term physical, psychological, and social effects (Crowne et al. 2011; Gudino et al. 2011; McKelvey et al. 2011).

Domestic Violence

Historically, advocates and scholars have viewed domestic violence as involving physical battering. Recently, however, many have come to recognize it more broadly as a pattern of behavior in which one person seeks to isolate, dominate, and control the other (Black et al. 2011; Stark 2007). This pattern of control, which can involve psychological, sexual, economic, and/or physical abuse, affects a large number of women. A recent study estimates that more than one in three women across the nation (36 percent) experience domestic violence at some point in their lives (Black et al. 2011).

Although consistent, accurate data on domestic violence in West Virginia are not readily available, several indicators suggest that domestic violence is a significant problem for

⁴⁷ West Virginia prohibits same-sex marriage with a statute defining marriage between one woman and one man (West Virginia Legislature 2012).

many women in the state, as it is in other jurisdictions across the nation. In 2011, 12,064 incidences of domestic violence in West Virginia were reported to law enforcement,⁴⁸ and 74 percent of these victims were female (9,017 out of 12,156; West Virginia State Police 2012). Research also indicates that every nine minutes a call is made to a domestic violence hotline in West Virginia (National Network to End Domestic Violence 2011).

While some domestic violence victims may feel trapped and unable to access available resources, others seek assistance from anti-violence programs and services in their local areas. On September 15, 2011, the National Network to End Domestic Violence conducted its annual one-day count of domestic violence shelters and services across the country. The 14 participating programs in West Virginia (which represented 100 percent of identified local domestic violence programs in the state) served 486 victims, 152 of whom were provided emergency shelter or transitional housing and 334 of whom received non-residential assistance such as counseling, legal advocacy, and children's support. Sixteen requests for services went unmet, reflecting a shortage of funds and staff (National Network to End Domestic Violence 2011). Since many domestic violence victims do not contact local shelters for help, however, the need for services may be much greater than these survey statistics indicate.

For victims from underserved populations, it is often especially difficult to find help in dealing with domestic violence. For example, members of the LGBT community who experience domestic violence face specific barriers to safety. They may encounter discrimination in their interactions with criminal justice personnel and, due to the lack of outreach about violence in LGBT relationships, remain unaware of the services available to them and their protections under the law (Buckley 2009). Data from the West Virginia Coalition Against Domestic Violence show that between 1999 and 2004, 13 licensed domestic violence programs in the state served a total of 204 victims who reported being in a same-sex relationship—a number that is probably an undercount (Turley and Haas 2005). The substantial number of victims in same-sex relationships points to the need for policies and programs that address the specific challenges faced by this community.

Sexual Violence and Rape

Sexual violence and rape—which often occur within a context of domestic violence—also pose a serious threat to the health and overall well-being of many women in West Virginia and the United States as a whole. According to a recent study published by the National Center for Injury Prevention and Control of the Centers for Disease Control and Prevention, in 2010 West Virginia's rate of female victimization from rape was similar to the nation's overall. Approximately one in five women (18.9 percent) surveyed in the state reported having been raped at some point in her lifetime, compared with 18.3 percent of women in the United States as a whole. In addition, in West Virginia 35.9 percent of women aged 18 and older surveyed said they had experienced sexual violence other than rape at least once, which is considerably lower than the national average of 44.6 percent (Black et al. 2011). The Federal Bureau of Investigation's Uniform Crime Reporting (UCR)

⁴⁸ An incidence can include more than one offense; as a result, the number of total offenses is higher (12,534).

Program also reports that in 2010 West Virginia had a reported rate of forcible rapes⁴⁹ that was lower than the national rate (19.1 per 100,000 compared with 27.5 per 100,000; U.S. Department of Justice 2012a).

Official UCR data on rape, however, probably underestimate the number of rapes in West Virginia, for two reasons. First, these data include only reported rapes, and most rape victims do not report the crime to the police. One study that analyzed data from the National Crime Victimization Survey found that only 36 percent of completed rapes, 34 percent of attempted rapes, and 26 percent of sexual assaults that occurred between 1992 and 2000 came to police attention (Rennison 2002). Second, these data are based on the Uniform Crime Reporting (UCR) Program definition of rape, which from 1927 to 2011 included only forcible rapes of women by men (U.S. Department of Justice 2012b). In January 2012, the UCR definition of rape was revised to include both male and female victims and perpetrators and to reflect more forms of sexual penetration than the previous definition had recognized. The U.S. Department of Justice suggests that this revised definition will lead to a more accurate and comprehensive reporting of rape (2012c).

Child Abuse

Child abuse can take many forms-including physical abuse, sexual abuse, and neglect-and is unfortunately common. While the exact prevalence of child abuse is difficult to determine, research indicates that approximately 20 percent of women and 5 to 10 percent of men in the United States experienced some form of abuse as children (Finkelhor 1994).

In 2010, West Virginia had estimates that were similar to the nation's for both the overall rate of child abuse victims and the gender breakdown of reported victims. According to data collected by state and local child protective services agencies and reported to the National Child Abuse and Neglect Data System of the Children's Bureau at the U.S. Department of Health and Human Services, West Virginia had a child abuse rate in 2010 of 10.2 per 1,000 children, compared with 9.2 per 1,000 children in the nation as a whole. In the state, 51.2 percent of victims were girls and 48.7 percent were boys (U.S. Department of Health and Human Services 2011). Nationally, 51.2 percent of victims were girls and 48.5 percent were boys.⁵⁰

The West Virginia Child Advocacy Network found that 19 Children's Advocacy Centers (CACs) throughout the state served 2,358 child victims between July 2011 and June 2012.⁵¹ This represented a 16.4 percent increase in new children served compared with the prior fiscal year. Sixty-two percent of the children served were girls (1,466), and the proportion of girls to boys served is relatively consistent across several years of data collection. The major-

⁴⁹ The FBI Uniform Crime Reporting (UCR) Program definition of "forcible rape" does not include statutory rape, or non-forcible sexual intercourse with a person younger than the statutory age of consent (U.S Department of Justice 2012b).

⁵⁰ In the case of West Virginia, the sex of the victim was unknown for 0.1 percent; nationally, the sex was unknown for 0.3 percent of victims (U.S. Department of Health and Human Services 2011).

⁵¹ The network has added one CAC since this data collection. Email communication from the West Virginia Child Advocacy Network, December 3, 2012.

ity of children were served because of allegations of sexual abuse (79.5 percent). Other types of reported abuse included physical abuse (18.4 percent), witnessing violence (10.3 percent), neglect (5.8 percent), and drug endangerment (6.9 percent). The majority of the children served were aged 12 and under: 39.6 percent were too young to attend grade school (age 0–6 years), 40.3 percent were aged 7–12, and 20.1 percent were aged 13–18.⁵²

The West Virginia Child Advocacy Network (WVCAN) is a 501(c)(3) membership organization dedicated to helping local communities respond to allegations of child abuse. WVCAN provides training, support, technical assistance, and leadership on a statewide level to local child advocacy centers (CACs) and communities throughout West Virginia responding to reports of child abuse and neglect. The network is comprised of 20 CACs that officially serve 31 of West Virginia's 55 counties and provide courtesy services to almost every county in the state. CACs provide a facility where the child abuse professionals of a multidisciplinary team (e.g., prosecution, law enforcement, medical, mental health, and child protective services) work to assist children in a collaborative and coordinated response. CACs manage and track a case to its conclusion, facilitate forensic interviews of child victims, provide victim advocacy and court preparation, make referrals to therapy that is trauma-focused, track referrals for medical evaluations, and ensure that medical information is available to the multidisciplinary team.

Recommendations for Improving Women's and Girls' Health and Well-Being

West Virginia lags behind the nation on many key indicators of women's health and wellbeing, which is a pattern that also held true in 2000 (IWPR 2002). Women in West Virginia have higher mortality rates for chronic diseases such as heart disease, diabetes, and stroke than women in the United States as a whole, have more limited access to health care services, and are more likely to smoke and maintain a diet lacking in proper nutrition. The teen birth rate in the state also exceeds the national average. Recommendations for improving the health of women and girls in West Virginia include:

- exploring options for increasing the number of health care providers and services, especially for prenatal and dental care;
- increasing access to contraception by requiring insurance carriers to cover contraception for the dependent minors of all policy holders, increasing investments in family planning, and expanding Medicaid coverage of family planning services;
- conducting outreach in local communities and schools to address health concerns;
- improving outreach and education on healthy diets and healthy living;
- increasing services and awareness of supports for victims of domestic violence; and
- expanding protection services for child abuse.

⁵² Data provided by the West Virginia Child Advocacy Network (WVCAN) in an email communication on September 19, 2012.

This chapter includes data on different populations in West Virginia. Statistics on age, sex ratio, and elderly female population are presented, as well as the distribution of women by race and ethnicity and by family type. These data present an image of the state's female population and can be used to provide insight on the topics covered in this report. For example, compared with the United States as a whole, West Virginia has an older population; much smaller proportions of African American, Hispanic, Asian American, Native American, and foreign-born women; and a considerably higher proportion of women living in rural areas. Demographic factors have implications for the location of economic activity, the types of jobs available, market growth, and the types of public services needed.

West Virginia is a small state in population with just 1,853,973 residents, which is slightly more than the number of people who lived in the state in 2000 (1,808,344; Table 4.1 and IWPR 2002). Among the female population, there exists little racial and ethnic diversity. White women and girls make up the largest racial/ethnic group at 93.4 percent, which is a much larger share than in the nation overall (63.6 percent; Table 4.1). African American women and girls represent the next largest racial and ethnic group among West Virginia's female population at 2.9 percent, a proportion that is substantially lower than the national average (12.6 percent). Other racial and ethnic groups combined constitute the remaining 3.7 percent of the population in West Virginia and the remaining 23.8 percent of the population in the United States (Table 4.1). West Virginia also has a relatively small foreign-born female population. As of 2010, only 1.1 percent of women and girls in the state were immigrants–a proportion that is equal to the share of the state's female population that was comprised of immigrants in 2000 (IWPR 2002) and substantially lower than the share of the nation's female population that was made up of immigrant women and girls in 2010 (13.0 percent; Table 4.1).

The proportion of married women in West Virginia is slightly higher than in the nation as a whole, a pattern that held true in 2000 as well (Figure 4.1 and IWPR 2002). As of 2010, more than half of women aged 15 and older in the state (51 percent) were married compared with 50 percent in the United States overall. West Virginia also has a larger proportion of women who are widowed or divorced than the United States as a whole (Figure 4.1).

Table 4.1. Basic Demographic Statistics for Wes	t Virginia and	d the United
States, 2010		
	West Virginia	United States

	West Virginia	United States
Total Population, 2010	1,853,973	309,349,689
Proportion of Population in Rural Areas (population under 2,500)	51.3%	19.3%
Number of Women and Girls, All Ages, 2010	941,315	157,294,247
Sex Ratio, All Ages, 2010	1.03:1	1.03:1
Median Age of All Women and Girls, 2010	42	38
Proportion of Women Aged 65 and Older, 2010	17.8%	14.6%
Distribution of Women and Girls by Race and Ethnicity, All Ages, 2010		
White	93.4%	63.6%
African American	2.9%	12.6%
Hispanic	1.2%	15.9%
Asian American	0.6%	5.0%
Native American	0.1%	0.7%
Other	1.8%	2.1%
Distribution of Households by Type, 2010		
Total Number of Family and Nonfamily Households	741,937	114,562,629
All Married-Couple Households	50.3%	48.6%
All Nonfamily Households	34.5%	33.6%
All Other Family Households	15.2%	17.8%
Families with Children as Percent of All Households		
Married-Couple Households with Children Under 18	16.7%	20.0%
Households Headed by Single Women with Children Under 18	5.4%	7.4%
Households Headed by Single Men with Children Under 18	1.7%	2.3%
Proportion of Women and Girls Who Are Foreign-Born, All Ages, 2010	1.1%	13.0%
Percent of Federal and State Prison Population Who Are Women, 2010 ^b	10.9%	7.0%

Note: Racial and ethnic categories are defined as exclusive: white, not Hispanic; African American, not Hispanic; Asian American, not Hispanic; Native American, not Hispanic; and Other, not Hispanic. Persons whose ethnicity is identified as Hispanic or Latino may be of any race. "Other" includes those who chose more than one racial category as well as those not classified by the Census Bureau.

Totals may not sum to 100 percent due to rounding.

Sources: IWPR 2002; IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010); ^aIWPR calculations based on 2010 Census Urban and Rural Classification (U.S. Department of Commerce 2012f); ^bGuerino et al. 2012.

[&]quot;Single women" and "single men" refer to women and men who are divorced, widowed, or never married/single. Nonfamily households include individuals who live alone as well as those who live together but are not related through blood, marriage, or adoption. Adult children may be included in "all married-couple households" and "all other family households."

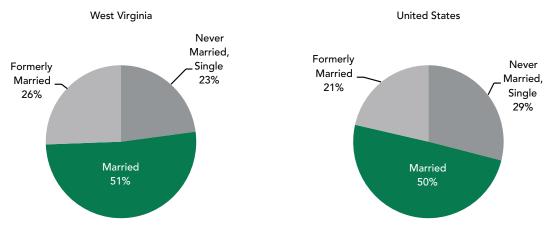


Figure 4.1. Distribution of Women by Marital Status in West Virginia and the United States, 2010

Notes: For women aged 15 and older. "Formerly married" includes those who are widowed or divorced. Married includes those who are separated or have an absent spouse.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Table 4.2. Distribution of Women by Marital Status in West Virginia and theUnited States, 2010

Marital Status	West V	irginia	United	States
Never Married, Single	179,932	23%	36,857,948	29%
Married	404,573	51%	63,164,728	50%
Formerly Married	200,826	26%	27,312,397	21%
Total	785,331	100%	127,335,073	100%

Notes: For women aged 15 and older. "Formerly married" includes those who are widowed or divorced. Married includes women who are separated or have an absent spouse.

Source: IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

The distribution of households in West Virginia also differs somewhat from the United States overall. West Virginia has a higher share of households headed by married couples (50.3 percent compared with 48.6 percent) and a lower share of households headed by single women with dependent children (5.4 percent compared with 7.4 percent). The proportion of nonfamily households is slightly higher in West Virginia than in the United States as a whole (34.5 percent and 33.6 percent, respectively; Table 4.1).

West Virginia is a rural state. The proportion of women and men living in rural areas in West Virginia is substantially higher than in the nation overall (51.3 percent compared with 19.3 percent; Table 4.1). The rural nature of the state affects women in many ways, including by limiting their access to health care services, child care centers, and paid employment. Women in rural areas often lack access to paid employment and vital services due to the limited availability of public transportation that could take them to jobs on a daily basis and enable them to visit a doctor or other health care provider. Having a car or friends and family members who can provide transportation increases access to services for many people in rural areas (Arcury et al. 2005), but not all individuals residing in these areas have access to these forms of transportation.

The percent of West Virginia's prison population that is female is higher than the national average, a pattern that held true in 2000 as well (Table 4.1 and IWPR 2002). In 2010, 725 women in the state were under the jurisdiction of state and federal correction authorities, compared with 303 in 2000 (Guerino et al. 2012). Women comprised 10.9 percent of West Virginia's prison population in 2010 and 7.9 percent in 2000 (Table 4.1; IWPR 2002).

Creating a Brighter Future for Women and Girls in West Virginia

The Status of Women and Girls in West Virginia examines critical issues that shape the lives of women and girls in the state. It shows that while women in West Virginia have made some progress in recent decades, their progress, on the whole, has been slow and in some ways stalled. For example, women's labor force participation rate in West Virginia has remained unchanged since 2000, following several decades of increased participation; and in recent years, the state's gender wage gap has increased slightly.

For nearly all indicators examined in this report, West Virginia women's status is, on average, lower than the status of women in the nation overall. West Virginia ranks 51st in the nation out of the 50 states and the District of Columbia for its proportion of women in the workforce and its proportion of women with a bachelor's degree or higher. It ranks 49th for women's median annual earnings and the gender wage gap, and 44th for its percent of women living above poverty. The state fares only slightly better for its proportion of employed women in managerial or professional occupations (for which it ranks 40th) and its proportion of women aged 18–64 with health insurance coverage (for which it ranks 35th). On only one indicator of women's social and economic status does West Virginia rank in the top half in the nation: the state places 22nd for its percent of businesses that are women-owned (Appendix II).

Changes to public policies as well as community investments and program initiatives provide excellent opportunities to create a better future for women and girls in West Virginia. To implement changes that benefit women—and therefore all members of the state's many communities—it is necessary to understand not only the challenges that women face in West Virginia, but also the interconnections among these challenges and the varied experiences of women in different regions within the state.

Interconnected Challenges

The issues discussed in this report are closely interlinked. For instance, employment directly relates to health and well-being, since without quality jobs that provide family-sustaining wages and benefits, women often lack access to basic health insurance coverage and health care. Similarly, educational attainment is integral to economic security, pointing to the importance of critical workforce supports such as child care that enable women with

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children to pursue postsecondary degrees. In addition, the health issues discussed in this report are closely intertwined: without good nutrition, exercise, and use of preventive measures, women are much more likely to experience health conditions such as diabetes, heart disease, and stroke. Understanding such connections between the issues in this report is integral to creating policies and programs that capitalize on women's achievements and better address their needs.

Racial/Ethnic and Demographic Disparities

Attending to the disparities among women from different backgrounds and regions within the state is another key to implementing changes that further the advancement of women and girls in West Virginia. While women overall earn less than men, African American women in West Virginia earn less than white women and disproportionately bear the burden of poverty in the state. Single women with children also face substantial challenges to achieving economic security and are especially in need of critical workforce supports such as paid sick days and affordable, quality child care. In addition, many older women in West Virginia–a growing demographic group in the state–encounter economic hardship that stems partly from a lifetime of lower earnings than men's due to the gender wage gap, lower labor force participation rates, the devaluation in the formal labor force of "women's work," and time taken out of the workforce to care for children and other family members.

Regional Disparities

Women in West Virginia also face a distinct set of challenges that come with living in rural areas. The state's largest cities are Charleston and Huntingdon, both of which have populations of around 50,000 (U.S. Department of Commerce 2012g); the rural nature of the state may contribute to the lower-than-average status of its women on many indicators, including West Virginia's ranking of 51st for its proportion of women in the paid workforce. The limited access to public transportation, child care, and other services that often characterizes rural areas makes it difficult for many of West Virginia's women to participate in the formal labor force and achieve economic security; gendered assumptions about women's traditional roles may also limit women's formal labor force participation in some cases.

The regional data presented in this report reveal stark disparities between the circumstances of women who live in the southern part of the state and those who live in the Eastern and Northern Panhandles. Women in southern West Virginia–which, in the 1970s and 1980s, lost thousands of jobs in the mining and manufacturing industries (Oberhauser 1995)– have much lower labor force participation rates and much higher poverty rates. These no-table differences point to the need to consider the varied experiences of women across West Virginia's diverse regions when proposing policy and programmatic changes.

Many advocates and women's organizations in West Virginia remain committed to addressing these challenges by leveraging the opportunities available to effect change. *The Status of Women and Girls in West Virginia* aims to highlight the importance of committing adequate resources to innovative strategies that will improve the economic security and health of women and girls across the state. The data in this report are intended to serve not only as a resource for policymakers, advocates, philanthropists, and other community stakeholders, but also as a catalyst for change that is initiated through the collaborative action of those engaged in improving the status of women and girls in West Virginia. To analyze the status of women and girls in West Virginia, IWPR selected indicators that prior research and experience have shown to illuminate issues that are integral to women's lives and that allow, for the most part, for comparability between the state, sub-state regions, and the United States as a whole. IWPR used similar indicators to those presented in its 2002 report on the status of women in West Virginia but added regional data to highlight the diversity of women's experiences within the state.

The data for this report come from multiple sources, which are noted in the text. Much of the data come from state and federal government agencies, including the Centers for Disease Control and Prevention, the Federal Bureau of Investigation, the West Virginia Bureau of Public Health, the U.S. Bureau of Labor Statistics, and the U.S. Census Bureau. The report also draws on data from local and national organizations that analyze issues such as health behaviors among West Virginia's residents and the economic status of older adults in the state. On some indicators, current and consistent quantitative data, disaggregated by gender and race/ethnicity, were not available or the sample sizes did not permit reporting estimates. A lack of reliable and comparable data limits IWPR's treatment of several important topics, including violence against women, issues concerning nontraditional families, issues of special importance to lesbians, and the work that women perform in the "informal" economy. IWPR considers these topics to be of serious concern to women, but their limited place in national surveys and other data collection efforts restricts the extent to which they can be addressed in the report.

Many of the figures and tables in the report rely on the U.S. Census Bureau's American Community Survey (ACS), a large annual survey of a representative sample of the entire resident population in the United States, including both households and group quarter (GQ) facilities. GQ facilities include places such as college residence halls, residential treatment centers, skilled nursing facilities, group homes, military barracks, correctional facilities, workers' dormitories, and facilities for people experiencing homelessness.⁵³

Most of the tables and figures in this report present data for individuals. Where data are disaggregated by race and ethnicity, the person providing the information on the survey form determines the group to which he or she (and other members of the household) belong. People defining themselves as Hispanic or Latino may be of any race; to prevent double counting, the other racial categories—white, African American (which includes those who identified as black or African American), Asian American (which includes those who

⁵³ GQ types that are excluded from ACS sampling and data collection include domestic violence shelters, soup kitchens, regularly scheduled mobile vans, targeted non-sheltered outdoor locations, commercial maritime vessels, natural disaster shelters, and dangerous encampments.

identified as Chinese, Japanese, and Other Asian or Pacific Islander), and Native American (which includes those who identified as American Indian or Alaskan Native)—are defined as exclusive of Hispanics or Latinos. The low numbers of Hispanics, Asian Americans, Native Americans, and people of more than one race in the state prevent the reporting of estimates for most indicators for these groups.

When analyzing state- and national-level microdata from the American Community Survey, IWPR used 2010 estimates, the most recent available data, for most indicators. For the analysis of sub-state regions and a small number of indicators at the state level, IWPR used estimates that combine three years of data (2008–2010) to ensure sufficient sample sizes. Even when using three-year combined data files, however, sample sizes may be too small to be reasonably confident of the resulting estimates. For example, given the state's small population, the three-year data file did not include a sufficient sample to provide reliable estimates of the earnings of women who did not graduate from high school. Data are not presented if the sample size is less than 100 for a category, or less than 20 for any cell or sub-category. IWPR used personal weights to obtain nationally representative statistics for person-level analyses, and household-level weights for household analysis. Weights included with the IPUMS ACS for the household- and person-level data adjust for the mixed geographic sampling rates, non-response adjustments, and individual sampling probabilities. Estimates from the IPUMS ACS samples may not be consistent with summary table ACS estimates due to the additional sampling error.

IWPR calculations based on microdata from the American Community Survey may differ slightly from published estimates that are available through the U.S. Census Bureau's American Fact Finder. In some instances, IWPR classifies respondents in a different way than the Census Bureau (e.g., race and ethnicity). In other cases, the Census Bureau employs different estimation procedures for calculating estimates. For a few indicators, IWPR reports American Community Survey data using tabulations from the American Fact Finder to describe the West Virginia population.

The five regions studied in this report were defined using Public Use Microdata Area variables (PUMAs), which are the smallest geographic unit available within American Community Survey microdata. The Northern Panhandle region includes the counties of Brooke, Hancock, Marshall, Monongalia, Ohio, Preston, and Wetzel. The North Central region includes the counties of Barbour, Braxton, Calhoun, Doddridge, Gilmer, Harrison, Jackson, Lewis, Marion, Pleasants, Randolph, Ritchie, Roane, Taylor, Tucker, Tyler, Upshur, Wirt, and Wood. The Eastern Panhandle region includes Berkeley, Grant, Hampshire, Hardy, Jefferson, Mineral, Morgan, and Pendleton counties. The South Central region includes Boone, Cabell, Clay, Fayette, Greenbrier, Kanawha, Mason, Nicholas, Pocahontas, Putnam, and Webster counties. The Southern region includes the counties of Lincoln, Logan, Mc-Dowell, Mercer, Mingo, Monroe, Raleigh, Summers, Wayne, and Wyoming. This clustering of counties is necessary to enable sufficient sample sizes and ensure respondents' confidentiality; the U.S. Census Bureau does not release one-year microdata for geographic areas with a population count of less than 100,000 and three-year microdata for areas with a population count of less than 65,000.

Readers of this report should keep one additional note in mind. In some cases, the differences reflected in the data between women and men, different groups of women, or West Virginia and other states or the nation as a whole are statistically significant (they are unlikely to have occurred by chance and probably represent a true difference between the groups being compared). In other cases, these differences are too small to be statistically significant and are likely to have occurred by chance. IWPR did not calculate or report measures of statistical significance; generally, the larger a difference between two values (for any given sample size), the more likely it is that the difference will be statistically significant. Sample sizes differ among the indicators and geographic areas analyzed.

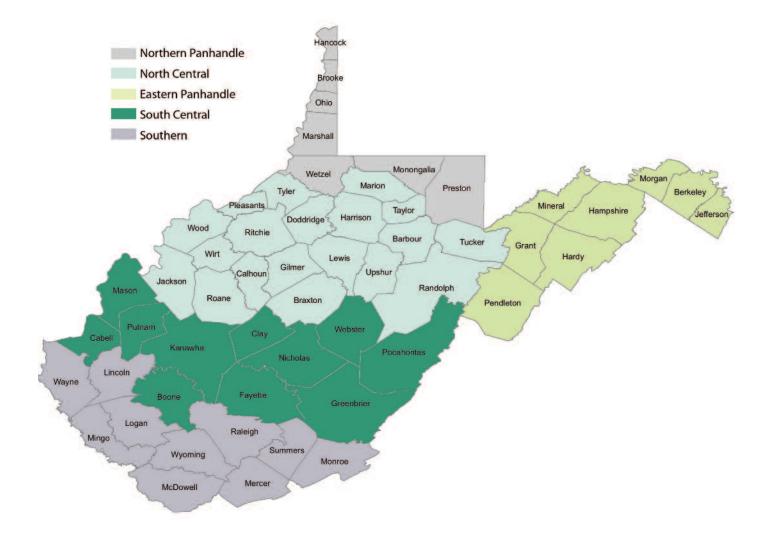
APPENDIX II. STATE-BY-STATE RANKINGS AND DATA ON INDICATORS OF WOMEN'S SOCIAL AND ECONOMIC STATUS, 2010

	Median An- nual Earnings for Women Employed Full-Time/Year Round, 2010	An- An- nen yed /Year- 2010	Median Annual Earn- ings for Men Employed Full- Time/ Year- Round, 2010		Earnings Ratio Between Women and Men Employed Full- Time/Year- Round, 2010	s Ratio een n and ployed Il- Year- 2010	Percent of Women in the Labor Force, 2010	Percent of Women in the Labor Force, 2010	Percent of Employed Women in Managerial or Professional Occupations, 2010	nt of yyed en in erial or iional tions, 0	Percent of Businesses that are Women- Owned, 2007	nt of esses are ien- ied,)7	Percent of Women 25 Years and Older with a Bachelor's Degree or Higher, 2010	Percent of Women 25 Years and Jlder with a Bachelor's Degree or Higher, 2010	Percent of Women Living Above Poverty, 2010	nt of Living ve irty, 10°	Percent of Women 18–64 Years Old with Health Insurance, 2010	int of 18–64 Id with Ith ance, 10
State	Dollars	Rank	Dollars	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank
Alabama	\$31,000	39	\$42,000	32	73.8%	41	54.2%	49	36.6%	42	28.1%	19	22.0%	46	81.2%	48	80.7%	32
Alaska	\$42,500	9	\$55,000	9	77.3%	31	65.5%	5	42.6%	6	25.9%	35	29.7%	19	88.3%	7	79.4%	35
Arizona	\$35,000	20	\$43,100	28	81.2%	∞	56.1%	45	38.0%	29	28.1%	19	24.9%	36	83.4%	38	79.7%	34
Arkansas	\$29,000	49	\$38,000	50	76.3%	33	56.1%	46	36.0%	47	24.5%	49	19.2%	50	81.6%	45	75.7%	45
California	\$40,000	7	\$49,500	17	80.8%	6	57.9%	40	39.5%	20	30.3%	6	29.8%	18	84.9%	29	77.6%	41
Colorado	\$39,000	14	\$50,000	6	78.0%	24	63.6%	1	42.0%	12	29.2%	13	36.4%	m	86.9%	15	81.8%	28
Connecticut	\$45,000	с	\$60,000	1	75.0%	36	63.2%	14	42.7%	8	28.1%	19	34.7%	9	89.4%	4	89.6%	9
Delaware	\$40,000	7	\$50,000	6	80.0%	11	60.6%	24	42.9%	9	25.9%	35	27.7%	24	88.5%	9	89.1%	8
DC	\$55,000	-	\$60,000	1	91.7%	1	64.7%	8	59.7%	1	34.5%	1	49.5%	1	80.5%	50	93.0%	2
Florida	\$32,700	32	\$40,000	40	81.8%	9	56.2%	44	36.3%	45	28.9%	14	25.0%	35	84.0%	34	72.9%	50
Georgia	\$34,000	26	\$43,000	29	79.1%	20	59.1%	31	39.3%	22	30.9%	5	27.5%	25	82.3%	42	75.4%	47
Hawaii	\$36,000	17	\$45,000	21	80.0%	11	61.9%	16	35.5%	49	31.0%	4	29.6%	20	88.9%	5	91.4%	4
Idaho	\$30,000	43	\$40,000	40	75.0%	36	58.6%	34	34.5%	50	23.5%	50	23.1%	41	83.7%	36	76.6%	42
Illinois	\$38,000	16	\$50,000	6	76.0%	35	60.9%	20	39.6%	18	30.5%	9	30.8%	13	86.1%	23	82.7%	24
Indiana	\$32,000	33	\$45,000	21	71.1%	46	59.6%	30	36.7%	41	26.8%	31	22.6%	42	85.0%	28	81.4%	30
lowa	\$33,000	29	\$42,000	32	78.6%	22	64.2%	10	37.7%	34	25.5%	43	25.5%	31	86.9%	15	88.4%	6
Kansas	\$32,000	33	\$43,200	27	74.1%	40	63.4%	13	38.6%	26	27.5%	25	30.0%	17	86.6%	18	82.4%	26
Kentucky	\$31,000	39	\$40,000	40	77.5%	29	55.4%	47	38.0%	29	25.6%	41	21.1%	47	81.3%	47	80.0%	33
Louisiana	\$30,000	43	\$45,000	21	66.7%	51	58.0%	39	36.6%	42	27.3%	26	22.3%	44	81.2%	48	75.8%	44
Maine	\$33,000	29	\$40,000	40	82.5%	ĸ	61.2%	19	40.2%	15	25.6%	41	28.2%	22	86.2%	22	87.6%	11
Maryland	\$47,000	2	\$57,000	4	82.5%	3	65.1%	9	47.3%	2	32.6%	2	35.5%	5	89.7%	2	87.0%	13
Massachusetts	\$45,000	с	\$56,000	5	80.4%	10	63.2%	14	46.2%	З	29.8%	11	38.7%	2	87.8%	12	95.7%	١
Michigan	\$36,000	17	\$49,000	18	73.5%	44	58.6%	34	36.9%	39	30.4%	7	25.2%	34	83.9%	35	84.7%	19
Minnesota	\$40,000	7	\$50,000	6	80.0%	11	66.7%	1	41.1%	13	26.8%	31	31.8%	11	88.2%	8	90.3%	5
Mississippi	\$28,500	51	\$39,000	49	73.1%	45	54.0%	50	38.4%	27	26.9%	30	20.7%	48	78.2%	51	76.1%	43

	Median Annual Earnings for Women Employed Full-Time/Year- Round, 2010	Annual ys for ien ivyed e/Year- 2010	Median Annual Earnings for Men Employed Full-Time/Year- Round, 2010		Earnings Ratio Between Women and Men Employed Full-Time/Year- Round, 2010	s Ratio 'een ind Men oyed e/Year- 2010	Percent of Women in the Labor Force, 2010	nt of in the Force, 0"	Percent of Employed Women in Mana- gerial or Profes- sional Occupations, 2010	nt of oyed n Mana- Profes- nal ations, 10	Percent of Businesses that are Women-Owno 2007	nt of esses are Owned, D7	Percent of Women 25 Years and Older with a Bachelor's De- gree or Higher, 2010	nt of 25 Years r with a or's De- Higher, 10	Percent of Women Living Above Poverty 2010 ⁶	nt of Living overty, 10 ⁶	Percent of Women 18–64 Years Old with Health Insurance, 2010	nt of 18–64 d with lth e, 2010
State	Dollars	Rank	Dollars	Rank	Percent	~	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank
Missouri Montana	\$32,000 \$30,000	43 33	\$42,000 \$40,700	32 39	76.2% 73.7%	43	60.4% 61.3%	27 18	38.2% 38.9%	28	26.1% 24.6%	48	25.5% 30.3%	31 15	84.6% 85.7%	30	82.6% 78.9%	25 38
Nebraska	\$31,000	39	\$42,000	32	73.8%	41	66.6%	2	37.6%	35	25.7%	40	27.9%	23	87.7%	13	84.9%	17
Nevada	\$35,000	20	\$43,000	29	81.4%	7	60.8%	23	31.0%	51	28.6%	15	20.5%	49	85.5%	25	73.4%	49
New Hampshire	\$39,000	14	\$51,000	7	76.5%	32	65.6%	4	42.3%	10	25.8%	39	33.2%	9	90.5%	_1	86.2%	16
New Jersey	\$45,000	ω	\$58,000	ω	77.6%	28	60.9%	20	42.9%	6	27.3%	26	34.4%	7	89.7%	2	84.4%	21
New Mexico	\$32,000	33	\$40,000	40	80.0%	11	55.2%	48	38.9%	23	31.7%	З	24.6%	37	81.5%	46	74.3%	48
New York	\$40,000	7	\$50,000	9	80.0%	11	58.4%	37	42.2%	11	30.4%	7	32.6%	10	85.1%	27	86.5%	14
North Carolina	\$33,000	29	\$40,000	40	82.5%	3	58.6%	34	39.9%	17	28.2%	17	26.6%	27	83.1%	39	79.1%	37
North Dakota	\$30,000	43	\$42,200	31	71.1%	46	66.4%	ω	37.1%	38	24.7%	47	31.2%	12	86.3%	21	88.3%	10
Ohio	\$35,000	20	\$45,000	21	77.8%	25	59.7%	29	37.2%	37	27.7%	23	24.2%	39	84.5%	32	84.9%	17
Oklahoma	\$30,000	43	\$40,000	40	75.0%	36	57.5%	41	36.3%	45	25.3%	45	22.3%	44	83.6%	37	75.5%	46
Oregon	\$35,000	20	\$45,000	21	77.8%	25	59.0%	32	38.9%	23	29.7%	12	28.3%	21	84.5%	32	78.8%	39
Pennsylvania	\$35,200	19	\$47,000	19	74.9%	39	58.1%	38	39.5%	20	27.0%	29	26.1%	30	86.7%	17	87.6%	11
Rhode Island	\$40,000	7	\$50,000	9	80.0%	11	60.9%	20	39.6%	18	27.3%	26	30.3%	15	85.5%	25	86.4%	15
South Carolina	\$31,000	39	\$40,000	40	77.5%	29	57.4%	42	36.5%	44	27.6%	24	24.6%	37	82.2%	43	78.3%	40
South Dakota	\$30,000	43	\$38,000	50	78.9%	21	63.6%	11	40.5%	14	22.1%	51	27.2%	26	84.6%	30	84.6%	20
Tennessee	\$32,000	33	\$40,000	40	80.0%	11	56.6%	43	38.0%	29	25.9%	35	22.6%	42	82.8%	41	82.2%	27
Texas	\$33,300	28	\$42,000	32	79.3%	19	58.7%	33	38.0%	29	28.2%	17	25.3%	33	82.9%	40	70.3%	51
Utah	\$32,000	33	\$46,000	20	69.6%	48	60.5%	25	36.0%	47	24.9%	46	26.2%	29	86.5%	19	81.6%	29
Vermont	\$35,000	20	\$42,000	32	83.3%	2	64.5%	9	43.2%	ъ	26.0%	34	35.6%	4	88.0%	11	92.2%	З
Virginia	\$40,000	7	\$50,000	9	80.0%	11	61.8%	17	44.4%	4	30.1%	10	34.1%	8	88.2%	8	84.3%	22
Washington	\$40,000	7	\$51,000	7	78.4%	23	59.8%	28	40.0%	16	28.6%	15	30.6%	14	86.5%	19	83.1%	23
West Virginia	\$29,000	49	\$42,000	32	69.0%	49	49.6%	51	36.8%	40	28.0%	22	17.8%	51	81.7%	44	79.4%	35
Wisconsin	\$35,000	20	\$45,000	21	77.8%	25	64.8%	7	38.0%	29	25.9%	35	26.6%	27	87.0%	14	89.5%	7
Wyoming	\$33,500	27	\$50,000	9	67.0%	50	60.5%	25	37.4%	36	25.5%	43	23.7%	40	88.1%	10	81.1%	31
United States	\$36,000		\$45,500		79.1%		59.3%		39.4%		28.7%		27.9%		84.9%		81.0%	
Notes: apersons 1		- -																

United States: Data on the percent of businesses that are women-owned are from the U.S. Census Bureau's 2007 Survey of Business Owners (U.S. Department of Commerce 2012c); all other data are from IWPR analysis of 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

APPENDIX III. REGIONAL MAP OF WEST VIRGINIA



Source: IWPR definition of West Virginia regions using shape files available from the U.S. Census Bureau's Master Address File/Topologically Integrated Geographic Encoding and Referencing (MAF/TIGER) database available at http://www.census.gov/geo/www/tiger/tgrshp2010/tgrshp2010.html (accessed December 13, 2012).

Table 1. Summary Table of Women's Social and Economic Status in West Virginia Regions, West Virginia, and the United States

	Earning Time/Yea Workers,	Annual gs, Full- ar-Round , 16 Years Older	Ratio of Women's Earnings to Men's	Percent of Women Living At or Below Poverty, 18 Years and Older	Percent of and Mer Labor F 16 Years a	in the orce,	Percent of Employed Women in Managerial and Professional Occupations	
Region	Women	Men	Percent	Percent	Women	Men	Percent	Percent
Northern Panhandle, 2008–2010	\$30,000	\$42,000	71.4%	18%	54%	61%	40%	23%
North Central, 2008– 2010	\$26,332	\$40,000	65.8%	19%	49%	60%	35%	16%
Eastern Panhandle, 2008–2010	\$30,492	\$43,000	70.9%	13%	60%	69%	32%	18%
South Central, 2008– 2010	\$29,476	\$43,000	68.5%	17%	51%	62%	38%	19%
Southern, 2008–2010	\$25,320	\$40,000	63.3%	21%	41%	52%	36%	13%
West Virginia, 2010	\$29,000	\$42,000	69.0%	18%	50%	60%	37%	18%
West Virginia, 1999/2000	\$28,111	\$40,141	70.0%	17%	51%	64%	28%	14%
United States, 2010	\$36,000	\$45,500	79.1%	15%	59%	70%	39%	28%
United States, 1999/2000	\$34,063	\$46,852	72.7%	12%	60%	75%	32%	23%

Notes: Data for 1999/2000 are based on IWPR (2002) analysis of the Current Population Survey (CPS). Data on earnings reflect pooled data from 1998–2000, inflated to 2010 dollars; adjustments are computed using the U.S. Bureau of Labor Statistics inflation calculator at http://www.bls.gov/data/inflation_calculator.htm> (accessed January 10, 2013). Three years of data were used to ensure a sufficiently large sample; the data are referred to as 1999 data, the midpoint of the three years analyzed.

2008–2010 earnings data are in 2010 dollars. Dollar amounts have been standardized to dollars as valued in the final year of data included in IPUMS ACS multi-year files.

Data on employment in management and professional occupations are for 1999; data on labor force participation and bachelor's degree or higher are from 2000.

Full-time, year-round is defined as 35 or more hours of work per week and 50 or more weeks of work per year.

See Appendix III for a map showing the counties included within each region.

Sources: IWPR 2002; IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

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Table 2. Summary Table of Poverty and Food Stamps Statistics in West Virginia Regions, West Virginia, and the United States

	Percent I or Below 18 Yea Olc	Poverty, rs and	Percent of Households Receiving Food Stamps	Ρ	overty Rates	by Family Typ	e
Region	Women	Men	Percent	Married Couples With Children	Married Couples Without Children	Single Women With Children	Single Men With Children
Northern Panhandle, 2008–2010	18%	16%	10%	10%	4%	41%	N/A
North Central, 2008–2010	19%	14%	16%	12%	7%	55%	35%
Eastern Panhandle, 2008–2010	13%	8%	9%	5%	3%	40%	N/A
South Central, 2008–2010	17%	13%	15%	10%	5%	49%	36%
Southern, 2008–2010	21%	17%	17%	16%	7%	67%	46%
West Virginia, 2010	18%	14%	15%	12%	5%	53%	33%
West Virginia, 1998–2000	16.8%	11.5%	*	11%	6%	44%	N/A
United States, 2010	15%	12%	12%	9%	4%	42%	24%
United States, 1998–2000	12.0%	8.3%	*	6%	4%	36%	N/A

Notes: N/A indicates insufficient sample size.

"Single women" and "single men" refer to women and men who are single/never married, divorced, widowed, separated, or married with an absent spouse.

*Poverty figures for 1998–2000 are based on IWPR (2002) analysis of the Current Population Survey (CPS); source does not include data on food stamps.

Those who live at or below poverty have family incomes at or below 100 percent of the federal poverty line.

See Appendix III for a map showing the counties included within each region.

Sources: IWPR 2002; IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Table 3. Percent of Women and Men with Any Health Insurance Coverage, Aged 18–64 Years, in West Virginia Regions, West Virginia, and the United States

Region	Women	Men
Northern Panhandle, 2008–2010	83%	79%
North Central, 2008–2010	78%	77%
Eastern Panhandle, 2008–2010	82%	80%
South Central, 2008–2010	79%	78%
Southern, 2008–2010	78%	75%
West Virginia, 2010	79%	77%
West Virginia, 2000	81%	80%
United States, 2010	81%	75%
United States, 2000	83%	81%

Note: See Appendix III for a map showing the counties included within each region.

Sources: IWPR 2002; IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Table 4. Educational Attainment by Gender, Aged 25 Years and Older, in West Virginia Regions, West Virginia, and the United States

		an High Diploma		ol Diploma ivalent		ollege or 's Degree		's Degree gher
Region	Women	Men	Women	Men	Women	Men	Women	Men
Northern Panhandle, 2008–2010	13%	12%	38%	41%	26%	25%	23%	21%
North Central, 2008–2010	15%	19%	41%	43%	28%	24%	16%	15%
Eastern Panhandle, 2008–2010	14%	18%	42%	44%	26%	21%	18%	17%
South Central, 2008–2010	16%	18%	38%	40%	27%	23%	19%	20%
Southern, 2008–2010	23%	26%	40%	43%	24%	20%	13%	10%
West Virginia, 2010	16%	18%	40%	43%	27%	23%	18%	17%
United States, 2010	14%	15%	28%	29%	30%	28%	28%	29%

Note: See Appendix III for a map showing the counties included within each region.

Source: IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Table 5. Median Annual Earnings and Gender Earnings Ratio by Educational Attainment, Aged 25 Years and Older, in West Virginia Regions, West Virginia, and the United States

	High Schoo	ol Diploma or the	Equivalent	Bache	elor's Degree or H	ligher
Region	Women	Men	Earnings Ratio	Women	Men	Earnings Ratio
Northern Panhandle, 2008–2010	\$21,269	\$37,000	57.5%	\$44,563	\$62,001	71.9%
North Central, 2008–2010	\$21,269	\$35,448	60.0%	\$42,689	\$56,716	75.3%
Eastern Panhandle, 2008–2010	\$25,624	\$40,000	64.1%	\$46,588	\$60,984	76.4%
South Central, 2008–2010	\$24,000	\$38,486	62.4%	\$44,200	\$60,767	72.7%
Southern, 2008–2010	\$21,649	\$38,623	56.1%	\$39,499	\$50,000	79.0%
West Virginia, 2010	\$24,000	\$40,000	60.0%	\$42,500	\$57,000	74.6%
West Virginia, 1999	\$22,793	\$37,427	60.9%	\$38,000	\$60,032	63.3%
United States, 2010	\$28,000	\$38,000	73.7%	\$53,000	\$75,000	70.7%

Notes: Data for 1999 are based on IWPR (2002) analysis of the Current Population Survey (CPS). Data for 1999 earnings are in 2010 dollars. Adjustments are computed using the Bureau of Labor Statistics inflation calculator at

http://www.bls.gov/data/inflation_calculator.htm> (accessed January 10, 2013).

2008–2010 earnings data are in 2010 dollars. Dollar amounts have been standardized to dollars as valued in the final year of data included in IPUMS ACS multi-year files.

Earnings are for full-time/year-round workers aged 16 and older. Full-time, year-round is defined as 35 or more hours of work per week and 50 or more weeks of work per year.

Sources: IWPR 2002; IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

Table 6. Demographics in West Virginia Regions, West Virginia, and the United States

			Proport the Popu					Marita	l Status			
	Mediar	n Age	Aged 6 Old	5 and		W	omen				Men	
Region	Women	Men	Women	Men	Married	Single	Divorced	Widowed	Married	Single	Divorced	Widowed
Northern Panhandle, 2008–2010	41	37	18%	13%	49%	28%	10%	13%	50%	37%	10%	3%
North Central, 2008–2010	43	40	19%	15%	54%	20%	13%	13%	56%	29%	12%	4%
Eastern Panhandle, 2008–2010	39	39	15%	13%	54%	24%	12%	10%	55%	29%	12%	3%
South Central, 2008–2010	42	40	18%	14%	51%	22%	14%	13%	55%	28%	13%	3%
Southern, 2008–2010	42	40	18%	14%	54%	19%	12%	15%	57%	27%	12%	4%
West Virginia, 2010	42	40	18%	14%	52%	23%	13%	13%	54%	30%	12%	4%
United States, 2010	38	35	15%	11%	50%	29%	12%	9%	52%	35%	10%	3%

Notes: Marital status is for individuals aged 15 years and older. "Single" refers to individuals who were never married; "married" includes those who are separated and those who are married with an absent spouse.

See Appendix III for a map showing the counties included within each region.

Source: IWPR analysis of 2008–2010 and 2010 IPUMS American Community Survey microdata (Ruggles et al. 2010).

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