

**KEY CHARACTERISTICS OF NEW  
AFDC PAYEES:  
DOES THE 1987 PROFILE STILL APPLY?**

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## EXECUTIVE SUMMARY

Welfare reform is here to stay. It would be premature to predict what shape national and state-level reform will take in the next few years, but it seems quite safe to predict that some type of reform will certainly occur. Regardless of one's views on what the best approach to welfare reform would be, there is need to base proposals and implementation plans on valid, reliable data about the population to be served.

Ideally, AFDC policy-makers would have instant, on-line ability to answer myriad questions about caseload characteristics and be able to have large-scale research studies carried out in weeks, rather than months or years. Unfortunately, neither scenario is common in the real world of public welfare and, as a result, administrators must usually rely on their own accumulated practice wisdom coupled with research results which may be several years old. When yesterday's research results are used to shape policy and/or reform options, decision-makers must feel confident that those results are an accurate reflection of today's realities.

One specific population of great interest to welfare reform planners, especially those concerned with prevention, is that of first-time AFDC recipients. Several years ago, Maryland was prescient enough to commission a study that produced a valid and reliable profile of its new AFDC payees in mid-1987. As we contemplate the next wave of welfare prevention and welfare

reform, the question that arises is whether or not key client characteristics identified in the 1987 first-timers study remain key characteristics or risk factors in 1994.

The state's interest in this question is not merely academic. Instead it is a very practical concern since it is simply not possible to design welfare reform or dependency prevention programs absent knowledge of the important, widespread characteristics of the people to whom those programs will be addressed.

The analyses reported herein were undertaken to answer the important twin questions about the validity of key 1987 variables in the mid-1990s and their implications for future welfare reform and caseload composition planning. The analyses confirmed that the four characteristics studied do remain of vital importance; this paper provides Maryland AFDC officials with the independent, empirical evidence we used to arrive at that conclusion. In particular, we believe the paper shows that these variables remain particularly useful for anticipating the characteristics of those most likely to be coming onto the state's AFDC rolls. Absent intervention, these variables should be equally useful in predicting patterns of welfare use.

In addition to those four variables, our search of the literature suggested to us that AFDC administrators would also be well-advised to give serious consideration to several "new" issues in their planning for the future. One of these concerns the small, but growing cohort of "other relative" AFDC cases, particularly those where the child's reason for living apart from

its parent(s) is precipitated by a parental substance abuse problem. More generally, the data suggest that the incidence and implications of substance abuse among AFDC recipients should be added to the list of policy-makers' concerns.

On a different note, we think the data we uncovered also imply need for the state to begin to plan programs, rethink the AFDC-child support link and construct both the AFDC and child support budgets as if all new AFDC cases were in need of paternity establishment. This is especially true in Baltimore City. At the most practical level, we strongly recommend based on this review that renewed, serious and concerted efforts be undertaken to improve the IV-A (AFDC) and IV-D (child support) interface.

Specifically, the analyses and paper look at four critical variables which have been shown to be associated with heightened risk for AFDC receipt, and to be risk factors for long-term welfare dependency. These variables are:

- \* teenage childbearing
- \* non-marital childbearing
- \* limited work experience
- \* limited education.

The method used to determine whether or not these variables have utility today was to examine a wide variety of federal, state, and local reports and data sources, as well as general social science literature for the period 1987 to the present. In examining these materials, our search was for point-in-time statistics or trend data that would confirm or contradict our hypothesis that the four risk factors/characteristics remain important in the mid-1990s. We found no evidence to suggest that

any of the four have diminished in magnitude or importance since the time of the 1987 study. Indeed, in some cases we found reason to suspect the behavior or status may have taken on heightened importance or prevalence over time. A brief overview of findings for each risk factor/characteristic illustrates these two points.

### Teen Childbearing

National, state, and local vital statistics data on the incidence of births to teens were examined, as were numerous empirically-based articles in the social science literature and a recent analysis of Maryland Quality Control data. The consistent finding is that the phenomenon of teen childbearing has not diminished in size or importance and, if anything, may have increased. Review of just a few post-1987 statistics makes this clear. The 1990 birth rate to all teens, for example, was at its highest level in 20 years. Likewise, the birth rate among 18 and 19 year old women reached an all-time high in 1987 - only to increase again in 1988. While the overall U.S. birth rate went down in 1991, the same year saw sharp increases in fertility among teenagers.

Of particular relevance to the AFDC program, we think, is a projection concerning teen births and low-income youngsters. That is, it is anticipated that more than 80 percent of teen births this year (1994) will occur among those who are from poor or near-poor households. This projection must be considered in light of the fact that young women in poor or near-poor families represent less than 40 percent of all females in that age group.



Additional evidence that teen childbearing continues to be germane to future AFDC caseload planning is that, in the post-1987 era, childbearing among very young teens has increased dramatically. Of all teen births in 1990, for example, fully half were to females aged 17 and younger. Perhaps more telling is the fact that childbearing among very young adolescents (aged 10 to 14) increased by 33 percent during the decade of the 1980s.

The relevance of these statistics to AFDC planning must be considered in light of what we know about teen childbearing and welfare use. One thing we know is that nearly half of all teen mothers receive AFDC within the first five years of giving birth. Another is that teen childbearing has been associated with long-term AFDC use in both national and Maryland studies. Considering these and other post-1987 realities uncovered in our research, we think it unequivocally true that teen childbearing remains both a risk factor for entrance onto the Maryland AFDC rolls and a characteristic that will be commonly found among applicants and recipients in the remainder of the 1990s.

#### Non-marital Childbearing

Non-marital childbearing was a common characteristic among first-time entrants to the Maryland AFDC rolls in 1987. Our review of independent data about the phenomenon since that time suggests it should remain a key variable of concern to welfare program administrators. We uncovered no indication that the phenomenon has decreased, but rather found reason to think it has probably increased in the period 1987-94.

Many statistics are reported in the body of the paper, but there are a few which nearly say it all. One is that, today, the proportion of all births that are to unmarried women is at an all-time high, among both black and white women. Only 18 percent of all births were to unmarried women in 1980. By 1990 the proportion was 28 percent, and by 1991, 32 percent, the highest level ever recorded in the 51 years for which this data has been available. At present, the majority of non-white children (57 percent) are born outside of marriage.

That the national trend of rising out-of-wedlock births has had an impact on the AFDC program seems indisputable. During the period 1976-1992, the proportion of never-married women receiving AFDC more than doubled. The U.S. General Accounting Office calls the growth in the proportion of women who never married the most dramatic change among single women receiving AFDC during the period 1976-1992. The Congressional Budget Office attributes more than half of recent AFDC caseload growth to increases in the numbers of female-headed households, especially those headed by never-married women.

The Maryland picture is similar; today, in our state, fully one-third of all births are to unmarried women. Indeed, Maryland is among the top three states in its rate of births to unmarried women. In Maryland, too, more non-white children (55 percent) are born to unmarried women than to married women. Perhaps not unrelated to these statistics is the fact that Maryland also has one of the highest proportions of children for whom "never married" is the AFDC deprivation factor.

Considered in isolation we believe the published post-1987 data confirm that non-marital childbearing remains a phenomenon and a characteristic with which AFDC administrators should be concerned in planning for the future. But, as administrators and line staff know all too well, non-marital childbearing often goes hand-in-hand with teen childbearing. It is thus appropriate to point out that nationally, in 1990, two-thirds of all teen births were outside of marriage, the highest proportion of out-of-wedlock births ever recorded among teens in the U.S. It is also germane to note that in Maryland, the figures are even more dramatic: in 1990, more than 80 percent of births to teens took place outside of marriage.

#### Limited Work Experience

The 1987 study, like virtually all national and state AFDC studies, found that most women receiving welfare did have some history of labor force participation, albeit in jobs of the low wage, low skill variety. In examining post-1987 data sources we were less concerned with documenting AFDC mothers' work histories and more concerned with describing employment opportunities likely to be available today and tomorrow. The relevant, specific concern for AFDC administrators is the extent to which adults with no or few skills will be marketable or will find themselves at welfare's door.

On this dimension, too, we found no evidence to suggest that the labor market from now until at least the end of the century will have room for all those with limited skills or little work history. Indeed, all projections indicate there will be far

fewer opportunities for workers with the employment histories typical of many AFDC adults. Typical statements we found follow. There will be more joblessness among the least-skilled. Very few new jobs will be created for those who cannot read, follow directions and use math. Two of every five new jobs will be in the high skilled professional, technical and managerial occupations. Even jobs requiring lower skills will be far more demanding; while 30 percent of jobs in the year 2000 will require college degrees, fully 70 percent will require post-secondary training.

These projections themselves suggest, and welfare agencies should anticipate that low-income women with few or no job skills and limited education will continue to turn to AFDC as a de facto form of 'unemployment insurance'. Not only is it likely that women with few or no marketable skills or work experience will continue to turn to AFDC, it is also conceivable, all else equal, that they will exit from welfare at ever-slower rates in an increasingly demanding economy. This may be particularly true for teenage mothers who are less likely than others to have any work experience prior to receiving AFDC. As the Department of Economic and Employment Development (DEED) bluntly put it in a recent report, "the bottom-line is that education and skills pay". To the extent that women in AFDC at-risk families continue to have fewer marketable skills and less education than do their peers, we think it inevitable that they will turn to the welfare agency for assistance.

### Limited Education

We found both good news and bad news in our review of recent data on the variable of educational attainment and its relevance to current and future welfare planning/reform. The good news was that, over time there has been a consistent increase in the rate of high school graduation among of young American and Maryland adults - including women on AFDC.

The bad news was more complicated and multi-faceted. First, improvements in high school graduation rates have not been evenly distributed. Rates of high school completion continue to vary on two dimensions that are germane to AFDC: region of state and ethnicity. Non-whites, as well as inner city and rural residents, continue to have much lower rates of secondary school completion. High school dropout rates remain particularly high in Baltimore City, home to nearly half of all Maryland AFDC cases. Likewise, the dropout rates of single women on welfare remain "extremely high" and considerably higher even than those of other single women.

On the basis of these data alone, we think it safe to conclude that limited education - especially lack of a high school diploma - does remain a valid risk factor for and descriptor of likely new entrants to our state's AFDC caseload. There are other reasons to think this is true. Not the least of these, of course, are the consistent predictions that the jobs of tomorrow will increasingly require education beyond high school, technical skills or both. Today's unemployment statistics likewise support our prognostication. For example, the

unemployment rate for those with less than four years of high school remained virtually unchanged from 1985 to 1991. Today, in Maryland, the unemployment rate for persons with less than a high school education is 22.8 percent, compared to 13.1 percent for those who have graduated from high school and 6.1 percent for college graduates.

Also germane to AFDC planning is another educational reality of which we became aware only through this review: the increasing prevalence of the GED. Indeed, it appears the only reason high school completion levels have not fallen among those aged 20 to 24 is because GED certification has been rising; one of every seven new high school certificate holders achieves that status via a GED. For AFDC, the importance of this relates to the fact that, in general, GED-holders mirror high school dropouts, not regular high school graduates, in their work and earnings. To the extent that many AFDC applicants/recipients have GEDs, we might do well to begin differentiating in welfare planning, practice and budgeting between those with GEDs and those with regular diplomas. In short, there is some evidence that, despite its title, the GED is not truly 'equivalent' to a regular diploma.

Of the four critical AFDC-risk variables discussed, education is probably the one that most amenable to public policy intervention. The education and employment data we uncovered seem to strongly suggest that a major thrust of any future-focused welfare prevention efforts must be to keep young people in regular high school. Beyond that, our review suggests that,

at least for some AFDC mothers, programs to permit and encourage the pursuit of higher education could have great long-term payoffs.

This can be controversial, but available empirical data suggest that higher education would be a wise investment for those who have the desire and ability, especially if our real goal is to enable people to exit welfare permanently.

#### Other Issues

In conducting this review and in thinking about the interconnections between and among the phenomena being studied, we have identified two other issues that state AFDC administrators should add to their list of planning and programming concerns. The first of these deals with the troubling and heretofore generally unexplored problem of substance abuse as it exists among some AFDC clients, and its possible contribution to the small, but growing cohort of "other relative" AFDC cases.

There is little hard data available about the magnitude of the substance abuse problem among women receiving AFDC. However, there are anecdotal reports that this is a growing problem, and there is mounting empirical evidence from child welfare, especially IV-E foster care especially, that substance abuse is a problem in a number of IV-A-eligible families. It is hard to think of an issue more difficult for AFDC program managers to contend with and incorporate in policy and planning, but that they will ultimately have to do so also seems unquestionably clear.

The second issue that we believe must receive heightened AFDC attention is paternity establishment in AFDC cases. It is beginning to be widely accepted that discussion of AFDC is incomplete without discussion of child support, but often the focus is on support enforcement. However, in a majority of AFDC cases in our state the prerequisite of paternity establishment is necessary. More than 70 percent of Maryland AFDC youngsters have "no marriage" as the deprivation factor, one of the highest proportions in the country. Current and projected realities - including the dismal national and state track record of support collections for AFDC children - strongly suggest that paternity establishment be made a high priority issue, not just for the IV-D program, but also for the IV-A program.

There are a number of things that really need to be done. Staff training/retraining in both IV-A and IV-D is one of them. There is reason to believe that, in practice, paternity cases may not get the attention they deserve because of common, but inaccurate, beliefs that such cases have little potential payoff in support collections or AFDC offsets.

Another "must do", in our opinion, is stepped-up, serious, high-level efforts to markedly improve the IV-A/IV-D interface. Our own studies and the research of others lend credence to the notion that interface problems are long-standing and pervasive and, in and of themselves, are probably connected to low levels of paternity establishments. Certain problems in the IV-A/IV-D interface will be addressed when the new computer systems (CARES/CSSES) are implemented statewide. However, others will not



be and, if left unattended, will continue to have an adverse effect on both the AFDC and child support programs, not to mention the children involved.



## INTRODUCTION

Administrators, legislators and advocates in Maryland and Washington, D.C. are engaged in dialogue about the shape and substance of the next wave of federal and state welfare reform. Regardless of one's views on what would be the best approach to change, there is need to base proposals and implementation plans on valid, reliable data about the population to be served. In the context of current debate, the population of greatest interest is families receiving or at risk to receive AFDC.

In the course of reform discussions within Maryland, concern has been expressed that some widely-cited data may no longer be valid. Specifically, questions have been raised as to whether the profile of first-time Maryland AFDC payees presented in Born and Kunz's 1987 study is still an accurate representation of today's new welfare cases.<sup>1</sup>

To the extent that research results are used to shape policy and/or reform options, it is both understandable and commendable that decision-makers want to feel confident that those results accurately reflect today's, rather than yesterday's, caseload realities. The continuing validity of the first-timers study for welfare program planning purposes will be shown in this paper.

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<sup>1</sup>Catherine E. Born and James P. Kunz, First-Time AFDC Recipients in Maryland: Who Are They?, Baltimore: University of Maryland School of Social Work, 1990.



## THE NECESSITY AND UTILITY OF RESEARCH RESULTS

Ideally, program administrators would like to have instant, on-line ability to answer myriad questions about welfare families by literal queries to client databases. Ideally, too, those databases would contain the information elements necessary to respond to those inquiries. Unfortunately, neither of the above options is available in Maryland or in most other states, nor are they likely to be available in the near future. Administrative databases simply do not usually contain the types of data that policy-makers often need (i.e., how old were most AFDC moms when they first had children, how much education do moms have, the extent to which new entrants to AFDC are second generation teen parents and so forth). Rather, as is consistent with their purpose, administrative databases tend to contain only those data elements which are necessary to operate programs in accordance with law and policy. Thus, in reality, policy-makers' best estimates of "what is" must also be guided by both their own accumulated experiences (so-called "practice wisdom"), and the research data available on the topic of interest.

With regard to using research findings to inform public policy-making, one must always be concerned that those findings are an accurate reflection of reality. This is as true of "brand-new" research data as it is of older data; a study can be hot off the press, but if the sample was poorly chosen or

misleading questions were asked, the results will not be valid or reliable. "Old" studies can be flawed for similar reasons, but it is not age alone that determines whether research findings should be considered useful or not. In other words, "old" research should not be deemed invalid or outdated just because it is based on data collected in an earlier time period. Rather, "old" research findings should be considered of historical, rather than current, value when there is other independent evidence which suggests that the earlier findings are no longer representative of the population or the phenomenon of interest. On the other hand, more recent independent trend data or other statistics may be consistent with the "old" study findings. In these latter situations it is appropriate to still consider the "old" findings as reasonable, useful tools for program and policy planning.

This paper takes key client characteristics identified in the "old" 1987 first-timers study and, using post-1987 data sources, assesses whether or not the "old" characteristics remain useful for AFDC planning purposes in the mid-1994s. Results of the analyses strongly suggest that the "old" data are still valid.

## CHARACTERISTICS OF 1987 FIRST-TIMERS: A REVIEW

The typical first-time AFDC recipient family in our state in the late 1980s was, overwhelmingly, a one-parent household headed by a woman (94 percent of cases), almost always the natural mother of the children for whom assistance was being sought. Because mother-only families were and remain the largest subgroup of AFDC cases both nationally and in Maryland, we limited our client profile research to mother-only assistance units. What did we learn?

### A. First-Timers' Profile

With regard to demographics, we learned that new AFDC payees were not a homogeneous group. There were divorced and separated women in our sample, as well as those who had never been married. Likewise, some payees were applying for assistance for the very first time at the age of 40 or more; others were in their 20s or 30s, while some were only 18 years of age. Educational and employment backgrounds were similarly diverse, ranging from those with considerable education and/or work experience to those with little of either.

Despite the diversity observed, some characteristics were much more common than others and it was possible to develop a profile of the "typical" new entrant to Maryland's AFDC rolls.

In the late 1980s, this profile, in short, was that of a never-married, non-white women, native to the state, with one child. The typical first-time AFDC payee first became pregnant at 17 or 18; this pregnancy was unplanned. The first live birth to a first-timer probably occurred before the mother's 20th birthday. Our first-time Maryland AFDC recipient was a second generation teen mother whose own mother also had her first child before the age of 20. For financial reasons, the first-time payee in our study lived with her family during her first pregnancy. The father of her first child did not live with her, but did provide some financial and/or emotional support for the child. The new recipient was only slightly more likely to have a high school diploma as to not have one and had not participated in any education or training since leaving or graduating from school.

The typical first-time AFDC payee in the late 1980s did have some history of paid employment, although her work experience was limited. Most often, she worked full-time in a clerical or sales position before her first child was born, but did so for less than one year and left because of the pregnancy. She did not return to work in the first year after the birth of her first child and she was not working when she applied for AFDC. The typical new AFDC payee in 1987 applied for assistance in her own name at age 18 or 19 and claimed to have heard about the program from a family member who was receiving AFDC benefits.



## B. Implications for the AFDC Program

The state's primary interest in the first-timers' research, of course, was not to learn about the specific characteristics of individual families who turn to the welfare agency for financial support. Rather, the state's overarching interest was and remains to figure out what these client-level data imply for future program planning and welfare reform purposes. At this level of analysis, several conclusions from the 1987 first-timers study were critically important.

1. The vast majority of first-time AFDC recipients in Maryland in the late 1980s possessed one or more traits shown to be associated with long-term welfare dependency in numerous research studies.

Previous AFDC research studies at the national and state level had identified certain risk factors which were linked to a higher probability of long-term welfare dependency.<sup>2</sup> Among those which consistently appeared to increase a woman's chances of remaining on AFDC were: adolescent childbearing, never having married, first adult receipt of AFDC as a teenager, and being a second-generation teen parent.<sup>3</sup> Using these criteria, it was thus clear that, in the late 1980s, a sizable proportion of new

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<sup>2</sup>See, for example, Catherine Born, AFDC Recipients in Maryland: A Longitudinal Study, Baltimore: University of Maryland, 1989; Mary Jo Bane and David Ellwood, The Dynamics of Dependence, Cambridge: Urban Systems Research and Engineering, 1983.

<sup>3</sup>In addition to the studies by Born (1989) and Bane and Ellwood (1983), many other state studies also identified these factors. Several of these studies appear on our reference list.

entrants to Maryland's AFDC rolls were at great risk of chronic welfare dependency. The specific proportions of first-timers exhibiting each of the above-mentioned traits were: adolescent childbearing (56 percent), never married (62 percent), first AFDC in teens/early 20s (47 percent <22), and second generation teen parent (58 percent).

2. With specific reference to a very high-risk group, we found that one of every three first-time AFDC cases in Maryland was headed by a teenage mother.

At the time of our study, much had already been written about the welfare costs associated with teen childbearing. The combined AFDC, Medicaid and Food Stamp cost in 1988 for families in which the first birth occurred when the mother was a teen were estimated at \$19.8 billion.<sup>4</sup> Nationally, it was also well-known that more than half of all females heading AFDC families had been teenage mothers.<sup>5</sup> These data alone were fiscally alarming, but our finding that one of every three new AFDC cases was headed by a teen mother was even more distressing when considered in light of other documented realities. Among these were:

women who start childbearing in their teens have more children, have them closer together, bear more unwanted children and have more out-of-wedlock births than do women who delay motherhood.<sup>6</sup>

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<sup>4</sup>U.S. General Accounting Office, Home Visiting: A Promising Early Intervention Strategy for At-Risk Families, Washington, D.C.: General Accounting Office, July, 1990: 14.

<sup>5</sup>Martha Ozawa, "Welfare Policies and Illegitimate Birth Rates Among Adolescents: Analysis of State-by-State Data," Social Work Research and Abstracts, 25 #1 (March, 1989).

<sup>6</sup>Kathleen Ford, "Second Pregnancies Among Teenage Mothers," Family Planning Perspectives, 15 #6 (November-December, 1983): 72.

women who are less than 22 at the time of their first receipt of AFDC average more than eight years of total receipt and about a third spend 10 years or more on AFDC; in contrast, women who are between 31 and 40 at first receipt average about five years and only 15 percent spend 10 years or more.<sup>7</sup>

one longitudinal study of nearly 900 girls found that 70 percent who experienced a teen out-of-wedlock birth received welfare within the next three years.<sup>8</sup>

Clearly, the profile described above has enormous implications for the design of appropriate, effective welfare "reforms". If the typical new entrant to AFDC is a poorly educated, minority young mother with limited work experience and a family history of early childbearing, traditional interventions may not be the correct ones. The services needed to secure independence for an undereducated, inexperienced, minority teen parent are probably far different than those needed for an older client who has turned to AFDC because of marital disruption or the loss of a job. Likewise, there are implications for Project Independence and for programs outside the welfare agency which might help to prevent such things as teen pregnancy, repeat pregnancies among young mothers and dropping out of school.

It is unquestionable that policy directions and choices do and should vary greatly depending on the characteristics of the

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<sup>7</sup>Saul Hoffman, "Patterns of Welfare Dependency," in Welfare Dependency: Behavior, Culture and Public Policy, Kevin Hopkins (ed.), Alexandria: Hudson Institute, September, 1987: I-45.

<sup>8</sup>Chong-Bum An, et al. "Teen Out-of-Wedlock Births and Welfare Receipt," Review of Economics and Statistics, 75 #2, May, 1993: 200.

"typical" client coming onto the welfare rolls. The path suggested by the 1987 first-timers profile is one that would focus great attention on both primary and secondary prevention, in areas relevant to young women and men. The opportunity to develop state-level, targeted welfare reforms also seems a good possibility under the emerging federal reform strategy. Moreover, it has been suggested that one possible federal strategy may be to phase-in welfare reform by requiring states to focus on the youngest recipients (born after 1971) first. Given that "young" recipients were such a large proportion of first-timers in our 1987 study, reform which mandates specific attention to this cohort could have enormous implications for reform planning in our state. Thus, for a variety of reasons, a critical planning question which confronts Maryland welfare administrators today is this:

should we or should we not continue to plan as if  
the 1987 profile of first-time AFDC payees remains  
a valid profile of new entrants in the mid-1990s?

We believe the answer to this question is "yes, you should continue to use this profile for planning purposes". The remainder of this paper explains why, based on review of research findings and government statistics, we think these profile data remain valid and useful.

## The Question at Hand: Are the 1987 Data Still Valid?

With regard to characteristics of new entrants to the Maryland AFDC rolls, the critical question for policy-makers is: does the general profile of first-timers documented in 1987 remain a reasonably good profile in 1994? The answer to this question must be decided on the basis of whether one can demonstrate that the characteristics typifying 1987 first-timers no longer typify new accessions to the caseload. Thus, the appropriate methodology is to examine available data for time periods subsequent to 1987 relevant to the important profile variables identified in the 1987 study.

This section of the paper takes a look at more recent data on the 1987 profile variables of interest to determine their likely continued relevance for 1994 planning purposes. Not all variables included in the 1987 profile are studied. Rather, the examination is limited to only those variables from the profile consistently shown during the past decade of national and Maryland research to be key risk factors for long-term welfare dependency.<sup>9</sup> These are:

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<sup>9</sup>A few other risk factors/profile variables are not covered in this report either because they are not amenable to intervention by the welfare agency (e.g., ethnicity) or because we were unable to locate any or sufficient post-1987 data on the subject (e.g., 2nd generation teen parenting).

- \* teenage child-bearing
- \* non-marital child-bearing
- \* limited work experience
- \* truncated education.

The next sections of the paper review post-1987 data, research findings and other materials on each of these four variables. The focus of each review is to determine whether this newer information does or does not seem to support continued use of the variable as a relevant one in planning for AFDC in Maryland in the immediate future.

#### Issue 1: Teenage Child-Bearing

The first-timers study identified teenage child-bearing as a major factor associated with entrance to the state's AFDC rolls. We believe that the data show it remains a factor. If anything, the importance of teenage child-bearing to AFDC entrance and long-term welfare dependency has probably increased during the period 1987-94.

For "teen motherhood" to no longer be a valid client characteristic relevant to the design of prevention/intervention programs, one would need to demonstrate that rates of teenage childbearing have decreased since the time of the original study in mid-1987. In addition, one would look for data suggesting that the population-at-risk for teen pregnancy has also decreased in size. In addition to statewide statistics, one would be specifically interested in Baltimore City because of its large AFDC caseload size.

We are aware of no data which indicate that, overall, the magnitude of the teen child-bearing problem has decreased nor that it is likely to decrease to a point where it should be considered an irrelevant or trivial correlate of AFDC receipt. Among the "since 1987" statistics suggesting that teen parenting, instead, remains very relevant are the following:

- \* In FFY 1991, Maryland's female adult AFDC recipient profile showed our payee population to be younger than the comparable nationwide cohort. For example, while the U.S. showed 27.3 percent of payees were aged 19-24, the Maryland proportion was 32.7 percent. Some 24.7 percent of payees nationally were 35 and older, but in Maryland the figure was 17.3 percent.<sup>10</sup>
- \* As cited in the Evening Sun (10/9/89), state health officials reported "the number of babies born to Baltimore mothers under age 18 went up another 4 percent in 1988, even though the number of teen-agers in the City had dropped. These figures upset the notion that an eight percent increase in 1987 was an aberration".<sup>11</sup>
- \* Although progress has been made, Baltimore City continues to rank in the top five cities in the country in its teen pregnancy rate.
- \* Women aged 15-19 in Baltimore City had the highest birth rate for that age group among all 24 subdivisions in 1990; additionally, the overall state birth rate increased from 1989 to 1990, the number of births recorded in 1990 being the largest number of births ever reported in the state.<sup>12</sup>

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<sup>10</sup>Office of Family Assistance, Characteristics and Financial Circumstances of AFDC Recipients: FFY 1991, Washington, D.C.: Department of Health and Human Services, undated.

<sup>11</sup>"Pre-18 Mothers." Evening Sun, October 8, 1989: B-8.

<sup>12</sup>Division of Health Statistics, Maryland Vital Statistics Annual Report, Baltimore: Department of Health and Mental Hygiene, 1990.

- \* The average age of first intercourse for males in the United States is less than 16 years of age.<sup>13</sup>
- \* A Hopkins study of City junior/senior high school males aged 11 to 19 found the self-reported mean age at first coitus to be 11.8 years; 65 percent of the 660+ subjects claimed to have had their initial sexual experience at age 12 or younger.<sup>14</sup>
- \* For the nation, live birth rates for teens declined slightly during the early 1980s, but rose back to their 1980 levels by 1988; birth rates continued to rise in 1989, another six to eight percent.<sup>15</sup>
- \* Nationally, most of the 1986-88 increase in live births to teens was for younger teens aged 15-17; their birth rate rose 10 percent from 1986 to 1988.<sup>16</sup>

In addition, a recent analysis of 1992 Quality Control data showed that, for the Maryland AFDC caseload as a whole, nearly half (47 percent) of all current recipients had given birth to a child before reaching age 20.<sup>17</sup> The statewide proportions for whites and African-Americans were 37 percent and 51 percent, respectively. That same study also calculated Baltimore City proportions separately. Here it was found that a little over

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<sup>13</sup>Governor's Council on Adolescent Pregnancy, Prevention, Spring, 1991: 1.

<sup>14</sup>Samuel Clark, et al. "Sex, Contraception and Parenthood: Experience and Attitudes Among Urban Black Young Men," Family Planning Perspectives, 16, #2: 78-79.

<sup>15</sup>Stephanie Ventura, et al. "Trends in Pregnancies and Pregnancy Rates, U.S., 1980-88," Monthly Vital Statistics Report 41 #6 Supplement (November 16, 1992), Hyattsville: National Center for Health Statistics: 2,

<sup>16</sup>Ibid.

<sup>17</sup>Ashraf Ahmed, "Characteristics of Recipients of AFDDC in Maryland," presentation to National Association for Welfare Research and Statistics, Austin, Texas, August 2, 1994.



half (52 percent) of sample cases had experienced a birth before age 20; among white AFDC recipients in the City the figure was 47 percent, among African-Americans, 52 percent. While these figures themselves are alarming, they may well underestimate the incidence of early child-bearing among brand-new recipients/applicants.<sup>18</sup>

Considered singly or in concert we think these data rather unequivocally indicate that, in the 1990s, as in 1987, births to teens remains a phenomenon of tremendous magnitude, especially in Baltimore City. If anything, the incidence of teen child-bearing may be on the increase across the nation. An analysis of states' 1980 and 1990 birth data by the Children's Defense Fund, to illustrate, contained the comment:

newly released government data on adolescent child-bearing in 1990 show an increase for the fourth year in a row in both the teen birth rate and the number of births to teens...the 1990 rate was at its highest level since 1972.<sup>19</sup>

Moreover, of all births to teens in 1990, nearly half were to those females less than 18 years of age.<sup>20</sup> Indeed, childbearing among very young adolescents (between the ages of 10 and 14

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<sup>18</sup>This is because long-term welfare users are always over-represented in cross-sectional samples drawn from the open caseload.

<sup>19</sup>Children's Defense Fund, "Births to Teens," CDF Reports, June, 1993: 7-10.

<sup>20</sup>Mark Roosa, "Adolescent Pregnancy Programs Collection: An Introduction," Family Relations 40 (October, 1991): 370.

years) increased by 33 percent during the last decade.<sup>21</sup> While we do not have exactly comparable data for Maryland, the 1992 Quality Control data analysis cited previously did report that, among all open AFDC cases in the sample, slightly more than one in every five (21 percent) statewide had given birth before age 18; among Baltimore City cases, the ratio was one case of every four (25 percent).<sup>22</sup>

With reference to 18 and 19 year old women, who if they have a child are currently eligible without restriction to establish their own AFDC households, the trend has been similar.

\* According to data released by the National Center for Health Statistics, the birth rate among 18 and 19 year old unmarried women reached an all-time high in 1987, only to increase again in 1988.<sup>23</sup>

\* The overall U.S. birthrate decreased in 1991, but this same year saw sharp increases in fertility among teenagers; the 1991 birthrate among older teenagers (18-19) was the highest since 1972.<sup>24</sup>

There has been controversy in recent academic literature about whether early childbearing is a social problem deserving of special attention or an adaptive response to social and economic

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<sup>21</sup>Pamela Nath, et al. "Understanding Adolescent Parenting: The Dimensions and Functions of Social Support," Family Relations 40 (October, 1991): 411.

<sup>22</sup>Ahmed, op.cit.

<sup>23</sup>National Center for Health Statistics, Advance Report of Final Natality Statistics, 1988, Hyattsville: U.S. Public Health Service.

<sup>24</sup>F. Althaus, "U.S. Birthrate Decreased in 1991, but Nonmarital Fertility Continued to Rise," Family Planning Perspectives 26, #1 (January-February, 1994): 43.

deprivation.<sup>25</sup> Without joining that fray, we would only note that the association between teenage childbearing and receipt of AFDC is a well-documented one.

- \* Three-fifths (59 percent) of all women receiving AFDC were teenagers at the birth of their first child.<sup>26</sup>
- \* According to the Congressional Budget Office, nearly half of all teen mothers and over three-fourths of unmarried teen mothers receive AFDC at some point within the first five years of giving birth.<sup>27</sup>
- \* In 1990, it was estimated that the federal government spent \$25 billion in AFDC, Medicaid and Food Stamps to support families begun by teenagers.<sup>28</sup>

Moreover, research has consistently found that AFDC recipients who have children when in their teens are among those at greatest risk to experience long-term welfare dependency.<sup>29</sup> Closer to home, our analysis of the 1987-91 welfare experiences of several hundred first-time Maryland AFDC payees also found that teen parenting was associated with chronic dependency; the rate of long-term welfare use among teen mothers (24 percent) was nearly

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<sup>25</sup>See Frank Furstenberg, "As the Pendulum Swings: Teenage Childbearing and Social Concern," Family Relations 40 (1991): 127-138, for an overview of this debate.

<sup>26</sup>Kristin Moore, Facts at a Glance 1990, Washington, D.C.: Child Trends.

<sup>27</sup>Congressional Budget Office, Sources of Support for Adolescent Mothers, Washington, D.C.: Congressional Budget Office, September, 1990: 62.

<sup>28</sup>U.S. General Accounting Office, Families on Welfare: Teenage Mothers Least Likely to Become Self-Sufficient. Washington, D.C.: General Accounting Office, May, 1994: 2.

<sup>29</sup>Studies reaching this conclusion are many in number; among the best-known of these is the study by Bane and Ellwood (1983) which appears on the list of references.

twice that of older mothers (14 percent).<sup>30</sup> A recent report by the U.S. General Accounting office sums up rather tidily why teenage childbearing should remain a phenomenon of tremendous concern to welfare policy-makers:

AFDC families headed by women who have either less than a high school education, little work experience, or children younger than six are likely to leave AFDC less quickly than others. These characteristics are especially prevalent among teenage mothers receiving AFDC...women who had their first child as teenagers comprise a large and costly segment of the AFDC population [emphasis added].<sup>31</sup>

Based on available data, we think it is clear there has been no significant decline in the magnitude or the significance of teenage childbearing at the national, state or local level since 1987 insofar as planning for AFDC is concerned. Our conclusion is consistent with that of a Baltimore researcher who has devoted decades to the study of teen pregnancy, and who recently wrote:

My many years of service and research with white and black inner-city families in East Baltimore has made clear to me that many are locked into the poverty cycle because of their inability to plan their families...the U.S. rate of adolescent pregnancy is still increasing (50/1000 in 1986 to 62/1000 in 1991) and families started by teens make a major contribution (way out of proportion to the numbers involved) to the AFDC rolls.<sup>32</sup>

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<sup>30</sup>Catherine E. Born, First-Time Maryland AFDC Payees: The Incidence and Correlates of Chronic Dependency, Baltimore: University of Maryland School of Social Work, Winter, 1993: 52.

<sup>31</sup>U.S. General Accounting Office, Families on Welfare: Focus on Teenage Mothers Could Enhance Welfare Reform Efforts, Washington, D.C.: General Accounting Office, May, 1994: 2,8.

<sup>32</sup>Dr. Janet Hardy, letter to Delegate McIntosh, February 17, 1994.

Considering all the evidence, we further conclude that this aspect of the 1987 first-timers profile remains a valid client characteristic for program planning and/or reform design purposes. In other words, the available evidence seems to unequivocally suggest that, in 1994 as in 1987, teenage childbearing is still a common characteristic among new entrants to the Maryland AFDC program and, most likely, among long-term recipients as well.

Indeed, in terms of planning ahead for the AFDC program and for targeted services to both new applicants and long-term recipients, these teen childbearing data suggest administrators might be well-advised to anticipate that teen childbearing may become even more common than it already is. Two related threads uncovered in our review cause us to set forth this scenario. The first is the projection recently made by the Guttmacher Institute and reported by the Children's Defense Fund:

[we] project that more than 80 percent of the 15 to 19 year olds who give birth in 1994 will be from poor or near-poor households...even though poor and near-poor teens make up less than 40 percent of all females in this age group.<sup>33</sup>

The second aspect of the phenomenon that may be a bit different in 1994 and is certainly germane to future planning, is the extent of teen pregnancy and childbearing among very young women (under age 16). We have no hard data to indicate that this phenomenon has increased in magnitude among young girls already

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<sup>33</sup>Children's Defense Fund, "Teen Pregnancy at 20 Year High," CDF Reports, September, 1994: 9.

included in AFDC households, but there are many reasons to suspect that it has. One such suspicion comes from the national data just reviewed which indicates that very early childbearing has been on the rise. Since Maryland data has paralleled that of the country on other childbearing and teen pregnancy variables, we have no reason to suspect it would not also parallel the nation on this item as well. Another hint that childbearing among very young teens has been on the rise was given by an acknowledged local expert on the subject, Dr. Rosetta Stith, in her remarks during deliberations of the Commission on Welfare Policy. A final hint can be found in the results from analysis of the 1992 AFDC Quality Control data. That study found that, for the caseload as a whole, fully one in five payees had given birth when under the age of 18; in the City, the figure was one payee in four.<sup>34</sup>

To the extent that very early childbearing has been and/or is increasing, the implications for the state's AFDC and social service programs are many. With regard to the latter, it is probably sufficient in this paper to merely note that these very young mothers and their children can be expected to have even more extensive service needs than do older teen parents. With regard to programmatic issues, this trend makes it even more important that the state devise some method for identifying these children/parents and their offspring within AFDC assistance units. Currently, information systems are structured in such a

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<sup>34</sup>Ahmed, op.cit.: Table 4.1

way that it is impossible to know how many non-payee AFDC teen parents there really are. This has been a long-standing problem and one that, perhaps, will be rectified with implementation of the new computer system (CARES). If this is not already a built-in feature of CARES, however, we strongly recommend it be made a high priority on the 'modifications and upgrades' list.

Another implication of rising rates of early childbearing pertains to the state's child support program. The vast majority of teen births occur outside of marriage and the large majority of unmarried teen mothers receive AFDC within a few years of giving birth. These intertwined realities suggest that, in our state, program planning, budgeting and resource allocation in child support as well as AFDC must take early childbearing into consideration. In child support in particular, the practical implication is probably that budgets and staffing requests should be constructed as if all AFDC cases are in need of paternity establishment - a legal prerequisite to support enforcement. Beyond that, the data suggest that the child support program would be well-advised to develop educational materials, as well as establishment and enforcement strategies, targeted on young parents.

## Issue 2: Non-Marital Child-bearing

Non-marital parenting was also identified in the 1987 study as being an important characteristic relative to beginning a welfare (AFDC) career. We believe the available data for the period since 1987 indicate that, for program planning purposes, non-marital childbearing is still a valid profile variable for new AFDC payees.

To make the determination that non-marital childbearing is no longer a reliable or useful predictor vis-a-vis coming onto AFDC, one would look first for data indicating that non-marital childbearing has declined. Because it is unquestionably true that families headed by unmarried mothers have higher poverty rates than other types of families, a finding that non-marital childbearing has declined would imply that the population-at-risk for AFDC had also decreased.

Again, however, we are aware of no data indicating that non-marital child-bearing has diminished in magnitude or importance. Rather, the evidence seems to suggest the contrary. For example:

- \* Nationally, the proportion of all births that are to unmarried women is at an all-time high among both both blacks and whites.<sup>35</sup>

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<sup>35</sup>Center on Budget and Policy Priorities, Issues Raised by the Murray Article, Washington, D.C.; Center on Budget and Policy Priorities, January 12, 1994: 1.



- \* The actual number of out-of-wedlock births in the United States rose from about 400,000 in 1970 to over 1.2 million in 1991.<sup>36</sup>
- \* In 1980, 18.4 percent of all U.S. births were to unmarried women; in 1985, they were 22 percent of the national total. By 1990, non-marital births accounted for 28 percent of all births in this country.<sup>37</sup>
- \* Among whites, unmarried births increased from 11 percent to 20.4 percent from 1980 to 1990; among non-whites from 48.5 percent to 57.1 percent.<sup>38</sup>
- \* In 1991, unmarried American women had a record number of births, 4 percent more than in 1990. These increases in nonmarital births brought each age-specific rate to the highest level ever reported in the 51 years for which this information has been available.<sup>39</sup>
- \* In Maryland, the percent of all births which are to unmarried women also continues to rise; such births were 25.7 percent of the state total in 1980, but by 1990 were 29.6 percent of all births in the state.<sup>40</sup>
  - Among whites, unmarried births rose from 11.5 percent in 1980 to 16.3 percent of all births in 1990; there was virtually no increase among non-whites; the percents were 55.3 and 55.2 in 1980 and 1990, respectively.
- \* Maryland has a higher proportion of children on AFDC due to "never-married parents" than is typical in the U.S. In FFY 1991, our never-married proportion was 75.1 percent while the U.S. figure was 55.3 percent.<sup>41</sup>

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<sup>36</sup>U.S. General Accounting Office, Families on Welfare: Sharp Rise in Never-Married Women Reflects Societal Trend, Washington, D.C.: General Accounting Office, May, 1994: 2.

<sup>37</sup>National Center for Health Statistics, Monthly Vital Statistics Report, 41 #9, Hyattsville: U.S. Public Health Service. February 25, 1993: 9

<sup>38</sup>U.S. Bureau of the Census, Statistical Abstract of the United States 1993 (113th edition), Washington, D.C.: Census Bureau: 78.

<sup>39</sup>Althaus, op.cit.: 43.

<sup>40</sup>Division of Health Statistics, op.cit.: 108.

<sup>41</sup>Office of Family Assistance, op.cit.:

- \* Only the District of Columbia, New Jersey and the Virgin Islands have higher proportions of "never married" AFDC cases than Maryland.<sup>42</sup>
- \* Maryland continues to rank in the top three states in its rate of births to unmarried women.<sup>43</sup>
- \* According to the most recent data available, one-third (32 percent) of all Maryland births are now to unmarried women.<sup>44</sup>

Evidence to support continued use of non-marital child-bearing as a profiling variable for first-time AFDC payees is strengthened by data on teen child-bearing cited earlier in this report. As administrators and line-level staff know all too well, teen births and non-marital child-bearing go hand in hand. Most births to teens are out-of-wedlock; to the extent that teen births have not declined (and may have increased), one must assume that non-marital births have either remained constant or have increased as well. National data illustrate this point.

- \* In 1990, two of every three (67.6 percent) births to teens were births outside of marriage, the highest proportion of out-of-wedlock births among teens ever recorded in the United States.<sup>45</sup>
- \* In Maryland in 1990 the link between teen births and non-marital births was even more pronounced; more than eight of ten (83.3 percent) teen births were non-marital births out-of-wedlock.<sup>46</sup>

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<sup>42</sup>Ibid.

<sup>43</sup>See, for example, Kids Count, 1990.

<sup>44</sup>Division of Health Statistics, Maryland Vital Statistics: 1992 Preliminary Report, Baltimore: Department of Health and Mental Hygiene, undated.

<sup>45</sup>Children's Defense Fund, op.cit.: 8.

<sup>46</sup>Ibid: 10.

Should non-marital childbearing still be considered as a characteristic that probably is a valid descriptor of many new AFDC payees in 1994? We again think the empirical evidence is unequivocal in indicating that the answer is yes. There is no reason to think that non-marital childbearing has decreased; there is reason to think it has probably increased during the period 1987-1994. Thus, we conclude that Maryland AFDC policymakers would be on firm ground in continuing to accept this portion of the 1987 first-timers' profile as being a valid descriptor of current caseload and applicant realities. Data reported by the U.S. General Accounting Office (GAO) appears to support this argument:

From 1976 to 1992, the proportion of single women receiving AFDC who had never been married more than doubled, increasing from about 21 percent to about 52 percent. The growth in the proportion of women who never married was the most dramatic change we found among the group of single women receiving AFDC [emphasis added].<sup>47</sup>

Between 1976 and 1992, the number of never-married mothers receiving AFDC increased from about 380,000 to over 1.5 million.<sup>48</sup>

Also on point is the finding of the Congressional Budget Office reported in the same GAO report:

Growth in female-headed families, especially those headed by never-married women, accounted for more than half of the recent growth in the national AFDC caseload.

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<sup>47</sup>U.S. General Accounting Office, Sharp Rise, Washington, D.C.; General Accounting Office, May, 1994: 2.

<sup>48</sup>Ibid.

### Issue 3: Limited Work Experience

A third characteristic common to first-time AFDC payees in 1987 was that of limited work experience. While the majority (82 percent) had some history of paid work, most of them (two-thirds) had total work histories of one year or less. Despite the infusion of the "newly poor" into many counties' AFDC rolls during the recent recession, we believe weak or non-existent employment history continues to be a relevant profile variable for planning purposes.

To make the determination that limited or no work experience should not be considered a relevant or important characteristic vis-a-vis new entrants to Maryland's AFDC rolls, one would examine data of various types. First, one would look for data which purport to forecast the number and types of jobs available in the future and the educational and/or skill requirements of those jobs. These data would then be considered in light of what we know about the educational levels of AFDC adults. Because the birth of a child often interferes with labor force participation, data on the patterns of child-bearing among AFDC recipients would also have to be considered. Then, one would be in a position to make a reasoned assessment about the continued use of this variable for program/reform planning purposes.

With regard to employment opportunities, perhaps the best, most succinct summary of what probably lies ahead in the remainder of this century can be found in the Executive Summary of the report, Workforce 2000, which notes:

U.S. manufacturing will be a much smaller share of the economy in the year 2000 than it is today. Service industries will create all new jobs...new jobs in service industries will demand much higher skill levels than the jobs of today. Very few new jobs will be created for those who cannot read, follow directions and use math... [there will be] more joblessness among the least-skilled and less among the most educationally advantaged.<sup>49</sup>

Between now (1987) and the year 2000, for the first time in history, a majority of all new jobs will require post-secondary education.<sup>50</sup>

Projections closer to home are similar. The Baltimore Regional Council of Governments, for example, predicts the following:

There will be more opportunities for employment in white collar occupations...[they] are growing faster than the other major occupational groups...these types of occupations will continue to provide the greatest number of employment opportunities in the year 2000.<sup>51</sup>

With regard to the educational requirements for the jobs of the future, prognostications all seem to indicate that more, rather than less, education will be needed. This point is consistently made in reports of the Baltimore Regional Council of Governments:

Educational requirements for available jobs are increasing.<sup>52</sup>

The less skilled occupations are growing more slowly or, in some cases, declining.<sup>53</sup>

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<sup>49</sup>William Johnston, et al. "Executive Summary", Workforce 2000, Indianapolis: Hudson Institute, 1987: xiii.

<sup>50</sup>Ibid: xxvii.

<sup>51</sup>Baltimore Regional Council of Governments, Employment Opportunities in the Year 2000, Baltimore: BRCG, November 16, 1989: 1.

<sup>52</sup>Ibid: 2.

<sup>53</sup>Baltimore Regional Council of Governments, Economic Update, Fall, 1989: 3.

Technological advances and the changing dynamics of international commerce will place higher premiums on educational attainment.<sup>54</sup>

A similar point has been made by the Maryland Department of Economic and Employment Development:

Two of every five new jobs will be in the highly skilled professional, technical and managerial occupations.<sup>55</sup>

Moreover, if the projections are to be believed, even the requirements for low-end positions in tomorrow's economy will not remain static:

Even jobs requiring lower skills will be far more demanding than in the past. While 30 percent of the jobs in the year 2000 will require college degrees, fully 70 percent will require post-secondary training.<sup>56</sup>

These forecasts are alarming. Single mothers - and those on AFDC in particular - tend to lag behind the general population in educational attainment and few AFDC mothers have education beyond high school. All else equal, it thus seems unlikely that many young women at risk for AFDC will be able to successfully compete in the labor force. It also seems unlikely, given the increasing stringency of the labor market and persistently high dropout rates in some places, that the size of the at risk population will decrease substantially anytime soon.

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<sup>54</sup>Baltimore Regional Council of Governments, Skills for a Global Economy: Baltimore Workforce 2000, Baltimore: BRCG, January 24, 1990: 4.

<sup>55</sup>Office of Labor Market Analysis and Information, 1992 to 2005: People to Jobs, Baltimore: Department of Economic and Employment Development, September, 1994: 21

<sup>56</sup>The Abell Foundation, "The Case for Regional Cooperation," The Abell Report, 7, #2, November/December, 1994: 3.

Nationally, it is estimated that about 30 percent of all youth aged 16 to 24 lack the skills for entry-level employment and that 50 percent of adults in their late twenties have not found a steady job.<sup>57</sup>

Unemployment rates for all persons, for males and for females remain highest for those with less than four years of high school; these rates remained virtually unchanged from 1985 to 1991.<sup>58</sup>

Unemployment rates tend to be higher in areas of concentrated poverty. In 1992, the national unemployment rate averaged 7.3 percent. But, in those census tracts in which 20 percent or more of the population was poor, the unemployment rate averaged 12 percent.<sup>59</sup>

Overall, women who had attended college for four or more years, who were having their first birth or who were over the age of 30 were more likely than others to be in the labor force in 1987.<sup>60</sup>

In Maryland, the current unemployment rate for persons with less than a high school education is 22.8 percent, compared to 13.1 percent for those who have graduated high school and 6.1 percent for college graduates.<sup>61</sup>

Some pundits assert that AFDC functions as a form of de facto 'unemployment insurance' for poorly educated, low income women with children. To the extent this characterization is

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<sup>57</sup>U.S. General Accounting Office, Training Strategies: Preparing Non-College Youth for Employment in the U.S. and Foreign Countries, Washington, D.C.: General Accounting Office, May 11, 1990: 2-3; Paul Osterman and Maria Ianozzi, Youth Apprenticeships and School to Work Transition, Philadelphia: National Center on the Educational Quality of the Workforce, 1993: 4.

<sup>58</sup>U.S. Bureau of the Census, Statistical Abstract: 414.

<sup>59</sup>Isaac Shapiro and Robert Greenstein, Making Work Pay: The Unfinished Agenda, Washington, D.C.: Center on Budget and Policy Priorities, May, 1993: 61.

<sup>60</sup>U.S. Bureau of the Census, "Fertility of American Women: June, 1987" Current Population Reports, Series P-20, No 427: 1988.

<sup>61</sup>Office of Labor Market Analysis and Information, op.cit.: 23.

accurate, the post-1987 data we have examined suggest that state AFDC administrators would be wise to continue to view non-existent or weak employment and/or job skills as a relevant descriptor for many welfare applicants and recipients. This seems particularly true at the present time since Maryland's economic comeback has thus far been what the Department of Economic and Employment Development has called a "jobless recovery".<sup>62</sup>

In many respects, common sense alone would suggest the wisdom of continuing to accept clients' recent work status and work experience as a risk factor/characteristic for AFDC applicants and recipients. It is only logical to imagine that these two variables would, in fact, bear some relationship to a low income mother's likely pattern of welfare use. The recommendation, however, is supported by empirical research findings. According to the General Accounting Office, for example:

At the end of 19 months, about three-fifths (58.1 percent) of families headed by women who were not working at the time they started to received AFDC remained on AFDC, compared to one-third (32.1 percent) of families who were employed at the time of entry.

At the end of 19 months, 63.9 percent of families headed by women who had no work experience lasting at least six months during the previous two years remained on AFDC, compared with 42.8 percent of families headed by women with recent work experience.<sup>63</sup>

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<sup>62</sup>Ibid:

<sup>63</sup>U.S. General Accounting Office, Focus on Teenage Mothers, Washington, D.C.: General Accounting Office, May, 1994: 5.



A similar portrait emerged from analysis of a national data set where the purpose was to profile women who, over a five year period, never left welfare compared to women who, during that same period of time, left welfare because of work and remained off welfare for at least two years.

...women who achieved long work exits entered the welfare system with far more human capital investments than other women. Almost 80 percent of them worked during the 12 months prior to their initial welfare receipt...In stark contrast, women who never left welfare during this time period were an extremely disadvantaged group of women. Two-thirds entered AFDC with no work experience.<sup>64</sup>

In short, the national reality is that women with no work history and women with no recent work experience leave AFDC at a slower rate than do other women. This fact, coupled with what appears to be a state labor market characterized by fewer and fewer job opportunities for those with limited skills and education, supports the notion that limited/no work history remains a valid, useful characteristic for AFDC planning purposes. It seems likely that poor women with this employment profile will continue to turn up at the door of the welfare agency.

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<sup>64</sup>LaDonna Pavetti, The Dynamics of Welfare and Work., Cambridge: Harvard University, May, 1993: 110.

#### Issue 4: Truncated Education

A fourth factor identified in the 1987 study was that of limited educational attainment. Few payees had more than 12 years of schooling; 58 percent claimed a high school or equivalency diploma. Forty-two percent had neither graduated nor acquired a GED, meaning that about two-fifths of new entrants could be considered "dropouts". We believe this aspect of the profile also remains valid for planning purposes in the mid-1990s.

The 1987 study really determined that two educational facts described new accessions to the state's AFDC caseload. The first is that education beyond high school was quite uncommon among new recipients at that time. The second reality was that just under three-fifths of new payees had either a high school or general equivalency diploma, while two-fifths were dropouts.

To determine if these educational descriptors continue to be valid descriptors of new AFDC payees in the mid-1990s requires that we examine educational attainment among the general population as well as any more recent data concerning educational levels among AFDC recipients. After these data are examined, one can decide whether they support or reject the idea that limited education and/or dropping out of school should still be considered a valid characteristic of today's new AFDC payees.

In the general United States population, the trend over time has been toward an ever-greater proportion of adults having at least completed high school. Both nationally and within Maryland, the younger the cohort of adults, the greater their

rate of high school completion. Rates of high school completion, however, do vary by region; inner cities and rural communities - disproportionately where poor families reside - tend to have lower rates of secondary school completion among their young adult populations than do other areas. Ethnic differences in high school completion rates also remain evident.

- \* More than three of four (78.7 percent) native-born U.S. adults had completed 12 or more years of schooling in 1990.<sup>65</sup>
- \* In October, 1991, the high school completion rate for young U.S. adults (19 to 20) was 84.7 percent and for those 21 to 22, 86.2 percent, but many inner city and rural areas have significantly lower rates.<sup>66</sup>
- \* In 1989, only 54 percent of Hispanic and 76 percent of African-American youth 20 and 21 had graduated with a regular high school diploma, compared to a graduation rate of 84 percent for white, non-hispanic youth.<sup>67</sup>

Maryland trends have been similarly positive, to wit:

- \* In 1980, 67.4 percent of Marylanders 25 or older had at least 12 years of schooling; about one in five had at least 16 years. In Baltimore City the figures were 48.4 percent and 11.3 percent, respectively.<sup>68</sup>

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<sup>65</sup>Elizabeth Stephen, et al., "Health of the Foreign-Born Population: United States, 1989-90," Advance Data, Washington, D.C.: National Center for Health Statistics, February 14, 1994: 1.

<sup>66</sup>U.S. General Accounting Office, School-Linked Human Services, Washington, D.C.: General Accounting Office (December, 1993): 3.

<sup>67</sup>U.S. Public Health Service, Healthy People 2000, Washington, D.C.: Department of Health and Human Services, 1991: 254.

<sup>68</sup>George Hall and Courtenay Slater, 1992 State and City Extra: Annual Metro, City and County Data Book, Lanham: Bernan Press, 1992: 291.

\* Per the 1990 census, some 78.4 percent of Marylanders 25 and older had at least a high school education. At the same time, the 26.5 percent of our adult population with at least a bachelor's degree was the fifth highest among all the states.<sup>69</sup>

Unfortunately, improvements have not always been equally evident among all populations or in all parts of the state. In Baltimore City, for example, only 61 percent of adult residents aged 25 and older had a high school education or more at the time of the 1990 census, compared to 78.4 percent for the entire state. Likewise, a 1990 Maryland report documented that the percentage of high school dropouts is almost double in state subdivisions which have severe concentrations of poverty.<sup>70</sup> Statistics from the 1992 report on the performance of Maryland schools confirm the correlation between poverty and completion of high school:

\* The overall high school dropout rate for state public schools was 5.2 percent in 1992, but the rate in Baltimore City (16.4 percent), home to nearly half of all AFDC families, was three times as high.<sup>71</sup>

The positive trends in rates of high school completion among American adults are also directly and indirectly positive for the nation's children, since years of parental schooling is known to

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<sup>69</sup>"Highlights of 1990 Census Data for States," Database, Baltimore: Maryland Office of Planning, January, 1993: 1.

<sup>70</sup>Maryland Commission for Children at Risk, Maryland's Challenge, Baltimore: Commission for Children at Risk, January, 1990: 6.

<sup>71</sup>Office of School Performance, Maryland School Performance Report, 1992, Baltimore: Maryland State Department of Education, November, 1992: 10, 16.

be associated with such things as a child's likelihood of completing high school,<sup>72</sup> differential risk of having a low birth-weight baby,<sup>73</sup> likelihood that the family will be poor<sup>74</sup> and so forth.

\* Over time the percentage of American children whose mothers have at least a high school education has increased; for all children the proportion rose from 73.3 percent in 1980 to 80.3 percent in 1990.<sup>75</sup>

While the trend has been positive for all children, racial differences remain. To illustrate, as of 1990, 87.5 percent of white, non-Hispanic children had mothers with at least a high school education; for African-American children and Hispanic children, the proportions were 71 percent and 49.5 percent, respectively.<sup>76</sup>

As the preceding statistic indicates, children of color are still much more likely than white children to have a mother with less than a high school education. Non-white children are also more likely to live in a single parent, female-headed household. When the factors of ethnicity and female headship are jointly considered, the effect of truncated education can be seen in national statistics.

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<sup>72</sup>Robert Haveman, et al. The Relation of Educational Attainment to Childhood Events and Circumstances, Madison: Institute for Research on Poverty, January, 1990: 28.

<sup>73</sup>U.S. Public Health Service, op.cit.: 11.

<sup>74</sup>U.S. General Accounting Office, Poor Preschool-Aged Children, Washington, D.C.: July, 1993: 5.

<sup>75</sup>Children's Defense Fund, CDF Reports, April, 1994: 6.

<sup>76</sup>Ibid.

- \* About 60 percent of poor preschool aged children lived in single parent homes in 1990; over 80 percent of poor black preschoolers lived in single-parent families.<sup>77</sup>
- \* When families are headed by a woman (25 or older) with only 12 years of education, those families are at substantial risk of being poor; overall 30 percent of such families are poor, per Census Bureau data.<sup>78</sup>
- \* Poverty rates decline noticeably when the head of the family has some schooling beyond high school; the most dramatic improvement occurs among blacks:
  - the poverty rate is only 21 percent if the woman has at least one year of school past high school - a drop of 30+ percentage points relative to the poverty rate (51 percent) among black families headed by a female high school graduate with no other schooling.<sup>79</sup>

There are other dangers as well. A recent analysis of national data by the Centers for Disease Control, for example, found that out-of-school adolescents aged 14 to 19 were more likely than in-school adolescents to engage in risky behaviors such as smoking, use of alcohol, marijuana and cocaine, sexual intercourse, and sexual intercourse with multiple partners.<sup>80</sup> Poor children, especially those whose mothers have less than a

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<sup>77</sup>U.S. General Accounting Office, Poor Preschool Aged Children: 31-33.

<sup>78</sup>Arloc Sherman, College Access and the JOBS Program, Washington, D.C.: Center for Law and Social Policy, January, 1990: 3.

<sup>79</sup>Ibid.

<sup>80</sup>Centers for Disease Control, "Health Risk Behaviors Among Adolescents Who Do and Do Not Attend School, U.S. 1992," Journal of the American Medical Association 271, #14 (April 13, 1994): 1068 (1068-1069).

high school education, are at risk of cognitive delay of as much as one standard deviation of IQ (15 points) at age three.<sup>81</sup>

Societal risks and costs of continued high rates of non-completion of high school are also great. It is estimated that each year's new "class" of school dropouts will cost the nation more than \$240 billion in lost earnings and forgone taxes.<sup>82</sup> Likewise, it has been estimated that female high school dropouts will earn \$260,000 less and pay \$60,000 less in taxes during their lifetimes than females who graduate from high school.<sup>83</sup>

Assessment of educational attainment data and their relevance to the profile of new AFDC payees in the mid-1990s can not be undertaken in isolation. Years of schooling does not exist in a vacuum, but influences and is influenced by other characteristics which typify AFDC recipients. For example, we know that teenage childbearing is widespread, that it is a key risk factor for receipt of AFDC (75 percent of teen moms receive AFDC within a few years), and is associated with long-term reliance on welfare. With regard to education, we also know that, as a general rule:

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<sup>81</sup>Centers for Disease Control, "Meeting Notice." Federal Register 59, #85, May 4, 1994: 23068.

<sup>82</sup>U.S. General Accounting Office, Home Visiting, 14.

<sup>83</sup>U.S. General Accounting Office, School-Linked Human Services: 2.

\* women who have a baby as teenagers do not complete as much schooling, on average, as do women who delay childbearing.<sup>84</sup>

The bottom-line is, as the Department of Economic and Employment Development has said, "education and skills pay".<sup>85</sup> The truth of this assertion is perhaps best illustrated by U.S. data on unemployment rates and educational attainment. In 1993, to illustrate, the national unemployment rate for those with less than a high school education was 22.8 percent. For high school graduates with no college, the rate was 13.1 percent, but was less than 10 percent (8.7 percent) for those with some college and those who were college graduates (6.1 percent).<sup>86</sup>

Of necessity, this review of available educational data has been somewhat circuitous. Few data, historical or current, are available at either the national or state level which speak directly and exclusively to levels of educational attainment among AFDC applicants/recipients. In fact, educational data on AFDC adults has traditionally been less than readily available; the most recent federal AFDC client characteristics study, to illustrate, reports that years of schooling information was not available in official AFDC case files for 49.9 percent of cases nationwide and 59.7 percent of Maryland cases in the sample.<sup>87</sup>

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<sup>84</sup>Amy Butler, "The Changing Economic Consequences of Teenage Childbearing," Social Service Review 65, #1 (March, 1992): 10.

<sup>85</sup>Office of Labor Market Analysis, op.cit.: 23.

<sup>86</sup>Ibid.

<sup>87</sup>Office of Family Assistance, op.cit.: 52.



Despite our need to rely on statistics that do not exactly address the question at hand, results are congruent with trends over time in the educational levels of women who receive AFDC. Our review suggests that, in general, the rate of high school completion for young American adults has been increasing, so that, among all ethnic groups, there are now more high school graduates than not. This may also be true for the AFDC caseload nationwide; when education is known, there are more clients with 12 or more years of schooling (or equivalent) than there are with fewer years. This is also what we found among the 1987 first-timers; 58 percent claimed to have a high school or GED degree or above, while 42 percent said they did not.

Taken at face value, one might be tempted to conclude that truncated education is decreasing in importance as a variable with which welfare administrators need be concerned. Sadly, that is probably not the case, as Brandon observes:

One might conclude that completing high school is a universally shared phenomenon among all groups. Not so. Single mothers on welfare - an important group, not necessarily defined along racial and ethnic lines - remain an exception...their dropout rates remain extremely high.<sup>88</sup>

The conclusion Brandon reached from his analysis of 25 years of national data concerning educational trends among single mothers in general is similar to what we would conclude from longitudinal

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<sup>88</sup>Peter Brandon, "Trends Over Time in the Educational Attainments of Single Mothers," Focus 15 #2 (Summer/Fall, 1993): 26.

educational data descriptive of AFDC clients. The news is both good and bad:

Single mothers have made progress in educational attainment over the last 25 years. High school dropout rates of black and white single mothers are converging. Yet the rate of decline in dropout rates for single mothers (black and white) who have received welfare is so slow that their dropout rates remain considerably higher than those of other single mothers.<sup>89</sup>

There is another, somewhat hidden reality that should also be considered in assessing the utility of educational level - especially high school graduation versus non-high school completion - as a useful AFDC profile and planning variable in the mid-1990s. This is the increasingly important role played by general equivalency diplomas (GED) and what we know about the earning power of GED holders as compared to regular high school graduates. To the extent that the increasing incidence of "high school completion" among AFDC mothers reflects the acquisition of GEDs, rather than their completion of four years of traditional secondary schooling, there may be important implications for programs such as Project Independence.

The GED has become a major source of high school degrees in this country. One out of every seven new high school certificate holders achieves that status by a GED...

High school completion levels measured by the proportion of persons aged 20 to 24 who have high school credentials or more - have not deteriorated in the last 20 years only because GED certification has been rising.<sup>90</sup>

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<sup>89</sup>Ibid: 30.

<sup>90</sup>James Heckman, Assessing Clinton's Program on Job Training, Workfare and Education in the Workplace, National Bureau of Economic Research, Cambridge: NBER, August, 1993: 25.

This distinction is important to bear in mind. To the extent that GEDs may be largely responsible for the seeming improvement in the educational levels of AFDC mothers over time, we could be overly optimistic about these women's earnings potential and/or the ease and likelihood of their finding employment and economic self-sufficiency.

Except for a tiny upper tail, GED-certified high school graduates earn roughly the same as high school dropouts. For all groups (other than males in late 20s to early 30s), there is little evidence that GED-certified workers earn the same wages or work the same hours as ordinary high school graduates.<sup>91</sup>

What can we conclude from our admittedly convoluted review of available educational data? We conclude the news is both good and bad. The good news is that, for AFDC payees, as for the general U.S. population, the proportion of adults with less than a high school education or its equivalent continues to decline. This is especially true for young adults, those at greatest risk of AFDC receipt.

The bad news is multi-faceted. First, rates of high school completion continue to vary on two dimensions that are germane to AFDC: region of the state (the inner city and rural areas having lower rates); and ethnicity (whites having higher rates than non-whites). Moreover, the data are clear in showing that single mothers in general and single mothers on welfare in particular remain an exception to the trend; their dropout rates have

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<sup>91</sup>Ibid: 26.

remained extremely high. Thus, without asserting a causal link in one direction or the other, we think it safe to conclude that truncated education - defined as being a high school dropout - does remain a valid risk factor for and descriptor of likely new entrants to our state's AFDC rolls.

Our review has also uncovered another educational reality that is worth noting and, we think, worth incorporating into welfare planning. This is the increasing importance of the GED as a contributor to high school completion levels coupled with the finding that, in general, GED-holders mirror high school dropouts, not high school graduates, in their work and earnings. With this in mind, it bears repeating that one of every seven new high school "graduates" achieves that status via a GED and that the only reason high school completion levels among 20-24 year olds have not declined since the mid-1970s is because GED certification has been rising.

In addition to continuing to accept non-completion of high school as a profiling variable for new AFDC entrants, we believe these data also suggest it would be wise for welfare reformers and administrators to begin to differentiate in planning and practice between those with a regular high school diploma and those who possess a GED. If the latter group do, indeed, have more in common with dropouts than with secondary school graduates, they may well require more intensive services and/or longer participation in welfare-to-work programs than may have been commonly assumed. Despite their possession of a GED, at

least some payees may also be in need of remedial education; there appears to be at least some hint in the data we uncovered that, despite its prevalence, the GED is not totally 'equivalent' to a regular high school diploma.

For these reasons, we believe this review also clearly indicates that efforts should be expanded and strengthened, to encourage youngsters in AFDC or at-risk households to stay in and complete regular secondary school. However, even a redoubling of traditional "stay in school" messages and campaigns may not be sufficient. The magnitude of the dropout problem among young people at risk for AFDC and the known associations between dropping out of school and pregnancy, welfare receipt, long-term dependency, earning power, employment prospects, and possible effects on children, probably demands much more direct intervention.

These data indicate to us that Maryland might be wise to experiment with reforms that more directly attempt to keep AFDC teens (parents and non-parents) in regular high school. The Primary Prevention Initiative (PPI), of course, is one such approach. Most observers, however, agree that PPI is less likely to be effective with teens than with younger children because the program tinkers with the size of the mother's welfare check and provides no direct incentive for the teen. Perhaps we should think about a demonstration project modeled after Ohio's apparently successful LEAP program, but one where the incentive

program is not limited only to AFDC teens who already have children.<sup>92</sup> Early results from Ohio seem promising:

LEAP had two important and statistically significant effects on teens' enrollment in high schools and adult education programs: it decreased drop-out rates among teens in school and induced many dropouts to return to school...these estimates probably underestimate the effects that would be found in an ongoing LEAP program...in addition to promoting enrollment and retention, LEAP improved the daily attendance of teens enrolled in high school.<sup>93</sup>

At minimum, given the magnitude of its dropout problem and the rate of childbearing among teens, conduct of a pilot LEAP-type program in Baltimore City would seem advisable. The payoff from such investments could be considerable:

Results suggest that young people who are doing well in school and...feel the future is bright, are unlikely to do something to impede their future opportunities. Consequently, interventions that increase the success of at-risk youngsters in school are also likely to reduce the rate of early family formation.<sup>94</sup>

Finally, there is another reality looming on the horizon which has enormous implications for the welfare system, given the current educational statuses of the population receiving and at-risk to receive AFDC. This is the reality that, as we approach the 21st century, even those who have a high school diploma find it increasingly difficult to successfully compete for available

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<sup>92</sup>For a description of the LEAP program and preliminary results, see: Dan Bloom, et al. "Ohio Boosts Attendance Among Teen Parents," Public Welfare, Winter, 1994: 18-30.

<sup>93</sup>Ibid: 25, 27.

<sup>94</sup>Gary Sandefur and Sara McLanahan, Family Background, Race and Ethnicity and Early Family Formation, Madison: Institute for Research on Poverty, July, 1990: 29.

jobs. As noted in our earlier discussion of employment, it is generally predicted that people lacking post-secondary education will have even fewer job opportunities in the years ahead.

These realities must be taken into account by those who operate and fund so-called 'welfare to work' programs. In certain quarters there is considerable controversy about permitting people to pursue college degrees while they are on the welfare rolls. Certainly, pursuit of a college degree is not the appropriate course for all AFDC payees. For those who have the desire and ability, however, there are empirical data which suggest that, in the long-run, higher education for welfare mothers might prove a wise investment.<sup>95</sup>

One analysis of Census Bureau data, for example, found that women with postsecondary schooling are far more likely to escape poverty, achieve adequate income and leave AFDC quickly, than are high school graduates with no further schooling.<sup>96</sup> Similarly, Census Bureau data also show that four year college graduates rarely ever use welfare and, when they do, almost never use it for long periods of time.<sup>97</sup> A third study also indicates the very powerful effect of education beyond high school in

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<sup>95</sup>The author's belief in this point arose not only from study of the literature, but from her own experiences providing mentoring services to several young Baltimore women who were receiving AFDC while pursuing bachelor's degrees.

<sup>96</sup>Sherman, op.cit.: 1.

<sup>97</sup>U.S. Bureau of the Census, Characteristics of Persons Receiving Benefits from Major Assistance Programs, Washington, D.C.: Census Bureau, 1989.

insulating women from long-term acquaintance with the welfare system. It projected that only one of four AFDC mothers with one year of college would remain on welfare at the end of two years compared to more than half of those with a high school education.<sup>98</sup> These data and common sense suggest that, for at least some AFDC mothers, higher education may be the vehicle that not only permits them to exit welfare, but enables them to leave it permanently.

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<sup>98</sup>John Fitzgerald, The Effect of the Marriage Market and AFDC Benefits on Exit Rates from AFDC. Madison: Institute for Research on Poverty, 1989: 24.



### Other Issues Warranting Attention

The paper thus far has focused on variables previously found to be commonly descriptive of families coming onto our AFDC rolls for the first time. Based on review of independent data, we believe it is appropriate for the state to continue to use the 1987 first-timers profile in planning for services to first-time AFDC families in the mid-1990s. At the same time, there are two issues that were not specifically addressed in the 1987 study that we believe the state should also incorporate into its thinking about the future. Each of these issues is briefly outlined below.

AFDC administrators should begin to think about and plan for the small, but steadily growing cohort of "other relative" AFDC cases. In particular, they should be concerned about cases in which the need for assistance or the child's reason for living apart from its parent(s) may be precipitated by a parental substance abuse problem.

More generally, the incidence and implications of substance abuse among AFDC recipients should be added to the list of policy-makers' concerns.

There is little empirical data about the characteristics and circumstances of the "other relative" sub-group among AFDC cases. However, there is general consensus among those on the front lines of public welfare that substance abuse is an increasingly important phenomenon affecting the client population. Sisco and

Pearson's (1994) review of the limited literature appears to confirm what practice wisdom has begun to quietly suspect:

Three studies examined alcohol and drug abuse in populations that included AFDC recipients...

[a 1989 study] found significantly higher binge drinking ...and hard drug use among AFDC recipients with contact with child protective services compared to mothers without CPS contact...

Using toxicological screening, [a 1990 study] found that 16.3 percent of pregnant women who used public clinics compared to 13.1 percent who used private clinics tested positively for alcohol, marijuana, cocaine or opiate use or some combination...

A comparison of alcohol and drug dependence among male and female GPA and AFDC recipients found that...five percent of female recipients were alcohol dependent and 13 percent were drug dependent.<sup>99</sup>

What we do know for certain is that there has been an alarming increase in the number of individuals using cocaine in the United States.<sup>100</sup> Concomitantly, as Minkler and others have noted, the number of children living away from their natural parent(s) has also increased:

The 1990 census revealed close to a 40 percent increase in the number of children living with other relatives during the decade of the 1980s.<sup>101</sup>

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<sup>99</sup>Carol Sisco and Carol Pearson, "Prevalence of Alcoholism and Drug Abuse among Female AFDC Recipients," Health and Social Work 19, #1 (February, 1994): 75.

<sup>100</sup>Candyce Berger, et al. "Cocaine and Pregnancy: A Challenge for Health Care Providers," Health and Social Work 14 #4, November, 1990: 310.

<sup>101</sup>Meredith Minkler, et al. "Raising Grandchildren from Crack Cocaine Households," American Journal of Orthopsychiatry 64 #1, January, 1994: 20.

About 3.5 million U.S. children now live with a grandparent.<sup>102</sup>

Also relevant to AFDC is that most studies concur in finding as many as 10 percent of all babies born have been exposed to cocaine in utero.<sup>103</sup> As Haskett et al. have noted, "cocaine use is associated with multiple indicators of risk for family dysfunction and for child abuse and neglect".<sup>104</sup> Cocaine abuse, in particular, may well be at least partially responsible for the increase in "other relative" AFDC cases, just as it has been implicated in foster care, child protective services and child welfare in general. The Child Welfare League of America's survey of more than 250 agencies in 10 states documented this reality:

- \* Of all children served in FY 1991, nearly two-fifths (36.8 percent) were affected by problems associated with substance abuse and there was consensus among agencies (88 percent) that problems associated with substance abuse were increasing.
- \* Specific concern was expressed about crack cocaine users. Seven of ten agencies said this was a serious problem among children and families served; some 88 percent said crack cocaine users are more difficult to work with than other drug users and 83 percent said these clients are more likely to be unpredictable or violent.<sup>105</sup>

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<sup>102</sup>Cleopatra Caldwell, "More Grandparents Become 'Reparents'," Institute for Social Research, Ann Arbor: University of Michigan, August, 1994: 8.

<sup>103</sup>See, for example, D.A. Frank, et al. "Cocaine Use During Pregnancy: Prevalence and Correlates," Pediatrics 82, 1988: 888-894.

<sup>104</sup>Mary Haskett, et al. "Intervention with Cocaine-Abusing Mothers," Families in Society, October, 1992: 453.

<sup>105</sup>Patrick Curtis and Charlotte McCullough, "The Impact of Alcohol and Other Drugs on the Child Welfare System," Child Welfare LXXII, 6 (November-December, 1993): 535-536.

A recent U.S. General Accounting Office (GAO) study of foster care in the three states that, together, contain more than 50 percent of all foster children, leaves no doubt about the role of substance abuse in foster care placements. It also rather strongly implies that substance abuse is a phenomenon about which the AFDC program should also be concerned. In a study of 1986 and 1991 foster care cases of young children (under 36 months of age), to illustrate, the General Accounting Office found:

- \* There was a sizable, estimated increase in the number of parents who abused drugs. The GAO estimated this proportion rose from 52 percent to 78 percent between 1986 and 1991.
- \* There was a dramatic increase in the proportion of young foster children for whom prenatal exposure to cocaine could be documented. In 1986, the proportion was 17 percent, but by 1991 had risen to 55 percent.<sup>106</sup>

Although the data are limited, estimates of the proportion of AFDC recipients with a substance abuse problem range from 4.5 percent (HHS) to 27 percent.<sup>107</sup> A General Accounting Office study due to be released in the next few months should provide more reliable estimates. The foster care/substance abuse link documented in the GAO's foster care study does not specifically mention AFDC, but there can be little doubt that there is considerable overlap between the two populations. This point is well illustrated by the GAO's additional foster care/substance

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<sup>106</sup>U.S. General Accounting Office, Foster Care: Parental Drug Abuse Has Alarming Impact on Young Children, Washington, D.C. U.S.GAO, April, 1994: 2.

<sup>107</sup>William Claiborne, "Substance Abuse Among Welfare's Young Mothers," Washington Post, June 28, 1994: 58.

finding that much of the 110-percent growth in the population of young foster children between 1986 and 1991 occurred among those who were AFDC-eligible.<sup>108</sup>

It seems indisputable that substance abuse is an issue with which the AFDC program will, sooner or later, need to contend at the program policy level. Although service resources for AFDC recipients are already strained, it would behoove state welfare administrators to start thinking now about how they will go about meeting the difficult challenges that this problem will present to their efforts at promoting client self-sufficiency.

There is also a second issue we think should be incorporated in welfare planning and budgeting, as well as the design of program reforms.

The state should begin to plan programs, rethink the AFDC-child support interface and construct both the AFDC and child support budgets as if all new AFDC cases were in need of paternity establishment. This is especially true in Baltimore City.

At the same time, renewed and serious efforts must be undertaken to improve the IV-A (AFDC) and IV-D (child support) interface.

It is beginning to be widely accepted that discussion of AFDC is incomplete without discussion of child support. Both the Clinton welfare bill and the final report of the Governor's Commission on Welfare Policy, for example, place considerable

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<sup>108</sup>U.S. General Accounting Office, Foster Care: 13.

emphasis on child support.<sup>109</sup> Often, however, attention focuses primarily on enforcement of support orders, with little attention to paternity establishment.

There is good reason to be concerned about child support enforcement. According to the most recent national statistics, paying cases accounted for only 18.7 percent of the total child support caseload.<sup>110</sup> Moreover, of \$10.9 billion in current support due, only \$6 billion (55 percent) was collected. Of prior support (arrears) totalling \$23.9 billion, only \$1.8 billion (seven percent) was paid.<sup>111</sup> Exactly comparable Maryland statistics are not available, but it was reported to the Governor's Commission on Welfare Policy that there is a \$100 million dollar gap in Maryland between the amount of support that should be paid and the amount that is actually collected.<sup>112</sup>

The above statistics are not only appalling in their own right, but also mask an issue that should be of great concern to welfare administrators and advocates: relatively little of the support collected is for children on AFDC. Nationally, of all cases with collections, only 38 percent were AFDC, Foster Care or AFDC arrears-only cases; of all support collected, only 28

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<sup>109</sup>Governor's Commission on Welfare Policy, For the Good of the Whole: Making Welfare Work, Baltimore: Governor's Commission, June, 1994.

<sup>110</sup>Office of Child Support Enforcement, Seventeenth Annual Report to Congress, FFY 1992, Washington, D.C.: Department of Health and Human Services, 1994: 51.

<sup>111</sup>Ibid.: 57.

<sup>112</sup>Governor's Commission on Welfare Policy, op.cit.: 26.

percent was for children receiving AFDC.<sup>113</sup> In fiscal year 1993 in Maryland, only 24 percent of support collections were for AFDC children.<sup>114</sup>

As important as the issue of collections is, we need to realize that for AFDC cases in particular there is another child support issue that warrants at least equal attention: paternity establishment. In all cases with non-marital children, paternity must be legally established before a support order can be issued, let alone enforced.

Increasingly, paternity establishment is needed by American children in general. In 1960, for example, only three percent of children in one-parent families lived with a never-married mother; by 1988, the figure was 28 percent.<sup>115</sup> In fact by 1988, for African-American children, living with a never-married mother was the most common (52 percent) living arrangement.<sup>116</sup> Closer to home, about one-third (32 percent) of all Maryland births are to unmarried women.<sup>117</sup>

These trends are even more pronounced when we examine the AFDC population separately. Nationwide, the proportion of AFDC

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<sup>113</sup>Office of Child Support Enforcement, op.cit.: 51-52.

<sup>114</sup>Child Support Enforcement Administration, Annual Statistical Report, FY 1993, Baltimore: Department of Human Resources, undated.

<sup>115</sup>Patricia Shiono and Linda Quinn, "The Epidemiology of Divorce," in Children and Divorce, Richard Behrman (ed.), Los Angeles: Center for the Future of Children, Spring, 1994: 22.

<sup>116</sup>Ibid: 23.

<sup>117</sup>Division of Health Statistics, 1992 Preliminary Report.

children whose parents were never married to each other went from 24 percent in 1967 to 52 percent in 1988.<sup>118</sup> According to the same federal report, the proportion of Maryland AFDC cases with "no marriage" as the deprivation factor was even higher than the national average, at 72 percent.<sup>119</sup> In a random sample of first-time IV-A cases in Baltimore City - home to about half of the Maryland IV-A caseload - we found that 85 percent were paternity cases.<sup>120</sup>

The implication of these trend data is, we think, that both the AFDC and child support programs in our state would be well-advised to plan and budget as if paternity establishment would be needed for at least one child in each and every AFDC case. As one long-time child support scholar and his colleagues have noted:

While there was an improvement in paternity establishment and award rates for children born out of wedlock in the 1980s - from 1 in 10 to 3 in 10 - there was also an increase in the proportion of children in this high-risk group<sup>121</sup>.

This, in turn, suggests that additional resources and/or resource redirection may be needed, as paternity cases are

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<sup>118</sup>Office of Family Assistance, op.cit.: 1.

<sup>119</sup>Ibid: 14.

<sup>120</sup>Catherine E. Born and Margaret Steiner, First-Time AFDC Recipients: A Report on Child Support Referrals and Results in Baltimore City, Baltimore: University of Maryland School of Social Work, March, 1992: 18.

<sup>121</sup>Irwin Garfinkel, Marygold Melli and John Robertson, "Child Support Orders: A Perspective on Reform," in Children and Divorce: 87.



usually more time-consuming and resource-intensive than are non-paternity cases. There have been a number of new federal mandates imposed on state and local child support programs in the past few years, and there has been consistent growth in the size of the non-AFDC child support caseload. All of these consume staff time and program resources, perhaps at the expense of paternity establishment in AFDC cases. At the same time, albeit quietly, the proportion of AFDC children in need of paternity establishment (e.g., the "never married" cohort), has continued to increase.

It could be that Maryland's larger-than-average, non-marital AFDC caseload warrants the infusion of resources devoted exclusively and specifically to paternity establishment. We are certain this is the case in Baltimore City, but suspect the need is statewide. Despite the realities of non-marital births in Maryland, we had a 15 percent decrease between FY 1992 and FY 1993 in the number of AFDC paternities established.<sup>122</sup> Some counties recorded large increases. In others, decreases were dramatic: Baltimore City (-18 percent), Montgomery (-15 percent) and Prince George's (-44 percent). These decreases, in particular, should be of concern to welfare administrators since these three counties, together, account for a sizable portion of the state's total AFDC caseload.

The trends also suggest the need to experiment with additional, creative, cohort-specific methods to encourage

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<sup>122</sup>Child Support Enforcement Administration, op.cit.: 6.

establishment. Some of this is underway, as evidenced by the new federal requirement for in-hospital paternity establishment mechanisms and paternity-specific proposals in the Clinton welfare reform proposal. For many reasons, however, in-hospital establishment programs and the President's proposals are, at best, only partial solutions. Most observers of the nation's child support system agree there is much more that could and should be done.<sup>123</sup>

These data, the author's own experiences in the child support field, and the literature also suggest some staff training or retraining might be in order. Specifically, there is reason to believe that at least some child support staff have ingrained, negative attitudes about paternity cases that do not bode well for increasing paternity establishments, let alone enforcing support orders and recouping AFDC payments.

There is at least some indication in the literature that, policy to the contrary, paternity cases, in actual practice, may not routinely receive the same degree of attention as do other cases. The Congressional Research Service, for instance, reports "some observers maintain there are many jurisdictions where low

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<sup>123</sup>See, for example, Paula Roberts, Understanding the Clinton Welfare Bill: Paternity and Child Support Cooperation Requirements, Washington, D.C.: Center for Law and Social Policy, September, 1994.

priority is given to paternity cases".<sup>124</sup> Another study quotes a child support program respondent as saying:

Often cases are prioritized not by the child's right to have paternity established, but by the potential payor's ability to pay, including ease of collection.<sup>125</sup>

Despite the above, it has been documented that when the fathers of non-marital children are expeditiously located, the majority voluntarily acknowledge paternity, thus avoiding the expensive and time-consuming trial process.<sup>126</sup> There is also a growing body of research findings which suggest that popular stereotypes about the financial status of men who father children outside of marriage are not true.

Although many fathers in paternity cases have zero or very low incomes at the time the paternity case comes to court, a sizable minority, indeed half of those aged 25 and older, have incomes over \$10,000. Further, the incomes of many increase modestly or dramatically in the first three years after the petition is filed...a suggestion from these results is that paternity should be established and a support award set as soon as possible in a child's life even if his/her father does not have significant income.<sup>127</sup>

Similarly, our own research of City AFDC cases, 85 percent of which were paternity cases, found the large majority of alleged

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<sup>124</sup>Carmen Solomon, The Child Support Enforcement Program: Policy and Practice, Washington, D.C.: Congressional Research Service, December 8, 1989: 87.

<sup>125</sup>Esther Wattenberg, "Establishing Paternity for Nonmarital Children," Public Welfare 45, #3 (Summer, 1987): 11.

<sup>126</sup>Sandra Danziger and Ann Nichols-Casebolt, "Child Support in Paternity Cases," Social Service Review, 64, #3, September, 1990: 468.

<sup>127</sup>Daniel Meyer, Supporting Children Born Outside of Marriage, Madison: Institute for Research on Poverty, December, 1993: 24-25.

fathers did have stable, albeit not lucrative, employment over a four year period.<sup>128</sup> A Wisconsin study concluded "AFDC absent fathers have the ability to pay substantially more child support than they are currently paying".<sup>129</sup> One New Jersey project was able to remove 26 percent of existing cases from AFDC through concerted attention to award modifications and collections.<sup>130</sup>

Given Maryland's high rate of teen child-bearing and the fact that more than 80 percent of teen births are outside marriage, age-appropriate paternity establishment campaigns, directed at young parents and jointly promoted by IV-A and IV-D, would seem especially apropos.<sup>131</sup> Such efforts would also be wise since the evidence is clear that, in the case of teen parents, if paternity is not established soon after the baby's birth, the likelihood of adjudication dramatically drops.<sup>132</sup>

Common myth, unfortunately, has it that these cases, in particular, have little potential child support payoff, and there is anecdotal evidence that they are therefore not aggressively pursued. Yet, research has shown the fallacy of this thinking.

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<sup>128</sup>Born and Steiner, op.cit.: 114-125.

<sup>129</sup>Thomas McDonald, James Moran and Irwin Garfinkel, "Absent Fathers' Ability to Pay More Child Support," Journal of Social Service Research, 13, #3 (1990): 14.

<sup>130</sup>Laura Loyacono and Shelley Smith, State Budget Implications: Child Support Enforcement, Washington, D.C.: National Conference of State Legislatures, March, 1988: 15.

<sup>131</sup>Children's Defense Fund, "Teen Pregnancy," : 9.

<sup>132</sup>Sandra Danziger and Ann Nichols-Casebolt, "Teen Parents and Child Support," Journal of Social Service Research, 11, #2-3 (1987-88): 17.

For example, one study has found that 61 percent of young absent fathers who were poor in 1980 were not poor six years later.<sup>133</sup>

At the most practical level, these data suggest a need for stepped-up efforts to improve the interface between the IV-A and IV-D programs in Maryland. The U.S. General Accounting Office (GAO) has previously documented the existence of widespread problems in the IV-A/IV-D interface<sup>134</sup> and a forthcoming study from the Center for Law and Social Policy is expected to confirm the GAO's earlier conclusions.<sup>135</sup> An overview of the soon-to-be-released study's findings echoes what we have found in our own research:

When asked about barriers to determining paternity for children receiving AFDC, IV-D directors report that their agencies frequently receive incomplete information from AFDC caseworkers. Sometimes this is because the AFDC caseworker does a poor job of gathering the information. Sometimes this is because the information is gathered, but not transmitted to the IV-D worker. Sometimes the mother later provides information to the AFDC worker, but this information is not forwarded to IV-D. As a result, many cases which could be brought are not pursued. This frustrates mothers who wish to establish paternity and IV-D workers who would like to do a better job.<sup>136</sup>

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<sup>133</sup>Family Impact Seminar, "Encouraging Unwed Fathers to be Responsible," Background Briefing Report, Washington, D.C.: American Association for Marriage and Family Therapy, undated, 11.

<sup>134</sup>See, for example, U.S. General Accounting Office, Child Support: Need to Identify Fathers and Obtain Support Orders, Washington, D.C.: GAO, 1987.

<sup>135</sup>Finkel and Roberts, Establishing Paternity for Children Receiving AFDC: What's Wrong and What's Right With the System, Washington, D.C.: Center for Law and Social Policy, forthcoming.

<sup>136</sup>Paula Roberts, op.cit.: 10.

Based on our own IV-A/IV-D research in Maryland, we believe that here, as elsewhere, it is true that "poor connections between the AFDC system and the child support system may be connected to low levels of paternity establishment".<sup>137</sup>

It is anticipated that certain problems in the IV-A/IV-D interface will be addressed when the new computer systems (CARES/CSES) are implemented statewide. However, other important problems, including staff attitudes, will not be solved via computerization alone. If left unattended, however, these long-standing interface problems will continue to have an adverse effect on both the AFDC and child support programs, not to mention the children involved.

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<sup>137</sup>Daniel Meyer, "Paternity and Public Policy," Focus 14, #2 (Summer, 1992): 5.

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