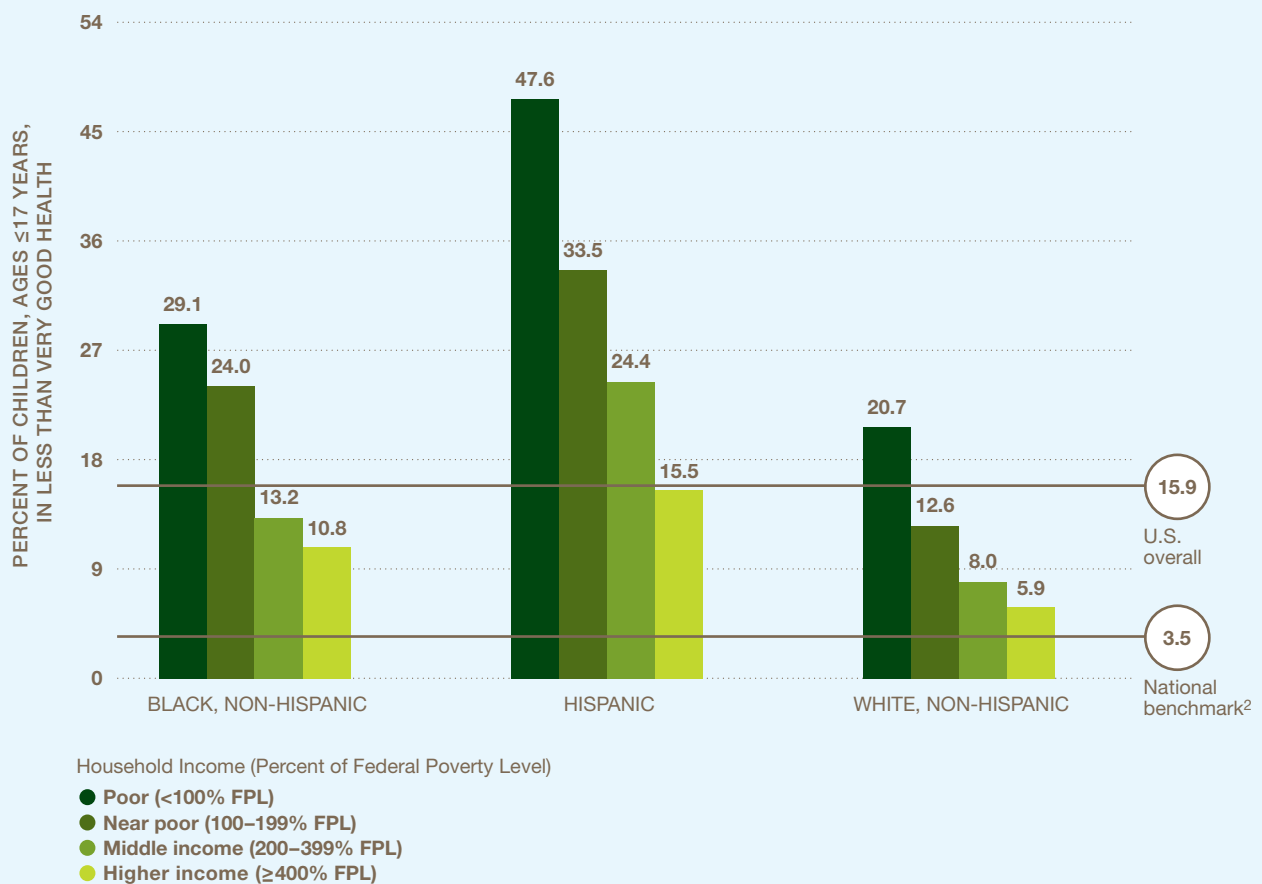# Income Is Linked With Health
Regardless of Racial or Ethnic Group

Gaps in children's health by income do not simply reflect differences by race or ethnicity; nor do they simply reflect differences between the rich and the poor. Both income and racial or ethnic group matter.

- Within each racial or ethnic group, a steep income gradient is evident. Children's general health status[1] improves as family income increases. Among non-Hispanic whites, for example, children in poor, near-poor or middle-income households were 3.5, 2.1 and 1.4 times as likely to be in less than very good health as children in higher-income households.

- At each level of income, non-Hispanic black and Hispanic children fared worse than non-Hispanic whites.

The extent of unrealized health potential is even greater when considering the level of children's health that should be attainable. At every income level in every racial or ethnic group, the percentage of children in less than optimal health was higher than the national benchmark[2] for children's general health status.

PERCENT OF CHILDREN, AGES ≤17 YEARS, IN LESS THAN VERY GOOD HEALTH

BLACK, NON-HISPANIC: 29.1, 24.0, 13.2, 10.8
HISPANIC: 47.6, 33.5, 24.4, 15.5
WHITE, NON-HISPANIC: 20.7, 12.6, 8.0, 5.9

15.9 — U.S. overall
3.5 — National benchmark[2]

Household Income (Percent of Federal Poverty Level)
- ● Poor (<100% FPL)
- ● Near poor (100–199% FPL)
- ● Middle income (200–399% FPL)
- ● Higher income (≥400% FPL)

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