LIFE ON WELFARE: THE ACTIVE TANF CASELOAD IN MARYLAND

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Executive Summary

The present study of Maryland's Temporary Assistance to Needy Families (TANF) caseload was undertaken to provide policy makers and program managers with empirical data on the characteristics, circumstances, and prospects of the adults and children who currently receive cash assistance. As caseloads have declined across the country, most research and political attention has focused on the characteristics and post-welfare circumstances of clients who have exited the welfare rolls. However, answers to the question of "Who is on welfare today?" are more critical for the task at hand: making program and policy decisions for the next few years that are consistent with and responsive to the circumstances and needs of today's cash assistance clients.

In response to a solicitation by the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, five states and the District of Columbia received financial support to examine and report on the characteristics, employment assets, and employment barriers of their current TANF caseloads, using a common survey instrument to facilitate cross-state comparison. Within this framework, the goal of Maryland's study was to answer two questions:

- **What is the profile of the current Maryland TANF caseload?**
- **How does this profile vary across jurisdictions?**

Because of the strong welfare-to-work emphasis in TANF and because of concern that today's clients might be disproportionately disadvantaged in a work-oriented welfare system, the common survey instrument focused on assets and barriers to employment. Similarly, we limited our research sample to TANF cases with one and only one adult and at least one child in the assistance unit. Study cases (n = 1,146)

were randomly selected from the universe of such cases receiving cash assistance in Maryland in June 2002 (n = 15,867). Telephone interviews were completed with 819 recipient adults, for a response rate of 71.5%. Various administrative data sources were also utilized to complement the survey data and, in particular, to provide historical information about welfare program participation and employment.

Our results concerning the demographic characteristics, employment, income and participation patterns of today's "traditional" cash assistance cases (i.e. single-parent families) do not differ substantially from the profile of cash assistance cases in the early years of welfare reform, or from client profiles in the Aid to Families with Dependent Children (AFDC) era. Key findings include:

- Consistent with the study's focus on single-adult TANF cases with at least one child, we find that the typical Maryland case is that of a never-married (70%), African-American (86%) woman (97%) in her early 30s with one (47%) or two (32%) children and no other persons living in the household (51%). On average, the youngest child in the household is five years of age. More than one-half of all cases have a child under the age of four.

- Jurisdictional differences in payee and case demographics are consistent with general population differences and previous studies. Baltimore City's caseload contains a higher proportion of African-American (95%) and never married (75%) caseheads than Maryland's 23 Counties (70% African-American and 62% never married). The youngest child in a Maryland County TANF case is, on average, one year younger than his or her counterpart in a Baltimore City case.

- Most clients are not total strangers to the world of welfare, but neither are they long-term welfare users. Typically, clients had received TANF for two of the past five years. Few (7%) had reached the 60-month time limit by June 2002. Baltimore City customers generally have longer welfare histories than Maryland County customers. On average, adults heading TANF cases in Baltimore City had used 32 months of time-limited assistance compared to only 19 months in Maryland's Counties.

- The vast majority of adults are also not strangers to the world of paid employment. Virtually all (93%) had worked in a Maryland job covered by the Unemployment Insurance (UI) program and, for the large majority, this work had

been fairly recent. About three-quarters (73%) had worked in the past two years and nearly three of five (57%) had worked within the past year. However, relatively few (24%) adults were employed at the time of the survey.

- The current or most recent jobs held by adults were typically full-time (60% worked 35+ hours/week), regular day shift (58%) positions paying between $6.01 and $8.00 per hour (mean $7.90). These jobs provided relatively few benefits and, in the eyes of respondents, held little or no opportunity for advancement (57%).

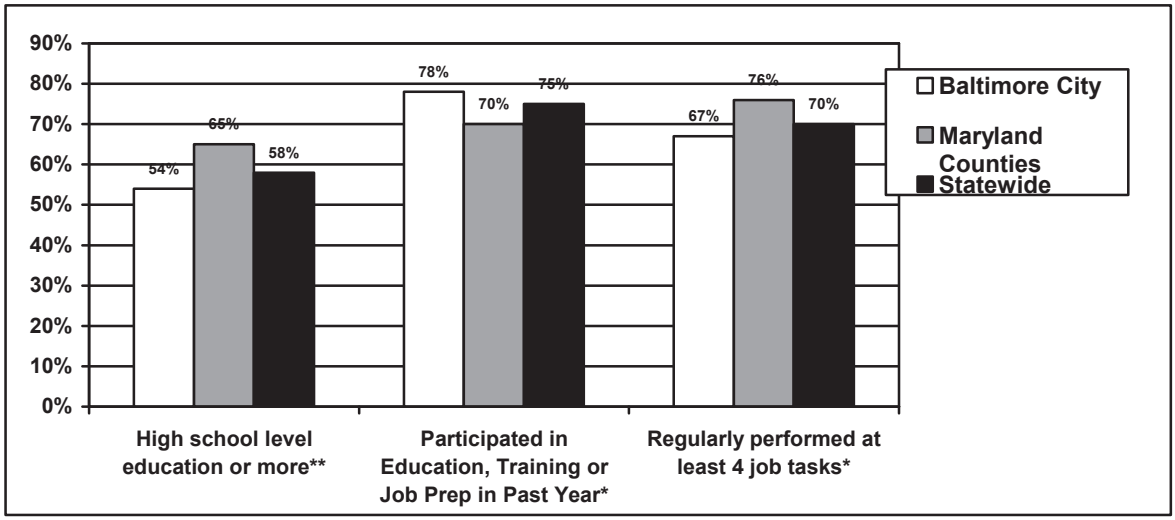
- Administrative/clerical (18.6%), food service (16.9%), and sales (14.1%) jobs were most common, together accounting for one of every two (50%) current or most recent jobs. Notably, almost two-fifths of respondents (38%) indicated that their current or most recent job was temporary or seasonal.

- Statewide, non-employed payees most often cited health problems (17%) or pregnancy/maternity leave (16%) as the reason they left their last job. Similarly, physical health, mental health or substance abuse problem (21%) was the most frequently reported reason for not being employed. Next most common were childcare problems (14%) and pregnancy/newborn care (11%).

- We find few jurisdictional differences in employment history between Baltimore City and Maryland County TANF recipients. Baltimore City residents report higher rates of temporary or seasonal employment and were more likely to work in maintenance and cleaning or health services positions. County residents were more often employed in food services, administration/clerical or sales positions.

While the majority of Maryland's current TANF recipients have the asset of prior work experience, this fact alone does not provide enough information to be practically useful at the program planning or case management level. For this reason, additional survey questions further investigated the human capital assets of our sample members. Our findings suggest that most possess the basic prerequisites for employment. Key results about assets are presented in Figure I and summarized in the following bullets.

Figure I. Human Capital Assets



Source: 2002 survey of single-adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
**p < .05 ** p < .01 *** p < .001*

- About three-fifths (58%) of single parents heading Maryland TANF cases have at least a high school diploma or GED. Two-fifths (42%) lack a high school diploma or GED and 15% have some education beyond the high school level.

- The large majority of adults (75%) report participating in some type of educational, training, or job preparation activities in the past year, most often some type of job search/job club (56%) or job readiness training (48%).

- In terms of experience with various types of job tasks or skills, the most common regularly performed tasks were talking with customers face-to-face (84%), working with an electronic machine other than a computer (70%), and doing arithmetic (62%). Seven out of ten TANF caseheads reported performing at least four of seven common job tasks on a regular basis in their current or most recent job.

- Jurisdictional differences are evident for all human capital assets examined. Baltimore City residents have significantly lower levels of education, with almost half (46%) lacking a high school diploma or GED, and significantly higher levels of participation in educational, training, and job preparation activities. Maryland County payees were more likely to report having performed each of seven basic tasks regularly than their Baltimore City counterparts.

While it is good news that most adults receiving cash assistance in Maryland today have the basic human capital assets needed for employment, most also have one or

more barriers to moving from welfare to work. Our survey assessed a wide variety of these barriers including logistical challenges such as childcare and transportation as well as personal and family challenges like health and mental health problems. Figure II and the following bullets summarize our findings about the prevalence of various work barriers among our sample families.

- Although almost all respondents (94%) indicated at least one potential barrier to employment, specific problems are generally not pervasive or universal. On average, TANF recipients reported, on average, three employment barriers.

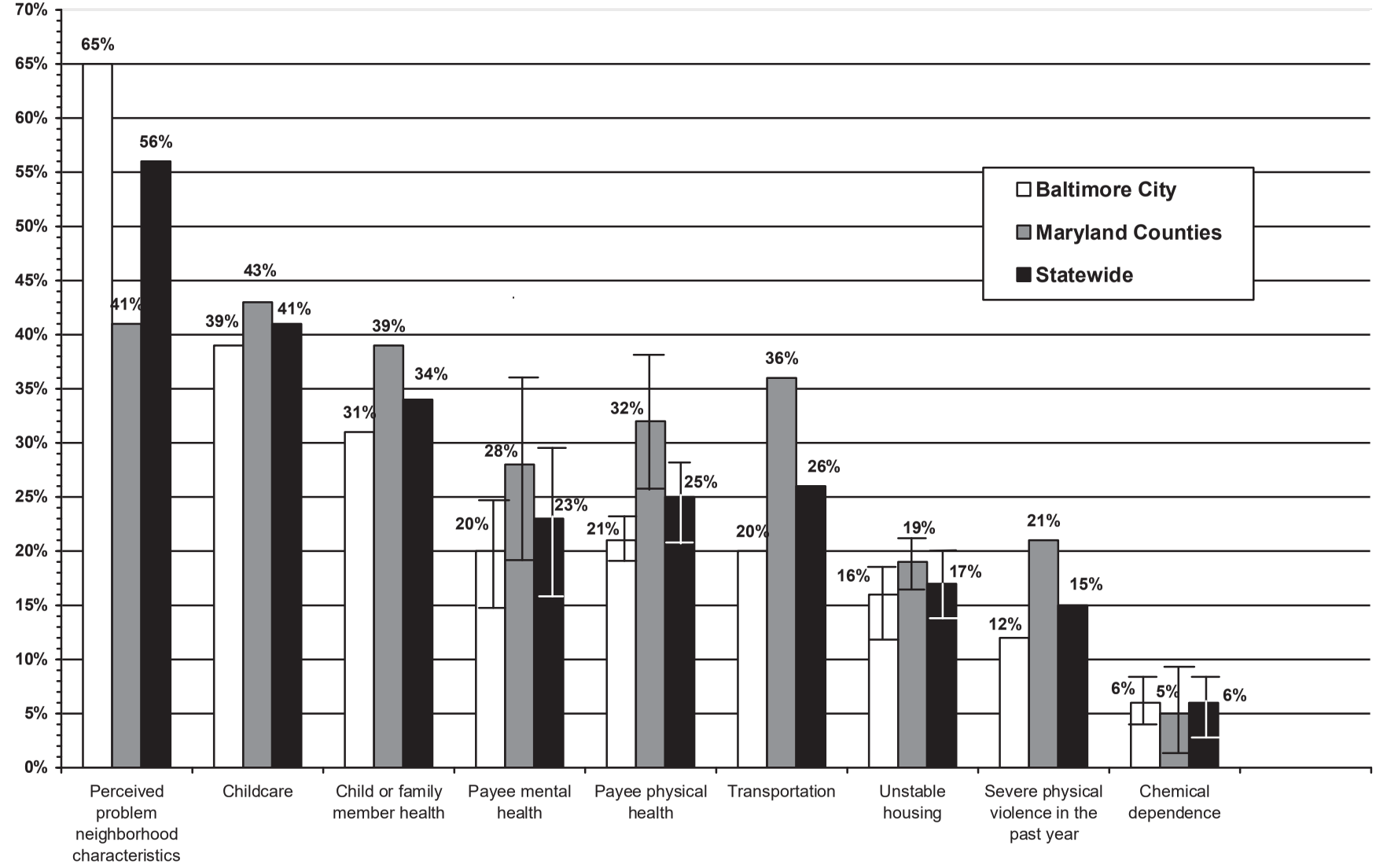
- The most commonly reported potential employment barrier, and the only one indicated by a majority of respondents, is perceived problem neighborhood characteristics. More than half of Maryland TANF caseheads (56%) rated unemployment, drug use, crime, and/or rundown buildings as a big problem in their neighborhoods or stated that their neighborhood lacks a safe place for children to play. Baltimore City respondents (65%) were significantly more likely to indicate neighborhood problems than their counterparts in Maryland's 23 Counties (41%).

- Childcare was the second most frequent barrier statewide, with two-fifths (41%) of parents with a child under the age of 13 stating that they had experienced a problem with childcare in the past year. The most common childcare problem was lack of availability when needed (39% of those with problems).

- Family physical and mental health concerns also present challenges to a significant minority of Maryland's single adult TANF families. Statewide one-third of respondents (34%) stated that caring for a child, other family member or friend with health problems interfered with their ability to work. Almost two-fifths of County payees (39%) reported providing such care, compared to only about three in ten Baltimore City payees (31%).

- Mental health issues among our customer sample were assessed in a number of ways. Less than one-fifth (16%) stated that a mental health problem interfered with their ability to work, and nearly the same percentage (17%) experienced serious psychological distress in the previous month. Based on responses to a standard measure, it appears that one-fourth (25%) are at risk for probable major depression. Combining these various measures, we find that just under three in 10 Maryland TANF caseheads (28.8%) likely have a mental health barrier in moving from welfare to work.

Figure II. Summary of Potential Employment Barriers among Single-Adult TANF Cases



Source: 2002 survey of single-adult TANF cases in Maryland
Note: The survey data have been weighted to be representative of all single-adult TANF recipients in Maryland.

[a] At least one neighborhood characteristic is perceived by case head to be a big problem.
[b]Tabulated only for cases with children under age 13 (n=750).
[c]Cases with a child with health, behavioral, or special need or those caring for an elderly, disabled, or sick family member or friend.
[d] This barrier was assessed in several ways. The bar indicates the mid-point of estimates and the lines show the upper and lower bounds. Low estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year. Higher estimates are researcher calculations based on high level of nonspecific psychological distress or probable major depression.
[e] This barrier was assessed in several ways. The bar indicates the mid-point of estimates and the lines show the upper and lower bounds. Low estimates are researcher calculations based on poor or fair overall health and physical functioning in the lowest quartile. High estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year.
[f] Self-reported problems that prevented case head from participating in work, education, or training during the past year.
[g] This barrier was assessed in several ways. The bar indicates the mid-point of estimates and the lines show the upper and lower bounds. Low estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year. Higher estimates are researcher calculations based on having been evicted or moving two or more times in the past 12 months.
[h] This barrier was assessed in several ways. The bar indicates the mid-point of estimates and the lines show the upper and lower bounds. Low estimates are researcher calculations of probable alcohol or drug dependence. High estimates are based on self-reported lifetime diagnosis of an alcohol or drug problem.

- In terms of physical health, we find that almost three in 10 (29%) reported that health problems had interfered with work or work-related activities in the previous year. One-fifth (20%) were identified as having a health barrier to employment based on a self-rating of fair or poor health and scoring in the bottom quartile on a test of physical functioning.

- Both mental and physical health barriers are more common among TANF recipients in Maryland's 23 counties than among those in Baltimore City. Considering the highest estimates, almost two-fifths of Maryland County respondents likely have a mental (37%) or physical health (38%) problem, compared to only about one-fourth of their City peers (25% mental health and 23% physical health problem).

- Transportation was reported as a work barrier by 26% of Maryland's TANF caseheads. Over one-third of County adults (36%) experienced transportation problems, compared to only 20% of Baltimore City adults.

- Survey findings indicate that domestic violence is not uncommon in the lives of women receiving TANF in Maryland. Almost half (46%) have experienced violence or threats from a romantic partner at some point, and 15% had been victims of severe violence in the past year. Women residing in Maryland 23 counties were significantly more likely to report domestic violence than Baltimore City respondents (21% vs. 12%, respectively).

For policymakers and program managers in particular, what do these findings suggest about the employment and self-sufficiency prospects of Maryland's single adult welfare population? We offer several general conclusions. First, most TANF recipients are prepared for employment in terms of education, previous work experience, and job skills. However, their work experience and job skills have come typically from low-wage and low-skill jobs. The challenge for these families and the welfare agency attempting to assist them will be to obtain and maintain employment that will be sufficient to support their families in both the short- and long-term. At least for some families, meeting this challenge may mean that the adult casehead will have to spend some time gaining additional and more marketable skills.

Our second conclusion is that although Maryland's TANF families are experiencing a variety of logistical and personal challenges to employment, only one of these barriers (neighborhood problems) is reported by a majority of the sample. For policymakers and program managers, these results suggest that agency resources devoted to "barrier removal" would be best directed to dealing with the most commonly reported barriers, including child care, payee health and mental health, child health, and transportation. At the case management level, caseworkers should expect that most families will have at least one barrier to employment, but individual assessment will be required in order to identify the combination of services needed to move them from welfare-to-work.

A third conclusion suggested specifically by the data presented in Figure II is that effective resolution of many of the more commonly reported problems (e.g., physical or mental health problems of casehead or family member, domestic violence) clearly will not be achieved solely by the provision of "welfare-to-work" services. Rather, these complex issues require inter-agency collaboration, coordination, intervention, and ongoing feedback mechanisms. For example, many childcare problems indicated by survey respondents, such as care not available when needed or provider unreliable, may be beyond the scope of the welfare agency to address by itself. Thus, the welfare system may be ultimately held accountable for moving these families from welfare to work, but assistance from other community partners to address many of the problems standing in the way of achieving this goal will be needed.

Our findings regarding regional variation among Maryland's TANF population are somewhat surprising, given commonly held assumptions about welfare caseloads in

large urban areas. Although we find statistically significant differences on most employment barriers, it is not true that Baltimore City TANF recipients always have more challenges than their County peers. Human capital barriers, such as having less than a high school education, and problem neighborhood characteristics are more common among Baltimore City's welfare population. In contrast, County payees report higher rates of physical and mental health concerns for the payee and other family members, domestic violence, and transportation problems. These results provide a strong argument for maintaining some degree of local flexibility in program planning and implementation. They further suggest that Baltimore City resources may need to be directed more towards building human capital among the TANF caseload, whereas County resources should be spent more on dealing with health concerns and transportation issues, including the often limited availability of public transportation.

Perhaps the most important conclusion from this study is that the profile and circumstances of today's single-adult welfare families has changed very little over the course of reform. In general, the TANF recipients in our sample have the basic prerequisites for employment as well as a history of participating in the labor force. For a variety of reasons, life events such as a job loss, pregnancy, or emerging health problem has brought them to the welfare rolls. The challenges they face in transitioning from welfare to work are varied, but the caseload as a whole does not appear to have more of these barriers than those receiving assistance in earlier years. For policymakers, program managers, and researchers, the remaining task is to find innovative and effective strategies for removing barriers and moving families from the

welfare rolls to financial self-sufficiency adequate enough to allow them to weather life's inevitable storms.

Introduction

Temporary Assistance to Needy Families (TANF) caseloads have dropped to historically low levels in Maryland since the outset of welfare reform in October 1996, a pattern observed in nearly every state. Rapid caseload decline initially gave rise to great interest in two straightforward, but important, policy and program-related questions: Who leaves welfare under the new rules? and, What happens to them after they exit? The many "leavers" studies to date have yielded a considerable body of findings in answer to these questions. However, far less political and research attention has been directed at the arguably more important question of the characteristics, circumstances, and prospects of the adults and children who currently receive cash assistance in today's radically altered welfare environment.

Who is on welfare today? There is belief and concern among some observers that the current TANF caseload consists largely or at least disproportionately of families that are "hard to serve" (Brookings Institution, 1999; Brown, 1997; Heinrich, 1999; Loprest and Zedlewski, 1999). Though the term is rarely defined, the phrase "hard to serve" refers to families who possess multiple problems ranging from limited human capital to substance abuse and, in general, are unlikely candidates for rapid, successful transitions from welfare to work. While this belief has many adherents, empirical evidence to support or refute it is neither compelling nor consistent. In fact, welfare agency personnel are well aware that welfare caseloads are dynamic. Thus, at least some portion of the current TANF caseload is composed of new entrants and re-entrants whose characteristics, needs, and self-sufficiency prospects may be quite different from those clients who have had long, uninterrupted spells of benefit receipt.

The truth is that neither the nation nor individual states possess data descriptive of today's active TANF caseload that is adequate to the critical task at hand: making program and policy decisions for the next few years that are consistent with and responsive to the circumstances and needs of today's cash assistance clients. Absent this type of data, state and federal policy-makers will be hard-pressed to make the correct choices. Moreover, the consequences of poor decisions could be severe given the recent economic downturn, the up-ticks in welfare caseloads that have been observed in many states, and time limits on receipt of federally-funded cash assistance.

In response to a solicitation issued by the Office of the Assistant Secretary for Planning and Evaluation (ASPE), U.S. Department of Health and Human Services, five states and the District of Columbia received financial support to examine and report on the characteristics and circumstances of their current cash assistance caseloads. Within this framework, the goal of our project is to answer two questions that are of inestimable importance to policymakers and program managers:

- **What is the profile of the current Maryland TANF caseload?**
- **How does this profile vary across jurisdictions?**

We hope to contribute to the development of a body of knowledge about welfare users that is comparable to that which currently exists about welfare leavers and generate information that is useful in policy-making and program management in Maryland.

Background

In any research endeavor involving public programs, it is important to keep in mind the context in which the programs operate. Thus, this chapter presents a brief description of Maryland's TANF program and the research literature on which our study of the current caseload is based.

Maryland's TANF Program

The study state, Maryland, accepted its TANF block grant in October 1996 and began operating the Family Investment Program (FIP) that same month. FIP is a state-supervised, locally administered program that, within broad state-level parameters, is based on three themes: 1) the welfare agency should move customers into unsubsidized employment as quickly as possible (i.e. a work first approach); 2) local conditions should be taken into account when designing and implementing programs; and, 3) empirical data is necessary for continuous program monitoring and development.

The first theme, that encouraging rapid entry into the labor market is best for helping families move off welfare, is consistent with the current Zeitgeist in welfare policy, a work first philosophy. The work first approach emphasizes quick entry into the labor market, typically through immediate job search (Brown, 1997; Holcomb, Pavetti, Ratcliffe, and Riedinger, 1998). It is grounded in the general view that the best way to get a better job is to be in a job, that is, to be participating in the labor force. Indicative of the seriousness with which Maryland takes the "work first" approach, it should be noted that, following a conciliation period, the state does impose a full family sanction

(i.e., cessation of the entire TANF grant) for the first instance of non-compliance with work requirements or non-cooperation with child support enforcement.

The second theme, local flexibility, is consistent with the so-called "devolution revolution" which swept through public policy in the mid-1990s. In Maryland, eligibility standards and benefit levels for cash assistance, as well as time limit and sanctioning policies are consistent across the state.[1] However, the 24 local jurisdictions (23 counties and the independent incorporated City of Baltimore) have had considerable flexibility in program implementation. For example, some local agencies invest considerable departmental resources in assessing clients' needs and resources and providing services to assist clients in moving to work. In contrast, other jurisdictions contract much of the assessment and welfare-to-work service provision out to one or more non-profit or for-profit organizations.

The final theme underlying Maryland's TANF program, that empirical data are key to continuous program monitoring and improvement, reflects the state's decades-long tradition of using research to inform its welfare policies. Through its partnerships with several universities, including the University of Maryland School of Social Work, the Department of Human Resources regularly receives data on a variety of welfare-related issues.

[1] Maryland has a 60-month lifetime limit on adults' receipt of TANF benefits. The time limit clock started in Maryland in January 1997 with the first families reaching the limit in January 2002.

Changes in the Welfare Caseload During the Course of Reform

As mentioned previously, cash assistance caseload declines since the mid-1990s have been unprecedented in nearly every state. The declines have produced at least two distinct, macro-level caseload changes of note. First, residents of rural and suburban areas have moved off the rolls more quickly than their counterparts in urban areas. As a result, today's TANF caseload is much more concentrated in major cities than the caseload of just a few short years ago (Brookings Institution, 1999; Meyers, 2001; Waller and Berube, 2002). For example, in October 1996, 48.9% of Maryland's caseload resided in Baltimore City. This figure rose to 57.5% by June 2002, our study month.[2] Concentration of the welfare population in major cities such as Baltimore has significant political and fiscal implications for both the affected cities and their respective states.

A second change evident in both the national and Maryland welfare caseloads is that child-only cases, where the adult case head is not included in the TANF grant, have become an increasing share of the overall caseload. According to the U.S. Department of Health and Human Services (2002), from 1969 to 2000, to illustrate, the proportion of child-only cases more than tripled to approximately 35% of the active caseload. The increase is largely attributable to the fact that, since the outset of welfare reform in the mid-1990s, the decline in child-only cases has not been as precipitous as the decline in cases with an adult included in the grant.

Rising proportions of child-only cases, which are not subject to federal time limits and work requirements, may appear on the surface to be good news for states.

[2] This figure has changed very little; in October 2003, 54.1% of the state caseload was in Baltimore City.

However, the news is not so positive when considered from the opposite perspective. That is, the proportion of the caseload made up of single-parent families – those for whom TANF was designed – is declining. To meet federal work participation requirements, states need to engage a larger share of the dwindling, work-mandatory population in work activities.[3]

What Do We Know about the Current TANF Caseload?

In addition to these macro-level caseload challenges, it is also quite possible that some current, on-welfare, work-mandatory families face different personal and other barriers to employment than their peers who transitioned off welfare in the first years of reform. For policymakers and program managers, there may be a need to rethink certain policies in light of today's changed economic environment and cash assistance caseload profile. For example, direct or contracted services, such as immediate work engagement, used successfully with job-ready/less disadvantaged clients and/or in an expanding economy, may be less effective. Instead, especially if federal work requirements concerning rates of participation, hours of required participation, or both, increase under welfare reform re-authorization, efforts to craft work-focused policies more appropriate for the harder-to-employ might become essential. Agency resources or vendor contracts may need to re-focus on complex issues such as family functioning and/or structure, mental illness, and disability–all of which decrease the likelihood of making smooth, lasting transitions from welfare to work and increase the odds of returning to welfare after an exit (Acs and Loprest, 1999; Loprest, 2002).

[3] Although two-parent families are also work-mandatory, Maryland has funded these cases through state maintenance-of-effort funds. Thus, they are not counted in the federal work participation rates.

Available research shows that families receiving TANF today are different from those of yesterday in a number of ways. As mentioned previously, today's caseloads are heavily concentrated in major urban centers where caseloads have decreased more slowly and long-term recipients are more common (Waller and Berube, 2002). A related finding is that the racial composition of the caseload is more heavily concentrated among minorities, especially African Americans and Hispanics (Peterson, Song, and Jones-DeWeever, 2002; Smith, 2001; Zedlewski and Alderson, 2001).

In terms of family composition, Weil (2002) found no significant increase in marriage. However, other studies have found that more single TANF parents are living with a partner (Zedlewski and Alderson, 2001).

Nationally, today's welfare customers are also more likely to be working for pay than their counterparts receiving assistance in earlier periods. Zedlewski and Alderson (2001) found that one-third were working for pay in 1999, compared with 22% who were working in 1997. More adults also have recent work experience, or work experience within the last three years (Zedlewski and Alderson, 2001). However, a significant percentage of adult TANF payees have low levels of education (Danziger and Seefelt, 2002; Zedlewski and Alderson, 2001).

In addition, a number of studies have found that current TANF customers have multiple barriers to employment (Danziger and Seefeldt, 2002; Zedlewski and Alderson, 2001). Physical health problems, mental health problems, or disabilities that limit work are among the most common barriers to employment for TANF customers (Danziger and Seefeldt, 2002; Larrison, Nackerud, and Risler, 2001; Moffitt, Cherlin, Burton, King, and Roff, 2002; Zedlewski and Alderson, 2001). It is also not uncommon for parents to

have a chronically ill or disabled child and this fact prevents or limits their ability to work for pay (Lee, Sills, and Oh, 2002; Smith, Romero, Wood, Wampler, and Chavkin, 2002).

Summary, Rationale and Research Questions

This brief review illustrates that evidence concerning caseload composition and changes is mixed. On some important dimensions, current clients appear to compare favorably to those in prior years, while on other dimensions they do not. The importance of welfare reform's next phase to families and children and the local and state communities in which they live clearly warrants an in-depth, empirical examination of the characteristics and circumstances of families currently receiving cash assistance. The goal of our present study is to provide this type of data for the State of Maryland. To accomplish this, our study uses a combination of survey and administrative data for a random sample of 819 families receiving TANF in Maryland in June 2002. We address two questions:

1. What is the profile of the current TANF caseload in our state?
2. How does this profile vary within the state?

Because the main purpose of this federally-funded project is to provide information on assets and barriers to employment, we focus specifically on cases with one adult and at least one child included in the TANF assistance unit. In addition, we stratify our sample on jurisdiction, to compare single parent TANF cases in Baltimore City to single parent TANF cases in Maryland's 23 counties.

Methods

This chapter describes the procedures of sample selection, data collection, and variable construction. Included is a discussion of survey instrumentation and procedures, as well as the various sources of administrative data used to examine TANF recipients' demographic characteristics, program participation, and employment patterns. Finally, we outline the data analysis approach used for this report.

Sample

The sample for this study was randomly selected from the universe of active single-adult Temporary Cash Assistance (TCA, Maryland's TANF program) cases for June 2002 (n=15,867). Single-adult cases were defined as those having one adult grantee and at least one child included on the welfare grant. Child-only cases, those with more than one adult receiving assistance, and those with no children receiving assistance were excluded from sample selection. A sample of 1,146 cases was initially selected. This number of cases, with a 70% survey response rate, yields a valid sample with a 95% confidence level and ± 5% margin of error.

To allow examination of differences between Baltimore City and Maryland county cases, we stratified the sample on jurisdiction, with half of the cases from Baltimore City (n=573) and half (n=573) from the 23 counties that comprise the balance of the state. In all analyses presented here, the data are weighted so that the proportion of Baltimore City cases in the sample is equal to the proportion of Baltimore City cases in the Maryland TCA single-adult caseload. Details on the calculation of sample weights are presented in Appendix A.

Data Sources

This report includes both administrative data and survey data. The following paragraphs describe each data source in more detail.

Survey Data

To obtain detailed data on family characteristics and barriers to employment, telephone surveys were conducted using the TANF Caseload Survey instrument, developed by Mathematica Policy Research, Inc. (MPR) with input from the six ASPE grantees participating in the study. The instrument was designed to assess current TANF families' key barriers to employment, including family composition, employment history, job training, education, earnings, childcare, physical and mental health, chemical dependence, domestic violence, transportation, and neighborhood characteristics. The University of Maryland School of Social Work (SSW) also contracted with MPR to administer the survey instrument in our state. Interviews were conducted by MPR with 819 of the 1,146 sample families (71.5% response rate) between August 19 and October 31, 2002. The survey was completed via computer-assisted telephone interviewing (CATI) and averaged 35 minutes in length. All surveys were conducted in English, and no proxies were used.

A number of methods were utilized to increase our chances of achieving a high response rate. First, elapsed time between sample selection (July 2002) and survey administration (August—October 2002) was as short as possible. Second, advance letters introducing the survey and requesting participation were mailed to each sample member. Third, all participants received a $20 incentive for completing the survey.[4]

[4] At the request of the federal Office of Management and Budget, Maryland agreed to serve as a study site for MPR's randomized experiment with two incentive procedures. A prepayment group received $2 cash

Finally, several strategies were used to correct/update sample members' contact information when advance letters were returned to MPR if the address was incorrect.[5] Efforts to obtain updated contact information included searches of Lexis-Nexis databases, the Client Automated Resources and Eligibility System (CARES, Maryland's welfare administrative data system), and the Maryland New Hires Registry.

To assess if our final surveyed sample of 819 single-adult TANF families was representative of the statewide single-adult caseload, we compared the demographic characteristics and employment and welfare receipt histories of survey respondents and non-respondents utilizing data from our administrative data systems. Details of this analysis are presented in Appendix B. In general, respondents and non-respondents are quite similar. However, we did find statistically significant differences on three demographic characteristics – age, race, and marital status. Non-respondents were, on average, one and one-half years older than respondents. Non-respondents were also more likely to be Caucasian and, according to the administrative data, more likely to be married.[6] Readers may wish to keep these differences in mind when considering study findings, but we do not believe they negate or diminish the value or utility of our findings for our state's policy-makers and program managers.

Administrative Data

To supplement the survey data, particularly with information on participants' welfare and employment histories, administrative data were retrieved from

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with the advance letter and an $18 check upon survey completion. A post-payment group received no cash with the advance letter and a $20 check upon survey completion. There was no statistically significant difference in response rates between the two incentive groups.

[5] Of the 1,146 advance letters mailed, 14.5% (n=166) were returned to MPR due to an incorrect address.

[6] We chose not to use weights to adjust for these differences. The use of weights, in essence, would make these observed differences disappear, but could introduce other, unknown differences. Thus, in our view, the benefits do not outweigh the risks.

computerized management information systems maintained by the State of Maryland. Demographic and program participation data were extracted from two administrative data systems: the Automated Information Management System/Automated Master File (AIMS/AMF) and the Client Automated Resources and Eligibility System (CARES). Data on childcare subsidies come from the Child Care Automated Management Information System (CCAMIS). Employment and earnings data were obtained from the Maryland Automated Benefits System (MABS), which contains official data on all Maryland jobs covered by the state's Unemployment Insurance system. Each of these systems is briefly described below.

AIMS/AMF

AIMS/AMF was the statewide data system for programs under the purview of the Maryland Department of Human Resources (DHR) from 1987 through 1993. Beginning in late 1993, the state began converting to a new system, CARES. The final jurisdiction (Baltimore City) converted to CARES in March 1998; since that time, no new data have been added to AIMS/AMF, although the system is still accessible for program management and research purposes.

AIMS/AMF contains a participation history for each person who applied for cash assistance (AFDC or TCA), Food Stamps, Medical Assistance, or Social Services. In addition to providing basic demographic data (name, date of birth, gender, ethnicity), the system includes the type of program, application and disposition (denial or closure) date for each service episode, and a relationship code indicating the relationship of the individual to the head of the assistance unit.

CARES

As of March 1998, the Client Automated Resource and Eligibility System (CARES) became the statewide, automated data system for programs under the purview of DHR. Similar to AIMS/AMF, CARES provides individual and case level program participation data for cash assistance, Food Stamps, Medical Assistance and Social Services.

CCAMIS

The Maryland Department of Human Resources' Child Care Automated Management Information System (CCAMIS) tracks childcare subsidies provided to Maryland's children. Data are available at the individual (child, case head, childcare provider) and case (family) level, and provide information on a monthly basis as to who received a subsidy.

Children age 12 and younger whose family incomes are less than 50% of the state median income may receive subsidies.[7] Priority for childcare subsidies is given first to current TCA recipients, then to families that exited from TANF within the past 12 months, and finally to families that have not received TANF within the past year. Prior to January 2003, there was no waiting list for subsidies. However, the recent state budget situation necessitated a policy change so that all new Priority 3 applicants (i.e. families that have not received TANF in the previous year) are placed on a waiting list.

MABS

The Maryland Automated Benefits System (MABS) contains employment and earnings data on all jobs within the state that are covered by the Unemployment

[7] Prior to January 1, 2002, the income eligibility guideline to receive childcare subsidies was 45% of the state median income.

Insurance (UI) program. Roughly 93% of all in-state jobs are covered. However, notable exclusions in the administrative employment records are federal government employees (civilian and military), independent contractors, commission-only salespersons, most religious organization employees, some student interns, self-employed persons with no paid staff, and farm workers. "Off the books" or "under the table" employment is not included, nor are jobs located outside of Maryland.

The lack of administrative data on jobs in other states and federal jobs is particularly important. According to the 2000 census, the rate of out-of-state employment among Maryland residents (17.4%) was nearly five times greater than that of the nation as a whole (3.6%).[8] Moreover, jurisdictions vary significantly in their rates of out-of-state employment. In certain populous counties with sizable TANF caseloads (Prince George's and Montgomery), one-third or more of employed residents work outside Maryland; in contrast, only 2.3% of Baltimore City residents do so. Thus, our lack of access to employment data from the states that border Maryland likely understates true rates of employment and overestimates differences in employment between Baltimore City residents and persons residing in the other 23 jurisdictions.

It is also important to note that earnings from UI-covered jobs in Maryland are reported on an aggregated quarterly basis. Thus, we do not know, in any given quarter, how much of that quarter (i.e., how many hours in a month or months in the quarter) the individual was employed. It is also impossible to compute hourly wage, or weekly or

[8] Data were obtained from the U.S. Census Bureau web-site http://www.factfinder.census.gov using the Census 2000 Summary File 3 Sample Data table QT-P25: Class of Worker by Sex, Place of Work, and Veteran Status: 2000.

monthly salary, from these administrative data. It is important to bear these data limitations in mind when examining employment patterns among our sample members.

Variables

Table 1, following, summarizes the types of variables analyzed and their sources (i.e., administrative data, survey data, or both). Variables were grouped into five broad categories: 1) customer characteristics; 2) employment; 3) assets for employment; 4) logistic and situational challenges to employment; and 5) personal and family barriers to employment.

Customer characteristics include payee demographics, case demographics, household composition, welfare history, and income. Employment variables constructed from administrative data focus on payees' employment history, current employment status, and earnings, while survey data provide information on important topics such as self-reported hourly wages, work hours, and fringe benefits.

Concerning assets for employment, we examine payees' reported educational attainment and job skills. We also consider their participation in education, training, and job preparation programs during the previous year.

Finally, in terms of potential employment barriers we examine logistic and situational challenges reported by survey respondents, as well as their perceptions of personal and family barriers. Logistical and situational challenges include transportation, childcare, housing, and neighborhood characteristics. Personal and family barriers to employment concern physical health, mental health, chemical dependence, and domestic violence.

Table 1. Variable Categories and Data Sources

VARIABLE CATEGORY	DATA SOURCE
Customer Characteristics	
Payee Demographics	Survey and administrative data
Case Demographics	Administrative data
Household Composition	Survey data
Welfare History	Administrative data
Income	Survey data
Employment	
Employment History	Administrative data
Current Employment Characteristics	Survey data
Assets for Employment	
Educational Attainment	Survey data
Education, Training, and Job Preparation	Survey data
Job Skills	Survey data
Logistic and Situational Challenges to Employment	
Transportation	Survey data
Childcare	Survey and administrative data
Housing	Survey data
Neighborhood Characteristics	Survey data
Personal and Family Barriers to Employment	
Physical Health	Survey data
Mental Health	Survey data
Chemical Dependence	Survey data
Domestic Violence	Survey data

Data Analysis

Data were analyzed using descriptive statistics. Specifically, frequency tables were created to summarize customer information and measures of central tendency were used to describe customer characteristics and trends. The chi-square and analysis of variance statistical methods were used to test for differences between customers living in Baltimore City and those living in Maryland's 23 other jurisdictions. The next few chapters summarize our main findings. Readers are encouraged to review the more detailed data tables presented in Appendix C, which are designed to be directly comparable with those of the other study states.

Findings: Demographic, Assistance Unit, and Household Characteristics

This chapter summarizes findings about demographic and household characteristics, household income, and welfare participation for our sample of active single adult TCA cases in Maryland in June 2002. Because Baltimore City accounted for 57.5% of the statewide June 2002 TANF caseload, we also examine differences between Baltimore City cases and cases in Maryland's 23 counties.

Payee Demographics

Table 2, on the next page, displays data on individual demographic characteristics of our TANF customer sample. Statewide, the typical TANF casehead was an African American (86.2%), female (96.8%), in her early 30s (mean age 30.2 years) who had never been married (70.4%). Baltimore City and Maryland county caseheads differ significantly on three variables: race; marital status; and age at first birth. Baltimore City residents were significantly more likely to be African American -- more than 9 out of 10, compared with 7 out of 10 in the other jurisdictions. They were also more likely to never have been married, 75% vs. 62% of county residents. Non-city residents, on the other hand, were twice as likely as Baltimore City payees to be separated, divorced, or widowed.

In terms of age at first birth, female payees living in Baltimore City, on average, began childbearing at a younger age, compared with those living in the Maryland counties.[9] Twice as many Baltimore City customers as County customers gave birth before their 16th birthday.

[9] Age at first birth estimates are calculated for female payees from administrative data, using payee's date of birth and the date of birth of her oldest child in the assistance unit. If payees have older children not included in the assistance unit, our figures will understate the rate of early childbearing among the sample.

Table 2. Payee Demographics

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Gender [a]			
Female	97.3% (514)	95.9% (279)	96.8% (793)
Male	2.7% (14)	4.1% (12)	3.2% (26)
Payee Age [a]			
Younger than 25 years	35.4% (187)	35.2% (102)	35.3% (289)
26-34 years	33.9% (179)	34.8% (101)	34.2% (280)
35 years and older	30.7% (162)	30.0% (87)	30.4% (249)
Mean	30.2	30.2	30.2
Standard Deviation	9.3	8.9	9.1
Race ***			
African American, Non-Hispanic	94.9% (484)	70.3% (196)	86.2% (679)
White, Non-Hispanic	5.1% (26)	28.8% (80)	13.5% (106)
Other	4.7%(25)	8.6% (25)	6.0% (49)
Marital Status*** [a]			
Never married	75.3% (396)	61.6% (180)	70.4% (576)
Married or living with partner	11.6% (61)	13.7% (40)	12.4% (101)
Separated, divorced, or widowed	13.1% (69)	24.7% (72)	17.2% (141)
Age at First Birth [b]			
Younger than 16 years	12.1% (60)	5.5% (15)	9.8% (75)
16-20 years	47.5% (251)	45.7% (133)	46.9% (384)
21 years and older	35.2% (186)	42.6% (124)	37.9% (310)
Mean*	21.3	22.2	21.6
Standard Deviation	5.8	5.6	5.8

Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*
[a] Source: 2002 survey of single-adult TANF cases in Maryland.
[b] Source: 2002 Maryland administrative data on the TANF caseload.

Case Demographics

Table 3 presents statistics for several variables describing the characteristics of the welfare cases in our sample: size of the assistance unit; number of children in the assistance unit; and, age of the youngest child in the household. Of these case-level demographic variables, only age of youngest child was significantly different between Baltimore City and Maryland County cases. In terms of unit size, both groups had an average of approximately three people in the assistance unit, with an average of two children.

Among cases in the 23 counties, the youngest child in the household was, on average, one year younger than in Baltimore City cases. Perhaps notably, those living outside Baltimore were more than twice as likely to have a child younger than 12 months of age. All else equal, these results suggest that non-parental childcare, particularly for pre-school age children, is likely to be an issue for many single-adult TANF families transitioning from welfare-to-work. They further indicate that, proportionately, the need for childcare for very young children may be greater in the 23 Maryland counties than in Baltimore City.

Table 3. Case Demographics

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Size of Assistance Unit			
2	46.8% (247)	46.0% (134)	46.5% (381)
3	32.4% (171)	32.0% (93)	32.2% (264)
4 or more	20.8% (110)	22.0% (64)	21.2% (174)
Mean	2.8	2.9	2.9
Std Deviation	1.1	1.1	1.1
Number of Children			
1	46.9% (247)	46.0% (134)	46.6% (381)
2	32.4% (171)	32.0% (93)	32.3% (264)
3 or more	20.6% (109)	22.0% (64)	21.1% (173)
Mean	1.8	1.9	1.9
Std Deviation	1.1	1.1	1.1
Age of Youngest Child			
Less than 12 months	12.3% (64)	27.2% (79)	17.6% (143)
1-4 years	44.1% (233)	40.2% (117)	42.7% (350)
5-9 years	25.9% (135)	16.2% (47)	22.4% (182)
10-15 years	13.8% (72)	14.5% (42)	14.0% (114)
16-18 years	3.4% (18)	1.7% (5)	2.8% (23)
Mean**	5.4	4.4	5.0
Median	4.1	2.5	3.5
Std Deviation	4.5	4.5	4.5

Source: 2002 Maryland administrative data on the TANF caseload.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Household Composition

As noted, our sample is limited to TANF cases that, at the time of sample selection, included one (and only one) adult and at least one child in the assistance unit. However, the assistance unit (persons whose needs are included in calculation of the TANF benefit) and the household (persons residing together, regardless of income source) are not always synonymous. There may be adults and/or children in the home who are not part of the TANF case. Information about the actual composition of TANF families' households (as opposed to their assistance units) is not commonly available, but can be invaluable in terms of service and program planning. Survey findings about

the household composition of our single-adult TANF cases appear in Figure 1, following this discussion.

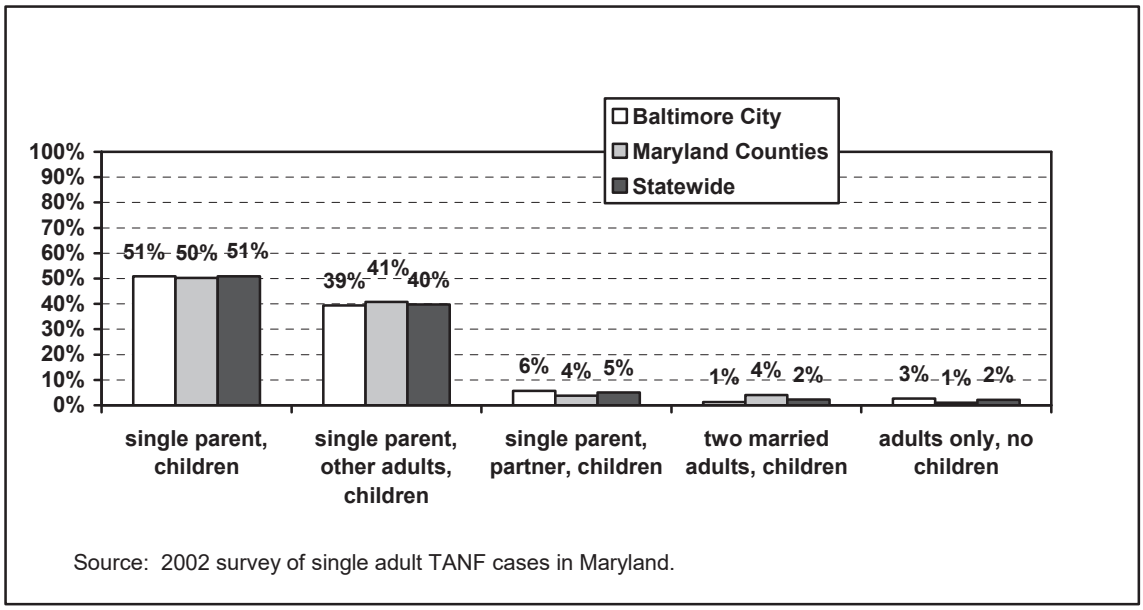
Statewide, about half of all households reportedly consisted of only the single parent and children. Another 40% were composed of a single parent, adults other than the casehead's spouse or partner, and children, and five percent consisted of the single parent, his/her partner, and children. On average, there were four persons in our sample households, including two children under the age of 18 years. Other adults residing with our TANF families typically were close relatives. In cases reporting at least one other resident adult, mother/step-mother and sibling were most common.

Differences in household composition between Baltimore City and Maryland counties' cases were statistically significant, though very small. City TANF payees were more likely to report living with a partner and children or in a household composed only of adults.[10] County cases, on the other hand, were more likely to include two married adults and children than were Baltimore City cases. One important conclusion from these findings is that, despite differences in specific household composition, Baltimore City and Maryland County single-adult TANF caseheads are similar in that approximately half of them reside in households with at least one other adult present. This other adult may increase the family's chance of transitioning from welfare to work by sharing in work and childcare responsibilities. However, a caveat to this conclusion is that these other adults are not included in the assistance unit, which may indicate that they are either disabled or immigrants. In fact, our survey data indicate that only about one-fourth of cases include another adult in the household who worked for pay in the

[10] Survey administration took place generally within 90 days of sample selection and, at the time study cases were selected, all did have at least one child included in the TANF case.

previous month. Maryland county households were significantly more likely to include an employed, other adult than Baltimore City households (33.1% vs. 22.5%, respectively).

Figure 1. Household Composition*



Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Program Participation

The welfare history of current TANF recipients is important to consider because long welfare histories are associated with lower rates of exit (Sandefur and Cook, 1997). Moreover, the 60-month TANF time limit makes it imperative that families transition from welfare to work as quickly as possible and that these transitions be permanent ones.

By definition, all survey respondents had received a June 2002 TANF grant, but this fact alone tells us nothing about the extent of their prior participation in cash

assistance. Some, no doubt, are brand-new to aid, others have been episodic users and some have almost certainly had lengthy welfare careers.

Table 4, following this discussion, uses administrative data to present two measures of payees' cash assistance receipt history. The top half of Table 4 displays total months of cash TANF receipt in Maryland during the five years or 60 months immediately preceding, and including, our study month (June 2002). The table shows that, statewide, participants had received TANF, on average, in 25 of the previous 60 months or, roughly for two of the last five years.

Differences between City and county cases are significant. On average, Baltimore City payees had roughly 10 more months of TANF use than did Maryland county payees. Most striking is that almost one-half of county caseheads had 12 or fewer months of aid receipt in the past five years vs. not quite one-fifth of City casheads.

The bottom of Table 4 presents the total number of months of benefit receipt that counted towards customers' lifetime 60-month limit, the first month of time-limited aid in Maryland being January 1997.[11] On average, respondents had used 27 months as of June 2002, and about seven percent had reached or exceeded the 60-month limit.[12]

Jurisdictional differences are again statistically significant. Payees residing in Baltimore City had used more months of time-limited aid than payees residing in Maryland counties. Baltimore City payees were also two and one-half times more likely to have reached or exceeded 60 months of time-limited aid.

Table 4. Historical Receipt of Cash Assistance

[11] The period covered in the bottom half of Table 4 is January 1997 to June 2002. The period covered in the top half of the table, in contrast, is July 1997 to June 2002.

[12] Clients reaching the 60-month limit may receive additional aid if they have a self-sufficiency plan and are cooperating with its requirements.

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Number of months of receipt out of last 60* **			
12 months or less	18.0% (95)	45.7% (133)	27.8% (228)
13-24 months	22.3% (118)	25.1% (73)	23.3% (191)
25-36 months	24.4% (129)	11.0% (32)	19.7% (161)
37-48 months	22.3% (118)	9.6% (28)	17.8% (146)
49-60 months	12.9% (68)	8.6% (25)	11.4% (93)
Mean	28.8	19.2	25.4
Standard Deviation	15.0	16.5	16.2
Number of months of receipt counted towards the 60-month time limit* **			
Less than 12 months	17.6% (93)	44.2% (129)	27.1% (222)
12-23 months	21.6% (114)	27.4% (80)	23.7% (194)
24-35 months	21.0% (111)	11.6% (34)	17.7% (145)
36-47 months	16.3% (86)	7.5% (22)	13.2% (108)
48-59 months	14.6% (77)	5.8% (17)	11.5% (94)
60+ months	8.9% (47)	3.4% (10)	7.0% (57)
Mean***	31.5	19.2	27.1
Standard Deviation	18.7	16.3	18.8

Source: 2002 Maryland administrative data on the TANF caseload.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Household Income

The final set of family characteristics addressed in this chapter relates to household income amounts and sources as reported by respondents for the month prior to the survey. Average reported monthly household income from all sources was $1,052 statewide, $1,057 in Baltimore City and $1,043 in the balance of the state. These figures are low, but are comparable to results reported from a 1999 survey of TANF-receiving women in Boston, Chicago, and San Antonio. In that study, average monthly income was approximately $1,000 (Moffitt, Cherlin, Burton, King and Roff, 2002).

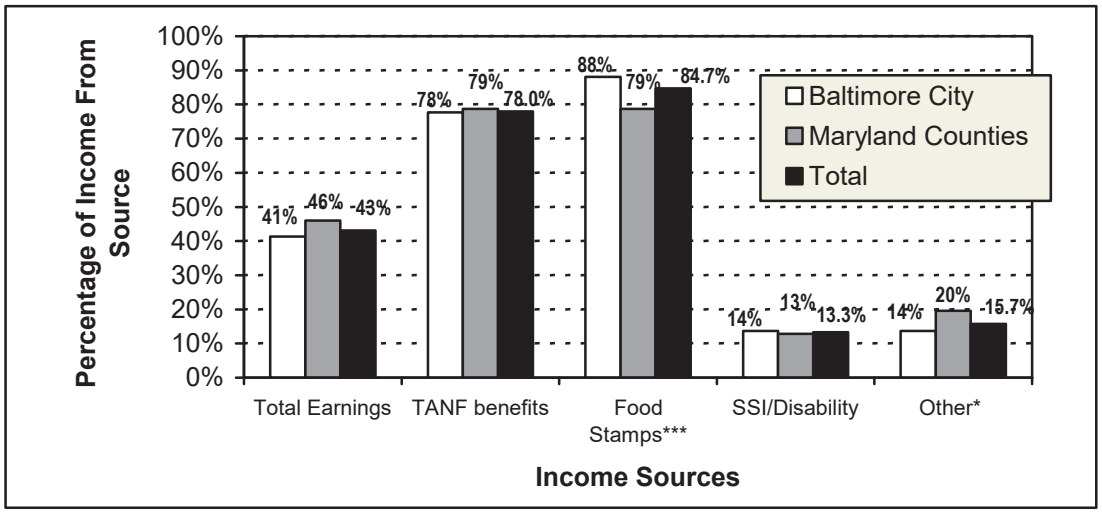
As shown in Figures 2 and 3, and as expected given that we selected study respondents from the roster of **active** TANF cases, the most commonly mentioned

sources of income were Food Stamps and TANF. Average monthly amounts of income received from those two sources were $276.74 and $407.26 for Food Stamps and TANF, respectively.

Earnings of household members was the next most commonly reported income source, mentioned by about two-fifths of households statewide and averaging $1,096 in the previous month. Receipt of Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) was reported much less often, as was receipt of income from other sources.

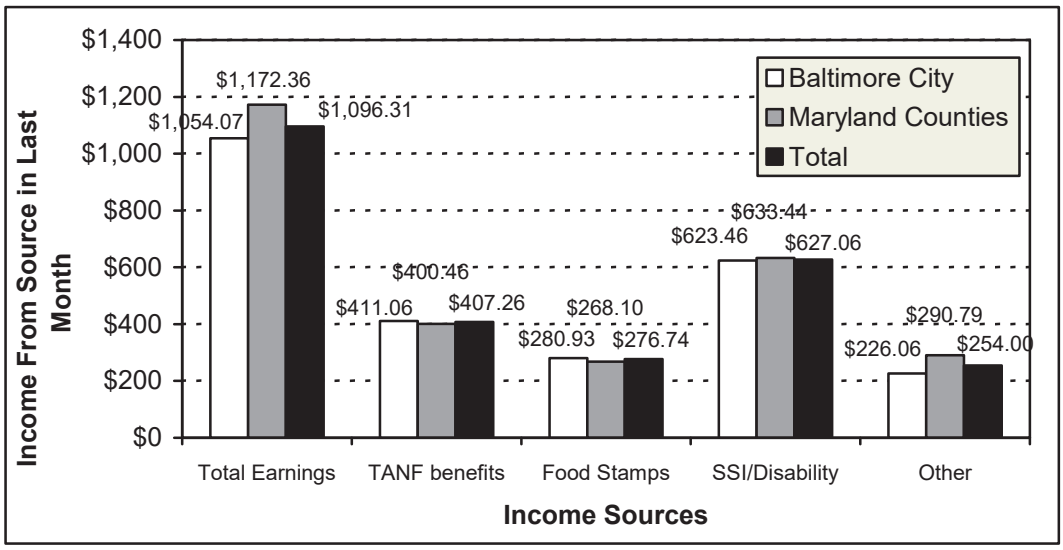
We find statistically significant differences across jurisdictions in receipt of Food Stamps and income from other sources. Baltimore City respondents were more likely to have received Food Stamps in the preceding month (88.1% vs. 84.7%). County payees, however, were more likely to report income from other sources (including child support, unemployment benefits, alimony, or money from friends or relatives).

Figure 2. Income Sources in Last Month[a]



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*
[a] Income sources and amounts refer to the month prior to the survey.

Figure 3. Income Amounts in Last Month[a]



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*
[a] Income sources and amounts refer to the month prior to the survey.
[b] Income from other sources includes child support, unemployment benefits, alimony payments, or money from friends or relatives.

In sum, our analyses of the demographic and case characteristics of Maryland's single-adult TANF caseload generally reveal statewide and jurisdictional trends consistent with previous studies of the state's welfare population. We find that the typical single-adult TANF case is composed of a never-married, 30 year old African-American woman with two children. Half of these assistance units reside in a household with at least one other adult. The relationship of these other adults to the TANF casehead varied significantly by jurisdiction. Baltimore payees were more likely to live with a partner while Maryland County payees more commonly reside with a spouse or other relative.

The youngest child, statewide, averages five years of age. However, in Maryland County cases, the average age of youngest child is one full year younger than in Baltimore City cases. These results suggest that county TANF recipients may have more difficulties with obtaining and paying for reliable non-parental childcare as they transition from welfare to work.

Finally, in terms of their welfare histories, we find that half of Maryland's TANF recipients have received benefits for two years or less out of the previous five. Consistent with a number of other Maryland studies, our results indicate that Baltimore City customers generally have longer welfare histories than their counterparts in the 23 counties. In fact, almost one out of ten Baltimore payees had reached the 60-month lifetime limit by June 2002, compared to only 3.4% of County payees.

Findings: Employment Characteristics

Research has unequivocally established that most women who receive cash assistance are not strangers to the world of paid employment. Almost all of them have some history of participation in the labor market, however short-lived or episodic that participation might have been. Unfortunately, for many low-income women, including those currently receiving TANF, episodes of employment have been interspersed with episodes of welfare and lasting transitions from welfare to work have not occurred. Thus, many observers opine that, in today's time-limited, work-oriented welfare system, the most difficult challenge for recipient women and for the welfare system lies not in getting jobs, but in breaking the welfare-to-work-to-welfare-to-work-to-welfare cycle.

To help policy makers and program managers assess the employment prospects of Maryland's TANF customers, this chapter summarizes findings from analyses of employment data, including employment history, earnings, and job characteristics. Data sources include both administrative data and survey data.

Employment History

Table 5 details various measures of employment history based on administrative data from Maryland's Unemployment Insurance (UI) system.[13] Specifically, we examine employment and earnings in the four quarters before June 2002 and the second quarter of 2002, which includes our study month.

Findings confirm that, indeed, virtually all study respondents (92.7%) had some prior employment: nine of ten payees had worked in a Maryland UI-covered job at some

[13] All UI-reported earnings are standardized to 2001 dollars. Note that UI earnings are reported on an aggregate quarterly basis. Thus, we do not know how many hours or weeks individuals worked in a quarter. It is impossible to compute hourly wage figures from these administrative data.

point before June 2002[14]. Moreover, the large majority had work experience that was fairly recent: nearly three-quarters worked at some point in the past two years and almost three of five had UI-covered employment within the past 12 months. However, on average, payees worked less than half the quarters in the previous year. Also, earnings figures were quite low with an average of $1,315 per quarter and $3,599 for the year.

Rates of employment were considerably lower during the second quarter of 2002, the quarter in which our study month occurs, with slightly more than one-fourth of Maryland single-adult TANF case heads working in a Maryland UI-covered job. Average quarterly earnings ($1,265) were also slightly lower than they had been over the previous year. Perhaps contrary to expectation, there were no statistically significant differences between Baltimore City residents and those in the rest of the state on any of the employment history variables examined.

Table 5. Employment History

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Preceding 4 quarters			
Percent employed	58.1% (306)	55.9% (162)	57.3% (470)
Mean # of quarters worked	1.3	1.3	1.3
Mean total earnings	$3454.07	$3873.26	$3598.81
Mean average quarterly earnings	$1266.77	$1315.49	$1315.49
Second quarter 2002			
Percent employed	28.2% (149)	27.1% (79)	27.8% (228)
Mean earnings	$1379.39	$1048.50	$1265.17

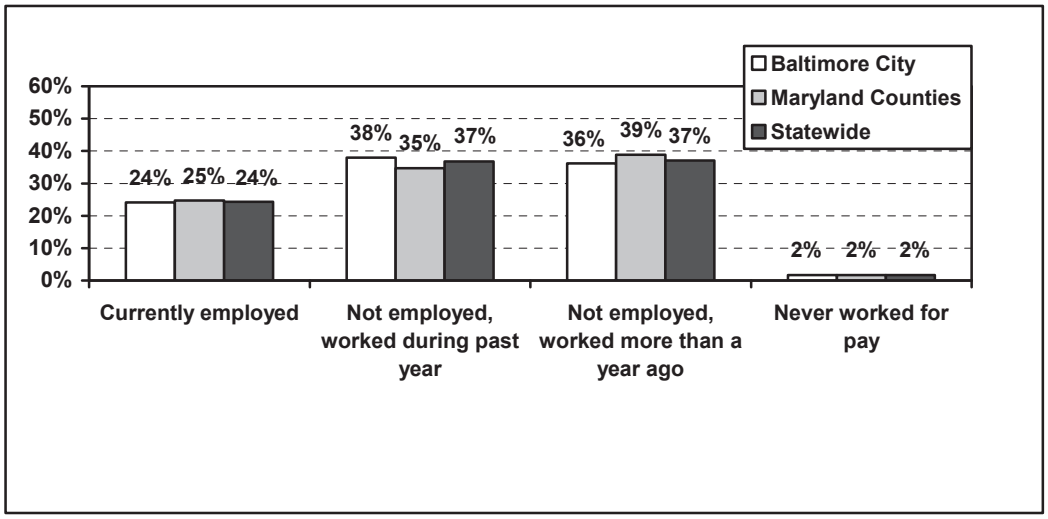
Source: 2002 Maryland administrative data on the TANF caseload.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

[14] Readers are reminded that the employment data from Maryland's UI system do not include employment in other states or federal jobs. Overall, the rate of out-of-state employment by Maryland residents (17.4%) is roughly five times greater than the national average (3.6%). (Census 2000 Summary File 3 Sample Data Table QT-P25: Class of Worker by Sex, Place of Work, and Veteran Status, 2000.)

Current Employment: Situation and Characteristics

In addition to examining administrative data on respondents' employment histories, several survey questions also inquired about this topic. As illustrated in Figure 4, roughly one in four reported working at the time of survey administration.[15] Approximately three-quarters of payees said they were not working at the time of the interview; equal proportions of non-employed payees said they had worked within the past year or had last worked more than one year ago. Again, there were no significant differences between City and county respondents in terms of current employment status or employment history measured through these survey questions.

Figure 4. Current Employment Status



Source: 2002 Maryland administrative data on the TANF caseload.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002
** p <.05, ** p<.01, *** p<.001*

Merely knowing if and how recently low-income women have worked, of course, is but a small part of the information needed to assess their likelihood of being able to smoothly transition from welfare to work and/or the types of employment and wages

[15] These percentages do not exactly correspond with the administrative data due to differences in time periods covered. Also, administrative data are restricted to Maryland jobs covered by the Unemployment Insurance system while the survey questions had no such restriction.

they may be able to command. Information describing payees' current or most recent jobs can potentially provide a useful starting point in that regard and a number of such questions were included in the survey. Results appear in Table 6.

Although the mean length of current or most recent job is one year, this measure is influenced by very long job tenure among a small group of sample respondents. A better measure is the median, which indicates that half of respondents' current or most recent jobs lasted about 4 months. Typically, the job was a full-time, regular day shift position paying $7.00 to $8.00 per hour, but providing relatively few fringe benefits and, in the eyes of respondents, providing little or no opportunity for advancement. Notably, almost two-fifths of respondents statewide indicated that the job had been or was temporary or seasonal.

Baltimore City residents were significantly more likely to report temporary or seasonal jobs than were residents of the 23 counties and were significantly less likely to report that their job offered a retirement plan or health insurance. Perhaps contrary to expectation, there were no significant differences between the two groups in terms of job tenure, weekly hours, shift worked, hourly wage or perceived advancement opportunities.

Table 6. Characteristics of Current or Most Recent Job Among TANF Caseheads Who Have Ever Worked For Pay

	Baltimore City (n=519)	Maryland Counties (n=286)	Total (n=805)
Length of employment on job (months)			
Mean	12.4	13.8	12.9
Median	4.0	4.0	4.0
Std dev.	32.6	30.5	31.9
Temporary or Seasonal job**	41.3% (213)	31.6% (90)	37.9% (303)
Hours worked per week			
Less than 20	10.7% (55)	9.4% (27)	10.3% (82)
20-34	28.7% (148)	30.8% (88)	29.4% (235)
35 or more	60.6% (312)	59.8% (171)	60.4% (483)
Mean	34.6	34.3	34.5
Std dev.	12.8	13.0	12.0
Hourly wage			
Mean	$7.70	$8.30	$7.90
Std dev.	$4.23	$6.20	$5.02
Benefits available			
Paid holidays	49.3% (250)	52.2% (143)	50.3% (393)
Retirement plan**	43.4% (216)	53.8% (149)	47.1% (365)
Paid vacation	43.3% (218)	50.0% (138)	45.7% (356)
Paid sick leave	37.3% (186)	41.5% (112)	38.7% (298)
Health insurance**	28.6% (128)	36.3% (90)	31.4% (219)
Opportunity for advancement			
Great deal	16.5% (85)	19.4% (55)	17.6% (140)
Little	52.4% (272)	49.0% (140)	51.3% (413)
None	30.7% (158)	31.3% (89)	30.9% (247)

Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
*p <.05, ** p<.01, *** p<.001*

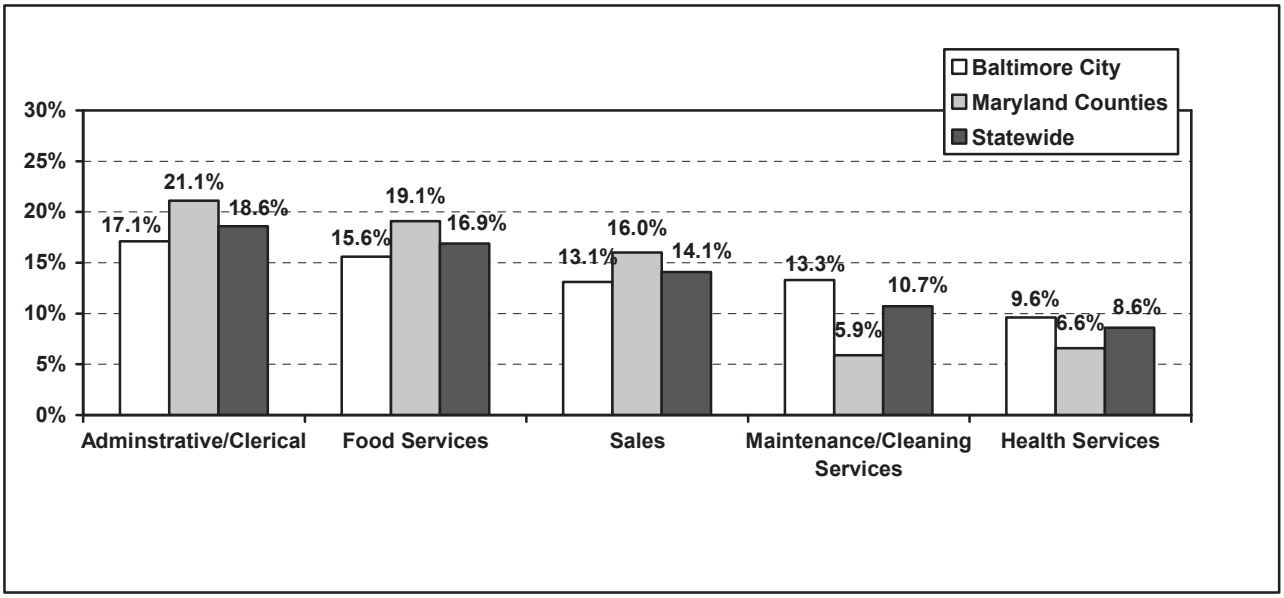
Information about the specific types of jobs previously or currently held by adults receiving TANF can also be important because the industry in which one finds employment can be a good indicator of the potential of that employment in terms of wages, wage growth, stability and advancement opportunities. Traditionally, women receiving welfare have found jobs in low-wage, low-skill sectors of the economy, particularly in service industries like restaurants, nursing homes, hotels and motels, department stores and temporary help firms (Burtless, 1997; Spalter-Roth, Burr, Hartman and Shaw, 1995; Zill, Moore, Nord & Steif, 1991). Consistent with findings from our multi-year, longitudinal study of Maryland welfare leavers (Ovwigho, Born,

Ruck and Tracy, 2003), we find that current TANF recipients have most recently worked in the retail (26.2%), business services (16.3%) and health services (10.4%) industries.

In terms of work actually performed, respondents cited a wide variety of positions or occupations. The top five are presented in Figure 5, following. Consistent with the literature, administrative/clerical, food service, and sales positions were the most common, accounting for just about half of all current or recent positions.

We find statistically significant differences across jurisdictions on both industry and occupation. Baltimore City respondents were more likely to work in business and health services, while Maryland county respondents were more likely to work in retail or personal services. Similarly, maintenance/cleaning service and health service positions were more common among Baltimore City residents, while administrative/clerical, food services, and sales were more common among residents in Maryland's counties.

Figure 5. Top Five Occupations of TANF Caseheads in Current or Most Recent Job**



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
**p <.05, ** p<.01, *** p<.001*

Reasons for Leaving Most Recent Job and for Not Currently Working

As previously noted, the vast majority of study subjects had worked in the past, most of them within the 12 months immediately preceding the study. Relatively few (27.8%) were working at the time of the study, however, and all received TANF in June 2002. In the present time-limited, work-oriented welfare system, it is obviously essential to try to understand what lies behind statistics such as these. Thus, several survey questions focused on a sub-group of recipients of particular interest: payees who have prior work experience, but who were not working at the time of the survey. These respondents (n=600) were asked first to indicate the main reason they had left their most recent job and, second, the principal reason they were not working at present.

Statewide, non-employed payees most often cited health problems (17.2%) or pregnancy/maternity leave (16.0%) as the reason they left their last job, although there were significant differences by region. One quarter of respondents in the state's 23 counties cited their own health problems as the reason for leaving their most recent job, compared to only 13.1% of Baltimore City respondents. Being fired or laid off was reported by twice as many Baltimore City payees (12.3%) as county payees (6.2%)

Survey findings regarding why clients were not working at the time of the survey appear in Table 7. The most common reason, cited by about one in five clients statewide, was having a physical health, mental health or substance abuse problem. Next most common were childcare problems and pregnancy/newborn care.

Response patterns were significantly different by region. Baltimore City residents were more likely to report childcare problems, being in school or training, and lack of jobs or wages too low as the primary reason for their current unemployment. In the

counties, respondents were more likely to report health problems, wanting to stay home with children, family problems, transportation and lack of education or work experience.

Table 7. Principal Reason Not Currently Working for Caseheads Not Currently Employed**

	Baltimore City (n=386)	Maryland Counties (n=214)	Total (n=600)
Physical, mental health, or substance abuse problem	19.7% (76)	24.8% (53)	21.4% (128)
Childcare problem	15.5% (60)	12.1% (26)	14.4% (86)
Pregnancy or newborn care	11.4% (44)	10.3% (22)	11.2% (67)
No jobs available/wages too low	10.9% (42)	8.4% (18)	9.9% (59)
In school/training	9.6% (37)	5.1% (11)	8.0% (48)
Family responsibilities	5.7% (22)	8.4% (18)	6.6% (40)
Lack education/work experience	5.2% (20)	7.5% (16)	6.0% (36)
Prefer/need to stay home with children	2.6% (10)	6.1% (13)	4.0% (24)
Transportation problem	2.1% (8)	7.0% (15)	3.8% (23)
Other	17.4% (67)	10.3% (22)	14.8% (88)

Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Our examination of administrative data and survey-based measures of employment history among Maryland's single-adult TANF payees reveals few surprises for those familiar with the welfare literature. Although nine out of ten payees have a work history, three-quarters were not working at the time of the survey.

Respondents' most recent employment experiences indicate that the jobs they have held have generally netted low wages, few benefits, and little stability and advancement. Half of respondents reported that their current or most recent job lasted about four months. Although the job was typically full-time and a regular day shift, it only paid on average $7.00 to $8.00 per hour and more often than not lacked benefits and perceived opportunity for advancement.

Specific job types reflected those traditionally held by women receiving welfare – low-wage and low-skill jobs, particularly in the service industries. Both industries and occupations differ across regions, with Baltimore City recipients more likely to work in maintenance and cleaning or health services positions and County residents more often employed in food services, administration/clerical or sales positions.

Finally, health issues were commonly cited as reasons for leaving the most recent job and for not currently working. We find slight, but statistically significant differences across jurisdictions, with physical health, mental health, or substance abuse problems reported more often by County residents. While the previous chapter showed that children in County cases are on average a year younger than children in Baltimore City cases, this chapter reveals that childcare problems were cited more often by Baltimore City residents as a reason for not working.

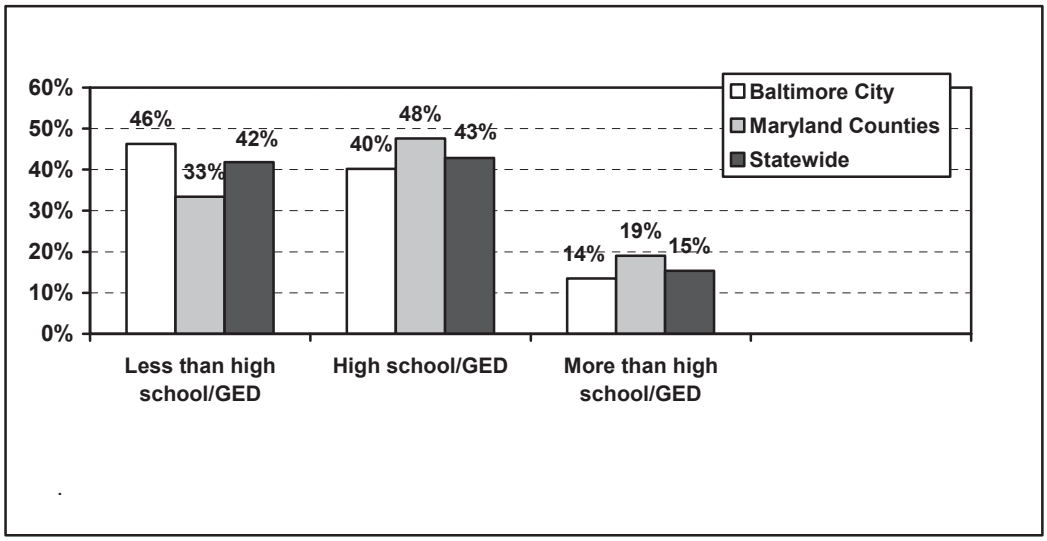
Findings: Assets for Employment

Programs and policies serving low-income families often seem to focus heavily, if not exclusively, on perceived deficits or barriers, ignoring or not taking adequate account of assets or strengths that the family and/or the adult head of household may possess. However, particularly now when helping families move from welfare to work is such an important program objective, interventions designed to promote that goal must consider client assets as well as client barriers. The preceding chapter showed that the large majority of Maryland's single-adult TANF case heads have recent work experience in jobs paying more than minimum wage and which, at least some of the time, provided some fringe benefits. While prior work experience is an asset, the fact alone does not provide enough information to be practically useful at the program planning or case management level. Using survey responses, this chapter looks at other potential employment assets, including educational attainment, participation in education, training and job preparation programs, and job skills.

Educational Attainment

As of summer 2002, three-fifths of Maryland TANF caseheads had a high school diploma or GED, and about 15% had at least some education beyond high school. However, as illustrated in Figure 6, there are significant differences between Baltimore City residents and those in Maryland's 23 counties. Maryland county payees generally reported higher levels of education than their Baltimore City counterparts.

Figure 6. Educational Level**



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
**p <.05, ** p<.01, *** p<.001*

Education, Training, and Job Preparation Programs

As shown in Table 8, following this discussion, three-fourths of TANF adults statewide indicated that they had taken part in educational, training or job preparation activities within the past year. Most often, the activity was some type of job search/job club or job readiness training. Baltimore City residents were significantly more likely to report participating in an education, training or job preparation program in the past year. Specifically, participation in GED training, specialized training, job readiness training, and work experience was significantly more common among Baltimore City payees than among those in Maryland's counties.

Table 8. Participation in Education, Training, and Job Preparation Programs in the Previous Year

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Education or Training Programs			
GED classes/training for GED exam***	27.7% (146)	16.2% (47)	23.6% (193)
Specialized training program**	36.4% (192)	25.4% (74)	32.5% (266)
College classes	14.4% (76)	12.7% (37)	13.8% (113)
Job Preparation Programs			
Job readiness training*	50.6% (267)	42.3% (123)	47.6% (389)
Job search program or job club	57.0% (301)	54.3% (158)	56.0% (459)
Work Experience Program*	27.7% (146)	20.7% (60)	25.3% (206)
Any of the above*	77.5% (409)	69.8% (203)	74.8% (612)

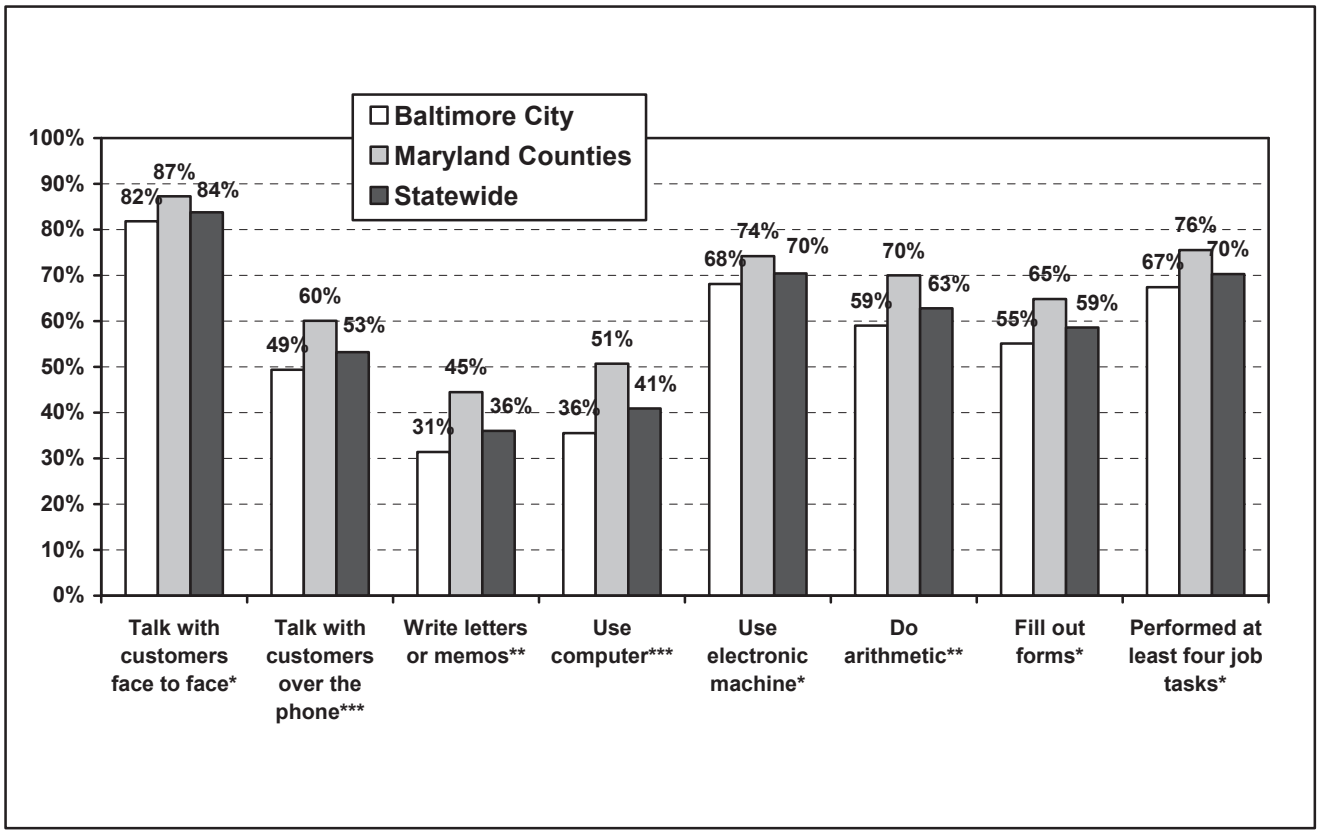
Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Job Skills

The final survey question regarding employment assets concerns the frequency with which clients carried out various tasks or used various skills in their current or most recent jobs. Specifically, clients were asked which of seven stated activities they performed on a regular basis, defined as having performed that function daily or weekly. Figure 7 depicts the results.

Overall and by a rather wide margin, talking with customers face-to-face was the most regularly and widespread task performed. Working with an electronic machine other than a computer and doing arithmetic were also commonly reported as being regular job tasks or activities. Seven out of ten payees had performed at least four of the seven tasks. County residents were more likely to report having performed each of the seven skills regularly than were City residents.

Figure 7. Performance of Job Tasks



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
**p<0.05, **p<0.01, ***p<0.001*

Our findings regarding the human capital assets of Maryland TANF recipients indicate that most have at least some basic qualifications for employment. Three-fifths of respondents have at least a high school diploma or equivalent and 15% of that group have some education beyond the high school level. In addition, a large majority indicated that they participated in an educational, training, or job preparation program in the past year. Education varied significantly across jurisdictions, with Baltimore City residents having lower levels of education and higher levels of participation in educational, training, and job preparation activities.

In terms of specific job skills, most payees have performed at least four of seven basic work tasks on a regular basis. The most commonly reported work activities are

consistent with the types of occupations discussed in the previous chapter, namely talking with customers face-to-face, using an electronic machine other than a computer, and doing arithmetic. Although there were no jurisdictional differences in employment history, we find that county residents were more likely to report having performed each of the seven job skills regularly than their Baltimore City counterparts.

Findings: Barriers to Employment

Logistical and Situational Challenges

As noted in the preceding chapter, it is important to take clients' assets and experiences into account when trying to assess their current situations and formulate a plan to assist them to successfully transition from welfare to work. At the same time, it would be foolhardy not to also recognize the many challenges that might also characterize their present situations and jeopardize the success of their welfare to work transitions. While the vast majority of Baltimore City recipients have some history of employment in a Maryland job covered by the Unemployment Insurance program, for example, it would be foolish to overlook the fact that nearly half (46%) have neither a high school diploma nor a GED.

Human capital challenges or barriers are not the only impediments to employment faced by low-income women, including those receiving cash assistance. In this section, we summarize findings concerning logistical and situational challenges as well as personal and family challenges.

Logistical and situational challenges include issues such as lack of transportation, unreliable childcare, and unstable housing which may limit a person's ability to maintain employment.

Transportation

Transportation has long been viewed as one major impediment to the ability of many low-income women to obtain and maintain employment. Recently, studies have documented a so-called spatial mismatch between the location of low-income families and the locations in which job growth has taken place. This has led to greater concern

about how transportation problems may be a challenge for clients who are or would like to be transitioning from welfare to work. The survey included several questions about payees' transportation situations and their perspectives on the extent to which transportation is problematic in their lives.

The data in Table 9 indicate that the majority of respondents do not have a driver's license (63.5%), do not own or have access to a car (67.3%), and do or would rely on public transportation as the primary mode of getting to work or work-related activities (60.4%). On average, respondents said it took them roughly three-quarters of an hour to commute to work or a work activity, including time needed to drop children at daycare. Perhaps surprisingly given the above findings, only about one in four said that transportation was a problem.

The statewide figures mask large differences between respondents from Baltimore City and respondents from the counties. Statistically significant differences exist on all transportation variables, some expected, but others not. Baltimore City residents were more than twice as likely to rely on public transportation for work-related commutes and, perhaps related to this, to report significantly longer commute times. On the other hand, Maryland county residents were significantly more likely to indicate a transportation problem that interfered with their ability to participate in work, education or training.

Table 9. Transportation Use and Problems

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Primary mode of transportation* **			
Drive self	10.1% (52)	36.7% (102)	19.4% (154)
Get ride	7.2% (37)	17.3% (48)	10.6% (85)
Bus/public transportation	74.6% (384)	33.8% (94)	60.4% (478)
Walk	4.3% (22)	5.4% (15)	4.7% (37)
Other	3.9% (20)	6.8% (19)	4.9% (39)
Length of commute (in minutes) to work or work activity* **			
Mean	52.4	39.6	47.9
Std dev	34.6	31.8	34.2
Does not have driver's license* **	73.7% (389)	44.8% (128)	63.5% (518)
Does not own/have access to car* **	76.3% (403)	51.0% (147)	67.3% (549)
Self-reported transportation problem* **	20.3% (107)	36.1% (104)	25.9% (211)

Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Childcare

By definition, all cases in our study contained at least one child under the age of 18 years at the time of selection into our sample. Most households included one or two children and about two of every three had at least one child under the age of six. Childcare thus remains an important issue to consider for single parent TANF households in the context of welfare to work transitions. We use both survey and administrative data to describe childcare patterns and problems and report our findings in Table 10.

First, using agency administrative data we determined that, among all families with at least one child under the age of 13 years, a little less than one quarter received a childcare subsidy at some point in the preceding 12 months. The survey data, however, indicate that twice as many respondents had used some form of non-parental care for their children in the past year. Among those who reported at least some regular, non-

parental care during the past year, about half said they had received a childcare subsidy.

Regardless of their answers about regular use of some type of child care (subsidized or unsubsidized) in the past year, all sample members with at least one child in the home under the age of 13 were asked if any problem related to child care had interfered with work, school or training within the past year. The majority said no, but about two of five said yes. In terms of specific childcare problems, lack of availability when needed was mentioned most often.

We also examined the childcare data by region, focusing on all cases with at least one child under age 13. There were no statistically significant differences between Baltimore City and the rest of the state in terms of self-reported childcare and subsidy use, or in the percentage of clients reporting that childcare problems interfered with work, school or training. Likewise, the administrative data show no difference in the recorded rate of subsidy receipt during the past 12 months.

There were a few notable differences in the types of childcare problems encountered. Families living in Maryland's 23 counties were much more likely to report cost and having a sick or disabled child as being problematic than their Baltimore City counterparts.

Table 10. Childcare Use and Problems by Jurisdiction

	Baltimore City (n=481)	Maryland Counties (n=269)	Total (n=750)
Received a Childcare Subsidy in the Past Year (Administrative Data)	22.5% (108)	24.5% (66)	23.2% (174)
Used Childcare During Past Year	37.2% (179)	39.0% (105)	37.9% (284)
Reported receipt of Childcare Subsidy in survey (as well as marked administratively)	50.3% (90)	52.9% (55)	51.4% (146)
Childcare Problems Interfered with work/school/training	39.2% (187)	42.9% (114)	40.5% (301)
Specific childcare problems			
Not available when needed	39.0% (73)	38.6% (44)	39.1% (118)
Cost**	16.0% (30)	31.3% (36)	21.9% (66)
Provider unavailable or unreliable	16.6% (31)	18.4% (21)	17.5% (53)
Sick or disabled child**	2.1% (4)	9.6% (11)	4.7% (14)
Worry about child neglect or abuse	4.8% (9)	3.5% (4)	4.3% (13)
Other	32.8% (61)	28.9% (33)	31.2% (94)

Sources: 2002 survey of single adult TANF cases in Maryland and 2002 Maryland administrative data on the TANF caseload.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002. Respondents could indicate multiple childcare problems.
** p <.05, ** p<.01, *** p<.001*

Housing Characteristics

Housing is another logistical or situational issue that can influence the likelihood that an adult's efforts to leave welfare for work will be successful. Several studies have concluded that housing-assisted families are more disadvantaged, have longer welfare histories, have difficulty finding and retaining employment, and have lower earnings (Kingsley, 1997; Newman and Harkness, 2002; Zedlewski, 2002). On the other hand, there is also some evidence that housing assistance may help promote employment and/or be associated with better employment and earnings outcomes (Ong, 1998; Sard, 2002). Not in question, however, is that there is considerable overlap between the TANF and housing-assisted populations. Nationwide, in the mid-1990s, to illustrate, about 30 percent of all cash assistance clients had some type of housing assistance and about half of all families with children residing in public or assisted housing received

cash assistance (U.S. General Accounting Office, 1998b and 1998c). Although there has been some question about the accuracy of self-reported data on housing assistance, the survey did include several questions concerning the important subject of housing. Results are presented in Table 11.

Statewide, a bit more than half of respondents said they did not receive any housing assistance (i.e., did not live in public housing or have a rent subsidy), but more than two-fifths indicated they were receiving this type of help. Subsidy receipt was reported almost twice as often as was residence in public housing. There was no jurisdictional difference in the rate of housing assistance, but there was a statistically significant difference in the type of assistance. Specifically, Baltimore City residents were almost three times as likely to report living in public housing as residents of Maryland's 23 counties.

The survey also asked questions regarding the stability of the family's housing over the past year. Overall, about one in five families experienced some housing instability, defined as having been evicted or having moved two or more times in the past year. Rates of housing instability did not differ by jurisdiction.

Table 11. Housing Characteristics

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Housing assistance* **			
Live in public housing	20.4% (106)	7.0% (20)	15.7% (126)
Receive rent subsidy	22.7% (118)	37.3% (106)	27.8% (224)
None	56.8% (295)	55.6% (158)	56.5% (454)
Unstable housing	18.8% (99)	22.3% (65)	20.0% (164)

Sources: 2002 survey of single adult TANF cases in Maryland
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
Unstable housing is defined as having been evicted or having moved two or more times in the past year.
**p <.05, ** p<.01, *** p<.001*

Neighborhood Characteristics

The final logistical issue addressed in the survey concerns the neighborhoods in which our TANF sample members reside. Although not as well-researched as individual level factors, community or neighborhood conditions likely also affect a family's ability to make a lasting transition from welfare-to-work. In particular, negative or stressful living conditions, such as high crime rates or many abandoned buildings, may limit a woman's choices in the types of employment she is able to accept or in the types of child care arrangements she would consider for her children.

Survey respondents were asked to rate their neighborhoods on several dimensions. Table 12, following this discussion, displays the results. The majority of respondents indicated that unemployment, drug use, and crime were problems in their neighborhoods. Over one-third of the sample indicated that their neighborhoods lacked a safe place for children to play. Baltimore City residents are significantly more likely to report problems in their neighborhoods than their counterparts in the 23 counties. The differences are quite large, with drug use, run-down buildings, and having no safe place for children to play reported twice as often by City residents.

Table 12. Neighborhood Characteristics

	Baltimore City (N=528)	Maryland Counties (N=291)	Total (N=819)
Unemployment **			
Not a problem	33.1% (167)	45.0% (121)	37.3% (288)
Definitely a problem	63.8% (337)	51.0% (148)	59.2% (485)
Drug use***			
Not a problem	25.8% (133)	50.7% (140)	34.5% (273)
Definitely a problem	72.5% (383)	47.0% (136)	63.4% (519)
Crime***			
Not a problem	43.3% (223)	55.7% (156)	47.7% (379)
Definitely a problem	55.3% (292)	43.0% (124)	51.0% (416)
Run-down buildings***			
Not a problem	49.1% (259)	81.9% (235)	60.6% (494)
Definitely a problem	51.0% (268)	18.0% (52)	39.1% (320)
No safe area for children to play***	42.5% (223)	22.3% (64)	35.4% (287)

Sources: 2002 survey of single adult TANF cases in Maryland
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Personal and Family Barriers to Employment

Although not researched as frequently as demographic, human capital, and logistical barriers, it is commonly believed that a broad array of other personal and family struggles and stressors also can play a role in whether or not and how successfully a single parent is able to leave welfare for work. As Wolfe and Hill (1995) point out, for example, a woman's health and that of her children will influence the type of employment she can accept, the number of hours she can spend earning money outside the home, and the value she will place on health insurance and other benefits such as paid sick leave. For program managers, reliable data on these types of barriers has historically been limited at best. The next few pages present our survey results regarding health, mental health, alcohol and drug problems, and family violence barriers among Maryland's single-adult TANF caseload.

Physical Health & Functioning

Studies consistently show that about one in 10 cash assistance recipients report they are unable to work because of a physical disability or serious medical condition. In contrast, professional estimates of the proportion of recipients with a work-limiting health condition range from roughly 15% to 30% (Acs and Loprest, 1999; Adler, 1993; Loprest and Acs, 1995; Olson and Pavetti, 1996). It is likely that definitional differences account for some of the variation in these estimates. Table 12, following, summarizes several physical health measures for our TANF caseheads.

The first row of Table 13 shows that participants in our survey generally perceived themselves to be in good overall health; seven of 10 rated their health as excellent, very good or good. Only one in four assessed their health as being only fair or poor. On the other hand, nearly two of five respondents reported having a chronic health problem or medical condition.

Although self-reported health status has been shown to be a reasonably good indicator of actual health status, respondents were also asked to complete the Physical Functioning Scale of the SF-36 Health Survey. The scale captures self-reported ability to perform vigorous activities such as running or lifting heavy objects, moderate activities such as moving a table, and daily physical activities such as carrying groceries, climbing stairs, walking, bending and kneeling (Ware, Snow, Kosinski, and Gandek, 2000). As is depicted in the middle of Table 13, using this measure, roughly two of every five sample members have a physical functioning level below average for the U.S. general population.

Calculating "physical health problem" as a self-rating of "fair" or "poor" and a physical functioning score in the lowest quartile, the approach used in the University of Michigan's Women's Employment Study, we find that one-fifth of the sample can be considered to have a physical health problem. This rate is similar to findings from other studies. Danziger and colleagues (2000), for example, found that 19.4% of women surveyed in the aforementioned Women's Employment Study had a physical health problem. Moffitt and Cherlin (2002) found that 26% of welfare customers in the Three City Study had a health condition that limited or prevented work.

Jurisdictional differences exist for two of the five health variables examined. While there were no City-county differences in terms of self-ratings of health, nearly half of county participants scored below average on the Physical Functioning Scale compared to two-fifths of Baltimore City residents. Similarly, county participants were significantly more likely to rate as having a physical health problem than were their Baltimore City counterparts.

Table 13. Payees' Physical Health

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Overall Health (self assessment)			
Excellent or very good	48.0% (253)	37.4% (108)	44.3% (361)
Good	26.0% (137)	29.8% (86)	27.4% (223)
Fair or poor	26.0% (137)	32.9% (95)	28.4% (232)
Physical Functioning* [b]			
Below average for US population	40.1% (206)	47.6% (137)	42.8% (343)
Physical Health Problem (researcher defined)** [c]	18.1% (93)	26.1% (74)	20.9% (167)
Physical Health Interfered with Work in Past year ***	23.3% (123)	38.3% (111)	28.6% (234)

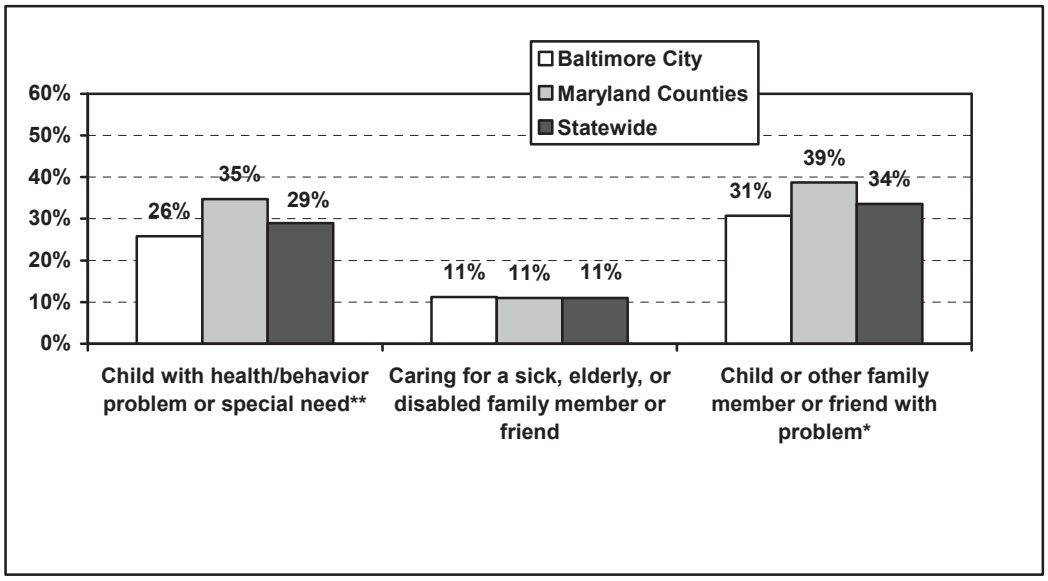
Sources: 2002 survey of single adult TANF cases in Maryland
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*
[a] Tabulated only for cases with female caseheads (n=514 for Baltimore City and n=279 for Maryland counties).
[b] Physical functioning was determined following the methodology of the Physical Functioning Scale of the SF-36 Health Survey, incorporating norms based on age and gender.
[c] Following the methodology of the University of Michigan's Women's Employment Study, a case head was defined to have a physical health problem if overall health was poor or fair and physical functioning was in the lowest quartile.

In addition to the payee's own health, the health of his/her children and other family members may affect his/her ability to work. Caring for children, especially a sick or disabled child, can produce emotional strain as well as expenses such as special diets, clothes, transportation, and medical and respite care that may need to be factored into the post-welfare budget (Breslau, Salkever and Staruch, 1982; Salkever, 1982; Wolfe and Hill, 1995). Nationally, it is estimated that six percent of children under the age of 18 have a disabling, chronic health condition and that, for between 0.5% and 3.0%, the condition is severely disabling (Newacheck and Taylor, 1992; Wenger, Kaye and LaPlante, 1996). However, low-income children have as much as a 40% higher risk of chronic illness or disability (Newacheck and McManus, 1988) and, among families receiving cash assistance, an estimated 13% to 20% include a child with a functional impairment (Loprest and Acs, 1995; Meyers, et al., 1998; Pavetti and Duke, 1995).

Figure 8, following this discussion, displays data on the extent to which Maryland's TANF case heads reported family health issues. Approximately three out of ten respondents have a child with a health or behavioral problem or special need. These problems were significantly more common among county cases than Baltimore City cases.

About one in 10 respondents reported caring for a sick, elderly, or disabled family member. Considering all family members, about one-third of case heads indicated that there is a child or another family member for whom they may need to provide special care.

Figure 8. Health Problems Within Case



Sources: 2002 survey of single adult TANF cases in Maryland
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002.
** p <.05, ** p<.01, *** p<.001*

Mental Health

Another potential barrier to employment about which rich, reliable data are generally not available is mental health. The nature of the relationships among poverty, psychopathology and psychological distress are complicated, but the weight of several decades of research evidence clearly indicates that mental health problems are more prevalent in low-income populations. Moreover, rates of psychological distress and depression tend to be higher among women receiving welfare than among women of similar income who are not receiving welfare (Krinitzky, 1990; Zill, Moore, Nord and Stief, 1991). One study found that, among women in a welfare-to-work program, 42% met the criteria for clinical depression (Moore, Zaslow, Coiro, Miller and Magenheim, 1995). Similarly, data from an AFDC-era Maryland study found that more than half of

single mothers entering the welfare rolls were at risk for clinical depression (Kalil, Born, Kunz and Caudill, 2001).

To assess possible mental health barriers among single-adult TANF payees, several measures were included in the survey. Figure 9, following this discussion, summarizes our findings regarding mental health issues, other than chemical dependence.

The first set of columns displays data from the K6 Psychological Distress Scale (Furukawa, Andrews, Kessler, and Slade, 2003) on which scores range from 0 to 24. Based on normative data from the National Household Survey on Drug Abuse (NHSDA) and the National Health Interview Survey (NHIS), individuals with a total score of 13 or higher are classified as having serious psychological distress in the past 30 days. Our results indicate that a little less than one-fifth of our customer sample meet or exceed this threshold and thus can be considered to be experiencing serious psychological distress.

The second set of columns presents findings related to major depression, the probability of which was determined using the Composite International Diagnostic Interview Short Form (CIDI-SF). Individuals with three or more of seven symptoms of major depression in the past year are classified as being at probable risk of major depression, as are individuals who volunteer that they are on medication or anti-depressants. Using this measure, about one in four respondents scored as being at probable risk.

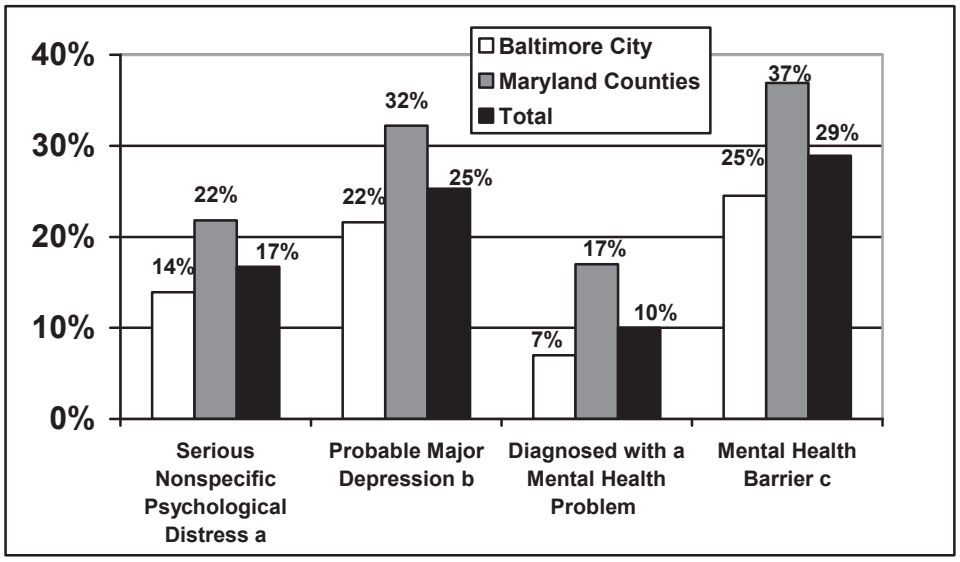
Respondents were also asked if they have ever been diagnosed with a mental health problem. Results from this question, displayed in the third set of columns,

indicate a much lower rate of diagnosed mental health problems, with one in ten reporting such a diagnosis.

The final set of columns of Figure 9 presents a combined mental health measure on which respondents are coded as having a mental health barrier if they have a high level of non-specific psychological distress in the past 30 days or probable major depression in the past year. In total, we find that almost three of ten case heads likely have a mental health problem that may be a barrier in moving from welfare to work.

As with our measures of physical health, we found statistically significant differences between regions in our mental health measures. County payees are significantly more likely to report having had a mental health problem diagnosis. They also are more likely to indicate current psychological distress or probable major depression, and to be rated as having a mental health barrier.

Figure 9. Mental Health



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002
**** p <.05, ** p<.01, *** p<.001***

[a] Categories of nonspecific psychological distress were assigned on the basis of on the K6 psychological distress scale, with a range of 0 to 24, and on normative data from the National Household Survey on Drug Abuse (NHSDA) and the National Health Interview Survey (NHIS). Individuals with a total score of 13 or higher classified as having serious psychological distress.

[b] The probability of major depression was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of major depression are classified as being at probable risk of major depression. Individuals who volunteer that they are on medication or anti-depressants also are classified as being at probable risk of major depression.

[c] Defined as having a high level of nonspecific psychological distress or probable major depression.

Chemical Dependence

Chemical dependence or substance abuse has long been cited as a major barrier to employment (French, Zarkin, Hartwell, and Bray, 1995; Kaestner 1998). However, obtaining reliable estimates of the prevalence of substance abuse problems among the welfare population remains a difficult task. The stigma, illegality and often secretive nature of substance abuse results in widely varying estimates of its prevalence among both the general population and the welfare population. Olson and Pavetti (1996), examining a number of studies, put the range from 6.6% to 37% of those

receiving welfare. Grant and Dawson (1996) cite estimates at the lower end. They found that of the more than 42,000 welfare recipients from the National Longitudinal Alcohol Epidemiological Survey, 6.4%-13.8% were heavy drinkers, 3.8%-9.8% used drugs, 4.3%-8.2% abused or were dependent on alcohol, and 1.3%-3.6% used other substances. These figures are similar to those reported for the general U.S. population (U.S. Dept. of Health and Human Services, 2002).

For this study of Maryland's TANF population, we assessed substance dependence via the Composite International Diagnostic Interview – Short Form (CIDI-SF) that asks respondents a series of questions regarding their use of alcohol and other drugs in the past year. An individual was classified as "chemically dependent" if three or more of the seven symptoms of dependence were reported. The first part of Table 14, following this discussion, presents our results from these measures.

Statewide, only 5% of case heads scored as chemically dependent on the CIDI-SF. Drug dependence was more common than alcohol dependence and there were no significant differences between Baltimore City residents and those in the counties. The Michigan Women's Employment Study found similarly low rates for both alcohol dependence (2.7%) and drug dependence (3.3%, Danziger, et al., 2000).

Readers may be surprised to find such low rates of chemical dependence among our customer sample. However, it should be noted that these measures are based solely on self-report. In addition, respondents were only asked about alcohol and drug use in the past year. In fact, as the last three rows of Table 14 indicate, lifetime rates of self-reported chemical dependence are much higher. When asked if they had ever been diagnosed with **any** substance abuse problem, almost one in ten replied in the

affirmative. Most commonly, respondents reported having had a drug problem diagnosis rather than an alcohol-related diagnosis.

The only significant regional difference relates to alcohol-related diagnosis. TANF payees residing in Maryland counties were significantly more likely to report having been diagnosed with an alcohol problem than were payees living in Baltimore City.

Table 14. Chemical Dependence

	Baltimore City (n=528)	Maryland Counties (n=291)	Total (n=819)
Alcohol Dependence [a]	1.5% (8)	1.7% (5)	1.6% (13)
Drug Dependence [b]	4.2% (22)	2.8% (8)	3.7% (30)
Any Chemical Dependence [c]	5.5% (29)	4.2% (12)	5.0% (41)
Diagnosed with Alcohol Problem**	1.0% (5)	4.5% (13)	2.2% (18)
Diagnosed with Drug Problem	7.4% (39)	7.0% (20)	7.3% (59)
Diagnosed with Any Substance Abuse Problem	8.0% (42)	9.0% (26)	8.3% (68)

Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in June 2002
** p <.05, ** p<.01, *** p<.001*

[a] The probability of alcohol dependence was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of alcohol dependence are classified as being at probable risk of alcohol dependence.

[b] The probability of drug dependence was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of drug dependence are classified as being at probable risk of drug dependence.

[c] Probable alcohol or drug dependence.

Domestic Violence

The final set of personal and family barriers explored in this chapter concerns family violence. During federal welfare reform debates in the mid-1990s, the point was made that availability of welfare is particularly important to women trying to escape violent domestic situations. Many expressed concern that the stricter work requirements of the new cash assistance program, in particular, would limit the options of abused women attempting to leave violent partners. Partially in response to these concerns, the Family Violence Option

(FVO) was included in the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA). Maryland, like the majority of states, adopted the FVO which permits exempting domestic violence victims from work and other program requirements as well as making referrals to or providing appropriate counseling and support services to victims.

Research demonstrates that domestic violence is more common among women receiving cash welfare than among women in general (Tjaden and Thoennes, 1998; U.S. General Accounting Office, 1998a). In addition, surveys of staff working with welfare recipients as well as victims themselves indicate that current abusive relationships may limit a woman's ability to obtain and retain employment (U.S. General Accounting Office, 1998a; Sheppard & Pence, 1988).

We assessed the prevalence of domestic violence among Maryland's single-adult TANF cases using a revised version of the Conflict Tactics Scale from the University of Michigan's Women's Employment Study. The scale assessed both lifetime and past year rates of violence and threats from romantic partners.[17] Figure 10 shows our results.

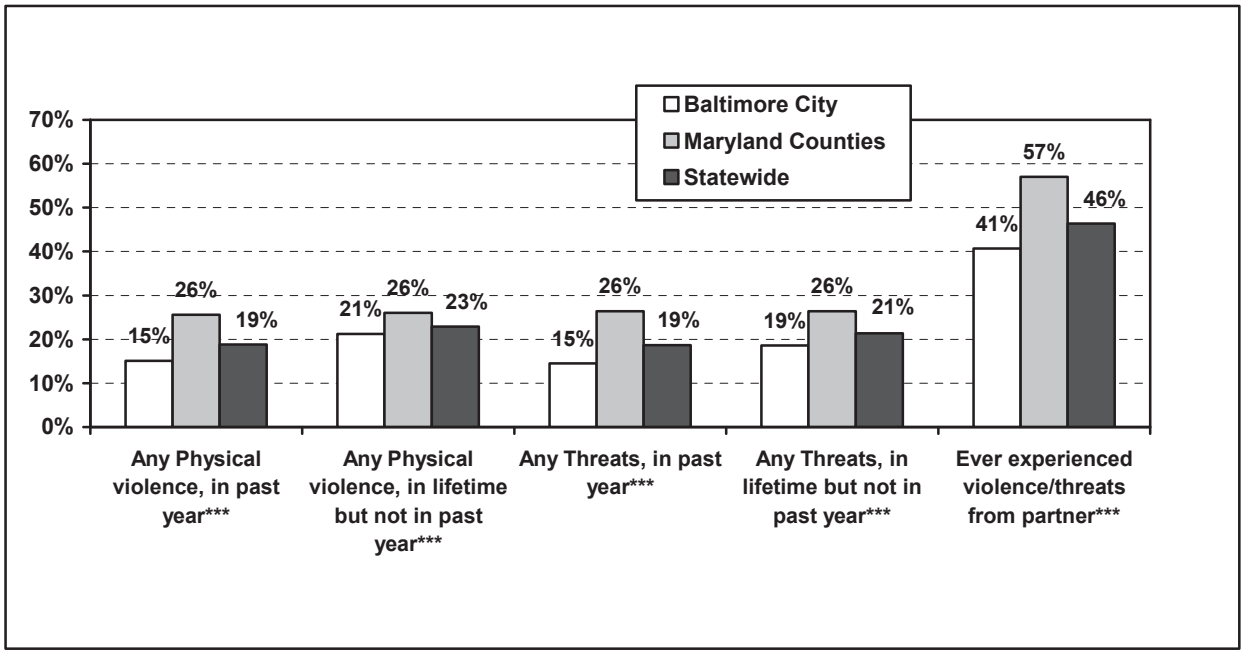
Almost half of Maryland's female TANF case heads reported experiencing violence or threats from a romantic partner at some point in time. One in five indicated they had experienced violence or threats in the past year. A similar percentage said that they had experienced such events but not within the previous twelve months.

Female case heads living in the counties were much more likely to report experiencing physical violence or threats from their partners within the past 12 months

[17] Physical violence includes pushing, grabbing, shoving, slapping, kicking, biting, hitting, beating, choking using or threatening use of a weapon, or forcing sexual activity. Threats include coercive or physical threats, such as threatening to hit with a fist or object, throwing anything that could cause harm, threatening to take children away, threatening to harm individual or friends, threatening to turn into child

and during their lifetimes. Perhaps most notably, nearly six in ten county residents reported experiencing violence or threats in their lifetime, compared to four in 10 of City residents.

Figure 10. Experience with Domestic Violence



Source: 2002 survey of single adult TANF cases in Maryland.
Note: Data are weighted to be geographically representative of Maryland's single-adult TANF caseload in *June 2002*
**p<0.05, **p<0.01, ***p<0.001*

This final and longest Findings chapter provides a large amount of data on potential barriers to employment among our single-adult TANF customer sample. Consistent with previous studies, we find that both logistical and personal/family barriers are not uncommon. One-fourth of respondents indicated that they have difficulty with transportation to work or work-related activities. Among those with at least one child under the age of 13, three-fifths reported that childcare is a problem, particularly finding care that is available when needed.

protective services or welfare agency, harassing at work or school, or coercing into doing illegal activities.

In terms of their living conditions, one out of five families experienced housing instability in the previous year. This instability, defined as having moved two or more times or being evicted, may make it more difficult for TANF payees to participate regularly in a work activity, to seek employment, or to maintain employment. Similarly, most respondents indicated that their neighborhoods are experiencing a variety of problems including unemployment, drug use and crime. These poor neighborhood conditions may indirectly affect the welfare-to-work transitions of the (primarily) single mothers who make up our sample via the hours they feel safe working or the types of childcare arrangements they feel comfortable with for their children.

Health and mental health concerns for both the adult head of household and other household members were also found to be potential employment barriers for a significant minority of our customer sample. Three-fifths of respondents scored below average in physical functioning and one-fifth were rated as having a physical health problem. Child health problems were even more common, with three out of ten TANF caseheads indicating that they have a child with a health problem, behavior problem, or special need.

Consistent with previous studies, our data utilizing standardized measures of depression and psychological distress reveal high rates of potential mental health barriers among our TANF customer sample. Three out of ten payees were rated as having a potential mental health barrier, with one-quarter reporting probable major depression in the past year. It is important to note that rates of mental health problem diagnoses were much lower; only 10% of our sample indicated that they had ever received such a diagnosis.

In contrast, lifetime diagnoses of drug and alcohol problems were almost twice as common as current “probable chemical dependence” scores on the standardized measures included in the survey. While only 5.0% of respondents scored as having a chemical dependence problem in the previous year, 8.3% indicated that they have been diagnosed with having such a problem. Drug dependence was reported more than alcohol dependence and in general, the rates in our study are similar to those reported in other studies of welfare recipients.

Of all the personal and family barriers discussed in this chapter, domestic violence was the most commonly reported by far. Almost half of Maryland’s female TANF recipients indicated that they have experienced violence or threats from a partner in their lifetime. For one-fifth of respondents, these events occurred within the past year.

In sum, our results concerning rates of the various logistical and family barriers to employment hold few surprises for those familiar with the literature. However, our findings concerning regional variation are somewhat surprising, given commonly held assumptions about welfare caseloads in large urban areas. Specifically, we find that, with the exception of housing stability and neighborhood characteristics, rates of employment barriers are higher among Maryland County TANF recipients than among Baltimore City recipients.

Conclusions

The previous findings chapters have presented a wealth of information about the lives and circumstances of Maryland single-adult TANF recipient families. These data reveal a general profile of the current caseload that closely resembles profiles from other studies of welfare populations. The majority of welfare cases in our sample are headed by a never-married African-American woman in her early thirties. Typically these cases include one or two children, with the youngest child being about five years old. On average, these families are neither brand new to the welfare rolls, nor long-term recipients, having received assistance for two out of the previous five years. Less than 10% of sample caseheads have reached the 60-month time limit.

For policy makers and program managers in particular, what do our results suggest about the employment and self-sufficiency prospects of Maryland's single-adult welfare population? Key conclusions from these analyses include the following:

1. **Most TANF recipients are prepared for employment in terms of education, previous work experience, and job skills. However, their work experience and job skills have come typically from low-wage and low-skill jobs.**

Three-fifths of respondents have at least a high school diploma or GED and four-fifths indicate that they have worked at least 50% of the time since they turned 18. While most TANF caseheads have performed four or more common job tasks on a regular basis, it is important to note that this experience has been gained in primarily low-skill, low-wage jobs with few benefits and little opportunity for advancement. On the positive side, our findings regarding the human capital assets of Maryland's TANF recipients suggest that most have the basic prerequisites for employment. The

challenge for these families and the welfare agency attempting to assist them is to obtain and maintain employment that will be sufficient to support their families and offer them opportunities to move to self-sufficiency.

2. Families reported a wide variety of potential barriers to employment. While problems are not uncommon, they are generally not pervasive or universal.

Consistent with previous studies, we find that Maryland's TANF families are experiencing a variety of logistical and personal challenges to employment. It is important to note, however, that except for poor neighborhood conditions, no barrier is reported by a majority of the sample. Table 15 summarizes the most common challenges. For policy makers and program managers, these results suggest that agency resources devoted to "barrier removal" would be best directed to dealing with the most commonly reported barriers, including childcare, payee health, child health, and transportation.

A second conclusion is that the need for individual family assessment and casework remains. Although the majority of families have at least one barrier to employment, the specific barrier or combination of barriers that are present varies. Caseworkers must still assess each family's situation in order to identify the combination of services needed to move them from welfare to work.

The third conclusion suggested by the data in Table 15 is that effective resolution of many of the more commonly reported problems (e.g., medical or mental health problems of casehead or family member, domestic violence) clearly will not be achieved solely by the provision of "welfare-to-work" services. Rather, these complex issues require inter-agency collaboration, coordination, intervention, and ongoing feedback

mechanisms. For example, two-fifths of Maryland TANF recipients with a child under the age of 13 indicated that childcare problems had interfered with work-related activities in the previous year. Many of the most commonly reported childcare problems, such as care not being available when needed or the provider was unreliable, may be beyond the scope of the welfare agency to address by itself. Thus, the welfare system may be ultimately accountable for moving these families from welfare to work, but assistance from other community partners to address many of the problems, which stand in the way of achieving that goal, will be needed.

Table 15. Summary of Potential Employment Barriers among Single-Adult TANF Cases.

Baltimore City (n = 528)		Maryland Counties (n = 291)		Total (n = 819)	
Perceived problem neighborhood characteristics	64.5%[a***]	Child care	42.9%[b]	Perceived problem neighborhood characteristics	56.3% [a]
Less than high school education	46.4%[***]	Perceived problem neighborhood characteristics	40.6% [a]	Less than high school education	41.8%
Child care	39.2%[b]	Child or family member health	38.7%[c]	Child care	40.5%[b]
Child or family member health	30.7%[c*]	Payee physical health	26.1% - 38.3% [e]	Child or family member health	33.6%[c]
Payee mental health [*]	14.8% - 24.5% [d**]	Payee mental health	18.5% - 36.9% [d]	Payee mental health	16.2% - 28.8% [d]
Payee physical health [*]	18.1% - 23.3% [e*]	Transportation	36.1%[f]	Payee physical health	20.9%- 28.6% [e]
Transportation [*]	20.3%[f**]	Less than high school education	33.3%	Transportation	25.9% [f]
Unstable housing	12.4% - 18.8% [g]	Unstable housing	16.6% - 22.3% [g]	Unstable housing	14.0% - 20.0% [g]
Severe physical violence in past year	11.5%	Severe physical violence in past year	20.7%	Severe physical violence in past year	14.8%
Chemical dependence	4.0% - 8.0% [h]	Chemical dependence	1.7% - 9.0% [h]	Chemical dependence	3.2% - 8.3% [h]
Any of the above	93.6%	Any of the above	94.8%	Any of the above	94.0%
Mean number of barriers**	3.3	Mean number of barriers**	3.8	Mean number of barriers**	3.5

Source: 2002 survey of single adult TANF cases in Maryland.

Notes: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown.

* p < .05 ** p < .01 *** p < .001

[a] At least one neighborhood characteristic is perceived by case head to be a big problem.

[b] Tabulated only for cases with children under age 13 (n=750).

[c] Cases with a child with health, behavioral, or special need or those caring for an elderly, disabled, or sick family member or friend.

[d] Low estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year. Higher estimates are researcher calculations based on high level of nonspecific psychological distress or probable major depression.

[e] Low estimates are researcher calculations based on poor or fair overall health and physical functioning in the lowest quartile. High estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year.

[f] Self-reported problems that prevented case head from participating in work, education, or training during the past year.

[g] Low estimates are based on self-reported problems that prevented case head from participating in work, education, or training during the past year. Higher estimates are researcher calculations based on having been evicted or moving two or more times in the past 12 months.

[h] Low estimates are researcher calculations of probable alcohol or drug dependence. High estimates are based on self-reported lifetime diagnosis of an alcohol or drug problem.

3. **Barriers to employment among Maryland's single-adult TANF caseload vary significantly by jurisdiction. In general, human capital barriers are more common among Baltimore City residents while logistical and personal challenges are more common among residents of Maryland's 23 counties.**

A final important distinction in our examination of the characteristics and circumstances of the current cash assistance caseload in Maryland is between cases located in Baltimore City and those in the state's 23 counties. This is a very important distinction in Maryland and elsewhere because, increasingly, cash assistance cases are concentrated in the nation's largest cities. To illustrate, the 89 U.S. counties that contain the nation's 100 largest cities contained roughly one-third of the nation's population in 1999, but their share of the national welfare caseload grew from 47.5% in 1995 to 58.1% in 1999 (Allen and Kirby, 2000). Moreover, a Brookings Institution survey of 26 states found that, in most of them, long-term adult-headed cases were even more concentrated in urban areas than were caseloads generally (Waller and Berube, 2002). The implications of this concentration are many, but perhaps chief among them is that a state's overall success in achieving required TANF performance measures and goals depends ever more heavily on actions taken and results achieved in its major cities and urban areas.

Our findings concerning regional variation among Maryland's TANF population are somewhat surprising, given commonly held assumptions about welfare caseloads in large urban areas. As Table 15 shows, we find statistically significant differences between Baltimore City and the 23 Counties on most barriers. Human capital barriers, such as having less than a high school education or having performed fewer than four common job tasks, and problem neighborhood characteristics are more common among

Baltimore City's TANF recipients. In contrast, County payees report higher rates of physical and mental health concerns for the payee and other family members, domestic violence and transportation problems. For policy makers and program managers, these results provide a strong argument for maintaining some degree of local flexibility in program planning and implementation. They further suggest that Baltimore City resources may need to be directed more towards building human capital among the TANF caseload, whereas County resources should be spent more on dealing with health concerns and transportation issues, including the often limited access to public transportation.

4. **In sum, our results provide little evidence that the profile and circumstances of Maryland's single-adult TANF recipient families have changed over the course of welfare reform.**

Perhaps the most important conclusion from the results presented herein is that the profile and circumstances of today's single-adult TANF families has changed very little over the course of reform. In general, the TANF recipients in our sample have the basic prerequisites for employment as well as history of participating in the labor force. For a variety of reasons, life events such as a job layoff, pregnancy or an emerging health problem have brought them to the welfare rolls. The problems they face in transitioning from welfare to work are varied, but the caseload has a whole does not appear to have more of these barriers than those receiving assistance in earlier years. For policy makers and program managers, as well as researchers, the remaining challenge is finding innovative and effective strategies for removing barriers and moving families

from the welfare rolls to financial self-sufficiency adequate enough to allow them to weather life's inevitable storms.

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Appendix A
Methodological Details

Calculation of Survey Weights

To ensure that the reported results accurately reflect the universe of Maryland work-mandatory TANF cases, we base our analyses on weighted data. The original sample was stratified on jurisdiction, with half of the cases originating from Baltimore City and the remaining half from the 23 counties that comprise the balance of the state. The final survey weights correct for this stratification. Specifically, we used normative weighting. Baltimore City cases are weighted by a factor of 1.3069306, and County cases by 0.7012048. These weights ensure that, in the final sample, Baltimore City represents 64.5% of the total, as it does in the June 2002 single-adult TANF caseload.

Although we found some statistically significant differences between survey respondents and non-respondents, we chose not to attempt correcting these differences through weighting. We based this decision on two factors. First, such weighting assumes that if you correct for known sample differences on factors such as ethnicity and age, you will automatically correct for unknown sample differences on factors notmeasured by the survey. We did not believe this assumption is justified, and were concerned that, in attempting to correct for some differences, we would create others.

Second, the ultimate test of the representativeness of the survey sample is a comparison with the population of interest, not the sub-group of non-respondents. Our administrative data allow such a comparison. As can be seen in Table A-1, we find little difference between our survey respondents and the universe of Maryland work-mandatory TANF cases in June 2002.

Table A-1

	Weighted Respondents (n=819)	ASPE Universe (n=15,867)	Difference
Payee age			
less than 18	0.0%	0.1%	-0.1
18-20	8.0%	6.8%	1.2
21-25	28.9%	26.7%	2.2
26-30	17.3%	18.7%	-1.4
31-35	15.8%	16.1%	-0.3
36 and older	30.1%	31.6%	-1.5
Mean	30.5	30.9	-.4
Std Deviation	9.1	9.0	
Residence			
Baltimore City	64.5%	64.5%	0
County	35.5%	35.5%	0
Race			
African American	86.1%	83.8%	2.3
Caucasian	13.1%	14.8%	-1.7
Other	0.9%	1.4%	-0.5
Marital Status			
Divorced	3.1%	3.4%	-0.3
Married	3.0%	2.7%	0.3
Never Married	84.6%	81.5%	3.1
Separated	8.3%	11.2%	-2.9
Unknown	0.5%	0.7%	-0.2
Widowed	0.3%	0.5%	-0.2
Gender			
Female	96.8%	96.6%	0.2
Male	3.2%	3.4%	-0.2
Age at First Birth			
Under 16	9.8%	8.4%	1.4
16-20	50.1%	52.5%	-2.4
21-25	20.7%	20.8%	-0.1
26-30	10.3%	10.1%	0.2
31 and over	9.3%	8.1%	1.2
Mean	21.6	21.5	0.1
Std Deviation	5.8	5.5	
Size of AU			
2	46.5%	45.2%	1.3
3	32.3%	29.3%	3.0
4 or more	21.2%	25.5%	-4.3
Mean	2.9	3.0	-0.1
Std Deviation	1.1	1.2	

	Weighted Respondents (n=819)	ASPE Universe (n=15,867)	Difference
Number of Children			
1	46.5%	45.2%	1.3
2	32.3%	29.3%	3.0
3 or more	21.3%	25.6%	-4.3
Mean	1.9	2.0	
Std Deviation	1.1	1.2	-0.1
Age of Youngest Child			
Less than 12 months	17.6%	17.3%	0.3
1-4 years	43.1%	42.6%	0.5
5-9 years	22.4%	21.6%	0.8
10-15 years	14.0%	15.7%	-1.7
16-18 years	2.9%	2.8%	0.1
Mean	5.0	5.2	-0.2
Std Deviation	4.5	4.6	

Appendix B
Non-Response Analysis

A variety of administrative data were used to assess the similarity of survey respondents and non-respondents. Table B-1 presents our comparison of demographic and household characteristics. The data indicate that respondents and non-respondents generally resemble each other. However, we do find statistically significant differences on five variables: payee age; payee race; payee marital status; assistance unit size; and number of children. Respondents are, on average, younger than non-respondents, have fewer children, and have smaller assistance units. We also find a higher proportion of African-Americans and never married individuals among those who completed the survey.

Table B-1. Demographic and Household Characteristics

Variable	Respondents (n=819)	Non-respondents (n=327)	Total (n=1,146)
Payee Gender			
Female	96.6% (791)	94.8% (310)	96.1% (1101)
Male	3.4% (28)	5.2% (17)	3.9% (45)
Payee Race*			
African-American	82.4% (664)	79.2% (255)	81.5% (919)
Caucasian	16.5% (133)	17.1% (55)	16.7% (188)
Other	1.1% (9)	3.7% (12)	1.9% (21)
Payee Age			
Mean*	30.5 years	31.7 years	30.8 years
Standard Deviation	9.1 years	9.1 years	9.1 years
Payee Age at First Birth			
Mean	21.7 years	22.1 years	21.8 years
Standard Deviation	5.7 years	6.1 years	5.8 years
Payee Marital Status*			
Divorce/Separated/Widowed	13.6% (113)	15.6% (51)	14.1% (164)
Never Married	82.6% (675)	78.2% (255)	81.4% (930)
Married	3.3% (27)	4.9% (16)	3.8% (43)
Unknown	0.5% (4)	1.2% (4)	0.7% (8)
Jurisdiction			
Baltimore City	64.5% (528)	66.6% (221)	65.1% (749)
Maryland Counties	35.5% (291)	33.4% (111)	34.9% (402)
Number of Children			
Mean*	1.9	2.0	1.9
Standard deviation	1.1	1.2	1.1
Assistance Unit Size			
Mean*	2.9	3.0	2.9
Standard deviation	1.1	1.2	1.1
Age of youngest child			
Mean	4.9 years	5.2 years	5.0 years
Standard deviation	4.5 years	4.6 years	4.5 years

Source: 2002 Maryland administrative data on the TANF caseload. Data are not weighted.
**p<5 **p<.01 ***p<.001*

Table B-2 displays data on historical utilization of public programs among survey respondents and non-respondents. We find no statistically significant differences in historical participation in TANF, Food Stamps, Medical Assistance, or Child Care Assistance.

Table B-2. Public Program Participation

Variable	Respondents (n=819)	Non-respondents (n=327)	Total (n=1,146)
TANF Receipt			
# of months out of last 60			
Mean	24.0	24.4	24.1
Standard deviation	16.5	16.7	16.5
# of months of time-limited assistance			
Mean	27.1	28.2	27.4
Standard deviation	18.8	19.6	19.1
Food Stamps - # of months out of last 12			
Mean	8.6	8.6	8.6
Standard deviation	4.1	4.0	4.0
Medical Assistance – # of months out of last 12			
Mean	3.9	4.0	4.0
Standard Deviation	3.8	3.7	3.8
Child Care Subsidy – # of months out of last 12			
Mean	1.0	1.0	1.0
Standard Deviation	2.5	2.4	2.5

Source: 2002 Maryland administrative data on the TANF caseload. Data are not weighted.
**p<5 **p<.01 ***p<.001*

Our final comparisons concern historical employment in Maryland jobs covered by the Unemployment Insurance program. Table B-3 displays results from these analyses. We find no significant differences in rates of employment. However, survey respondents had significantly lower earnings than non-respondents.

Table B-3. Employment in Maryland UI-Covered Jobs

Variable	Respondents (n=819)	Non-respondents (n=327)	Total (n=1,146)
Ever Employed	92.3% (756)	90.8% (297)	91.9% (1053)
Preceding 8 Quarters			
Percent employed	73.4% (601)	72.5% (237)	73.1% (838)
Mean total earnings	$7,217.70	$8,387.05	$7,548.41
Mean average quarterly earnings*	$1,473.90	$1,746.24	$1,550.93
Preceding 4 Quarters			
Percent employed	57.0% (467)	56.3% (184)	56.8% (651)
Mean total earnings	$3,661.86	$4,349.48	$3,856.51
Mean average quarterly earnings*	$1,336.71	$1,635.87	$1,421.39
2nd quarter of 2002 (sample selection)			
Percent employed	27.6% (226)	29.7% (97)	28.2% (323)
Mean earnings	$1,215.41	$1,118.39	$1,186.27

Source: 2002 Maryland administrative data on the TANF caseload. Data are not weighted.
**p<5 **p<.01 ***p<.001*

Appendix C
Detailed Data Tables: All Cases

TABLE B.1

EMPLOYMENT EXPERIENCES OF TANF CASE HEADS

	Percentage Unless Stated Otherwise
Current Employment Status	
Employed	24.3% (199)
Not employed; worked for pay during the past year	36.8% (301)
Not employed; worked for pay more than a year ago	37.1% (304)
Not employed; never worked for pay	1.7% (14)
Number of Months Worked for Pay During the Past Year	
0	39.0% (318)
1 to 3	20.6% (168)
4 to 6	22.7% (185)
7 to 9	9.5% (77)
10 to 11	3.2% (26)
12	4.9% (40)
Number of Months Worked If Employed in Past Year	
Average	3.3
Median	2.0
Number of Jobs Held During the Past Year	
0	38.9% (318)
1	31.8% (260)
2	19.5% (160)
3 or more	9.7% (79)
Number of Jobs Held If Employed in Past Year	
Average	1.1
Median	1.0
Proportion of Time Employed Since Age 18	
About 75 percent or more	55.9% (457)
About 50 percent	23.1% (189)
About 25 percent or less	19.2% (157)
Not at all	1.7% (14)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in MARYLAND. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

TABLE B.2

CHARACTERISTICS OF CURRENT OR MOST RECENT JOB
HELD BY TANF CASE HEADS WHO WERE EVER EMPLOYED

	Percentage Unless Stated Otherwise
Length of Employment on Job	
Average number of months	12.9
Median number of months	4.0
Hours Worked Per Week	
Less than 20	10.3% (82)
20 to 34	29.4% (235)
35 or more	60.4% (483)
Average hours worked per week	34.5
Median hours worked per week	40.0
Temporary or Seasonal Job	37.9% (303)
Shift or Time of Day Worked	
Regular day time shift	58.1% (466)
Morning or afternoon shift	4.4% (35)
Evening or night shift	18.5% (149)
Irregular, split, or rotating shift	11.7% (94)
Other	7.3% (58)
Industry	
Manufacturing	4.0% (32)
Retail	26.2% (211)
Transit/transportation	2.0% (16)
Personal services[a]	5.5% (44)
Business services/utilities	16.3% (131)
Recreation/amusement	1.7% (14)
Health services	10.4% (84)
Social/education/other non-profit or public services	6.9% (56)
Hotels and other lodging services	2.6% (21)
Other	24.4% (197)
Occupation	
Administrative support/clerical	18.6% (150)
Sales	14.1% (114)
Health services	8.6% (69)
Food services	16.9% (136)
Grounds maintenance/cleaning services	10.7% (86)
Personal services	6.9% (56)
Other services	5.6% (45)
Technical	1.6% (13)
Production/manufacturing	5.0% (40)
Other	12.1% (98)
Sample Size	**805**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

TABLE B.2 (*Continued*)

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Personal services include laundry and cleaning services, beauty shops, and other services performed within a private household.

TABLE B.3

COMPENSATION ON CURRENT OR MOST RECENT JOB
HELD BY TANF CASE HEADS WHO WERE EVER EMPLOYED

	Percentage Unless Stated Otherwise
Hourly Wage[a]	
Less than $5.15	10.4% (81)
$5.15 to 6.00	14.5% (113)
$6.01 to 7.00	27.0% (212)
$7.01 to 8.00	18.9% (148)
$8.01 to 9.00	10.2% (80)
$9.01 to 10.00	7.0% (55)
More than $10.00	12.1% (94)
Average hourly wage	$7.90
Median hourly wage	$7.00
Fringe Benefits Available	
Paid sick leave	38.7% (298)
Paid vacation	45.7% (356)
Paid holidays	50.3% (393)
Health insurance	31.4% (219)
Retirement plan	47.1% (365)
Opportunity for Advancement (Self-assessment)	
Great deal	17.6% (140)
Some	25.8% (207)
A little	25.7% (206)
None	30.9% (247)
Sample Size	**805**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]This estimate includes both case heads who are paid on an hourly basis and those who are paid a salary where the hourly wage was calculated.

TABLE B.4

PRINCIPAL REASONS FOR NOT WORKING AND FOR LEAVING MOST RECENT JOB FOR CASES WITH HEADS NOT CURRENTLY EMPLOYED[a]

	Percentage
Principal Reason Currently Not Working For Pay	
Physical, mental health, or substance abuse problem	21.4% (128)
Pregnancy or newborn care	11.2% (67)
Prefer/need to stay home with children	4.0% (24)
Other family responsibilities	6.6% (40)
Child care problem	14.4% (86)
Transportation problem	3.8% (23)
In school/training	8.0% (48)
Lack education/work experience	6.0% (36)
No jobs available/wages too low	9.9% (59)
Other	14.8% (88)
Principal Reason for Leaving Most Recent Job	
Not satisfied with hours/benefits/salary	6.5% (38)
Problems on the job (with boss or too stressful)	4.7% (28)
Pregnancy/maternity leave	16.0% (94)
Own health problems	17.2% (102)
Family or personal problems	6.8% (40)
Child care or transportation problems	7.7% (46)
Improved opportunities (school or another job)	4.1% (24)
Temporary or short term assignment ended	13.0% (77)
Fired or laid off	10.2% (60)
Other	13.8% (82)
Sample Size	**600**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in MARYLAND. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated for cases on which the case head was not currently employed, but had been employed in the past.

TABLE B.5

PERFORMANCE OF JOB TASKS AMONG TANF CASES WHO HAVE EVER WORKED FOR PAY
(Percentages)

	Regularly[a]	Monthly	Ever
Job Tasks Performed in Past Year:			
Talk with customers face to face	83.9% (686)	1.6% (13)	85.4% (699)
Talk with customers over the phone	53.2% (435)	3.7% (31)	56.9% (465)
Read instructions or reports	58.9% (481)	3.6% (30)	62.5% (511)
Write letters or memos	36.0% (294)	6.4% (52)	42.4% (346)
Work with a computer	40.9% (334)	4.1% (34)	45.0% (368)
Work with another electronic machine	70.4% (575)	3.9% (32)	74.3% (607)
Do arithmetic	62.8% (512)	5.3% (43)	68.1% (555)
Fill out forms	58.6% (478)	5.7% (47)	64.3% (525)
Keep watch over gauges or instruments	44.4% (361)	4.2% (34)	48.6% (395)
Performed at Least Four Job Tasks	70.3% (573)	1.2% (9)	73.8% (603)
Sample Size			**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Regularly is defined as having performed the job skill daily or weekly.

TABLE C.1

PARTICIPATION IN EDUCATION, TRAINING, AND JOB PREPARATION PROGRAMS AMONG TANF CASES DURING THE PAST YEAR

	Percentage
Education or Training Programs	51.2% (419)
GED classes or training for GED exam	23.6% (193)
Specialized training program	32.5% (266)
College classes	13.8% (113)
Job Preparation Programs	62.0% (507)
Job readiness training	47.6% (389)
Job search program or job club	56.0% (458)
Work Experience Program	25.3% (207)
Any of the Above	74.8% (612)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

TABLE D.1

CHARACTERISTICS OF THE HEADS OF SINGLE-ADULT TANF CASES IN MARYLAND

	Percentage Unless Stated Otherwise
Gender	
Female	96.8% (793)
Male	3.2% (26)
Age	
Younger than 25 years	35.3% (289)
25 to 34 years	34.2% (280)
35 years or older	30.4% (249)
Average age (years)	30.2
Median age (years)	28.0
Race/Ethnicity[a]	
White, Non-Hispanic	13.5% (106)
African American, Non-Hispanic	86.2% (679)
Native American, Non-Hispanic[b]	2.9% (23)
Other non-Hispanic	1.0% (8)
Hispanic	2.2% (18)
Marital Status	
Never Married	70.4% (576)
Married or living with partner	12.4% (101)
Separated, divorced, or widowed	17.2% (141)
Highest Education Completed	
Less than high school diploma/GED	41.8% (341)
High school diploma/GED	42.8% (350)
More than high school diploma/GED	15.4% (126)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Some cases may have identified more than one race category and, therefore, the categories shown are not mutually exclusive.

[b]Includes American Indians and Alaskan Natives.

TABLE D.2

HOUSEHOLD COMPOSITION OF SINGLE-ADULT
TANF CASES IN MARYLAND

	Percentage Unless Stated Otherwise
Household Composition	
Single parent, children	50.9% (416)
Two married adults, children[a]	2.3% (18)
Single parent, partner, children[a]	5.0% (41)
Single parent, other adults, children[b]	39.8% (326)
Adults only, no children	2.1% (17)
Average number of persons in HH	4.0
Median number of persons in HH	4.0
Number of Children Less than Age 18 in Household	
0	2.1% (17)
1	32.9% (269)
2	33.0% (270)
3	18.6% (152)
4	8.1% (66)
5 or more	5.3% (44)
Average number of children < 18 in HH	2.2
Median number of children < 18 in HH	2.0
Number of Children Less than Age 6 in Household	
0	33.5% (270)
1	38.7% (312)
2	21.9% (177)
3 or more	5.9% (48)
Average number of children < 6 in HH	1.0
Median number of children < 6 in HH	1.0
Age of Youngest Child	
Less than 1 year	19.4% (156)
1 to 5 years	47.6% (384)
6 to 14 years	29.2% (239)
15 years or older	3.3% (27)
Average age of youngest child	4.3
Median age of youngest child	2.0
Have Own Children Less than Age 18 Living Outside Household	9.4% (77)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

Table D.2 (*Continued*)

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Other adults may also have been present in the household.

[b]Other adults is exclusive of a spouse or partner.

TABLE D.3

HOUSING CHARACTERISTICS

	Percentage
Number of Bedrooms	
1	5.2% (42)
2	39.0% (319)
3	41.8% (342)
4 or more	13.8% (113)
Housing Assistance	
Live in public housing	15.7% (126)
Receive rent subsidy	27.8% (224)
None	56.5% (454)
Number of Moves in Past 12 Months	
0	55.8% (456)
1	26.6% (218)
2	11.9% (97)
3 or more	5.8% (47)
Evicted During Past 12 Months	4.4% (36)
Unstable Housing[a]	20.0% (164)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item on response may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Defined as having been evicted or moving two or more times in the past 12 months.

TABLE E.1

EARNINGS OF TANF CASES

	Percentage Unless Stated Otherwise
Case Head Worked for Pay in Last Month	25.6% (209)
Monthly Earnings of Case Head[a]	
Less than $400	27.0% (56)
$400 to $799	39.8% (83)
$800 to $1199	17.2% (36)
$1200 or more	16.1% (33)
Average monthly earnings	$699.00
Median monthly earnings	$599.60
Other Adults in the Household Worked for Pay in Last Month	26.2% (214)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated for cases who reported earnings for the month prior to the survey (n=209).

TABLE E.2

INCOME SOURCES AND AMOUNTS AMONG TANF HOUSEHOLDS[a]
(Percentages, Unless Stated Otherwise)

		Income in Last Month[b]	
	Percentage with Income from Source[b]	Cases with Income from Selected Source	All Cases[c]
Earnings by All Household Members	43.1% (352)	$1096.31 $800.00	364.42 .00
Public Assistance			
TANF benefits	78.0% (639)	$407.26 $375.00	$316.40 $372.00
Food stamp benefits	84.7% (694)	$276.74 $263.00	$233.78 $248.00
SSI or disability insurance	13.3% (109)	$627.06 $545.00	$66.50 $0.00
Child Support Over Past 12 Months			
Received any	13.9% (114)	N/A	N/A
Received regularly[d]	33.3% (38)	N/A	N/A
Other Sources[e]	15.7% (129)	$254.00 $200.00	$37.56 $0.00
All Sources			$1052.19 $819.34
Sample Size			**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Income sources and amounts refer to the month prior to the survey.

[b]Categories include income received by any member of the household.

[c]Figures for "all cases" includes cases that received or did not receive the income source in the last month. Cases that did not receive the income source had values of $0 in the calculation of the average.

[d]Tabulated only for cases that received child support in the past 12 months (n= 114).

[e]Other income includes child support, unemployment benefits, alimony payments, or money from friends or relatives. Separate figures for monthly child support payments were not gathered in the survey.

TABLE E.3

MONTHLY HOUSEHOLD INCOME OF TANF CASES
AND INCOME RELATIVE TO POVERTY LEVELS

	Percentage Unless Stated Otherwise
Total Monthly Household Income[a]	
Less than $500	13.4% (99)
$500 to 999	52.0% (386)
$1,000 to 1,499	19.0% (141)
$1,500 to 1,999	6.2% (46)
$2,000 or more	9.4% (70)
Average income	$1052.19
Median income	$819.34
Total Monthly Household Income Relative to Poverty Level[b]	
Less than 0.50	27.9% (207)
0.50 to 0.99	56.8% (421)
1.00 to 1.49	8.9% (66)
1.50 to 1.99	3.4% (25)
2.00 or more	3.1% (23)
Average income to poverty level	0.7
Median income to poverty level	0.6
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Based on reported household income for month prior to the survey.

[b]Poverty threshold level as established by the U.S. Bureau of the Census.

TABLE F.1

CHILD CARE USE AND PROBLEMS[a]
(Percentages)

	Cases with Child Under Age 6	Cases with Child Between Ages 6 and 12	Cases with Child Under Age 13
Used Child Care During the Past Year[a]	43.3% (232)	24.3% (52)	37.9% (284)
Received Child-Care Subsidy	53.0% (123)	44.2% (23)	51.4% (146)
Child-Care Problems Interfered w/ Work/School/Training	47.3% (251)	23.9% (51)	40.6% (302)
Specific child care problems for cases with problems[b]			
Cost	24.7% (62)	8.0% (4)	21.9% (66)
Not available when needed	36.7% (92)	51.0% (26)	39.1% (118)
Too far from home or work	3.2% (8)	0	2.6% (8)
Provider unavailable or unreliable	17.5% (44)	17.6% (9)	17.5% (53)
Worry about child neglect or abuse	4.8% (12)	2.0% (1)	4.3% (13)
Sick or disabled child	3.6% (9)	10.0% (5)	4.7% (14)
Subsidy late, so lost provider	2.0% (5)	0	1.7% (5)
Other	32.3% (81)	26.0% (13)	31.2% (94)
Sample Size			**750**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]The measure of child care use does not include care provided by a child's parent.

[b]Tabulated only for cases that used child care other than that provided by a parent and experienced problems with the care that interfered with work, school, or training (n = 303). Percentages sum to more than 100 because some cases experienced multiple problems.

TABLE F.2

OTHER PERSONAL AND FAMILY ISSUES THAT
MAY BE BARRIERS TO EMPLOYMENT

	Percentage
Possible Presence of a Learning Disability[a]	11.0% (88)
Caring for an Elderly, Sick or Disabled Family Member or Friend	11.0% (90)
Difficulty with English Because it is Not Native Language	1.1% (9)
Criminal Record	14.1% (115)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]The possible presence of a learning disability was determined following the methodology of the Washington State Learning Needs Screening Tool.

TABLE G.1

PHYSICAL HEALTH

	Percentage Unless Stated Otherwise
Overall Health (Self-Assessment)	
Excellent	20.1% (164)
Very good	24.2% (198)
Good	27.4% (223)
Fair	19.0% (155)
Poor	9.4% (77)
Pregnant[a]	5.1% (38)
Younger than 25 years	71.1% (27)
25 to 34 years	26.3% (10)
35 years or older	2.6% (1)
Presence of Chronic Health or Medical Condition	37.5% (304)
Arthritis	4.0% (32)
Asthma/Emphysema	13.3% (108)
Back problem	4.2% (34)
High blood pressure	6.5% (52)
Nerves/Anxiety/Stress	2.1% (17)
Physical Functioning[b]	
First quartile of the U.S. population	48.5% (384)
Second quartile of the U.S. population	14.3% (114)
Third or fourth quartile of the U.S. population	37.2% (294)
Below average for the U.S. population	42.8% (343)
Physical Health Problem[c]	20.9% (166)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated only for cases with female heads (n = 793).

[b]Physical functioning was determined following the methodology of the Physical Functioning Scale of the SF-36 Health Survey, incorporating norms based on age and gender.

[c]Following the methodology of the University of Michigan's Women's Employment Study, a case head was defined to have a physical health problem if overall health was poor or fair and physical functioning was in the lowest quartile.

TABLE G.2

MENTAL HEALTH

	Percentage Unless Stated Otherwise
Nonspecific Psychological Distress[a]	
None	83.3% (669)
Serious	16.7% (134)
Major Depression[b]	
No major depression	74.7% (609)
Probable major depression	25.3% (206)
Mental Health Problem[c]	28.9% (233)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Categories of nonspecific psychological distress were assigned on the basis of on the K6 psychological distress scale, with a range of 0 to 24, and on normative data from the National Household Survey on Drug Abuse (NHSDA) and the National Health Interview Survey (NHIS). Individuals with a total score of 13 or higher classified as having serious psychological distress.

[b]The probability of major depression was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of major depression are classified as being at probable risk of major depression. Individuals who volunteer that they are on medication or anti-depressants also are classified as being at probable risk of major depression.

[c]Defined as having a high level of nonspecific psychological distress or probable major depression.

TABLE H.1

CHEMICAL DEPENDENCE

	Percentage
Alcohol Dependence[a]	
No alcohol dependence	98.4% (802)
Probable alcohol dependence	1.6% (13)
Drug Dependence[b]	
No drug dependence	96.3% (784)
Probable drug dependence	3.7% (30)
Any Chemical Dependence[c]	5.0% (41)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]The probability of alcohol dependence was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of alcohol dependence are classified as being at probable risk of alcohol dependence.

[b]The probability of drug dependence was determined following the methodology of the Composite International Diagnostic Interview Short Form (CIDI-SF). Under this methodology, individuals with three or more of seven symptoms of drug dependence are classified as being at probable risk of drug dependence.

[c]Probable alcohol or drug dependence.

TABLE H.2

DOMESTIC VIOLENCE[a]

	Percentage
Experienced Physical Violence from Partner	
Moderate Physical Violence[b]	
In past year	17.5% (138)
In lifetime, but not past year	22.2% (175)
Never	60.3% (475)
Severe Physical Violence[c]	
In past year[d]	14.8% (116)
In lifetime, but not past year	18.1% (142)
Never	67.2% (529)
Any Physical Violence	
In past year	18.8% (148)
In lifetime, but not past year	22.9% (180)
Never	58.3% (459)
Received Threats from Partner	
Physical Threats[e]	
In past year	14.3% (112)
In lifetime, but not past year	22.3% (175)
Never	63.5% (500)
Coercive Threats[f]	
In past year	13.5% (106)
In lifetime, but not past year	12.4% (98)
Never	74.1% (583)
Any Threats	
In past year	18.7% (147)
In lifetime, but not past year	21.4% (168)
Never	59.9% (472)
Ever Experienced Violence/Threats from Partner	46.4% (366)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated only for cases with female heads, based on a modified version of the Conflict Tactics Scale used in the University of Michigan's Women's Employment Study.

[b]Moderate physical violence: pushing, grabbing, shoving, slapping, kicking, or biting.

[c]Severe physical violence: hitting, beating, choking, using or threatening use of a weapon, or forcing sexual activity.

[d] Any severe physical violence in past year was used to signify a barrier to employment in the Women's Employment Study of the University of Michigan. Severe physical violence includes hitting, beating, choking, using or threatening use of a weapon, or forcing sexual activity.

[e]Physical threats: threatening to hit with a fist or object, or throwing anything that could harm.

[f]Coercive threats: threatening to take children away, to harm individual or friends, to turn into child protective services or welfare agency, harassing at work or school, or coercing into doing illegal things.

TABLE I.1

TRANSPORTATION USE AND PROBLEMS

	Percentage Unless Stated Otherwise
Primary Mode of Transportation to Work or Work-Related Activity[a]	
Drives self	19.4% (154)
Gets a ride	10.6% (84)
Bus or public transportation	60.4% (478)
Walks	4.7% (37)
Other	4.9% (39)
Length of Commute to Work or Work-Related Activity (in Minutes) [a]	
Average	47.9
Median	40.0
Does Not Have a Valid Driver's License	63.5% (518)
Does Not Own or Have Access to a Car	67.3% (549)
Self-Reported Transportation Problem[b]	25.9% (211)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated only for cases on which the head worked or attended a work-related activity (n = 795)

[b]Case head indicated that a transportation problem prevented him/her from participating in work, education or training during the past year.

TABLE I.2

NEIGHBORHOOD CHARACTERISTICS[a]

	Percentage
Unemployment Among Neighborhood Residents	
Not a problem	37.3% (289)
Somewhat of a problem	27.9% (216)
Big Problem	34.8% (270)
Drug Users or Pushers in Neighborhood	
Not a problem	34.5% (274)
Somewhat of a problem	23.0% (182)
Big Problem	42.5% (337)
Crime, Assaults, or Burglaries in Neighborhood	
Not a problem	47.7% (380)
Somewhat of a problem	28.7% (228)
Big Problem	23.6% (188)
Run-down Buildings and Yards in Neighborhood	
Not a problem	60.6% (494)
Somewhat of a problem	18.2% (148)
Big Problem	21.1% (172)
At Least One Neighborhood Characteristic is Perceived to Be a Big Problem	56.3% (433)
No Safe Area for Children to Play in Neighborhood	35.4% (287)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Statistics in this table are analyzed from the self-assessments of TANF case heads. The case head was asked how much of a problem, if any, each category posed in their neighborhood.

TABLE SUM.1

SUMMARY OF POTENTIAL ASSETS AND LIABILITIES FOR EMPLOYMENT

	Percentage Unless Stated Otherwise
Potential Assets for Employment	
More than High School/GED	58.2% (476)
Work experience[a]	79.1% (646)
Performed four or more common job tasks	73.8% (603)
Potential Liabilities for Employment	
Personal and Family Challenges	
Physical health problem[b]	20.9% (166)
Child or other family member or friend with a health problem or special need[c]	33.6% (268)
Pregnant	5.1% (38)
Mental health problem[d]	28.9% (232)
Chemical dependence[e]	5.0% (41)
Severe physical domestic violence in past year	14.8% (116)
Possible presence of learning disability	11.0% (88)
Criminal record	14.1% (115)
Difficulty with English	1.1% (9)
Logistical and Situational Challenges	
Transportation[f]	25.9% (211)
Child care[f]	41.1% (335)
Unstable housing[g]	20.0% (164)
Perceived problem neighborhood characteristics[h]	56.3% (433)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Worked for pay 50 percent or more of time since turning age 18.

[b]Poor or fair overall health and physical functioning in the lowest quartile.

[c]Cases with a child with health, behavioral, or special need or those caring for an elderly, disabled, or sick family member or friend.

[d]High level of nonspecific psychological distress or probable major depression.

[e]Probable alcohol or drug dependence.

[f]Self-reported problems that prevented case head from participating in work, education, or training during the past year.

[g]Having been evicted or moving two or more times in the past 12 months.

[h]At least one neighborhood characteristic is perceived by case head to be a big problem.

TABLE SUM.2

NUMBER OF POTENTIAL LIABILITIES FOR EMPLOYMENT

	Percentage Unless Stated Otherwise
Number of Human Capital Deficits [a]	
0	44.0% (358)
1	29.5% (240)
2	20.1% (163)
3	6.5% (53)
Average	0.9
Median	1.0
Number of Personal and Family Challenges [b]	
0	32.6% (235)
1	31.4% (227)
2	20.9% (151)
3	8.3% (60)
4	4.4% (32)
5 or more	2.5% (18)
Average	1.3
Median	1.0
Number of Logistical and Situational Challenges [c]	
0	18.2% (138)
1	32.6% (247)
2	25.8% (195)
3	17.1% (129)
4	5.2% (40)
5	1.1% (8)
Average	1.6
Median	1.0
Number of All Potential Liabilities for Employment [d]	
0	4.6% (31)
1	10.6% (72)
2	14.5% (98)
3	18.2% (123)
4	15.9% (107)
5	13.8% (93)
6	10.3% (69)
7 or more	12.2% (81)
Average	3.9
Median	4.0
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

Table SUM.2 (*Continued*)

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a] Human capital deficits include having no high school diploma, no work experience, or having fewer than 4 job skills.

[b] Personal and family challenges include health problems, family member or friend with health problems, current pregnancy, mental health problem, drug or alcohol dependence, experience with severe domestic violence, possible learning disability, criminal record, or difficulty with English language.

[c] Logistic and situational challenges include transportation problems, child care problems, unstable housing, discrimination, or bad neighborhood conditions.

[d] Includes any of the above.

TABLE SUM.3

SELF-REPORTED PROBLEMS THAT PREVENTED CASE HEADS FROM PARTICIPATING IN WORK, EDUCATION OR TRAINING DURING PAST YEAR

	Percentage
Child's Health, Behavioral or Special Need	15.7% (125)
Physical Health Problem	28.6% (234)
Mental Health Problem	16.2% (132)
Alcohol or Drug Problem	3.2% (26)
Problem in Relationship with Spouse or Partner[a]	8.3% (65)
Transportation Problem	25.9% (211)
Child Care Problem[b]	39.5% (303)
Housing Problem	14.0% (114)
Other Problem[c]	9.4% (77)
Any of the Above Problems	75.3% (599)
Sample Size	**819**

SOURCE: 2002 survey of single adult TANF cases in MARYLAND.

NOTES: The survey data have been weighted to be representative of all single-parent TANF recipients in Maryland. Survey item nonresponse may cause the sample sizes for specific variables to be smaller than those shown. Rounding may cause percentages to sum to something other than 100.

[a]Tabulated only for cases with female heads (n = 793).

[b]Tabulated only for cases with children under age 15 (n=779).

[c]Caring for an elderly, disabled, or sick family member or friend; difficulty with English because it is not native language; criminal record.