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The Status of Low-Income Families in the Post-Welfare Reform Environment: Mapping the Relationships Between Poverty and Family

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ABSTRACT. Low-income families face an enormous burden to achieve economic security since the deterioration of a guaranteed safety net. Health insurance coverage is uneven, affordable childcare falls short of demand, and wage earnings insufficiently support family needs. This analysis focuses on recent trends in family formation, the impact of policy changes on families of color and of immigrant status, and explores the daily challenges and coping strategies low-income families use to survive despite insufficient resources. Four key findings emerge from this body of knowledge: (1) Low-income families experience severe hardships when relying on cash assistance, work, or a combination of both; (2) Low-income families are resilient and resourceful; (3) Low-income families face significant barriers to using public and private services along with increasing earnings from work; and (4) The quality of life for families of color and immigrant families is directly affected by employment and service sector practices. Future research needs to focus on identifying the critical unmet needs of low-income families. *[Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HAWORTH. E-mail address: <docdelivery@haworthpress.com> Website: <<http://www.HaworthPress.com>> © 2005 by The Haworth Press, Inc. All rights reserved.]*

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INTRODUCTION

Low-income families in the United States face enormous challenges in achieving economic self-sufficiency in the midst of a deteriorating guaranteed governmental safety net. As such, the research literature on “safety net” services tends to define many low-income families mistakenly by welfare receipt or unemployment status alone. Categorizing low-income families in this fashion overlooks important life circumstances. In fact, data from the National Survey of America’s Families indicate that one in six individuals of working age live in a low-income family where at least one member of the household is working (Acs, Ross Phillips, & McKenzie, 2001). Unfortunately, most of these low-wage workers are responsible for the bulk of their family’s income (Carnevale & Rose, 2001), making the escape from poverty difficult. Unfavorable working conditions, working fewer hours, and continued stress, for some, due to discrimination, serve as critical factors that contribute to remaining in poverty (Williams, 1997; Williams & Williams-Morris, 2000). For families all over the nation, and especially those in states with a high cost of living (i.e., California), the choices for coping and surviving involve either paying the rent or purchasing food on the one hand or receiving health care or purchasing clothing on the other.

This analysis of available research includes a description of the decisions that families make when struggling to meet their basic needs as well as the coping strategies that they use to stay alive. The analysis begins with a description of three key elements of low-income families: (1) definitions of family and low-income, (2) child and adult well-being, and (3) family formation. The highlights of the definitional issues are noted in Figure 1 and are followed by an elaboration of the other issues. The discussion then turns to the primary focus of this analysis, namely the family assets and coping strategies used by low-income families. After noting the challenging circumstances in which low-income families find themselves, the analysis concludes with a set of implications related to practice and research.

FIGURE 1. Working Definitions of Well-Being, Family, and Poverty

1. *Well-Being*

- “Well-being is the quality of life experienced by individual human beings and is dependent on a host of factors, from basic health, to the quality of primary and family relationships, to intellectual fulfillment and emotional satisfaction” (Top 10 by 2010, 2002).
- Measuring well-being includes census statistics, school records, crime reports, health statistics, and surveys of attitudes or behavior.
- Measures of material well-being, such as the Index of Child Well-Being (CWI), include health, safety, educational attainment, community participation, social relations, and emotional well-being (The Foundation for Child Development, 2004).

2. *Family*

- “. . . two or more people who consider themselves family and who assume obligations, functions, and responsibilities generally essential to healthy family life” (NASW, 2003, p. 155).

3. *Poverty*

- Current federal definition of poverty is \$18,660 for a family of four (two adults, two children) (U.S. Bureau of the Census, 2004). It is based on three times the estimate of a low-income family’s food budget, with the assumption being that the other two-thirds can be spent on housing, clothing, and other needs. A total of 12.1% of people were living in poverty in 2002, an increase from 11.7% in 2001 or an additional 1.7 million people living in poverty in the United States (Proctor & Dalaker, 2003).
- Debate: the current federal definition of poverty grossly underestimates the number of people living in poverty, especially since the value of food has decreased relative to other needs vs. an overestimate of the poverty rate in that the current poverty estimate fails to include the value of food stamps, tax credits, or other benefits (Bernstein, September 26, 2003).
- The federal measure of poverty developed in 1963 is no longer valid because of political, economic, and social shifts in the United States (e.g., increased need for child care as more women have entered the labor force, growth of single-parent households that are primarily female-headed, regional variation in the cost of living, rapid rise in medical costs, new tax laws where some increase taxes and some increase benefits, the expansion of in-kind benefit programs like food stamps, and inflation) (Citro & Michael, 1995).

4. *Theories About the Causes of Poverty* (Goldsmith & Blakely, 1992)

- *Poverty as Pathology*—People are poor because they are lazy and the only way to alleviate poverty is to somehow redeem, or punish, these people.
- *Poverty as Accident*—People only become poor when tragedy strikes and their personal safety nets fail to stabilize them. This requires only temporary support for the truly needy.
- *Poverty as Structure*—People are poor because of the way our sociopolitical system is built and may require structural change.

Family Poverty

Poverty is generally understood to be a brief experience, especially when income falls below family survival needs (the poverty line). Most families experience poverty for a short period that consists of only one to two years, often related to a detrimental life event such as a job loss or a health problem (Duerr Berrick, 1995; Rank & Hirschl, 2002). A smaller number of households experience chronic poverty, such as a work disability or multiple children in a female-headed family (Rank & Hirschl, 2002).

The two key factors that prevent low-income families from increasing their earnings are the decreased work opportunities available to members of disadvantaged groups and the lack of skills. The lack of education keeps individuals from attaining higher paying jobs and increases the likelihood of experiencing poverty at some point during their lifetime (Carnevale & Rose, 2001; Rank, 2001). In both working and unemployed low-income families, the head of the household is likely to lack a high school diploma (Acs et al., 2001). Gender may also serve as a barrier to higher-paying employment; for example, when examining prime age earners (30-59 years), 32% of women are considered to be low-earners, compared to only 12% of men of the same cohort (Carnevale & Rose, 2001). Low-income families in which the primary earner works full-time throughout the year, earn approximately \$15,600 annually (Acs et al., 2001). In general, this is the case for single-parent families. Thus the earnings of low-income families are more than \$26,000 less than the U.S. median household income of \$41,994 (Johnson, 2002). Also related to earnings is race; where the median income of households comprised of African Americans, for example, was nearly \$16,000 less than the median income for households comprised of Whites in 2000 (Johnson, 2002). Similarly, approximately 14% of Californians are low-income and live below the federal poverty level in 2000 (Johnson, 2002). Of those individuals living below the poverty level, one in ten was a child under the age of five (Johnson, 2002). The racial income gap noted above is also present in California. The median income for households comprised of African Americans in California was close to \$35,000 as compared to the median income of \$53,734 for households comprised of Whites (Johnson, 2002).

One important factor that increases stress on low-income families in California, relative to many other areas of the country, is the high cost of living. The median cost of renting an apartment in the United States was \$602 in 2000, as compared to \$747 in California and \$928 in San Fran-

cisco in that same year (Johnson, 2002). As a result of these high rents, more than 16% of households in California spend over 50% of their income on rent alone (Johnson, 2002). Despite the increased cost of rent for an apartment in California, and particularly in an urban area such as San Francisco, many apartments lack basic plumbing and kitchen facilities. Less than 1% of occupied apartments in the United States lack plumbing, as compared to 3.2% of occupied apartments in San Francisco (Johnson, 2002). Similarly, 1% of apartments in the United States do not have a kitchen, as compared to 5% of apartments in San Francisco. Living in apartments without appropriate plumbing and cooking facilities increases the amount of money a family must spend on food and other necessities, placing an even greater burden on low-income families.

CHILD AND ADULT WELL-BEING

Child and adult well-being are discussed as separate concepts within the ecological framework. The ecological framework provides an important theoretical foundation for assessing the complex relationships between children, families, and adults in the community (Chung & Pardeck, 1997; Garbarino, 1982; Ungar, 2002). It is difficult to influence the well-being of one group without affecting the other individuals in the community. For example, programs that provide health insurance to children only (excluding their parents), might improve child health but fail to address the health status of their parents and or guardians.

Child Well-Being

Child well-being is a broad term without a clear definition (Pollard & Lee, 2003). Pollard and Lee (2003) noted several trends in the well-being literature based on their systematic review of 175 studies from 1991-1999. Though there was little consistency in defining or measuring well-being across studies, five domains of well-being emerged from the research: physical, psychological, cognitive, social, and economic (Pollard & Lee, 2003). Eighty percent of the studies purported to study well-being (a multidimensional construct), but only measured one of the five domains, and just 2.3% of the studies assessed well-being in four of the five domains (Pollard & Lee, 2003). Most indicators of well-being were based on subjective assessments rather than objective measures, and generally focused on strengths and resources rather than

deficits. An exception to the focus on strengths was in the psychological domain where more measures were deficit-based. Pollard and Lee (2003) call for a consistent definition of well-being and development of an instrument that can assess well-being across all five dimensions.

One effort to define and measure well-being in a systematic way is the Index of Child Well-Being (CWI), developed by researchers at Duke University (The Foundation for Child Development, 2004). The CWI is a multidimensional construct that encompasses well-being indicators in seven domains: material well-being, health, safety/behavioral, productive activity, place in community, social relationships, and emotional/spiritual well-being. Each of these seven domains is equally weighted in the composite index. The index is expressed as a percentage increase or decrease across an arbitrarily chosen baseline year of 1975. Highlights of the most recent CWI report (The Foundation for Child Development, 2004), that assessed child well-being from 1975-2002 were as follows:

- The composite index score of well-being for children, across all ethnic and racial groups, is better than it was in 1975, but only modestly (rising four percentage points from the baseline).
- Child well-being declined in the 1980s and early 1990s, but has since increased.
- The increase in child obesity is a major factor contributing to problems in the health domain of child well-being.
- As rates of violent crime have dropped, safety/behavioral indicators of child well-being have increased.

Though the CWI contributes to knowledge about child well-being, questions remain about the methodology used to substantiate the index. First, the CWI equally weights the seven domains when creating the composite score. Some child advocates argue that certain domains deserve increased weighting (Munoz, 2004). Second, emotional and spiritual indicators are combined in the calculation, leaving youth who have few spiritual or religious beliefs with lower scores despite their appearance of satisfactory emotional health. Finally, two indicators comprise the social relationships domain: the number of children living in single-parent households and the number of children who have moved within the last twelve months. Similarly, this domain omits other important indicators of social relationships, such as relations with peers and other adults in the child's life.

Another key measure of child well-being is the annual KidsCount Data Book suggested by the Annie E. Casey Foundation. The Casey Foundation uses the following 10 indicators of child well-being, gathered from a number of sources, including the U.S. Census (The Annie E. Casey Foundation, 2003, p. 59): (1) percent of low-birthweight babies, (2) infant mortality rate, (3) child death rate, (4) rate of teen deaths by accident, homicide, and suicide, (5) teen birth rate, (6) percent of teens who are high school drop-outs, (7) percent of teens not attending school and not working, (8) percent of children living in families where no parent has full-time, year-round employment, (9) percent of children living in poverty, and (10) percent of families with children headed by a single parent. California ranked 21 out of 50 states in child well-being when using these ten indicators (The Annie E. Casey Foundation, 2003). Child well-being is also assessed in a number of other studies (Besharov, 2003; Gutmann, 2002; Hofferth, Phillips, & Cabrera, 2001; Moore & Vandivere, 2000; Vandivere, Moore, & Brown, 2000).

Adult Well-Being

Though a voluminous literature exists on the well-being of children, little research has been completed on the well-being of adults (Brim, Ryff, & Kessler, 2004). A recent study, entitled *Midlife in the United States* (MIDUS), assessed physical, social, and psychological well-being among a national sample of individuals aged 40-60 years using a telephone interview and a written questionnaire. While MIDUS focused on adults during their midlife, the data were collected on a total of 7,189 English-speaking adults between 25 and 74 years. The younger and older research participants were recruited for comparative purposes. Efforts were made to ensure adequate representation of older men, persons from lower-income groups, African Americans, Latinos, and individuals living in urban areas. Key findings from the MIDUS study include (Brim et al., 2004):

- While physical health status tends to decline with age, mental health status seems to improve. Similarly, middle and older adults reported an increasing feeling of mastery in work and family, and reported being better able to manage stress than young adults.
- Overall sense of well-being was strongly correlated with social context (family, work, and community) for middle- and older-age adults than young adults.

- Health status varied across socioeconomic groups and within specific levels of socioeconomic status, suggesting that there are many other variables affecting health status (e.g., a feeling of mastery in work and family contexts among lower socioeconomic groups was related to increased health status).
- The MIDUS study found that 85 to 90% of adults marry at some point in their lives between the ages 40-59 and 90% have at least one child, implying that the family, as an institution, remains strong.
- Overall levels of social responsibility and community participation were high among midlife adults (i.e., younger adults tended to be more focused on family, while older adults made a greater contribution to community efforts).
- Individuals are both significant contributors to their family, community, and workplace and are influenced by what is occurring in these life domains (p. 31).

The MIDUS study provides a much-needed perspective on the well-being of adults, and as such, makes an important contribution to the limited literature in this area. These findings include variables that also relate to family formation as explored in the next section.

Trends in Family Formation

Low-income families are changing and it is due to the decrease in marriage, rise in cohabitation, and increase in out-of-marriage births. The 2000 U.S. Census indicates that marriage rates differ based on socioeconomic status, race, education, and gender (Child Trends, 2002). Individuals from lower socioeconomic groups (e.g., African Americans), and those with less than a high school education are less likely to be married. Being female, in combination with any of the above factors (African American race, lower socioeconomic status, or less than a high school education), further decreases the likelihood of marriage as compared to men from similar racial, income, or education cohorts.

Several factors, such as availability of suitable marriage partners, influence the rates of marriage in different racial or cultural communities (Trent & South, 1992). In an effort to gain a deeper understanding of trends in family formation, the Fragile Families and Child Well-Being Study is following a birth cohort of 4,700 children in 20 cities (McLanahan et al., 2003). Forty-one percent of mothers in the Fragile Families study have household incomes that are at or below the federal

poverty line, with another twenty-eight percent of single mothers having household incomes below 200 percent of the poverty line. The study will follow the families from the birth of their child through age four and includes a comparison group of married parents in each city. Highlights of the study's most recent national report include (McLanahan et al., 2003):

- Most unmarried parents (82%) are in a romantic relationship when their children are born and over half of them are living together.
- Many unmarried parents lack the human capital necessary to support a family (close to 40% of unmarried mothers and fathers do not have a high school diploma).
- Nearly 25% of unmarried mothers did not receive prenatal care in their first trimester of pregnancy. One in ten mothers reported drinking alcohol, and 23% reported smoking cigarettes during their pregnancy.

Another study that contributes to our knowledge of family formation and composition among low-income individuals is the National Survey of America's Families (NSAF). The NSAF analyzes family, child, and adult well-being in 40,000 randomly selected families from thirteen states, including California. Data was collected between 1997-2002, so it provides a unique perspective on the effects of welfare reform on low-income families. Some highlights of a recent NSAF data brief (Acs & Nelson, 2003) on child well-being and family formation include:

- There was a slight decrease (3.7%) in the number of children under five living with single mothers between 1997-2002.
- During the same time period, there was also a slight increase (2.5%) in the number of children living with married parents.

Taken together, these studies provide evidence of both promising and troubling trends. The promising trends include the percentage (82%) of unmarried parents who are in a relationship when their children are born and the increase in the number of children living with married parents (Acs & Nelson, 2003; McLanahan et al., 2003). More troubling are the number of unmarried mothers who did not receive prenatal care (25%) and the percent of unmarried parents without a high school diploma (40%) (McLanahan et al., 2003). Given the increased public policy focus on family formation, the next section highlights the relationship be-

tween the family formation policies mandated by welfare reform and other public policies.

PUBLIC POLICY INFLUENCES ON CHILD AND FAMILY WELL-BEING

The focus of this section is on the role of public policies that regulate distribution of health insurance, food and other goods or services. Low-income families are particularly vulnerable to shifts in social welfare policy because they do not have the personal resources to compensate for changes in income support programs, health coverage, transportation and childcare costs, tax laws, or housing subsidies. Because all of these programs play a significant role in the lives of low-income families, additional support can have an enormous impact. For example, a study based on the 1997-1999 National Survey of America's Families (NSAF) found that families living in subsidized housing had better employment outcomes than families living in unsubsidized housing, even though more barriers to employment existed for families with housing assistance (National Center for Children in Poverty, 2003).

Policy research suggests that low-income families need support in five critical areas: (1) Income support programs such as TANF and SSI; (2) Health insurance; (3) Food stamps and other nutrition support programs; (4) Income tax laws; and (5) Childcare subsidies (Hofferth et al., 2001). The following discussion highlights health insurance, food stamps, and childcare subsidies because a discussion of income supports and tax laws is beyond the scope of this analysis. The expenses associated with each of these policy domains represents a major portion of low-income non-discretionary household spending. The issues are illustrated with examples from California.

Health Insurance

The number of people living in California without health insurance has reached staggering proportions. In a recent survey of the health insurance status of Californians, more than one in five, or a total of 6.3 million individuals, reported having been uninsured at some point in the last twelve months (Brown, Ponce, Rice, & Lavarreda, 2002). The majority of those who lacked insurance were from low-income households; 30% of people living in households below the federal poverty line were uninsured as compared to 5.8% of people living in households

earning at least three times the federal poverty level (Brown et al., 2002).

Without health insurance, the high cost of basic medical care may prevent many low-income families from seeking treatment for highly treatable illnesses. The average out-of-pocket cost for medical expenses for people without health insurance is \$420 per year, and many workers without health insurance accumulate medical care debts ranging from \$1,000 and \$100,000 (The Annie E. Casey Foundation, 2003). Medical care costs are so great that nearly one-third of the families participating in emergency food programs report that they must often choose between paying for medical care and purchasing food (America's Second Harvest, 2002). Unfortunately, the choice for many low-income families is the purchase of food.

Why are so many people uninsured? Four reasons are briefly reviewed here. First, many low-wage jobs do not provide health coverage to their employees. Approximately 75% of jobs paying less than \$25,000 per year do not offer health insurance to employees (The Annie E. Casey Foundation, 2003). Second, families who qualify for Medicaid are at risk of losing their medical benefits if their income increases even though they may not be receiving health insurance through their employers. Third, recent immigrants who lack a green card are not eligible for many state-supported health insurance programs, such as Healthy Families (Brown et al., 2002). In California, 180,000 children living in immigrant families did not qualify for the Healthy Families program, though they would otherwise have been eligible. Finally, many families are not aware of the availability of state-supported health insurance programs. All told, approximately one in four families eligible for the Healthy Families program did not know that the program existed (Brown et al., 2002).

Food Stamps and Other Nutritional Support Programs

A large number of Californians rely on food support programs to meet their nutritional needs. Over 1.5 million people in California participate in the federal food stamp program, close to 1.3 million receive food subsidies from the Women, Infants, and Children (WIC) program, and almost three-quarters of public school children receive free or reduced-price lunches through the federal school lunch program (America's Second Harvest, 2003). Despite the high number of participants in these three programs, there is still significant unmet need for nutritional support; nearly 12% of California households experienced food insecu-

rity between 1999 and 2001 (America's Second Harvest, 2003). Reasons for food insecurity include inadequate benefits levels and the complexity of the application process for the federal food stamp program.

Food stamps are not available to some families whose incomes exceed the maximum level but could be considered low-income, particularly in states that have a high cost of living like California. To qualify for food stamps, a family must earn less than 130% of the federal poverty level and have limited assets (The Finance Project, 2002). In 2003, the highest allowable household income to qualify for the federal food stamp program was less than \$1,994 per month (or just under \$24,000 annually) for a family of four (USDA Food and Nutrition Service, 2003). Even those families that receive food stamps may experience food insecurity due to insufficient benefit levels. The maximum food stamp grant per month for a family of four in 2003 was \$471 (USDA Food and Nutrition Service, 2003). This amount would not cover the cost of groceries for a family of four in California.

In addition to the income restrictions and low benefit level, the paperwork involved with applying for food stamps may prevent some families from participating in the program. In 2000, 47% of the households in California that were eligible for food stamps did not receive them (The Annie E. Casey Foundation, 2003). America's Second Harvest, a food policy research and advocacy institute, found that the average application for food stamps was twelve pages long, as compared to two-page state applications for jobs requiring a high degree of responsibility and accountability, such as applying for a bus driver position (O'Brien, Prendergast, Thompson, Fruchter, & Aldeen, 2002). California's food stamp application is 21 pages long and requires an 11th grade reading level to complete (O'Brien et al., 2002).

Progress has recently been made in expanding food support programs for low-income families. During the week of June 20, 2004, both the House of Representatives and the Senate passed legislation that expands the federal school lunch program for children of low-income families to receive free or reduced cost meals (Abbott, 2004). During the same week of 2004, President Bush announced completion of a plan to replace the paper food stamp vouchers with electronic cards that could be used at the grocery store like ordinary credit or debit cards (Pear, 2004). The electronic cards are expected to reduce the stigma associated with redeeming food stamps and prevent food stamps from being misused (Pear, 2004).

Childcare Subsidies

Childcare is a large expenditure for low-income families and can be a barrier to employment when affordable childcare is not available. The research evidence suggests that the cost of childcare influences the labor force participation of mothers to the extent that the increased cost of childcare is correlated with decreased employment (Shlay, 2004). The choice to remain unemployed makes sense given that childcare costs between \$4,000 to \$6,000 per year (The Annie E. Casey Foundation, 2003). Two parents working full-time in minimum wage jobs make \$21,400 in pre-tax income. Even if these parents allocated 10% of their income towards childcare, they would require an additional \$2,000 to \$4,000 to pay for childcare (The Annie E. Casey Foundation, 2003).

While limited subsidies for childcare are available, they do not reach all of the families who need them. In their review of the research on childcare subsidies, Shlay, Weinruab, Harmon, and Tran (2004) describe two types of barriers to the use of childcare subsidies. The first type includes consumer attitudes and knowledge. Many low-income families are unaware that they are eligible to receive childcare subsidies and some report that they do not need them even though they may be qualified. The second type of barrier to the use of subsidies is bureaucratic; like the federal food stamp program, some families have difficulty completing the required paperwork and providing supporting documentation. To gain a better understanding of the reasons for the non-use of subsidies by eligible families, Shlay et al. (2004) found that 44% of families who were not using subsidies did not know that they met the eligibility requirements. Of the families who did believe they were eligible but still did not use the subsidies, 37% reported that the difficulty of applying for a childcare subsidy was the reason for non-use.

In addition to the lack of knowledge and the bureaucratic hurdles that inhibit the use of subsidies, budget cuts are likely to reduce, rather than expand, the access to affordable childcare for low-income families. Though federal funds for childcare through Temporary Assistance to Needy Families (TANF) and the Child Care Development Fund (CCDF) were increased between 1996 and 2000, these subsidies are at risk of being reduced in the current budget environment in which many states are being forced to cut spending on social service programs (The Annie E. Casey Foundation, 2003). For example, recent legislation passed by the Senate Finance Committee could cause 430,000 children to lose their childcare (Mezey, 2003).

This section briefly reviewed three policy domains that impact the lives of low-income families. A critical issue missing from this discussion has been racial and ethnic disparities in access to jobs, education, housing, and other resources. Given the centrality of this issue, the next section focuses on the experiences of families of color and immigrant families.

RACIAL DISPARITIES AND POVERTY AMONG FAMILIES OF COLOR AND IMMIGRANT FAMILIES

The quality of life for people of color rarely receives adequate attention when complex social policy issues are debated in the literature. Too often, if race or ethnicity is discussed, the discourse progresses along dichotomous lines, such as comparing African Americans to Whites. In California, the comparisons of populations do not adequately represent the racial and ethnic diversity found within communities. The additional problem with comparisons is that the increasing number of biracial individuals is completely overlooked. Because documenting racial disparities on many issues is needed, the tendency to polarize race in social policy unfortunately leads to unexamined impacts of these policies on people of color. In this section, the relationship between poverty, race, and ethnicity are explored. The primary focus is on the research related to the differential impacts of public policy on poor families of color, especially welfare participants.

Poverty and Race

Nancy Boyd-Franklin (2003) describes the interaction between poverty and race for African American low-income families as experiencing a “sense of futility and disempowerment” (p. 265). The same statement is true for other low-income families of color, especially when the condition of poverty spans several generations. Boyd-Franklin also notes that even though low-income families of color have benefited from job and educational opportunities emerging from recent social policies, the communities in which they live still face the burden of poor educational systems, random crime, gangs, high unemployment, ongoing issues with the police and constant individual feelings of being trapped. Thus, the psychological consequences of poverty can oppress family members based on their race, social standing, and need for public assistance.

When examining welfare reform, Finegold and Staveteig (2002) offer the following four reasons to include race and ethnicity issues prominently in the development of a research agenda:

1. To learn about the variation in response to policy changes, as they may differ between members of diverse racial and ethnic groups.
2. To uncover whether self-sufficiency is encouraged and supported among all clients.
3. To focus on the differential impacts of welfare policies among and within various racial and ethnic groups to aid in designing more effective programs.
4. To reveal and eliminate discriminatory practices in welfare policy implementation.

African Americans represent the racial group with the largest number of families and children on the TANF rolls (Administration for Children and Families DHHS, 2003). A total of 39% of adult heads of households and 41% of children on TANF are African American, 24% adults heads and 28% children are Hispanic and 31% of adult heads of households and 26% of children are White (Administration for Children and Families DHHS, 2003). The caseload trends and analyses of those leaving welfare roles confirm the existence of differential patterns as noted in Table 1 (Lower-Basch, 2000). Lower-Basch (2000) reported that African Americans, Hispanics, and Whites were almost equally represented in 1996, but white families left the rolls at much faster rates than African Americans or Hispanic families. In sum, African Americans and Hispanics appear to be more likely to return to the welfare rolls than Whites. Due to the limited data, the research literature does not yet include conclusive evidence on the impact of time limits on these populations.

Little research was found on rates of employment and pay for immigrant families, but evidence suggests that a welfare recipient's race may be associated with earnings and type of employment, but not with the employment rate. Non-White recipients are more likely to be hired in lower-paying jobs (Gooden, 2000) and are likely to be earning less (Allard & Danziger, 2001; Harknett, 2001) than White recipients. Danziger et al. (2000) found that race was not associated with rate of employment. However, Gooden's (2000) study of racial differences and employment outcomes for 223 welfare recipients in Virginia found that African Americans were more likely than Whites to be working in lower-paying occupations such as food services workers or nurse's

TABLE 1. Numbers of Families and Poverty Rates, United States, 1985-1999, by Race

	1985			1999			Change 1985-1999		
	White	Black	Hisp.	White	Black	Hisp.	White	Black	Hisp.
# Families with children under 18	24,916	4,636	2,973	24,784	5,585	5,320	-0.5%	20.5%	78.9%
# Poor families with children under 18	2,776	1,670	955	1,984	1,615	1,330	-28.5%	-3.3%	39.3%
Poverty rate, families with children under 18	11.1%	36.0%	32.1%	8.0%	28.9%	25.0%	-27.9%	-19.7%	-22.1%
# Female-headed families with children under 18	3,737	2,269	771	4,252	2,892	1,353	13.8%	27.5%	75.5%
# Poor female-headed families with children under 18	1,266	1,336	493	1,079	1,333	630	-14.8%	-0.2%	27.8%
Poverty rate, female-headed families with children under 18	33.9%	58.9%	64.0%	25.4%	46.1%	46.6%	-25.1%	-21.7%	-27.2%

Figures in thousands.

"White" means Non-Hispanic White.

Source: U.S. Bureau of the Census, Historical Poverty Tables, Table #4.

aides. This finding deserves further exploration because the current welfare employment literature indicates that type of employment matters for persons of color.

Two studies have found that Whites typically earn more than non-Whites. Allard and Danziger analyzed data from the State of Michigan client database along with two surveys of Detroit area employers. A comparison of Whites and non-Whites living in areas classified as having good access to jobs found that Whites earned close to 15% more than non-Whites. Harknett (2001) examined administrative data and surveys of female welfare recipients collected by MDRC in California and found that Whites had higher per-quarter earnings than non-Whites. For example, White women in the control group (not enrolled in the *Welfare-to-Work* Labor Force Attachment program) earned an average of \$353 more per quarter than Black women in the control group.

Allard and Danziger (2001) analyzed individual-level employment outcomes and welfare exits in Detroit as related to geographic access to jobs for African Americans and Whites. They found that recipients living in suburban areas had greater access to jobs than did inner city residents. White recipients tended to live in suburban areas and had greater

access to jobs than non-Whites living in the inner city. They also found that recipients living in areas with greater access to jobs were more likely to exit welfare.

As the factors of neighborhood residence and race are frequently correlated, it is important to look at the interrelationship of neighborhood, access to employment opportunities, and race. Holzer and Stoll (2002) conducted a telephone survey of employers in four major metropolitan areas and found that the hiring rate for African Americans and Hispanic welfare recipients was lower than their representation in the population of low-income, female-headed households. For example, in Los Angeles, about 50% of the low-income, female-headed families are Hispanic, but the hiring rate found for this group in the study was under 40%. The authors suggest that minority welfare recipients may face more difficulties in gaining employment than White recipients. Holzer and Stoll (2002) also found that African Americans and Hispanic welfare recipients were less likely to be hired in suburban companies and more likely to be hired at companies serving a greater proportion of African American and Hispanic customers, although it is unclear if this is due to spatial mismatch, discrimination, or other factors.

There is conflicting evidence about the impact of job search and job support programs on members of diverse racial and ethnic groups. Harknett (2001) found similar employment outcomes for Black, White, and Hispanic welfare recipients enrolled in a jobs-first program. The employment outcomes for members of all racial and ethnic groups studied in the "work-first" program were better than employment outcomes for recipients enrolled in a control group that neither required job search nor offered job search support services.

However, Gooden (2000) found that enrollment in a job readiness program was associated with higher earnings for Whites, but not Blacks. It is difficult to determine what caused this conflicting evidence; it is possible that some of the difference can be attributed to regional differences in the implementation of job support programs, since the Harknett study was conducted in California and the Gooden study took place in Virginia.

Gooden (1998) studied differential treatment of Black and White clients by caseworkers in Virginia and found that many White clients reported receiving support in pursuing educational goals and in receiving discretionary assistance with transportation, but Black clients reported that they did not receive such assistance. While Gooden's sample was small (39 participants), her findings suggest that further study is needed.

And finally, every year more and more immigrants enter the United States and often need public assistance to survive. They are nearly twice as likely to participate in many of the means-tested programs where the highest welfare use rates occur in New York (30%), California (28%), and Texas (25%) (Capps, Ku, & Fix, 2002). Though many immigrants rely on public assistance to survive, many are able to secure only low-wage jobs. Thus, the incomes for immigrants tend to be lower than the earnings of the native-born poor, resulting in longer stays on the public assistance rolls.

There has been little research on racial or ethnic variation in response to welfare policies and programs. The existing research indicates that there may be cultural differences between racial and ethnic groups that could influence the responses of recipients to TANF policies. A study using NSAF data found some differences in attitudes that may influence how members of various racial or ethnic groups respond to TANF policies (Wertheimer, Long, & Vandivere, 2001). For example, 82% of African American mothers felt that a single mother could raise a child as well as a married couple in contrast to the views of 67% of Hispanic mothers and 63% of White mothers. Another example is that 60% of Hispanic mothers believe that a mother with small children should not work outside the home in contrast to the views of 50% of White mothers and 35% of African American mothers.

While many African Americans, Latinos, and immigrants have transitioned from the welfare rolls, evidence of disparities and hardships rooted in their differential access to resources continue to exist (Walters & DeWeever, 1999). Families of color and immigrant families display considerable patience and survival skills that are often missed in large quantitative studies. These families survive despite such hardships as discrimination, low wages, lack of benefits, limited access to information about job opportunities, poor English proficiency, lack of access to higher paying jobs, poor living conditions, and difficulty meeting basic needs for food, shelter, health care, and clothing. Significant changes in social policy will be needed in order to foster changes in the experiences of these families.

FAMILY STRENGTHS, CHALLENGES, AND COPING STRATEGIES¹

In addition to the racial, ethnic, and cultural discrimination experienced by many low-income families discussed in the preceding section, families living in poverty are able to confront numerous challenges in

their daily living. Given the emphasis on well-being earlier in this analysis, it is important to focus on how family strengths contribute to the life situations that low-income families endure and how they are similar to high-income families with respect to family resiliency (Orthner, Jones-Sanpei, & Williamson, 2003). This section includes examples of *how* low-income families use these strengths to meet daily needs despite the challenges they face.

Strengths

Working with vulnerable populations can be quite challenging and often benefits from incorporating the client strengths perspective, especially when it can benefit *all* persons in the household. A core concept in the strengths-based or empowerment service delivery literature is family resilience.

A measure of family strengths developed by Orthner, Jones-Sanpei, and Williamson (2004) assesses family strength in six dimensions: economic stability, communication skills, problem-solving abilities, family cohesion, social support, and presence of risk factors. In telephone interviews with over 2,000 low-income families, Orthner et al. (2004) found that low-income families scored high on indices of problem-solving and family cohesion despite the economic insecurity that many faced. However, the analyses revealed a wide variation in communication skills and social support, with many families reporting fewer competencies in these areas. Orthner et al. (2004) hypothesized that the low level of social support reported by many families in the study was attributable, in part, to the downward trend in civic engagement throughout the United States. Putnam (2000) provides a thorough discussion of this phenomena in *Bowling Alone: The Collapse and Revival of American Community*. As such, the decline in civic engagement for low-income families may indicate that there is a need for activities that assist families in making connections with friends and neighbors.

In an earlier study, Orthner et al. (2003) compared family strengths in low and higher income families. The results showed that the primary difference between low-income and more affluent families was, not surprisingly, economic stability. Other assessed areas of family strength revealed few significant differences between low-income and more affluent families. Orthner et al. (2003) noted that the most troubling finding was not any difference in family strengths between groups but in the low level of family strengths among all families. Approximately 30% of the families responded that they did not feel confident in their prob-

lem-solving abilities, communication skills, or family cohesion. These findings suggest that marriage and family enhancement programs that teach problem-solving and communication skills may be useful for strengthening both low-income and more affluent families.

Challenges

Low-income families face numerous challenges in daily living and many of them are related to structural barriers found in society. The barriers include the persistence of poverty or near-poverty, limited access to social services, unmet needs for food, clothing, shelter, health care, and other basic goods as highlighted in Figure 2.

Shipler (2004) interviewed working poor families and recounts Christie's story as typical of many low-income workers.

Christie is a childcare worker at a YMCA in Ohio who struggles to provide food, shelter, and clothing for herself and her two children on a \$660 monthly income. She also receives \$136 in food stamps, \$37 in child support, and a housing subsidy each month. Despite the fact that she works and participates in the government programs for which she is eligible, it is almost impossible for her to pay all of her bills. The food stamp allowance is frequently exhausted by the second of the month. The rest of her money is allocated for other expenses, including her car payments, rent, prescription medicine, and clothing for the children. Though Christie wants to increase her earnings to alleviate her family's hardships, she feels penalized when her income increases by even a small amount. For example, when she took a childcare class that gave her a 10-cent-per-hour raise, her monthly food stamp allowance was decreased by \$10, leaving her with only \$6 per month more than before she completed the course.

Christie's life circumstance illustrates how low-income families try to bridge the gap between their needs and available resources. In acquiring more resources, many families must employ creative coping strategies.

Coping Strategies

The coping mechanisms and survival strategies used by poor families involve the survival tactics of quick thinking and creative problem-solving (Duerr Berrick, 1995). Survival strategies must be adapted fre-

FIGURE 2. Common Challenges Faced by Low-Income Families

Challenge # 1: Persistence of poverty or near-poverty

- One-third of all workers in the United States earn below poverty wages and of these workers, one-third are persistent low-wage earners who are responsible for the bulk of their family's income (Carnevale & Rose, 2001).
- The primary earner in a low-income family works full-time, year round, and the average income of a single-parent working family is \$15,600 (Acs et al., 2001).
- Earnings of low-income families fall between \$11,000 and \$36,000 less than the median family budget requirements for a household of two adults and two children, as estimated by the Economic Policy Institute (Boushey, Brocht, Gundersen, & Bernstein, 2001).

Challenge # 2: Lack of education (Carnevale & Rose, 2001; Rank, 2001).

- Of both working and non-working poor families, the head of the household is likely to lack a high school diploma (Acs et al., 2001).

Challenge # 3: Chronic health problems

- Problems include asthma, diabetes, hypertension, cancer, and malnutrition because low-income families experience these illnesses at higher rates than non-poor families (Rank, 2001).
- Food insufficiency is associated with serious adverse physical and mental health consequences, especially the health of low-income children (Siefert, Heflin, Corcoran, & Williams, 2001).
- Babies born into poverty have a greater likelihood of having health problems and are more likely to suffer from malnutrition (Duerr Berrick, 1995).

Challenge # 4: Domestic violence

- Low-income status has been associated with higher levels of spousal abuse (Rank, 2001).
- Domestic violence rates among Michigan women receiving welfare benefits reported over 50% had been the victims of domestic violence at some point in their life, and 15% had experienced at least one incident during the past year with an intimate partner (Tolman & Rosen, 2001).
- The domestic abuse experienced by low-income women can be severe, including death threats, police intervention, and restraining orders (Browne & Bassuk, 1997; Duerr Berrick, 1995).
- Women who were both working and receiving welfare reported more incidents of family violence than those who were not working and not receiving welfare (Rodriguez, Lasch, Chandra, & Lee, 2001).
- Close to 48% of the women in Tolman and Rosen's sample who reported current experiences of domestic violence also reported that their abusers prevented them from going to work or performing their jobs.
- Domestic violence presented a barrier to employment because it caused mental and physical health problems (being stalked or sabotaged) which reduced work attendance (Brandwein & Filliano, 2000).

FIGURE 2 (continued)

Challenge # 5: Barriers to use of social services

- Approximately half of families that are eligible for TANF do not participate (Zedlewski, 2002).
- For those who do apply, forty percent of the families in the study cited program factors such as the difficulty of applying, sanctions, time limits, or misinformation about federal cash grants as the primary reason why they were not participating in the TANF program (Zedlewski et al., 2003).
- For close to 50% of these families, personal reasons prevented them from applying for cash grants (family pride or did not want to require the child's father to pay child support) (Zedlewski et al., 2003).
- Low-income families may also encounter problems in using nonprofit social services such as: (1) lack of information about the services; (2) inconvenient or unsafe locations; (3) stigma associated with service use; (4) difficulties in applying for services due to paperwork or waiting lists; (5) perception by respondents that they did not need help; and (6) problems with scheduling appointments at the nonprofits given work and childcare commitments (Kissane, 2003).

Challenge # 6: Unmet needs

- Critical hardships include inability to meet basic needs for food, shelter, and necessary health care (Boushey et al., 2001).
- Serious hardships include inability to access affordable housing or childcare (Boushey et al., 2001).
- 30% of families whose incomes were twice the federal poverty line experienced at least one critical hardship in 1996, and that more than 72% experienced a serious hardship (Boushey et al., 2001).
- Over half of the parent applicants to an Early Head Start Program did not have the necessary funds to cover the basic needs of food, clothing, and shelter as well as a lack of health care and childcare (Wall et al., 2000).
- Lack of time, for such things as being alone, being with a spouse/partner, or for adequate sleep, was cited as a pressing need (Wall et al., 2000).

quently as the needs and resources of families shift, requiring flexibility and responsiveness to changes in the circumstances of low-income families (Edin & Lein, 1997a).

Though low-income families use a wide variety of coping strategies unique to their situations, three main strategies were identified for this analysis: social networks, supplementary employment, and use of public and private social services (Figure 3). In Edin and Lein's landmark study of 379 low-income single mothers, these coping strategies were the most frequently used and are listed in order of preference, with support from public or private agencies being a last-resort strategy when social networks or supplementary employment are insufficient (Edin &

FIGURE 3. Major Coping Strategies of Low-Income Families

Strategy # 1: Use of social networks

- In a sample of 95 families not receiving TANF or earnings from work, nearly 50% reported that they received some type of child support payment, and 64% commented that family helped them either regularly or occasionally when they required assistance (Zedlewski et al., 2003).
- Women generally feel more comfortable accepting assistance from a partner or their children's father than from other family members (Edin & Lein, 1997a).
- The types of assistance social networks provided to low-income families varies widely, but common types of assistance include occasional childcare, help purchasing food and other necessities, and permission to borrow a car (Zedlewski et al., 2003).
- Case example: "I have a friend who is a better seamstress than I," said Lynn, "and if she will sew sometimes for me, I will clean her house." Her husband used his amateur carpentry skills to make cupboards, bookcases, and the like out of wood scraps he picked up from behind a cabinetmaker's shop. He bartered a kitchen cupboard for a blueberry pie from "a lady that makes the world's best blueberry pies," Lynn said. "We barter for repair of the car sometimes." And her nephew built them a computer in exchange for bookcases in his office (Shipler, 2004, p. 31).
- The level of support that low-income parents receive through their social network is even higher for working families, such that the average cash assistance low-income working single mothers receive through their social networks is \$253 a month as compared to \$157 for welfare-reliant mothers (Edin & Lein, 1997a).
- Low-wage earners tend to have a stronger personal safety net and more non-cash resources than welfare-reliant mothers (Edin & Lein, 1997b).
- Adolescent children constitute part of a safety network, working odd jobs to bring in extra money for the household (Duerr Berrick, 1995).

Strategy # 2: Supplementary employment or "side work"

- The character of a city's underground economy determines the extent and type of illegal or underground work in which welfare-recipient and low-wage earning mothers participate (Edin & Lein, 1997b).
- Working mothers are faced with greater budget deficits than welfare-reliant mothers (Edin & Lein, 1997b).
- Not only is working expensive, but the income that is provided through low-wage jobs is less stable than relying on income through welfare (Edin & Lein, 1997b).
- For those poor mothers who are relying on side work to resolve their deficits, working in the formal economy would mean a net loss in their income (Edin & Lein, 1997b).
- Side work also provides poor mothers some flexibility, which may include the ability to be their own boss or to work out of their home, permitting them to supervise their children at the same time as they generate extra income (Duerr Berrick, 1995).
- The childcare business and house-cleaning industry offer many "side work" opportunities for poor mothers, but the informal nature of this type of work allows for the possibility of abuses and frequently denies work-related benefits (Duerr Berrick, 1995).
- Between 2 and 19% of study participants sold sex, drugs, or stolen goods to generate extra money, exposing them to health and criminal justice risks (Edin & Lein, 1997b).

FIGURE 3 (continued)

Strategy # 3: Use of public and private social services

- Families that did not participate in cash grant programs were frequently receiving in-kind government assistance, such as 53% received food stamps, 37% participated in a government housing program, 80% had enrolled their children in Medicaid, and 45% had enrolled themselves in Medicaid (Zedlewski et al., 2003).
- 50% of those receiving government in-kind assistance reported receiving goods or services from private nonprofits (e.g., food, clothing, and assistance with rent or medical payments from charities) (Zedlewski et al., 2003).

Lein, 1997a). With regards to the coping strategies reported by the mothers in Edin and Lein's study, 77-82% made use of resources available through social networks, while 39-46% employed work-related strategies and 22-31% pursued the support of private agencies.

CONCLUSION

Throughout this analysis of the research on low-income families, one fact is clear: low-income families in the post-welfare reform era continue to struggle whether or not they have ever received government assistance. The policy mandates of the 1990s related to "making work sustain family life" appear to only reinforce the continuation of the mismatch between the limited skills of the worker and accessibility to jobs that promote family self-sufficiency (Handler & Hasenfeld, 1997, p. 43). In light of the policy focus on work, much of the evidence suggests that low-income families need institutional support in the form of education, health care, relevant job training, reliable and safe childcare, and higher minimum wages. Although these supports are neither new nor untried, they have failed to provide low-income families with adequate social and economic support. The general tendency to constrain public welfare programs has forced poor families into a continuous survival mode involving temporary jobs and time-limited public benefits.

This analysis features the recent trends in adult and child well-being, family formation, the impact of public policy on families of color and immigrant families, and family resilience related to coping strategies used to survive daily challenges of insufficient resources. Emerging from this analysis are four key findings. Each finding is summarized below and highlighted in Figure 4:

1. Low-income families, whether they rely on cash assistance, work, or a combination of both, experience severe hardships.
2. Low-income families are resilient and resourceful.
3. Low-income families face significant barriers to using public and private services needed to increase earnings from work.
4. Low-income families of color and immigrants continue to be affected by discriminatory practices in the employment and service sectors.

Practice and Research Implications

Despite the amount of research on the status of low-income families, questions remain about how to address the many obstacles to moving low-income families out of poverty and making better use of their strengths. Specifically, practitioners and researchers need to address the following questions:

1. In a tight budget environment, how can social service agencies maximize their effectiveness in serving low-income families, whether they have participated in the TANF program or not?
2. How can social services effectively incorporate the resilience and resourcefulness of low-income families into service strategies designed to reduce poverty among families and in the communities?
3. How can administrative barriers to accessing social services be decreased while ensuring that state and county agencies remain in compliance with governmental regulations?

A particularly troubling finding emerging from this analysis is the perceived inaccessibility of private and public social services, especially by families of color and immigrant families. It appears that agencies need to find ways to collect more client-relevant and community-relevant information in addition to compliance-oriented administrative data. Such data collection should not be burdensome to low-income families especially when language barriers are taken into account. Social service agencies need to focus more attention on take-up rates of various social service programs, especially as they relate to the length and complexity of application procedures.

In summary, the research on the status of low-income families reveals that there is an enormous burden placed on families who struggle to survive despite the deterioration of the governmental safety net. Fu-

FIGURE 4. Highlights of Key Findings

Finding # 1: Low-income families experience severe hardships whether they rely on cash assistance, work, or a combination of both.

- Of low-income families earning twice the poverty line (or up to \$37,320 using 2003 figures for a family of four), more than 72% experienced a serious hardship (difficulty obtaining affordable housing and lack of childcare) within the past twelve months (Boushey et al., 2001).
- Many families must choose between health care and food, or between other necessary expenditures (America's Second Harvest, 2002).
- The maximum food stamp grant for a family of four in 2003 was \$471 (USDA Food and Nutrition Service, 2003).

Finding # 2: Low-income families are resilient and resourceful.

- Many low-income families exhibit strengths equal to non-poor families (Orthner et al., 2003) and demonstrate a remarkable capacity to employ flexible and creative coping strategies (Edin & Lein, 1997a; Zedlewski et al., 2003).
- 75% report receiving cash assistance from a friend or family member, with the amount of assistance averaging more than \$150 a month (Edin & Lein, 1997a).
- In addition to use of social networks, low-income families also rely on "side work" and help from private charities when necessary.

Finding # 3: Low-income families face significant barriers to using public and private services and to increasing earnings from work.

- Many low-income families eligible for government cash or in-kind assistance either do not know they are eligible, or find that the application process is an obstacle to receiving assistance (Zedlewski et al., 2003).
- California's food stamp application is 21 pages long and requires an 11th-grade reading level to complete (O'Brien et al., 2002).

Finding # 4: Low-income families of color and immigrants continue to be affected by discriminatory practices in the employment and service sectors.

- Low-income families of color and immigrant families still face the burden of poor educational systems, random crime, gangs, high unemployment, ongoing issues with the police and constant fear of remaining in poverty for generations.
- Currently under debate: the hiring practices of non-White recipients in lower paying jobs (Gooden, 2000; Harknett, 2001) versus race not being associated with employment rates (Danziger et al., 2000). Evidence continues to identify the detrimental effects of racial discrimination within the TANF program (Gilens, 1999; Handler & Hasenfeld, 1997; Quadragno, 1994).

ture research and practice needs to focus on meeting the critical unmet needs of low-income families. This requires a closer look at the role of place-based poverty, primarily neighborhoods, and the promising programs and practices located throughout the country.

NOTE

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