

R.I. women are falling behind in state's economy, report shows

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By Daniel Barbarisi
Journal Staff Writer

Women in Rhode Island are more likely to be poor, to work part time, and to lack access to health insurance than they were five years ago, according to a study to be released today by the Women's Fund of Rhode Island.

Compared with their male counterparts, Ocean State women earn less, hold very few elective offices, and have lower-skill, part-time jobs, said the Status of Women in Rhode Island report.

At the same time, women are healthier than they were five years ago, and they are narrowing the wage gap. Women have lower mortality rates for lung cancer and breast cancer and fewer incidences of HIV/AIDS than they did in 2002. They are also ahead of the national average when it comes to receiving prenatal care, and have a lower rate of infant mortality.

The first Status of Women in Rhode Island report was released in 2002, and compared Rhode Island's levels of political participation, earnings, health, reproductive rights, and social autonomy with the national average. This second incarnation makes few comparisons with the national averages, and instead focuses on assessing women's progress in Rhode Island since 2002.

"Things haven't really changed that much in five years," said Marcia Coné-Tighe, executive director of the Women's Fund. The Women's Fund is a nonprofit research and advocacy group for Rhode Island women that also distributes grants to local organizations assisting women and girls.

"Since the first report, women are more likely to be poor. There are more women who lack health-care coverage. There are more women in the work force but more women are working part time."

The statistic raising the most concern, the report's authors said, is the poverty rate. Female poverty rates have risen from 10.5 percent in 2000 to 12.4 percent in 2005.

But the 2006 report also shows that women appear to be improving in areas where they have long trailed men, such as wages and business ownership. Women now make 84 cents for every dollar their male counterparts earn, the second-best ratio in New England, behind only Vermont.

But both men and women as a whole are doing poorly — so that while they may be narrowing the gap, in many ways women are doing worse overall.

“This report reveals unsettling news for women in Rhode Island, and also for men,” said Coné-Tighe. “Wages have fallen for men over the past five years — and yet even with that fall-off, women are still lagging behind.”

Since 2000, the report states, women’s inflation-adjusted median wages have increased by only 1 percent. But men’s median wages have decreased by 4.5 percent, accounting for much of the narrowing of the gap.

Similarly, both men and women are losing access to health care. In 2000, 77 percent of adult Rhode Island women had access to employer-provided health care. By 2004, that had slipped to 67 percent. Men fell to 63 percent over that period.

Women, poverty advocates say, often have a harder time dealing with economically stagnant times and low wage improvements, because of the added burden of child support and greater frequency of single parenthood.

“A lack of child support and the responsibility for child care can come together” to hit women particularly hard, especially single mothers, said Kate Brewster, executive director of the Poverty Institute at Rhode Island College.

The increasing cost of living in Rhode Island, coupled with stagnant wage increases, has meant more women not making ends meet, she said.

“Certainly women are facing bigger obstacles with their income not increasing and costs going up,” Brewster said.

Perhaps as a result of increasing costs, more women are entering the state’s workforce than ever before: 62.6 percent of women work, compared with 73.3 percent of men. This is up from 2000, when 60.6 percent of women were employed or seeking employment. Men’s workforce participation declined by 1 percent over that period.

But women who work are far more likely than men to hold part-time, lower wage jobs, with no health care — the study showed that nearly half of women who work are in part-time jobs.

“The sad part of that though is that they tend to be more in part-time work. There are more women working but it’s not helping them make ends meet,” said Coné-Tighe.

In 2000, 53 percent of women who work were employed full time. By 2005, that number had fallen to 49.8 percent. With 4 percent of women seeking work

considered to be unemployed and unable to find a job, that leaves roughly 46 percent of working women in part-time labor.

By comparison, 67.7 percent of men were employed full time in 2000, falling to 58 percent in 2005.

Women are also predominantly employed in office and administrative support occupations, with 23 percent of women in these fields, compared with 6.7 percent of men. Men continue to lead women in management, business, and financial occupations, with 15 percent of men in these fields, compared with 11 percent of women.

Rhode Island women have among the lowest levels of elected representation in state and national office in the United States. Women held only 19.5 percent of all elected offices last year, below the national average of 24.7 percent. Until Lt. Gov. Elizabeth Roberts was sworn in this month, no woman held statewide office in Rhode Island in the period covered by the two studies.

Some of this could be Rhode Island's entrenched political culture, where women have traditionally not been part of the power structure, said Coné-Tighe.

"You sort of model what you see, and if you see more women in office, you are more likely to run," she said. "Some of it could be just what has been traditional in this state, in terms of who typically runs for office and who's in the pipeline."

The Women's Fund makes no recommendations with these numbers, but will hold a forum today at the State House at 2:30 p.m. to educate lawmakers and the public about them.

Brewster's Poverty Institute, however, which helped compile the report for the Women's Fund, plans to use the data to lobby for changes, and to strengthen work support, adult education, and child and health care programs.