

MARYLAND'S PATERNITY
ACKNOWLEDGMENT PROGRAM:
PARTICIPANT ENTRIES INTO THE
PUBLIC CHILD SUPPORT AND
WELFARE SYSTEMS

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OCTOBER 2002



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Executive Summary

Although familiarly known as “welfare reform,” the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 also made major changes to public child support programs, including the mandate that states establish paternity for 90% of non-marital children. Setting this performance expectation high is appropriate because, for non-marital children, financial support can not be pursued unless and until paternity is established. Most observers agree that the 90% goal presents a challenge to states, but one that must be vigorously pursued for several reasons. First, a state’s degree of success in paternity establishment greatly affects its ability to meet other federal child support program performance standards. Second, achieving a consistently high rate of paternity establishments is important to states’ welfare reform efforts. Child support can be a valuable income adjunct for women leaving welfare for work and may lower a family’s risk of returning to welfare after an exit. Last, but not least, non-marital children experience high levels of poverty and are more likely to receive welfare than their peers born to married mothers. In the mid-1990s the poverty rate for single parent families headed by a mother whose children were born outside marriage was 57 percent.

Each state has a potentially very time- and cost-efficient tool, its in-hospital voluntary paternity acknowledgment program, with which to pursue paternity establishment for non-marital children. Maryland’s program has operated since October 1994 and has secured voluntary acknowledgments for more than 106,000 youngsters. In the last three years, acknowledgments were obtained for two of every

three children born outside of marriage. Maryland's acknowledgment rate is on par with other states' rates, but has leveled off in recent years. For this reason, the Child Support Enforcement Administration (CSEA), Department of Human Resources (DHR) and its partners have embarked on a thorough review of the in-hospital program with the intent to improve program operations and increase the paternity acknowledgment rate.

The research described in this report was conducted to provide empirical data to assist in program review and enhancement. The study also has potential to facilitate cross-program planning between child support and cash assistance and other programs serving low-income children and families. The study uses data on 16,473 non-marital children born in Maryland in calendar year 2000 and for whom an in-hospital paternity acknowledgment was filed. Using these data as the starting point, data from other computerized information management systems and published agency reports are examined to address three critical, unanswered questions and to identify policy, program and procedural modifications for consideration. The three study questions are:

1. Who is and is not participating in the paternity acknowledgment program? That is, how do demographic characteristics of participating parents compare to Vital Records data on the entire population of parents experiencing a non-marital birth in 2000?
2. How many children for whom a paternity acknowledgment is filed become known to the public child support program within one year of birth?
3. How many children for whom a paternity acknowledgment is filed become known to Temporary Cash Assistance (TCA, Maryland's TANF program), Food Stamps, Medical Assistance and the Children's Health Insurance Program within one year of birth?

To carry out the analysis, we employed the methodology described on pgs. 11-14 of the report and utilized data from DHR's Client Information System (CIS), several CIS component systems (CARES-Client Automated Resources Eligibility System and CSES-Child Support Enforcement System), and published Vital Records data. Key study findings and recommendations are briefly described below.

Two-thirds of non-marital births result in a paternity acknowledgment, but one-third do not and participation does vary by parental age. Older mothers and fathers are more likely to participate and younger parents, especially those under 20 years of age, are less likely to do so.

Targeted efforts addressed to the young parent population should be considered as should other, broad-based efforts to increase the acknowledgment rate which has been static for several years.

A sizable majority, about two-thirds, of all parents experiencing a non-marital birth in Maryland in 2000 filed a voluntary paternity acknowledgment, but one in three couples did not. Younger mothers and fathers are less likely to participate than are older mothers and fathers. About one in four (25.7%) non-marital births in 2000 were to mothers under age 20, but only one in five (19.8%) acknowledgment-signing mothers were under 20 years of age. Mothers aged 30 or older accounted for one in five (19.4%) non-marital births in 2000, but nearly one in three (32.4%) acknowledgments. This finding should be of concern because teen mothers and their children are a particularly disadvantaged population and, over time, can be very costly to public programs. About 80% of teen mothers end up on welfare and, once on, are likely to remain there for an extended period of time (Sawhill, 2001). Targeted outreach efforts to this population seem warranted, including review of all program materials to insure their relevance to the younger population of parents. We also recommend including a

specific focus on voluntary paternity acknowledgment in CSEA's new, multi-year, statewide media campaign. This recommendation arises from the fact that Maryland's overall paternity acknowledgment rate has been essentially flat, hovering around the 66% mark, for the past three years.

At least three of every four non-marital children whose paternity has been voluntarily acknowledged become known to DHR within one year of birth.

This finding implies that the paternity acknowledgment program, while housed in CSEA and thought of as a child support program, has relevance and utility for all DHR administrations and programs. Further research on the nature, extent and duration of these youngsters' early-in-life contact with DHR programs is needed; results may have important practical implications for one or more administrations/programs.

At least three of every four and perhaps as many as nine of every 10 non-marital children born in Maryland in 2000 and for whom a voluntary paternity form was filed, became known to DHR-CIS within one year of birth.¹ This does not necessarily mean the child received benefits from a DHR program, but that, for whatever reason, the youngster did come to the attention of one or more DHR programs before his or her first birthday. Obviously, the population of infants/very young children whose parents sign paternity acknowledgments are also a population at heightened risk of involvement with DHR-DSS within the first year of life. Managerially, it might be beneficial to reflect upon the implications of study findings for early intervention and/or service delivery, cross-program planning and resource maximization. In addition, further research is needed to

¹Through a two-step matching process, 73.1% of acknowledged youngsters were determined to match CIS. Case-by-case examination of a random sample of unmatched cases suggests that, overall, an additional 17.5% of acknowledged children were known to the system. Discussion of this point can be found on pps.13-14.

more thoroughly explore this finding and its implications for all administrations within DHR and for local Departments of Social Services.

At least one of every three voluntarily-acknowledged infants become known to the automated child support system (CSES) before their first birthday.

CSES reflects awareness of the acknowledgment in a majority of cases, but close attention to data matching processes and protocols is needed so expeditious case processing can be done in all cases and the value of the acknowledgments can be maximized.

That one in three acknowledged children become known to CSES within one year suggests that the voluntary paternity program does reach a significant minority of the child support program's population-at-risk. That CSES reflects the existence of the acknowledgment in 60% of cases is also encouraging given much lower rates reported by some other states. However, all children in this study had an acknowledgment on file; the programmatic goal must be that 100% of acknowledged children appear in CSES as having been acknowledged. Such was not the case for youngsters born in calendar year 2000. Thus, the report (p. 29) offers several specific recommendations concerning improvements in data accuracy, data matching/management and ways to increase front-line staff's access to paternity acknowledgment information.

Over half of all acknowledged children born in 2000 participate in the Maryland Children's Health Insurance Program (M-CHIP) in their first year of life; about one in four are included in a Medical Assistance application before their first birthday.

Consistent with the fact that M-CHIP has the highest income eligibility threshold of the five programs examined, applications and participation were much higher for this program than for the other four. More than half (54.9%) of non-marital, acknowledged

infants born in 2000 were enrolled in M-CHIP before their first birthday; virtually all children who applied for M-CHIP did receive benefits under that program (96.8%). Typically, M-CHIP program entry occurred within one month of birth. Because study children represent two-thirds of all non-marital children born in Maryland in 2000, these results are heartening. They suggest that, at least with regard to newborns and infants, M-CHIP is reaching a significant portion of its target population. On the other hand, the findings do underscore the fact that, relatively speaking, non-marital children as a group tend to be economically disadvantaged.

Medical Assistance (MA) applications were filed within the first year for about one in four study youngsters (23.9%) and not quite three-fifths of those who applied were enrolled (57.1%). MA enrollment, on average, occurred within five to six months after the child's birth.

One-quarter to one-third of study youngsters became known to the Temporary Cash Assistance (22.1%) and Food Stamp (33.2%) programs within one year of birth.

Consistent with other studies on the economic situations of non-marital children, we found that, during their first year of life, youngsters in our study had a fairly high rate of entry into the welfare system and, further, that those entries tended to occur shortly after birth. On average, both Temporary Cash Assistance (TCA) and Food Stamp applications were filed within the first three months. For both programs, too, the majority of youngsters not only applied, but received benefits before reaching their first birthday. The percentages applying who received aid are 68.3% for TCA and 77.6% for Food Stamps. Both programs have fairly stringent income eligibility limits. Thus, our

results confirm that children born outside of marriage - even those whose paternity has been voluntarily acknowledged, are at high risk to be poor and to apply for and receive means-tested benefits within the first year of life.

Taken as a whole, study results indicate that Maryland's voluntary paternity acknowledgment program is reaching a significant minority of the child population likely to come into contact with the public welfare and child support systems very early in life. Thus, it is imperative that relevant data systems accurately reflect the status of these children's paternity so that prompt action can be taken to locate non-custodial parents and to establish and enforce reasonable support orders.

The findings also make it clear that the voluntary paternity acknowledgment program does not just affect and have relevance to the state's child support program. Rather, there is also significant overlap with TCA, Food Stamps, Medical Assistance, and Children's Health Insurance and, perhaps, with child welfare and other social service programs not examined in this study. Cross-program discussions of the paternity acknowledgment program and the results of this study could be beneficial in understanding potential interactions and identifying steps that could be taken to better promote and utilize the paternity program within and across other state and local DHR offices and administrations.

In terms of child support specifically, further research which compares welfare and child support receipt patterns of children whose paternity has been acknowledged to those for whom it has not could also shed further light on the efficacy of the program vis-a-vis other federal performance standards. This study also suggests that additional

outreach efforts should be considered. Given their relatively low rates of participation in the paternity acknowledgment program, a campaign or campaign materials specifically targeted at young mothers and fathers is recommended. Because the state's acknowledgment rate has been fairly static for the past few years, hovering around 66%, it would be advisable to also include a more generalized focus on voluntary establishment in the new, statewide, multi-year media campaign. These recommendations and others which will arise from the program review now underway could further enhance the power and utility of the voluntary paternity acknowledgment program for the State of Maryland and its children.

Introduction

Although familiarly known as ‘welfare reform,’ the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) also mandated many significant changes to public child support programs. Among these is the requirement that states meet a 90% paternity establishment threshold or risk financial penalty.² Setting this performance goal high for child support programs is appropriate because, for non-marital children, no attempt can be made to obtain financial support unless and until paternity has been legally established. Most observers agree that the 90% threshold presents a sizable challenge to states, albeit one which must be met because the degree of a state’s success in establishing paternity greatly affects its ability to meet other program performance standards as well.

Although the topic has not received nearly as much attention, achieving a consistently high rate of established paternities is also important to the success of states’ welfare reform efforts. Child support can be a valuable income adjunct for low-income families who have left or are attempting to leave cash assistance and research has shown that the effects of child support on reducing welfare caseloads are substantial and significant (e.g., Huang, Garfinkel and Waldfogel, 2000). Child support income may also lower a family’s likelihood of returning to welfare after an exit and, at least in some cases, could “help keep the TANF ‘leaver’ from becoming a TANF

²States may elect a IV-D standard, whereby paternity must be established for 90% of all children in the child support caseload, or the universal standard whereby paternity must be established for 90% of all non-marital children born in the previous year.

‘returner’” (Heller, 2002). The new time-limited cash assistance system, of course, only serves to increase the importance of child support as a potential source of income to economically-disadvantaged families with children.³

Because of an earlier federal mandate, each state has a potentially very time- and cost-efficient tool, its in-hospital voluntary paternity acknowledgment program, with which to pursue the goal of paternity establishment for non-marital children. Research suggests that a well-run acknowledgment program can be expected to yield paternity establishments in at least two-thirds of all non-marital births; with use of sophisticated computer technology, some states have reported rates in excess of 80% (Policy Studies, Inc., 2002; Williams, 2001).

Through the Child Support Enforcement Administration (CSEA), Department of Human Resources (DHR), Maryland has had an in-hospital paternity acknowledgment program since October 1994.⁴ Since then, voluntary acknowledgments have been filed for more than 106,000 non-marital children. In 1999, 2000, and 2001, a voluntary acknowledgment of paternity was obtained for just about two of every three children born outside of marriage in Maryland. According to the information available, these rates compare favorably with those of other states.⁵ Despite performance statistics on

³The benefits to a child of having a legal father, of course, are many and extend far beyond the receipt of financial support.

⁴The paternity acknowledgment program is actually a partnership involving CSEA-DHR, hospitals and birthing facilities, the Division of Vital Records and the School of Social Work, University of Maryland-Baltimore.

⁵States are not required to report in-hospital program results to the federal government although Maryland and the majority of states do. However, to our knowledge, there are no ‘official’ data on in-hospital acknowledgment rates against which our state’s program results can be compared.

par with other states, it is obvious that Maryland's voluntary paternity acknowledgment rate has leveled off in the past few years. This suggests that new efforts may be needed to make this program attractive to the one in three unmarried couples whose children are not being voluntarily acknowledged at or near the time of birth.

Efforts are already underway by CSEA and its partners to improve program operations and increase the acknowledgment rate. Essential to those efforts' success are empirical data describing which sub-groups among the unmarried are participating in the program and which are not utilizing it to the same degree. To facilitate cross-program planning between Maryland's child support and cash assistance programs and make the most effective use of scarce resources in tight fiscal times, it is also very important to ascertain the extent to which voluntarily-acknowledged children become known to one or more of these public agency programs.

The purpose of this study is to provide administrators with this type of information about the acknowledgment program's clientele. Specifically, the study uses data on 16,473 non-marital children who were born in Maryland in calendar year 2000 and for whom an in-hospital voluntary paternity acknowledgment form was filed. With information on these youngsters as our starting point, data from other computerized management information systems and published agency reports are examined to address three critical and heretofore unanswered questions. These are:

1. Who is and is not participating in the paternity acknowledgment program? That is, how do the demographic characteristics of acknowledgment signers compare to Vital Records data on the characteristics of the entire population experiencing a non-marital birth in 2000?

2. How many children for whom a paternity acknowledgment is completed become known to the public child support system within one year of birth?
3. How many children for whom a paternity acknowledgment is completed become known to various other public assistance programs (Temporary Cash Assistance, Food Stamps, Medical Assistance and the Children's Health Insurance Program) within one year of birth?

In addition, the report identifies certain implications of study findings at the policy, program, and procedural level. It also offers several suggestions which administrators might wish to consider in their ongoing efforts to improve the operation and results of Maryland's in-hospital paternity acknowledgment program.

Background

One notable demographic trend in the United States has been a steady increase in the number of single parent families with children. Virtually all of the growth of single-parent families in recent decades has been due to an increase in non-marital births (Sawhill, 2001). Between 1970 and 1991, births to unmarried women increased nearly threefold, from 10.7% to 29.5%. Today about one of three births in the United States is to an unmarried woman (Martin, Hamilton, Ventura, Menacker and Park, 2000). In the mid-1990s, at least some demographers opined that the percentage of children born outside marriage could exceed 50 percent in the next few decades (Roberts, 1996).

This trend, the current non-marital birth rate and the consequences of non-marital childbearing, appropriately, are matters of public policy concern because non-marital children are an especially vulnerable population. Children born to unmarried mothers experience higher levels of poverty and are more likely to receive welfare assistance than their peers born to married mothers (Moore, Jekielek and Emig, 2002). Most generally, the poorest demographic group in the United States is children of single-parent families and, within this group, children living with never-married mothers fare the worst (Pearson and Thoennes, 1996). In the mid-1990s, to illustrate, the poverty rate for single parent families headed by a mother whose children were born outside marriage was 57 percent (Roberts, 1996). While certainly not true in all cases, the weight of empirical evidence is clear that living with a single parent is associated with often severe economic, educational and emotional disadvantages (Seltzer, 1997).

There is general consensus in this country that children are entitled to financial and other support from both parents. For the one in three American children born outside of marriage, paternity establishment is a needed first step in obtaining child support, but may benefit children in other important ways as well. Children whose paternity is established potentially have access to more emotional/psychological, social entitlement and financial resources than their peers without legal fathers (Pearson and Thoennes, 1995). That is, paternity establishment paves the way for a child to receive financial support and health insurance coverage from his/her father and provides inheritance and potential social insurance benefits, in the event of father's death. The child may also know his/her paternal family's medical history and heritage and may have more contact with his/her father and father's family. Research also suggests that when fathers provide for their children economically and are regularly and positively connected to them, whether or not they live in the home, children do better emotionally and have fewer behavioral problems (Pleck, 1997).

In response to these realities, beginning with enactment of the public child support program, Title IV-D of the Social Security Act, in 1975 and continuing to the present, public policy has focused on increasing paternity establishment and child support collections for children born outside of marriage, . Most germane to this study is the Omnibus Budget Reconciliation Act of 1993 (P.L. 103-66) which required that all states establish a simple procedure for unmarried fathers to voluntarily acknowledge paternity in birthing facilities and other locations.⁶ Although Congress had previously

⁶For a concise summary of the recent history of paternity establishment, see Roberts, P. (1996). *A Guide to Establishing Paternity for Non-marital Children*. Washington, D.C.: Center for Law and Social

tried to make evasion of paternity more difficult for non-custodial fathers, it had not established a federal mandate that would allow them to voluntarily acknowledge paternity for their children (Sorensen and Halpern, 1999).

The OBRA-mandated voluntary paternity acknowledgment programs were meant to take advantage of the fact that many unmarried fathers visit their children in the hospital at birth and may be willing to acknowledge the child at that “magic moment”. Research has shown that unwed fathers are typically more willing to acknowledge paternity shortly after the child’s birth, but that their willingness to do so usually subsides as the child grows older (Turner, 2001). Programs were also grounded in the practice wisdom acquired by front-line child support staff and confirmed by research studies: the sooner paternity is established and child support ordered and enforced, the more successful child support collections are likely to be (Brown, 1998).

Early evaluations of paternity acknowledgment programs indicated that they did significantly increase paternity establishment rates (Pearson and Thoennes, 1995; Welch, 1996). For example, Washington’s program increased rates from 17% to 40% in the first year of operation. Similarly, a demonstration project in several Denver-area hospitals increased paternity establishment rates from 13% to 24% before the intervention to 27% to 52% in the first two post-intervention years. Maryland statistics are similar. During the first full year of program operation (1995), voluntary acknowledgments were filed in 23.0% of all non-marital births; during year two the figure was 54.5% and, in year three, 54.9%.

Nationwide during the first three years of acknowledgment programs, there was an 80% increase in the number of paternities established (Federal Register, 64, #46, March 10, 1999). By 1998, the number of paternities was triple the 1992 level, at least partially a result of these voluntary acknowledgment programs (American Public Human Services Association, 2001). Now that these programs are well-established, it appears that voluntary acknowledgments are signed in the majority (66% to 75%) of non-marital births (Williams, 2001). Importantly also, these paternity acknowledgment programs are estimated to have significantly increased the child support receipt rate of never-married mothers (Sorensen and Halpern, 1999).

A few evaluations of paternity acknowledgment programs have also examined characteristics of signers and non-signers. Generally, these analyses show that an affidavit is more likely to be completed if the child's mother is Caucasian, has at least a high school education, and is employed (Pearson and Thoennes, 1995). Based on his literature review, Turner (2001) concluded that paternity establishment was positively correlated with being white, higher educational attainment, full-time employment, higher family income, cohabitation, financial independence from government transfer programs, and having fewer children. Seltzer (1997) reached similar conclusions in a study using data from the National Survey of Families and Households.

Notably, the profile of those likely to complete a paternity acknowledgment or to otherwise legally establish paternity differs in some important ways from the profile of the typical user of public child support services. In 1995, to illustrate, about one in three parents using the public child support system lived in families in which at least one

member received cash assistance (i.e., AFDC); about three in five families received Medical Assistance and about 7 in 10 had family incomes under \$30,000 (Lyon, 1999).

The profile of a typical family served by the public child support system has likely changed since 1996 due to large declines in the numbers of families receiving cash assistance and the accompanying reduction in the proportion of cash assistance cases in the child support caseload. Even so, these profile data raise the possibility that the in-hospital paternity acknowledgment program, at least in its early years, may have been more effective at reaching certain segments of the non-marital population than it has been in reaching others. Specifically, it appears from available data that the program may be less utilized by those who rely on a public agency for help with child support matters or for cash assistance or other forms of income support. Despite the importance of voluntary paternity acknowledgment to both the child support and cash assistance programs, however, there is virtually no published information which describes the degree of overlap among the populations served by the three programs.

The present study begins to fill this important information gap for Maryland. It starts with data on non-marital children for whom a paternity affidavit was filed proximate to their birth in 2000 and examines how certain characteristics of affidavit-signers compare to those of the entire population experiencing a non-marital birth in that same year. It also uses various computerized and other data sources to determine how many children with paternity affidavits on file became known to the child support, Temporary Cash Assistance (TCA) and certain other means-tested Department of Human Resources programs within one year of birth.

Study results provide valuable empirical information for policy makers concerned with the ongoing challenges of welfare and child support reform, including increasing paternity establishment rates and helping families make lasting exits from welfare. More specifically, findings should be a useful adjunct to current efforts to streamline and improve Maryland's paternity acknowledgment program and for intra- and inter-program planning in child support and cash assistance more generally. The state's in-hospital paternity acknowledgment program is an excellent focus for this type of analysis as it is a well-established program which began operating in all Maryland birthing facilities in October 1994. The following section describes the methods used for this study. It is followed by a presentation of the study findings.

Method

Sample

The sample for the present study consists of the universe of 16,473 non-marital children born in Maryland in calendar year 2000 for whom a valid voluntary paternity acknowledgment affidavit was filed with the Division of Vital Records. Table 1 displays the number of completed affidavits by child's month of birth. As shown in the Table, the distribution of affidavits across the 12 months was very even; each month accounted for about 7-8% of all affidavits, roughly between 1,260 and 1,480 per month.

Table 1. Number of Affidavits by Child's Month of Birth

Month	Number of Affidavits	Percent	Cumulative Percent
January	1402	8.5%	8.5%
February	1341	8.1%	16.6%
March	1398	8.5%	25.1%
April	1268	7.7%	32.8%
May	1343	8.2%	41.0%
June	1359	8.2%	49.2%
July	1377	8.4%	57.6%
August	1489	9.0%	66.6%
September	1397	8.5%	75.1%
October	1352	8.2%	83.3%
November	1319	8.0%	91.3%
December	1428	8.7%	100.0%
Total	16,473	100.0%	

Data Sources

Administrative data obtained from various sources were used to carry out this study. The nature of these data and their use in this study are described below.

Paternity Affidavit/Acknowledgment Forms

Data recorded on the paternity affidavits were analyzed and compared to information obtained from the Division of Vital Records on all calendar year 2000 non-marital births. These data describe mothers' and fathers' ages and each parent's race/ethnicity. In this study these data are used to address the first research question concerning similarities and differences between affidavit-signers and the larger population experiencing a non-marital birth during the study period.

Under contract with the Child Support Enforcement Administration, Maryland Department of Human Resources, the University of Maryland School of Social Work (UM-SSW) receives paternity affidavit forms from the Division of Vital Records. UM-SSW maintains a database of these forms, produces paternity acknowledgment reports for local child support offices, and provides a fax-back service for local child support officials requiring copies of affidavits in their work.

Administrative Data Systems

Data from two computerized administrative data systems maintained by the Maryland Department of Human Resources are used to address the second and third research questions concerning acknowledged children's use of certain public benefit programs during their first year of life. Specifically, information on post-birth applications for and entries into the Temporary Cash Assistance (TCA, Maryland's TANF program), Food Stamp, and Medical Assistance programs, including the

Maryland Children's Health Insurance Program (M-CHIP) was obtained from the Client Automated Resources and Eligibility System (CARES). The Child Support Enforcement System (CSES) provided data on children's entries into the public child support program.

Procedure

In order to determine if a child in the paternity acknowledgment sample became known to child support or public welfare programs within one year of birth, it was first necessary to determine if the child was known to the overall Department of Human Resources information management system. Specifically, we had to determine if the child had an individual record number (IRN). Along with other Departmental information management systems, the two data systems used in this study, CARES and CSES, are part of the Maryland Department of Human Resources' Client Information System (CIS). The IRN is the CIS variable which uniquely identifies an individual and all data in CIS' component systems are linked through the IRN.

The paternity affidavit forms from which the sample was identified contain the full name and date of birth for each child. The first step in identifying a child's IRN consisted of matching the child's first name, last name, and date of birth from the affidavit database to the same fields in CIS. Because this first round of matching would miss any children for whom there was a slightly different name spelling or date of birth entry error in either the affidavit database or CIS, "partial matches" among the remaining cases were also considered. That is, all CIS records where: (1) the first name and last name exactly matched a record in the affidavit database and the date of birth was in the same month and year; or (2) the date of birth was an exact match and

the first letters of the first and last names matched a record in the affidavit database were deemed to be possible matches. Each partial match was examined individually to determine if it was the correct study child.

Through this two-step matching process, IRNs were identified for more than seven of every 10 (73.1%, n=12,049/16,473) children in the acknowledgment sample. That is, almost three-fourths of children born outside of marriage in 2000 and for whom a paternity affidavit was signed became known to the Department of Human Resources automated client information management system (CIS) within one year of birth. As will be discussed, this does not necessarily mean the child received any benefits. It does mean though that, for whatever reason, within one year of birth, at least three of every four non-marital children born in Maryland in 2000 and for whom a paternity acknowledgment had been filed, were known to one or more DHR programs.

Because the matching process employed is still susceptible to typographical errors in one or both data systems, a random sample of children (n = 355) unmatched after the two-step process was selected for further investigation. Specifically, manual searches for these youngsters were done of CIS using all available information (e.g., names and dates of birth for child, mother, father). The results of these manual searches suggest that an additional 17.5% of sample children quite possibly were known to CIS within one year of their birth.⁷ Differences in name, particularly in how hyphenated last names were entered, and date of birth between the two databases

⁷This is an estimate, not a precise statement. Using this result, however, it could be that as many as nine of every 10 non-marital, acknowledged children born in Maryland in 2000 became known to DHR within 12 months of birth. Minimally, we can state with confidence that this was true for more than seven of every 10 such youngsters.

accounted for the vast majority of cases where the child was not found during the automated, two-step matching process, but was able to be found through manual searching.

Findings

As noted in a prior section of this report, a total of 16,473 voluntary paternity acknowledgments were filed for non-marital children born during calendar year 2000, or in about two of every three such births. Our first research question concerns the characteristics of the parents who participated in the paternity acknowledgment program and how their profile compares to that of all non-marital parents in 2000. To provide contextual information relevant to these results, we begin with data describing the distribution of affidavits by hospital/birthing facility and local jurisdiction.

The 16,473 affidavits were generated by 42 different hospitals and birthing facilities across the state. The top 10 facilities in terms of the numbers of affidavits obtained in 2000 are shown in Table 2, following; the complete list of facilities can be found in Appendix A. Table 2 shows that the top 10 hospitals accounted for a bit more than half (53.0%) of all affidavits in our study year, but that no single institution accounted for more than 8.3% of the total (Holy Cross Hospital, n=1,362). The second and third highest volume hospitals in 2000 were Prince George's Hospital (7.4%, n=1,215) and Mercy Medical Center (7.3%, n=1,202). These three institutions together accounted for nearly one of every four voluntary in-hospital acknowledgments filed (22.9%, n=3,779 of 16,473).

Table 2. Paternity Affidavits: Top Ten Facilities in 2000

Hospital/Birthing Facility	Number of Affidavits	Percent of Affidavits
Holy Cross Hospital	1362	8.3%
Prince George's Hospital	1215	7.4%
Mercy Medical Center	1202	7.3%
Franklin Square Hospital	933	5.7%
Johns Hopkins Hospital	729	4.4%
Anne Arundel Medical Ctr	682	4.1%
Sinai Hospital	678	4.1%
Greater Balto. Med. Ctr	674	4.1%
Harbor Hospital Center	650	3.9%
Peninsula Regional	607	3.7%
Total	8732	53.0%

Consistent with the fact that affidavits came from 42 different hospitals and birthing facilities across the state, the 16,473 cases also represent mothers who resided in all 24 of Maryland's jurisdictions. The largest number and percentage of affidavits were received for mothers who lived in Baltimore City (n=3,842, 23.3%), Baltimore County (n=2,452, 14.9%) or Prince George's County (n=2,395, 14.5%). Mothers living in one of these three subdivisions accounted for a bit more than one of every two (52.7%, n=8,689) affidavits in our sample. Patterns with regard to fathers' place of residence were identical; men residing in Baltimore City (23.2%), Baltimore County (14.2%) or Prince George's County (13.5%) accounted for one of every two affidavits (50.9%).⁸

Who is participating in the paternity acknowledgment program?

Turning to the first research question, Table 3, following this discussion, presents information on the demographic characteristics of unmarried women who gave birth in

⁸Appendix B presents the full list of affidavits by place of residence of mothers and fathers.

2000 and who signed a paternity acknowledgment form. On average, a mother was African-American (50.5%), in her early 20s (mean 24.6 years) and reported having some type of health coverage (71.1%), usually coverage other (64.5%) than Medical Assistance (6.6%). Relatively few mothers were teenagers at the time of the sample child's birth. Only six percent (5.9%, n=958/16,147) of participating mothers were under the age of 18; about 20 percent or one in five (19.8%, n=3,199/16,147) were under 20 years of age. At the time of the child's birth, a little less than half of the mothers in our sample reported being employed (46.2%, n=7,605/16,471). It was not possible to determine from these data if those who were unemployed were temporarily so because of pregnancy and childbirth or if this was a more long-standing situation for them.

Table 3. Mothers' Characteristics

Characteristics	Paternity Acknowledgment Signers
Mother's age at child's birth	
Under 15	0.2% (35)
15-17 years of age	5.7% (923)
18-19 years of age	13.9% (2241)
20-24 years of age	37.2% (6009)
25-29 years of age	22.6% (3642)
30-34 years of age	12.3% (1991)
35-39 years of age	6.3% (1018)
40-44 years of age	1.7% (276)
45 and older	0.1% (12)
Mean	24.66
Median	23.00
Standard Deviation	5.93
Range	12 to 53
Mother's Race	
Black/African American	50.4% (7919)
Hispanic	8.2% (1287)
White/Caucasian	38.4% (6031)
Other	2.9% (460)
Mother's Insurance	
None reported	28.9% (4755)
Medical Assistance	6.6% (1095)
Other	64.5% (10619)
Mother's Employment	
Employed	46.2% (7605)
Unemployed	53.8% (8866)

Note: Due to missing data for some cases, numbers reported may not always total 16,473.

Compared to information published by the Division of Vital Records for all unmarried women giving birth in 2000, it appears that younger women are less likely to sign a paternity affidavit. To illustrate, while about one in four (25.7%) total non-marital Maryland births in 2000 were to women under the age of 20, only one in five (19.8%) women completing affidavits were teens. Conversely, older women were more likely to

complete a paternity acknowledgment form. Among all non-marital births in 2000, about one in five (19.4%) were to women aged 30 and older; among unmarried mothers signing affidavits for children born in 2000, however, nearly one in three (32.4%) were 30 years of age or older.⁹

Table 4, following this discussion, displays data on the characteristics of fathers signing voluntary paternity acknowledgments for children born in calendar year 2000. Fathers are, on average, 27 years old, almost three years older than the mothers. Fewer than one in ten fathers is under the age of 20 (9.1%) and about one in three are 30 or older (32.4%). A bit more than half of all fathers are African-American (55.2%) and one third (33.0%) are Caucasian. Unfortunately, little information is available with regard to fathers' health insurance and employment. Although the paternity affidavit includes questions asking about these elements, these items are not often completed.¹⁰ Among fathers acknowledging paternity for a child born outside of marriage in 2000, a little more than one quarter (27.8%) reported their employers' names. A similar percent (28.8%) reported having health insurance.

⁹Comparable information on mothers' racial/ethnic background are not available from the Division of Vital Records.

¹⁰When the question is left blank, it is impossible to ascertain the meaning of the non-response; it could be that the person is trying to indicate that they do not have insurance or are not employed. However, it is just as plausible that they have insurance/are employed, but chose not to provide that information.

Table 4. Father's Characteristics

Characteristic	Paternity Acknowledgment Signers
Father's age at child's birth	
Under 15	0.1% (10)
15-17 years of age	1.7% (275)
18-19 years of age	7.3% (1182)
20-24 years of age	32.9% (5303)
25-29 years of age	25.5% (4110)
30-34 years of age	16.1% (2602)
35-39 years of age	9.0% (1449)
40-44 years of age	4.6% (741)
45 and older	2.7% (443)
Mean	27.47
Median	26.00
Standard Deviation	7.31
Range	12 to 69
Father's Race	
Black/African American	55.2% (8745)
Hispanic	8.5% (1343)
White/Caucasian	33.0% (5221)
Other	3.3% (529)
Father's Insurance	
None reported	71.2% (11729)
Medical Assistance	0.7% (108)
Other	28.1% (4636)
Father's Employment	
None reported	72.2% (11900)
Employed	27.8% (4573)

Note: Due to missing data for some cases, numbers reported may not always total 16,473.

Comparing paternity-acknowledging fathers to all non-marital fathers in terms of age yields results similar to those for mothers. Younger fathers are slightly less likely sign a voluntary paternity acknowledgment while older fathers are more likely to do so.¹¹

¹¹The comparison of the characteristics of fathers signing paternity acknowledgments to the Division of Vital Records data on all non-marital fathers should be treated with caution due to the large amount of missing data in the latter source.

How many children become known to the child support system within one year of birth? And, for these children, does the system indicate that paternity has been acknowledged?

In order to address the second research question, the extent to which children in the paternity acknowledgment sample became known to the public child support system within one year of birth, information from the affidavit database was matched to the Child Support Enforcement System (CSES) using the matching process described in the Methods chapter. We find that, within one year of birth, 5,341 children, about one-third of the sample (32.4%, $n=5,341/16,473$), became known to the child support system.¹² A similar result was reported by Welch (1996) in her evaluation of the Arkansas paternity project.

This finding confirms that, even in the short-run, there is overlap between the population of non-marital children affected by the paternity acknowledgment program and the population served by Maryland's public child support program. Conservatively, our findings for calendar year 2000 indicate that - within one year of birth - one of every three voluntarily-acknowledged children does appear in the child support information management system. This finding has important implications for children and for IV-D programs. Among other things, it suggests that, in a not insignificant number of non-marital cases, agency actions to obtain financial support should be able to be taken relatively soon after the child's birth, when the chances of success are greatest. The fact that at least 90% of fathers resided in Maryland at the time of the acknowledgment

¹²These 5,341 youngsters represent slightly more than two-fifths (44.3%) of all children known to the DHR information system (CIS) for any reason during their first year of life.

(see Appendix B) should facilitate location and order establishment and, certainly, provide additional impetus for timely action in these cases.

For support staff to be able to take advantage of this 'window of opportunity' on behalf of a child, of course, they must be aware that a paternity acknowledgment exists. For this reason, it was important to also look at the extent to which the existence of the paternity affidavit was documented in the automated information management system (CSES).

The current automated protocol is that periodic file matches are done between Vital Records' affidavit data and CSES data; certain CSES fields are automatically populated when an exact match is found. For purposes of this study, we examined one of these populated fields (affidavit signature date) for all acknowledged children who were known to CSES within one year of birth (n=5,341). Table 5, following, shows that the signature date field was populated, that is, it did indicate the presence of an affidavit, for about three of every five children (60.8%, n=3,247/5,341).

We also examined the paternity status field of the automated system, CSES, to ascertain what data were recorded therein. This information also appears in Table 5. The critical finding is that the field shows paternity established via affidavit for a bit less than half of the children (45.6%, n=2,434/5,337) and through court order for an additional 27.7% of youngsters (n=1,481/5,337). These rates of the automated system recognizing paternity establishment for children for whom an affidavit has been filed are considerably higher than the 33% reported by Pearson and Thoennes (1995) in their evaluation of Denver's earlier paternity establishment project. However, there is clearly room for improvement. As Table 5 shows, fully one of every five children known to

CSES and for whom a paternity affidavit is on file have a CSES paternity status of “requiring establishment” (20.3%, n=1,083/5,337).¹³

Table 5. Paternity Status According to the Child Support System

Child Support Variable	Percent of Children Known to CSES
Affidavit Signature Date Complete in CSES	60.8% (3,247)
Paternity Status Recorded in CSES	
Affidavit completed	45.6% (2,434)
Completed by court order	27.7% (1,481)
Mother is non-custodial parent	0.7% (35)
Parents married at birth now divorced or separated	0.6% (30)
Paternity excluded	0.7% (38)
Paternity establishment required	20.3% (1,083)
Paternity status unknown	4.4% (236)

Note: Due to missing CSES paternity status data for some cases, numbers may not total 5,341. Valid percents are reported.

How many children become known to the welfare system within one year of birth?

Our third research question concerns the extent to which children born outside of marriage and for whom a paternity acknowledgment form is completed enter the public welfare system within one year of birth. This is an important question for several reasons. First, previous studies have consistently demonstrated higher rates of welfare entry among unmarried mothers than among other mothers (Bennett, Bloom, and Miller, 1995). Second, and as noted previously, receipt of child support may have a positive effect on welfare exits and/or recidivism (Meyer, 1991; Schexnayder, Olson, Schroeder, and McCoy, 1998). In this study, we consider if a child becomes known to

¹³Non-rescinded paternity affidavits do not become legal findings of paternity until the 61st day after signature. However, none of the affidavits included in this study were still pending. Thus, this is not a plausible explanation for the ‘requires establishment’ finding.

the Temporary Cash Assistance (TCA), Food Stamp (FS), Medical Assistance (MA), or the Maryland's Children's Health Insurance (M-CHIP) programs during his/her first year of life and if she/he receives services from these programs.

Temporary Cash Assistance (TCA)

Table 6 displays the results of our analyses. With regard to cash assistance, we find that within one year of birth, a bit more than one of every five youngsters (22.1%, n=3,634/16,473) in the paternity affidavit sample had been included in an application for cash assistance.¹⁴ About 15% of all study children (n=2,481/16,473) did receive TCA benefits during their first year of life.¹⁵ On average, these children's entries into the TCA program occur shortly after birth, specifically within three months.

Food Stamps

Not surprisingly given the program's somewhat less restrictive eligibility criteria, we find higher rates of Food Stamp entry among our paternity acknowledgment sample. Within one year of birth, one of every three children born outside of marriage in 2000 and for whom paternity was acknowledged was included in a Food Stamp application (33.2%, n=5,464/16,473).¹⁶ Overall, about one of every four acknowledged youngsters (25.7%, n=4,242/16,473) did receive Food Stamp benefits within their first year of life.¹⁷

¹⁴This is 30.2% of all study children known to DHR, regardless of reason, within one year of birth.

¹⁵Thus, among acknowledged children included in a TCA application within one year of birth (n=3,634), the large majority (68.3%, n=2,481/3,634) do receive benefits within the first year of life.

¹⁶This is 45.3% of all study children known to DHR, regardless of reason, within one year of birth.

¹⁷The data suggest that, for Food Stamps as for Temporary Cash Assistance, the large majority of youngsters who apply do receive benefits (77.6%, n=4,242/5,464).

As was true with regard to cash assistance, Food Stamp entry, on average, occurred shortly after birth, usually within three months.

Medical Assistance

Rates of Medical Assistance (MA) application and participation among children for whom a paternity affidavit was completed are similar to those observed for the Temporary Cash Assistance program. Within one year of birth, an application for MA had been filed for almost one-quarter of study youngsters (23.9%, n=3,943/16,473) and 13.7% (n=2,252/16,473) of all acknowledged youngsters actually were enrolled in the program.¹⁸ However, MA entry does not occur as quickly as cash assistance and Food Stamp entries; on average, children entered the MA program within five to six months of birth.

Children's Health Insurance Program (M-CHIP)

Finally, the highest rate of participation is found for Maryland's Children's Health Insurance Program (M-CHIP). This result is expected, given that M-CHIP has the highest income eligibility levels of all programs examined. We found that within one year of birth, an M-CHIP application was filed for more than one half of the children in our paternity acknowledgment sample (56.8%, n=9,352/16,473). Typically, M-CHIP entry occurs within one month of the child's birth and virtually all children who apply are enrolled (96.8%, n=9,055/9,352).

¹⁸The majority of youngsters who are included on an application for Medical Assistance within the first year after birth do receive benefits (57.1%, n=2,252/3,943).

Table 6. TCA, FS, MA and M-CHIP Participation

Program	Applied within One Year	Received within One Year
<p>Temporary Cash Assistance</p> <p>N % of all children % of children known to DHR</p> <p><i>Length of time until entry</i> Mean Median Standard deviation Range</p>	<p>3,634 22.1% 30.2%</p> <p>3.2 months 2.0 months 3.3 months 0 to 12 months</p>	<p>2,481 15.1% 20.6%</p> <p>3.2 months 2.0 months 3.1 months 0 to 12 months</p>
<p>Food Stamp</p> <p>N % of all children % of children known to DHR</p> <p><i>Length of time until entry</i> Mean Median Standard deviation Range</p>	<p>5,464 33.2% 45.3%</p> <p>3.2 months 2.0 months 3.3 months 0 to 12 months</p>	<p>4,242 25.8% 35.2%</p> <p>3.2 months 2.0 months 3.1 months 0 to 12 months</p>
<p>Medical Assistance</p> <p>N % of all children % of children known to DHR</p> <p><i>Length of time until entry</i> Mean Median Standard deviation Range</p>	<p>3,943 23.9% 32.7%</p> <p>5.2 months 5.0 months 3.7 months 0 to 12 months</p>	<p>2,252 13.7% 18.7%</p> <p>6.0 months 6.0 months 3.6 months 0 to 12 months</p>
<p>M-CHIP</p> <p>N % of all children % of children known to DHR</p> <p><i>Length of time until entry</i> Mean Median Standard deviation Range</p>	<p>9,352 56.8% 77.6%</p> <p>< 1 month birth month 2.3 months 0 to 12 months</p>	<p>9,055 55.0% 75.2%</p> <p><1 month birth month 2.3 months 0 to 12 months</p>

Summary and Conclusions

This study has explored the critical topic of paternity establishment for children born outside of marriage. Its specific focus has been on the voluntary paternity acknowledgment program and the extent to which children involved in that program have contact with Maryland's public child support and welfare systems within the first year after birth. Study results have several important policy and practice implications.

- 1. Paternity affidavits are completed for two-thirds of all non-marital births, a rate on par with other states. However, acknowledgment rates are low for children born to young unmarried parents. Targeted efforts addressed to this population should be considered as should other, broad-based efforts to increase the overall acknowledgment rate which has been static for several years.**

Similar to other studies, we find that younger parents - particularly those under the age of 20 - are less likely to voluntarily acknowledge their children than are older parents. This finding is of concern because teen mothers and their children are a particularly disadvantaged population and, over time, can be very costly to public programs. Teen mothers are more likely to have dropped out of school and are less likely to be able to support themselves; about 80% end up on welfare and, once on, are likely to remain there for a long time (Sawhill, 2001). These realities, coupled with our finding of lower than expected acknowledgment rates for children born to young mothers, suggest that targeted outreach efforts for young unmarried parents might be warranted. As part of this initiative, it would also be wise to review acknowledgment program outreach and information materials to insure their relevance to the younger population of parents. More generally, we recommend including a specific focus on

voluntary paternity acknowledgment in the multi-year, statewide media campaign which is about to be launched. This recommendation arises from the fact that while Maryland does obtain a voluntary acknowledgment in two of every three non-marital births, that rate has leveled off and become static in recent years; the rate could be and should be improved.

2. **At least one of every three non-marital children for whom a paternity acknowledgment is filed become known to the child support system within one year of birth. The child support system is aware of the paternity acknowledgment in a majority of cases, but attention to data matching processes and protocols is needed so that expeditious case processing can be undertaken in all cases and the value of the affidavits is maximized.**

That one in three children for whom a paternity affidavit is completed become known to the child support system within one year of birth suggests that the paternity acknowledgment program is reaching at least a significant minority of the child support program's "at risk" population. Moreover, the fact that the child support agency is aware of the paternity affidavit in three out of five cases is encouraging, given much lower rates reported by other states (Pearson and Thoennes, 1995).

Despite this generally positive finding, it must be remembered that all children in this study were ones for whom a paternity affidavit had been filed. Thus, the goal of the child support program should be that 100% of acknowledged children known to the agency are flagged as acknowledged in the automated system. Because this is not the case, at least for children born in calendar year 2000, it seems clear that some areas for improvement include data accuracy, data matching/management and increasing front-line child support staff's access to paternity affidavit information.

One specific area that should be examined is the automated matching between Vital Records and CSES. As we found in this study, minor typographical errors/number transpositions often cause cases not to match, even though they are the same persons. To our knowledge there is no process in place at present through which possible matches can be efficiently investigated. However, based on study results, developing and instituting such processes could potentially increase the current match rate by as much as 15% to 20%. Careful study of the current match criteria and requirements and consideration of possible modification to either or both should also be undertaken. Thought should also be given to the frequency with which data are matched and how previously unmatched affidavits could be accessed at later points in time, particularly for periodic, automated re-matching efforts. In general, thorough detailed examination and possible reconsideration or reconfiguration of all existing data-related processes, protocols and parameters is thought to have potentially great benefit.

Another strategy would be to publicize and encourage even greater use of the affidavit information and reporting service at UM-SSW through which front-line child support staff can inquire during regular business hours. Prospectively, the joint affidavit imaging and real-time access project under discussion by CSEA-DHR and the School would offer "24/7" searchable access to local staff and permit expeditious use of paternity acknowledgment information on behalf of children.

- 3. Over half of all children in the paternity affidavit sample participate in the Maryland Children's Health Insurance Program (M-CHIP) in their first year of life.**

More than one of every two children born outside of marriage in calendar year 2000 and for whom a paternity acknowledgment form is filed participate in Maryland's Children's Health Insurance Program (M-CHIP) before their first birthday. Because study children represent two-thirds of all non-marital children born in our state in that year, the finding is heartening. It suggests that, at least with regard to newborns and infants, M-CHIP is reaching a significant portion of the population it was intended to serve. Of course, the finding also serves to underscore the point that, as a group, non-marital children tend to be economically disadvantaged.

4. One-quarter to one-third of non-marital, acknowledged children become known to the public welfare system within one year of birth and the majority of those who apply do receive benefits.

Consistent with earlier research, we find that children born outside of marriage, even those whose paternity is acknowledged, do have a fairly high rate of entry into the welfare system. Specifically, we find that approximately one in four children in the paternity affidavit sample become known to the Temporary Cash Assistance (TCA) and Medical Assistance (MA) programs within one year of birth (22.1% for TCA and 23.9% for MA). About one in three (33.2%) are included in a Food Stamp (FS) application within one year. TCA and Food Stamp applications tend to happen shortly after birth, on average within three months, while Medical Assistance applications including these youngsters, on average, are filed five to six months after birth.

Moreover, the vast majority of youngsters who apply for benefits do receive them within the first year. The percentages applying who receive benefits are 68.3%, 77.6%,

and 57.1% for Temporary Cash Assistance, Food Stamps and Medical Assistance, respectively.¹⁹ These programs all have fairly stringent income eligibility limits. Thus, study results suggest that, as a group, children born outside of marriage do remain at high risk for poverty and, further, that a significant minority of them will apply for and receive some type of means-tested benefits within their first year of life. Having the father complete an in-hospital voluntary paternity acknowledgment and having the child support agency aware that the affidavit has been signed is especially critical for these children's economic well-being, particularly in terms of potential child support receipt.

Without question these findings also make it clear that the voluntary paternity acknowledgment program does not just affect and have relevance to the state's child support program, but also to its cash assistance, Food Stamp, Medical Assistance and Children's Health Insurance Program. Cross-program discussions of the paternity program and the results of this study could be beneficial in understanding potential interactions and identifying steps that could be taken to better promote and utilize the paternity program within each respective program. Further research comparing welfare and child support receipt patterns for children who have had an affidavit completed to those for children who have not had their paternity acknowledged could also shed further light on the efficacy of the paternity acknowledgment program.

In sum, this analysis of Maryland's voluntary paternity acknowledgment program provides policy makers and program managers with empirical data on which to assess the need for and nature of program modifications or enhancements. Taken as a whole,

¹⁹In terms of all children in the paternity acknowledgment sample, 15.1%, 25.8% and 13.7%, respectively, received TCA, FS, or MA benefits within the first year of life.

the results suggest that the paternity acknowledgment program is reaching a significant proportion of the population at risk of coming into contact with the public welfare and child support systems. They also suggest that more work remains to be done in reaching certain sub-sets of the non-marital population and in refining program practices currently in place. In short, the voluntary paternity acknowledgment program has worked well in Maryland, but its power and utility could be further enhanced through consideration of the type of program modifications suggested by study findings.

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Appendix A

Affidavits by Birthing Facility - 2000

Birthing Facility	Number of Affidavits	Percent
Anne Arundel Medical Center	682	4.1%
The Baltimore Birthing Center	14	0.1%
Bethesda Naval Hospital	106	0.6%
Calvert Memorial Hospital	152	0.9%
Carroll County General Hospital	195	1.2%
Frederick Memorial Hospital	428	2.6%
Franklin Square Hospital Center	933	5.7%
Greater Baltimore Medical Center	674	4.1%
Garrett County Medical Center	63	0.4%
Howard County General Hospital	338	2.1%
Holy Cross Hospital	1362	8.3%
Harford Memorial Hospital	154	0.9%
Born at home, no hospital identified	6	0.0%
Harbor Hospital Center	650	3.9%
Johns Hopkins Bayview Medical Center	459	2.8%
Johns Hopkins Hospital	729	4.4%
Kent and Queen Anne's Hospital	97	0.6%
Laurel Regional Hospital	173	1.1%
The Maternity Center	10	0.1%
Mercy Medical Center	1202	7.3%
Malcolm Grow USAF Medical Center	61	0.4%
Maryland General Hospital	465	2.8%
Memorial Hospital and Medical Center	252	1.5%
Memorial Hospital	381	2.3%
Montgomery General Hospital	91	0.6%
North Arundel Hospital	1	0.0%
Prince George's Hospital Center	1215	7.4%
Civista (Formerly Physician's Memorial)	228	1.4%
Peninsula Regional Medical Center	607	3.7%
Special Beginnings	1	0.0%
Shady Grove Adventist Hospital	461	2.8%
Sacred Heart Hospital	7	0.0%
Sinai Hospital	678	4.1%
Southern Maryland Hospital Center	502	3.0%
St. Agnes Hospital	458	2.8%
St. Joseph's Hospital	283	1.7%
St. Mary's Hospital	221	1.3%
Union Memorial Hospital	324	2.0%
University of Maryland Medical System	494	3.0%
Union Hospital	214	1.3%
Upper Chesapeake Medical	24	0.1%
Washington Adventist Hospital	521	3.2%
Washington County Hospital Association	404	2.5%
Missing	153	0.9%
Total	16,473	100.0%

Appendix B

Paternity Affidavits by County of Residence

County/Jurisdiction	Mothers	Fathers
Allegany	1.3% (214)	1.2% (196)
Anne Arundel	7.8% (1290)	7.5% (1243)
Baltimore	14.9% (2452)	14.2% (2336)
Calvert	1.1% (187)	1.1% (177)
Caroline	0.8% (133)	0.8% (130)
Carroll	1.3% (216)	1.2% (198)
Cecil	1.4% (234)	1.3% (216)
Charles	2.4% (398)	2.2% (370)
Dorchester	0.7% (109)	0.7% (115)
Frederick	2.8% (454)	2.6% (424)
Garrett	0.4% (58)	0.4% (62)
Harford	3.1% (512)	2.9% (478)
Howard	2.0% (328)	1.8% (292)
Kent	0.5% (81)	0.5% (77)
Montgomery	9.9% (1623)	8.6% (1412)
Prince George's	14.5% (2395)	13.5% (2227)
Queen Anne's	0.6% (93)	0.5% (83)
St. Mary's	1.6% (268)	1.5% (254)
Somerset	0.6% (96)	0.5% (90)
Talbot	0.6% (92)	0.5% (88)
Washington	2.5% (420)	2.8% (469)
Wicomico	2.3% (385)	2.2% (364)
Worcester	0.7% (123)	0.7% (115)
Baltimore City	23.3% (3842)	23.2% (3826)
Out of State	2.1% (351)	5.9% (977)
Missing	0.7% (119)	1.5% (254)