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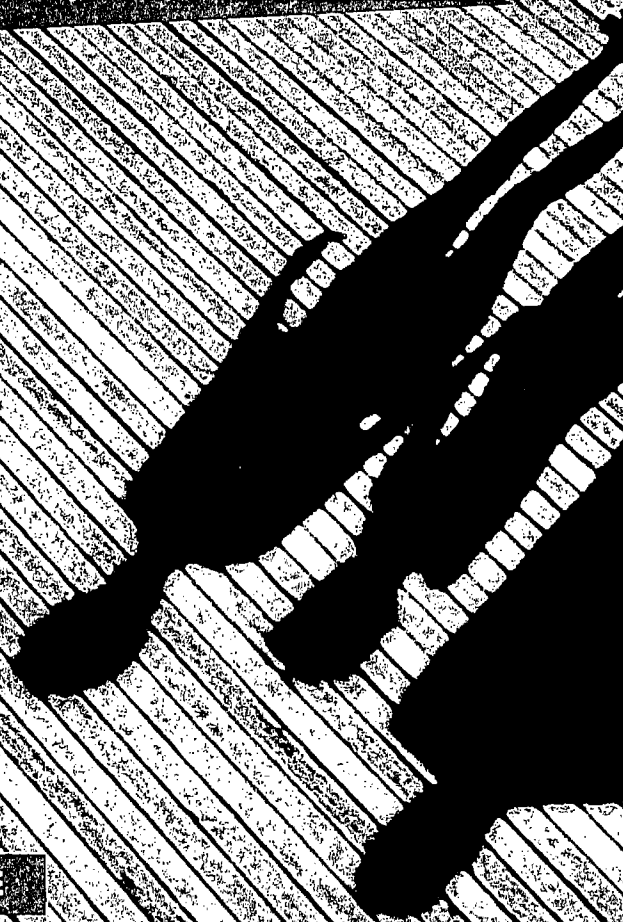
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SUMMARY

THE BEST INTENTIONS

**Unintended
Pregnancy
and the
Well-Being
of Children
and Families**

INSTITUTE OF MEDICINE



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by Rachel Benson Gold and Cory L. Richards

Improving RHC Reproductive Health Services in Managed Care Settings

**The
Alan Guttmacher
Institute**

New York and Washington

THE
RESPONSIVE
COMMUNITY



RIGHTS and
RESPONSIBILITIES

Volume 3, Issue 2, Spring 1993

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The Moral Voice of Welfare Reform

In 1963, Nancy A. Humphreys, now Dean of the School of Social Work at the University of Connecticut, was a child protective services worker in Los Angeles. One of her clients was a pregnant teenager, a school referral. The girl came from a large and rather troubled family—one sibling was retarded, a couple of her brothers had been in trouble with the law, her father was disabled, and each of her parents was on a different kind of financial assistance. There were nine or 10 kids in the family.

One day the mother called and invited Nancy Humphreys to their home; they set the time for 2 p.m. on a Thursday. "I was the first one to get there," Dr. Humphreys recalls. "But one by one, eight other people arrived. I didn't know any of them. When we were all there, the family went out the back door, leaving us to ourselves. It turned out we were all their social workers, each of us working with one or more people in that family. None of us had ever met or even talked about the case to any of the others."

The mother had made her point. The nine social workers held a case conference right there in the family's living room. "It showed me how important system coordination is," Dr. Humphreys said, "but it also showed me the coping strengths of this family. They were getting mixed messages from all these different service providers. The mother wanted us to get our act together so we could better help the family work on theirs."

Edna McConnell Clark Foundation, Annual Report 1990

Since 1963, when the incident Nancy Humphreys described occurred, categorical programs serving disadvantaged children and families have proliferated, so, now, there might be twice as many social workers to call together. In fact, if one tried to collect all the social workers who somehow touch a disadvantaged family over the years, they might not even fit in one room. The costly inefficiency of this atomized approach has been widely lamented; social workers, for example, rarely have the time to get as involved with their clients as they once did. But seldom mentioned is the negative impact of this fractionalization on the *moral* voice of social agencies—and individuals within those agencies—who are free to send their own "message,"

whether or not it is consistent with that of others serving the family.

Take as an example the experience of Rebecca Maynard of Mathematica Policy Research, who directed the evaluation of federally-funded demonstration programs for teenage mothers on welfare in Chicago, Illinois, and in Newark and Camden, New Jersey. She describes how the caseworkers in one of the teen centers encouraged the young mothers to seek support from the fathers of their children, only to discover that the welfare department's caseworkers (who would be responsible for collecting it) were giving the exact opposite advice. Another example of contradictory signals was discovered during the evaluation of a group of Rockefeller Foundation-funded welfare-to-work projects. Job training caseworkers were actively encouraging the mothers to build specific work skills and look for jobs. But, simultaneously, caseworkers in a community-based project who sought to "empower" these same mothers, told them that they had a right to be on welfare, and that they should take advantage of the opportunities afforded by AFDC to stay home, to take care of their children, and finish their schooling. When social agencies convey such opposing messages, is it any wonder that they have so little success in redirecting the lives of their clients?

TEEN MOTHERS AND WELFARE

Long-term welfare dependency is a serious and growing social problem. We often hear that about half of all new recipients are off the rolls within two years. This is true—but only because of the high turnover among short-term recipients. At any one time, about 82 percent of all recipients are in the midst of spells that will last five years or more. And about 65 percent are caught up in spells of eight or more years. The bulk of long-term welfare recipients are young, unmarried mothers, most of whom had their first baby as unwed teenagers. Starting with poor prospects, these young women have further limited their life chances by systematically underinvesting in themselves—by dropping out of school, by having a baby out of wedlock, and by not working. As a result, they do not have the education, practical skills, or work habits needed to earn a satisfactory living.

CBO
Report

According to the Congressional Budget Office, about 50 percent of all unwed teen mothers go on welfare within one year of the birth of their first child; 77 percent go on within five years. Nick Zill of Child Trends, Inc., calculates that 43 percent of long-term welfare recipients (on the rolls for 10 years or more) started their families as unwed teens.

A mother's age and marital status at the birth of her first child are stronger determinants of welfare dependency than is her race. One year after the birth of their first child, white and black unmarried, adolescent mothers have about the same welfare rate. After five years, black mothers have a somewhat higher rate (84 percent versus 72 percent), but various demographic factors account for this relatively small difference.

Reducing long-term dependency, therefore, requires doing something constructive about the young mothers who are on welfare. If, like Humphreys' client, we called together all the social workers assigned to a teen mother, what message would we want them to give her? To answer that question it helps to ask another: What would concerned parents say to their own daughter?

THE MESSAGE

The parents' message would probably be quite direct:

1. *Finish your schooling:* If you have not graduated from high school, stay in school; if you dropped out, go back to school.
2. *Take care of yourself and your baby:* Eat well; get medical check-ups for yourself while you are pregnant and then for your baby; and do the best you can to meet your child's physical, emotional, and developmental needs.
3. *Work:* After you complete your schooling, get a job, even a part-time one.
4. *Child support:* Tell us who the father is so that we can get him to contribute to the support of the child.
5. *Birth control:* You made a mistake once, don't do it again. Each additional child makes it harder to work your way off welfare.

since your home expenses will rise faster than your earning ability.

6. *Mutuality*: Throughout, we will help you—as long as you try your best; we will take care of your child while you are in school or at work. If you cannot earn enough to support yourself and your child, we will chip in.

Why don't we give young mothers on welfare this message? A major cause is our fractionated welfare system. Because there are so many different individuals and agencies involved, the process of social support and education resembles an assembly line more than a guiding relationship. But unlike an assembly line, the final product is never put together—so no one realizes that the pieces do not fit together.

The current system speaks with too many voices to have any impact. Recipients do not hear a clear message about what society expects of them. As a result, they come to believe that there are no expectations, or only confused, if not contradictory ones.

On a system-wide basis, we need to try to do what Humphreys' client asked her social workers to do: integrate the articulated goals as well as service structures of public welfare agencies. This, in effect, is what Bill Clinton implied in his formulation of welfare reform when he stated that welfare programs should "provide people with the education, training, job placement assistance, and child care they need for two years—so that they can break the cycle of dependency. After two years, those who can work will be required to go to work, either in the private sector or in meaningful community service jobs."

MUTUAL RESPONSIBILITY

Some young mothers will eagerly take hold of the opportunities provided by such an offer to escape from poverty and begin building a better life. But many others will not. Even richly-funded demonstration programs find it exceedingly difficult to improve the ability of these young women to care for their children, let alone to become economically self-sufficient. Earnings improvements in the realm of six percent are considered successes. (Most programs don't even try to work with the young fathers.)

This should not be surprising. Even in a strong economy, breaking patterns of behavior that took a lifetime to establish can take years. Thus, after the two years of services that President Clinton would give them, most of these unwed mothers will not be able to support themselves. If they will still be expected to work, as his formulation suggests, a large proportion will end up in semi-permanent "community service jobs," a euphemism for having them work to earn their welfare benefits (usually at the minimum wage).

This kind of "workfare" program, because of added costs for job training, child care (while the mothers work), and administration (to establish and monitor placements), is much more expensive than the current system, at least in the short run. But, in the long run, it is the only way to build job skills and work habits and thus reduce dependency. Inactivity is bad for anyone; it can be devastating for those loosely connected to the labor market. A work requirement also reinforces the mutuality of welfare assistance, which is essential to continued public support.

Most young mothers will not willingly enter such programs, however, and many will drop out. The experience of the teen-mother demonstration programs previously mentioned suggests that, to maintain high levels of program participation, about 50 percent of the mothers will have to be sanctioned with a reduction of benefits at least once. Hence, society, through welfare agencies, must be prepared to monitor compliance with program requirements and to sanction noncompliance.

Key elements of the welfare policy establishment have never liked strong work requirements that force poor mothers to work at very low paying jobs, even if only part-time. To discredit earlier efforts to impose work requirements, they successfully labelled them "slavefare." For example, according to Lawrence Mead in *Beyond Entitlement*, welfare rights organizer George Wiley had this to say in 1971 about the work requirement that had been attached to Richard Nixon's proposed Family Assistance Plan: "You don't promote family life by forcing women out of their homes to empty bedpans. When Richard Nixon is ready to give up his \$200,000 salary to scrub floors and empty bedpans in the interest of his family, then we will take him seriously."

Such arguments strike a responsive chord among Americans who feel partially responsible for the situation facing these mothers and ambivalent about imposing "further hardship" and "our values" on them. But, if not our values, whose? Certainly not those of a teenager who, by having a child out of wedlock—with no means to support it and largely unprepared to care for it—has already demonstrated that she does not make responsible decisions.

Imposing a clear-cut set of rules on these young mothers acknowledges the desperate need for structure in their lives—and society's right and obligation to provide it. To take no action is to turn our backs on fellow citizens who need our help and guidance most. As long as these requirements are not pursued in a malevolent or harsh manner, government should enforce the same level of responsible behavior that a loving parent would. Such reforms are needed—for the good of society, the children and, yes, the mothers.

Douglas J. Besharov

Governor's Council On Adolescent Pregnancy

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PREVENTION STRATEGIES is a series of briefs on the efforts of the State of Maryland to reduce the incidence of adolescent pregnancy. Each brief provides a comprehensive review of the issue including data analysis, a description of program objectives and components and, known outcomes.

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ADOLESCENT PREGNANCY IN MARYLAND

Introduction

Adolescent pregnancy its causes and solutions are some of the most controversial issues facing the United States today. Many individuals view the problem from a moral perspective, exclaiming teens do not have the same values as their parents. In fact teen pregnancy can be viewed from many perspectives; as a health care problem, teens do not have adequate information or access to family planning services; as a sociological problem, many teens are having babies for someone to love. Although individuals may bring different perspectives on the problem everyone can agree no one wants a pregnant teenager who suffers the consequences of too early childbearing. Yet in the United States, approximately one million teenage girls become pregnant every year, and nearly 600,000 have babies. These teenage mothers and their children face a lifetime of health, education and economic consequences.

Adolescents aged 17 and younger are twice as likely to deliver babies which weigh less than five and one half pounds at birth and these low birth weight babies are 40 times more likely to die in the first four weeks of life than are normal weight newborns.¹ Adolescent mothers have an increased chance of suffering pregnancy complications, including higher than average levels of toxemia, anemia, bleeding, cervical trauma and premature delivery.² The lifetime earnings of a teenage mother are about half of the income of a mother who first gave birth in her twenties.³ And adolescent fathers have lower incomes, less education and more children than do men who postpone having children until their twenties.⁴

The United States can no longer afford to allow teenage mothers and their children to slip into a lifetime of economic disadvantages because of premature childbearing. Comprehensive, multifaceted strategies that provide information, services and include parents, children and communities will bring the high adolescent childbearing rates down to acceptable levels.

Adolescent Childbearing in Maryland

The state of Maryland, with the fifth highest level of per capita income for families, has several local jurisdictions that have high rates of adolescent childbearing. One of the most urbanized states in the United States, Maryland's 4,622,000 residents live in 92.9% percent metropolitan areas; 28.3% percent of the population is minority and the per capita income is \$21,013.

Adolescent childbearing has been a problem for over 50 years, however only recently has the interrelationship between too early childbearing, long term welfare receipt and economics been explored. Thirty years ago the rates of adolescent childbearing were higher than today, however the economic and moral code were different. In the 50's a pregnant teen of sixteen would drop out of school to marry the father of the baby. He would also drop out to find a job at a factory, like Bethlehem Steel which was the largest employer in Baltimore at that time. He could earn a good living, have health insurance, buy a house and put his children through college. Today's teens would not fair as well. More often than not, a pregnant teen does not marry the father of the baby, she drops out of school and can only find employment at low paying menial jobs without health insurance. Her chances of finding employment at Baltimore's largest employer today Johns Hopkins, are slim to none because she lacks the skills to work in the highly technical medical field. Today, a single parent under twenty-five is nine times as likely to be poor as a young woman living on her own without children.⁵

Adolescent pregnancy cost the taxpayers who pay for the births to teenagers. But the cost of adolescent childbearing is more than economic. It limits the life options of a teen mother, father and child. Young families become stuck in a cycle of poverty, hopelessness and despair-- a trend which fuels increasing social problems. Nationally, approximately 53% of the caseload on Aid to Families with Dependent Children (AFDC) consists of families begun by a teen birth, even though only 4% of these welfare families are currently headed by a teen mother.⁶ In the United States in 1990, approximately \$20 billion was spent on welfare, medical and food assistance for families begun by a birth to a girl under the age of 20.⁷ And in Maryland, 1989-1990, approximately \$456 million was spent on welfare, medical and food assistance for families begun by a birth to a girl under the age of 20.⁸

Since the 1970's, the number of teenage females in the population has declined; the number of births and the birth rates for teenage women declined as well. There were:

- In Maryland in 1989, 3,278 teenage girls under the age of 18 gave birth to babies, a decrease of 1.9 % or 3,340 from 1988. In 1990, there were 2,899 births to women under 18 years of age in Maryland a decrease of 11.6%
 - In Baltimore City the births to adolescents dropped 10.6% between 1989 and 1990 with a major decrease in teen births among the under 15 age group. In 1989 there were 1,372 births to women under 18 years of age compared to 1,453 births in 1988 a decrease of 81 births or 5.6%. In 1990 there were 1,304 births to women under 18 years of age -- a decrease of 5.0 % from 1989. In addition, births to the under 15 age group decreased from 147 births in 1988 to 119 in 1989.
 - During 1988, 2,522 teen girls under the age of 18 had abortions compared to 2,103 abortions in 1989 -- a difference of 419 abortions or 16.6% statewide. In Baltimore City there were 558 abortions in 1989 to women under 18 years of age a decrease of 260 or 31.8%. This decrease was the largest decrease in recent years.
 - In the United States the birthrate among teenagers 15 to 17 jumped nearly 20% in three years, reversing a 16 year trend of declining of stable rates. Eight percent (8%) of this increase occurred from 1988 to 1989. The birth rates for the same age group in Maryland began to decline in 1988 by approximately two percent (2%). At the same time the abortion rate declined by 15.8% percent among this age group, indicating that programs are reaching those teens who do not want to become parents too soon.
-

GOVERNOR'S COUNCIL ON ADOLESCENT PREGNANCY

The Governor's Council on Adolescent Pregnancy was established by state law in 1986 which mandated the Council to develop an action plan that mobilizes public and private resources, develops, coordinates and evaluates programs and policies as strategies to reduce teen pregnancy and promote positive outcomes for pregnant and parenting teens and their children. The Council is comprised of members appointed by the Governor, including cabinet secretaries, members of the General Assembly and representatives from the community, academia, local government and the private sector.

To reduce adolescent childbearing in Maryland, the Council developed a comprehensive strategy based on research that is tailored to the specific needs and values of communities. Recognizing adolescents are not a monolithic group and that one strategy for all teenagers is unrealistic, the Council determined the State of Maryland had a number of existing programs for pregnant and parenting teens and their children. However, there was a paucity of programs for the prevention of adolescent pregnancy. Developing a four prong approach, the Council aims to reduce pregnancies among girls aged 17 and younger to no more than 50 per 1,000 adolescents. Current strategies include:

1. To delay sexual initiation among pre-adolescents and adolescents with the implementation of a media campaign promoting sexual abstinence.
2. For sexually active teenagers, the expansion of family planning services at locations and times that are accessible for teenagers.
3. Supporting parents in their roles as the primary sexuality educators of their children, by promoting PACT! Parents and Children Talking, a public awareness campaign.
4. Encouraging communities to become actively involved in adolescent pregnancy prevention with the establishment of Community Incentive Grants funding for local programs with the goal of preventing the first pregnancy among adolescents.

Strategies of the Governor's Council to reduce the rate of teenage childbearing

1. Delay Sexual Initiation

One strategy of the Council -- to help teenagers develop ways to delay sexual initiation until they are capable of making wise and responsible decisions about their personal lives and family formation -- utilizes media to communicate this theme to teens. This strategy is aimed at 9 -14 year olds who have not had sexual intercourse and are still in the formative stages of adolescent development. The media campaign's message promotes sexual abstinence and improved self esteem.

Campaign For Our Children was established in 1988 with \$100,000 in funding from the Maryland General Assembly to promote sexual abstinence among teens. This five year Campaign uses mass media television, radio, posters, billboards, bus placards and educational materials to influence and change attitudes about sex among 9-14 year old children. Messages aimed at key target groups: young people, adults (parents, coaches, teachers, counselors); and policy makers were developed. Each year a different theme for the Campaign is implemented: year one, "You can go farther if you don't go all the way", aimed at pre-teens and teens ; "Talk to your kids about sex", year two for adult influencers and for year three, "Male responsibility", to inform boys about child support and paternity laws.

This public-private partnership has generated \$3 million from the private sector to match funds provided by state government. Campaign materials are distributed free to all public middle and high schools in Maryland along with lesson plans and a guide for using the materials.

In a survey conducted by the Governor's Council on Adolescent Pregnancy, it was revealed Campaign materials were used in 95.7% of the school systems in Maryland. Materials are also used in churches, organizations serving teens, recreation centers, and adolescent pregnancy programs.

2. Encourage Contraception Among Sexually Active Teens

The average age of first sexual intercourse is 16.2 for girls and 15.7 for boys.⁹ On average, girls who are sexually active wait 11.5 months between initiating intercourse and making their first visit to a family planning clinic. Thirty-six percent visit the clinic only because they suspect they are pregnant. Based on this data and little evidence of the effectiveness of other strategies, the Council believes sexually active teens must be encouraged to contracept regularly. Family planning services must be available to adolescents at low or no cost, at hours convenient for teens, with outreach services to inform teens of the services and locations, and with aggressive follow-up to ensure proper contraceptive use. Family planning services include a variety of health, education, and counseling services related to birth control, including contraceptive services, pregnancy testing and counseling, and information and referral. Services are available in a variety of settings: hospitals, clinics, local health departments, private physicians, and schools.

Faced with increasing rates of adolescent childbearing, the Council conducted a survey of local health department family planning clinics and found the clinics were not accessible to teens. Recommendations were made to the Governor and the General Assembly improve the clinics and increase accessibility for teens. The Council lobbied the Governor for a \$2 million increase in funding for teen family planning clinics. Realizing the funds would not be adequate for all the county clinics, a plan was developed which provided additional family planning funds to the three jurisdictions with the highest rates of adolescent childbearing (Baltimore City, Prince Georges County, Anne Arundel County). The program which became known as Healthy Teens and Young Adults is innovative because it has:

- created model reproductive health clinics with a holistic approach toward health care to meet community-specific needs, including male responsibility;
- participation in reproductive health decisions have been emphasized as part of a community outreach effort;
- program activities have been targeted to those who live in areas at-risk for unintended pregnancy and poor pregnancy outcome. All clinics have evening and weekend hours, staff who are experienced and excited about working with teens, and aggressive outreach activities to draw teens to the clinics.

The clinics have been uniquely designed for each community: Baltimore in a busy shopping mall; Prince George's in a private medical office complex; and Anne Arundel's in a teen community center. Over the 1989-1991 fiscal year, there was a 54% increase in the number of young people served in the programs. Other strategies were employed to provide sexually active teens with contraceptives: condom distribution programs, school based clinics and hotlines.

3. Parents As The Sexuality Educators of Their Children

In a 1986 survey, teenagers ranked parents as their most important source of information about pregnancy and contraception, ahead of friends, school, television and the movies.¹⁰ Teens would like to communicate more about sex with their parents. Half of the teens in the 1988 survey said that their parents have not provided enough information about sex and that they want more discussion about sex with their parents.¹¹ However, ninety-eight percent of parents report they need help in talking to their adolescent children about sex.¹²

The Council implemented PACT! (Parents and Children Talking) as a family communication program in 1988 aimed at increasing and improving the quality of parent-child communication about sexuality, imparting the family's morals and values and thereby reducing adolescent pregnancy. Communities are encouraged to organize an event to promote the concept of PACT! and are provided with a PACT! handbook, speakers, posters, and brochures on How to Talk to Your Kid about Sex. Approximately 2/3 of the counties and Baltimore City hold PACT! events.

4. Community Involvement and Coalition Building

Any comprehensive pregnancy prevention effort must include the active participation of the community. Individuals, no matter how well intended, cannot solve the teen pregnancy problem alone. Community coalitions organized to include different segments of the community: business, government, religious, PTA's, have a crucial role to play in shaping values, in promoting parental and family participation, and mobilizing the resources and resourcefulness of the community.

The strategies of the Governor's Council On Adolescent Pregnancy are broad based and inclusive. Efforts to prevent adolescent childbearing must involve partnerships

between the public and private sectors that develop programs and foster widespread community involvement and self-help. Community based organizations can create the informal networks and supports that can instill the right messages about responsibility and can mobilize families, friends, and neighborhoods.

Community organizations may have ideas on programs to prevent the first pregnancy among adolescents but lack the financial resources to implement programs. For that reason, the Governor has included in his budget \$250,000 in funds for Community Incentive Grants (CIG). These funds are awarded on a competitive basis to local organizations to develop programs that target at-risk young people with concentrated, long term efforts to build self-esteem, delay the onset of sexual activity, and reduce teen pregnancy with information and services. The CIG program also is concerned about systems reform by improving the use of existing resources, linking community based services, allowing the development of new services which will fill in the gaps in current networks and leveraging private sector support for teenage pregnancy prevention programs. In operation since 1989, the programs serve 600 at-risk youth annually and statistics on the programs reveal :

- *5 female participants have become pregnant and 1 male participant has fathered a child;*
- *there was a 75% increase in school attendance among the participants;*
- *there was a significant decrease in school suspensions;*
- *the program costs approximately \$410 per person annually.*

Conclusion

Adolescent pregnancy is an issue that demands the leadership, the long-term commitment, and the courage to expand the approaches described in this report. It is important to realize that none of the interventions alone can solve the complex problem of adolescent pregnancy. In the development of strategies the Council understood the unique characteristics, expectations and tolerances of different communities. Also it is a problem which cannot be solved by government alone. Any efforts to alleviate the problems of adolescent pregnancy and child-bearing will ultimately require a sustained, coordinated commitment by policy makers, service providers, parents, and teenagers themselves. Everyone has been touched by the problem, and all of us must work together towards the solution.

FOOTNOTES

Adolescent Pregnancy In Maryland

- 1 **INSTITUTE OF MEDICINE,** "PREVENTING LOW BIRTHWEIGHT: SUMMARY," by Committee to Study the Prevention of Low Birthweight, (Washington, D.C. : National Academy Press, 1985), p.1
- 2 **Center for Population Options,** "Teenage Sexuality, Pregnancy, and Parenthood, "The Facts" (Washington, D.C.: Center for Population Options, April, 1987).
- 3 **Southern Regional Project on Infant Mortality,** "Adolescent Pregnancy in the South:Breaking the Cycle" (Washington, D.C. Southern Governor's Association, May, 1989).
- 4 **Center on Evaluation, Development, Research, Teenage Pregnancy, Hot Topic Series** (Bloomington, Ind.: Phi Delta Kappa, April 1987), p.235.
- 5 **Edelman, Marian Wright,** "Families in Peril An Agenda for Social Change" , (Harvard University Press, Cambridge, Massachusetts, 1987),p. 56.
- 6 **Martha R. Burt and F. Levy,** "Estimates of public Costs for Teenage Childbearing: A Review of Recent Studies and Estimates of 1985 Public Cost," in *Risking the Future:Adolescent Sexuality, Pregnancy, and Childbearing*, Vol. 2, Working Papers (Washington D.C. : National Academy Press, 1987), p.265
- 7 **Governor's Council on Adolescent Pregnancy,** unpublished study, *Costs of Adolescent Childbearing in Maryland*,
- 8 **M. Zelnik and F. Shah** "First Intercourse among Young Americans, "Family Planning Perspective (FPP), Mar/Apr 1983.
- 9 **L.S. Zabin and S.D. Clark, Jr.** "Institutional Factors Affecting Teenagers Choice and Reasons for Delay in Attending a Family Planning Clinic, FPP, Jan/Feb. 1983.
- 10 **Louis Harris and Associates,** "American Teens Speak:Sex, Myths, TV and Birth Control, " a poll conducted for the Planed Parenthood Federation of America (PPFA), 1986.
- 11 **L.P. Miller and N. Laing,** "Communicating with Teens about Sexuality:Parent Involvement," a paper presented at the annual meeting of the American Public Health Association, October, 1989.
- 12 **Alan Guttmacher Institute,** *Teenage Pregnancy:The Problem that Hasn't Gone Away*, New York, 1981.

NUMBER OF BIRTHS AND ABORTIONS TO MARYLAND WOMEN BY AGE GROUP AND JURISDICTION 1988 AND 1989

JURISDICTION	1988 Births			1988 Abortions			1989 Births			1989 Abortions		
AGE	<15	15-17	18-19	<15	15-17	18-19	<15	15-17	18-19	<15	15-17	18-19
MARYLAND	237	3,103	5,130	275	2,247	3,056	242	3,036	5,279	197	1,906	2,884
<i>Baltimore Metro Area</i>												
Anne Arundel	10	193	352	19	255	322	11	192	385	23	226	341
Baltimore City	147	1,306	1,614	141	677	860	119	1,253	1,733	76	482	694
Baltimore	8	246	484	50	399	607	14	219	486	33	443	643
Carroll	1	51	83	1	56	92	1	43	95	4	60	60
Harford	5	71	153	8	73	73	1	71	154	4	67	97
Howard	2	32	74	5	84	90	3	39	74	2	72	112
<i>Southern MD/DC Area</i>												
Calvert	1	23	58	1	17	25	1	24	63	-	22	26
Charles	4	51	120	2	33	43	3	56	120	4	18	37
Montgomery	6	171	365	8	173	273	17	182	342	14	147	284
Prince George's	30	467	868	26	265	405	47	468	858	20	210	321
St. Mary's	4	47	82	-	19	20	4	60	110	-	17	24
<i>Eastern Shore</i>												
Caroline	1	28	45	1	4	6	1	26	34	1	1	6
Cecil	2	56	124	-	8	5	2	42	91	1	3	3
Dorchester	3	42	46	1	10	5	1	38	55	2	3	7
Kent	1	8	20	1	4	2	2	10	22	-	2	3
Queen Anne's	1	13	27	1	12	11	-	20	33	-	17	12
Somerset	1	26	39	1	1	4	1	22	33	-	-	4
Talbot	-	16	38	1	13	9	3	18	29	1	8	8
Wicomico	4	49	88	3	9	20	8	52	107	1	10	22
Worcester	2	19	34	-	4	13	-	29	46	-	1	2
<i>Western Maryland</i>												
Allegany	-	46	88	-	29	41	1	40	100	2	17	52
Frederick	1	53	137	4	66	84	-	56	131	5	50	88
Garrett	-	28	31	-	9	5	2	17	41	-	7	5
Washington	2	61	160	1	27	41	-	59	137	4	23	33

GOVERNOR'S COUNCIL ON ADOLESCENT PREGNANCY

Quentin R. Lawson, Chairman
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INDICATORS

Not All Single Mothers Are Created Equal

By Douglas J. Besharov

IN THE NATIONAL DEBATE over the consequences of family breakdown all single mothers are being lumped together as if they were a homogeneous group. Much of the commentary after Vice President Dan Quayle's remarks about Murphy Brown giving birth out of wedlock reflected this simplistic perspective. But single mothers are not all alike, and the failure to make distinctions between female-headed households created by divorce and those created by the birth of a child out of wedlock has obscured the nature of the problem.

There is good reason to be concerned about the condition of female-headed families. Almost half of all female-headed families with children under 18 have incomes below the poverty line. This is almost five times the poverty rate of two-parent families with children. Three-fourths of all time periods spent on Aid to Families with Dependent Children (AFDC) begin with the creation of a female-headed family.

This new form of poverty is not caused directly by racial discrimination or by structural deficiencies in the economy, but, rather, by a major and troubling change in the behavior of American parents—the creation of single-parent households.

Over the past 25 years, the number of female-headed families almost tripled. In 1965, there were 2.9 million female-headed families with children, compared to 7.7 million in

1990 (see Figure 1 page 15). If the nation had had the same proportion of female-headed households in 1983 that it had in 1959, there would have been about 5.2 million fewer persons in poverty. According to a special Census Bureau report, the poverty rate for black families would have been 20 percent in 1980, rather than the actual 29 percent, if black family composition had remained what it was in 1970.

Family breakdown and ensuing poverty give every indication of worsening.

If present trends continue, about 60 percent of all children born in 1980 will spend part of their childhood in a family headed by a mother who is divorced, separated, unwed, or widowed.

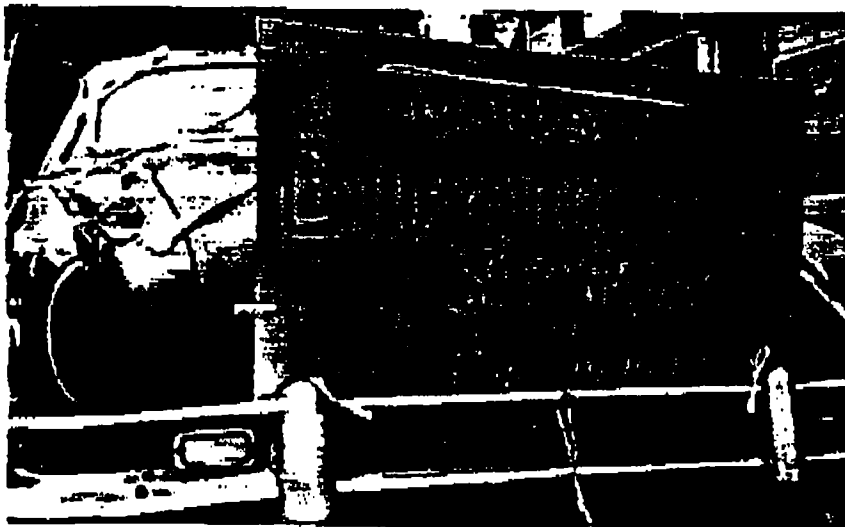
Family breakdown and ensuing poverty give every indication of worsening. If present trends continue, about 60 percent of all children born in 1980 will spend part of their childhood in a family headed by a mother who is divorced, separated, unwed, or widowed. Some social scientists predict that in the next generation half of all children will be born out of wedlock and that half of all children born to married parents will see their parents divorce before they are 18.

The trend data for out-of-wedlock births and divorces can be seen in Figure 2. These events impoverish hundreds of thousands of American families. The median income for female-headed families is about one-third that of intact families. In 1990, the median income for two-parent families with children living with both parents was \$39,076. For children living with their mothers only, however, median family income was \$12,005.

Lumping all poor female-headed families together is a deeply misleading rhetorical convenience. Hidden by aggregate statistics about their poverty and social dysfunction are substantial differences among female-headed families. As the following Census Bureau statistics establish, families headed by divorced mothers are, in general, doing much better than aggregate statistics suggest, and families headed by never-married mothers are doing much worse.

• In 1990, the median family income for never-married mothers with children under the age of 18 was \$8,337, compared to \$15,762 for divorced women with children (see Figure 3).

• Marital status also explains the income disparity between white and black female-headed



UPPER MIDDLE NEWSPHOTO

Some social scientists predict that, in the next generation, half of all children will be born out of wedlock. The trend data for out-of-wedlock births and divorces can be seen in Figure 2.

families. In 1990, the median income of black female-headed families was only 68 percent of white female-headed families, \$9,590 versus \$14,028. But controlling for marital status, the gap narrows to about 20 percent. The relevant figures (see Figure 3 again) are \$13,348 for divorced black mothers and \$16,334 for their white counterparts, compared to \$7,411 for never-married black mothers \$9,816 for whites.

- When one considers that 66 percent of all out-of-wedlock births in 1988 occurred among young women between the ages of 15 and 24, it becomes easier to see why their financial situation is so much worse than their divorced counterparts. Never-married mothers are on the average ten years younger than divorced mothers. The average age range of never-married mothers is 20 to 29; for divorced mothers, it is 30 to 39. The age spread for this second group is lower than it might otherwise be because it includes many unwed mothers who later marry but only for a short time.

Never-married mothers are also, on the average, much less educated. Only 57 percent of never-married mothers have a high school diploma, compared to 82 percent of divorced mothers (see Figure 4). This latter figure, too, is pulled down by the number of formerly unwed mothers who subsequently marry.

Thus, age, lack of education, and other demographic factors combine to

FIGURE 1
Female-headed families with children under age 18

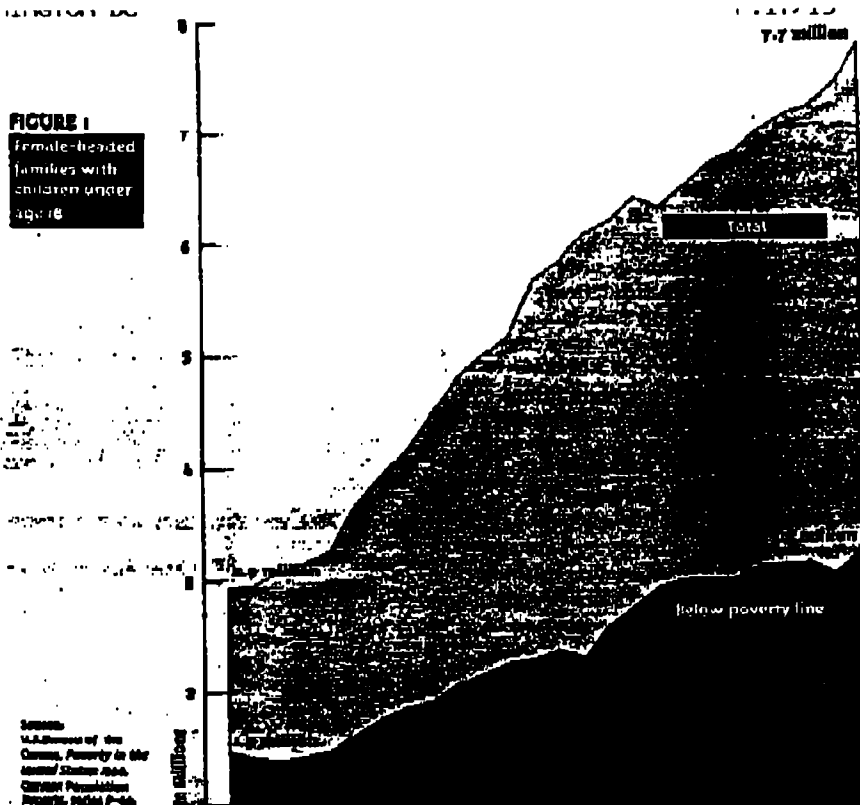


FIGURE 2
Out-of-wedlock birth and divorce rates



give never-married women much poorer job prospects. In 1990, 61 percent of divorced mothers worked full time, and an additional 11 percent worked part time, but only 29 percent of never-married mothers worked full time, and 8 percent part time. And their lack of work experience is only exacerbated by the fact that young single mothers have little chance of completing their education or acquiring job skills while having to care for a child.

Is This "Murphy Brown"?

These demographic differences between unmarried and divorced women translate into dramatically different rates of AFDC utilization. A much higher proportion of unwed mothers go on welfare than do divorced mothers. According to AEI's Nick Eberstadt, almost three-fifths of children born out-of-wedlock in the United States were on AFDC in 1982, compared to just under a third of children of divorced mothers. In fact, children of never-married mothers are three times more likely to be on welfare than are children of divorced mothers.

Teens have the worst prospects of all unmarried mothers. In 1988, 65 percent of teen mothers were unmarried at the time of their first child's birth, compared to 15 percent in 1950 (see Figure 5). According to a Congressional Budget Office report, 77 percent of unmarried adolescent mothers were welfare recipients within five years of the birth of their first child. Sixty percent of AFDC mothers under the age of 30 had their first child as a teenager.

Never-married mothers not only go on welfare in greater numbers than divorced women but they also stay on longer. While divorced women typically use welfare as a temporary measure until they get back on their feet, unmarried mothers become trapped in long-term welfare dependency. In a study of welfare mothers, Nicholas Zill of Child Trends, Inc., and his colleagues found that 43 percent of long-term AFDC recipients were 17 years old or younger at the time of their first birth, compared to 25



GEOFFREY MORGAN PHOTOS

The median income for female-headed families is about one-third that of intact families. In 1990, the median family income for children living with both parents was \$39,076. For children living with their mothers only, however, median family income was \$12,005.

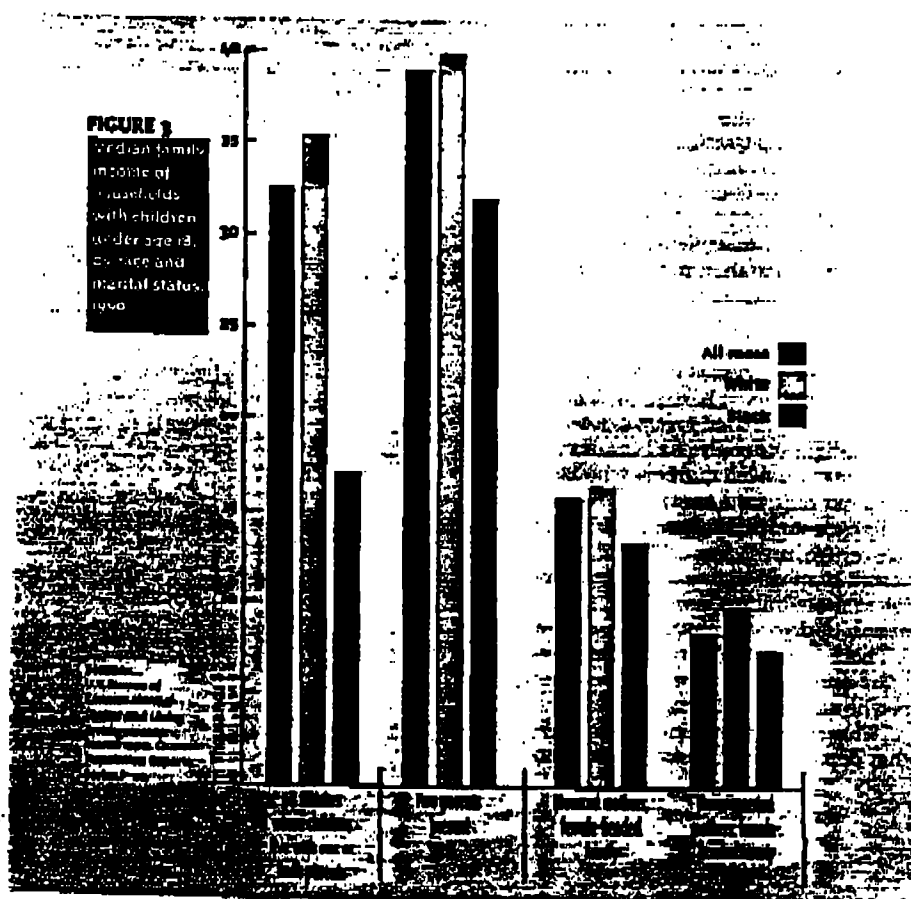
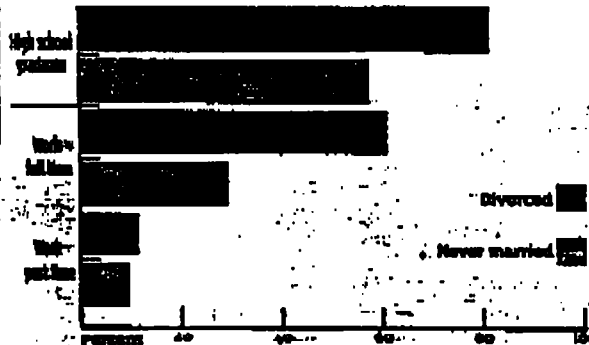


FIGURE 4

Characteristics of female-headed families by marital status, 1990

Source: U.S. Census Bureau, *Current Population Reports*, 1990-1991.



More than any other single factor, marital status determines whether a woman entering AFDC will become a long-term recipient. Forty percent of never-married mothers will receive AFDC for 10 years or more, compared to 14 percent of divorced mothers.



FIGURE 5

Percent of births to women age 18 years and under by marital status in 1990 and 1988

Source: U.S. Census Bureau, *Current Population Reports*, 1990-1991.

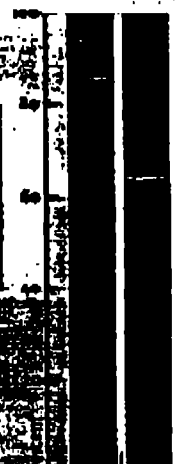


FIGURE 6

Percent of divorced and never-married recipients who will receive AFDC for periods of 10 years or more

Source: U.S. Census Bureau, *Current Population Reports*, 1990-1991.



percent of short-term recipients.

According to a study by Harvard's David Ellwood, about half of the new entrants to AFDC will be off welfare within four years, most within two years. The other half, however, are on for much longer—on average, almost seven years. More than any other single factor, marital status determines whether a woman entering AFDC will become a long-term recipient. Forty percent of never-married mothers will receive AFDC for 10 years or more, compared to 14 percent of divorced mothers (see Figure 6).

Levels of child support also vary markedly between these two groups of single mothers. In 1987, 77 percent of divorced mothers received child support awards, compared to only 20 percent of never-married mothers. The average annual payment to divorced mothers was \$3,073, while the average payment to never-married mothers was \$1,632.

Divorced mothers and their children suffer less severe poverty for shorter periods of time than do never-married mothers and their children. This is not to say that post-divorce poverty is not a serious problem—it is. But much more than a divorce, an out-of-wedlock birth to a young mother seems to be a direct path to long-term poverty and welfare dependency.

The economic consequences of our high illegitimacy rate seem beyond debate. It is one thing when a divorced, high-profile newswoman on a television sitcom has a baby without her ex-husband's financial support; it is quite another when a teenager or a young mother on welfare does. The difference, to put it bluntly, is money.

Acknowledging this dichotomy between divorced and unwed mothers is the first step toward developing effective social welfare policies. Both groups deserve our attention. But policies developed for each need to be based on a realistic understanding of the deep differences between them.

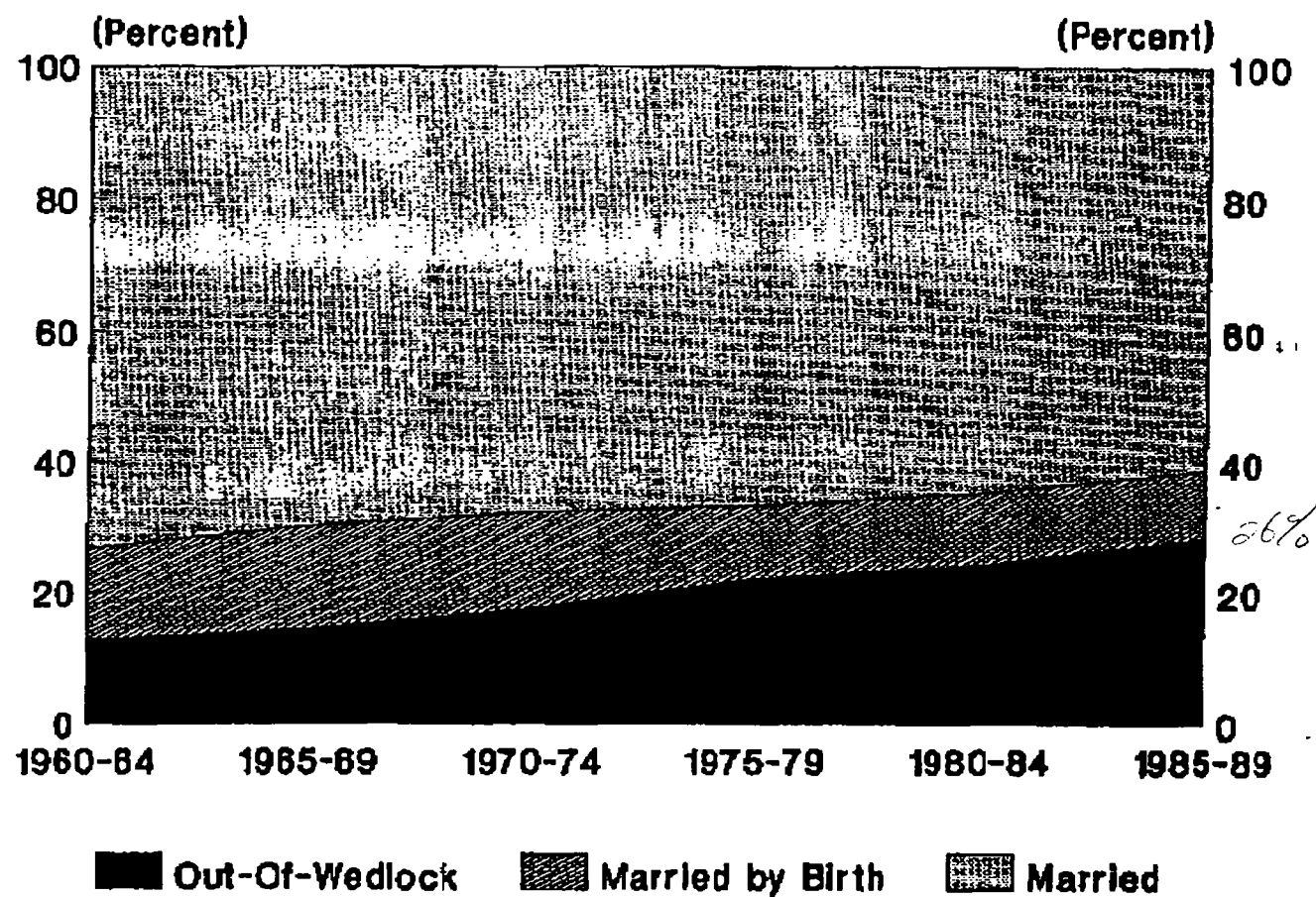
Douglas J. Besharov is a resident scholar at the American Enterprise Institute. Karen N. Gardiner of AEI helped prepare this article.



(5)

Marital Status at First Birth

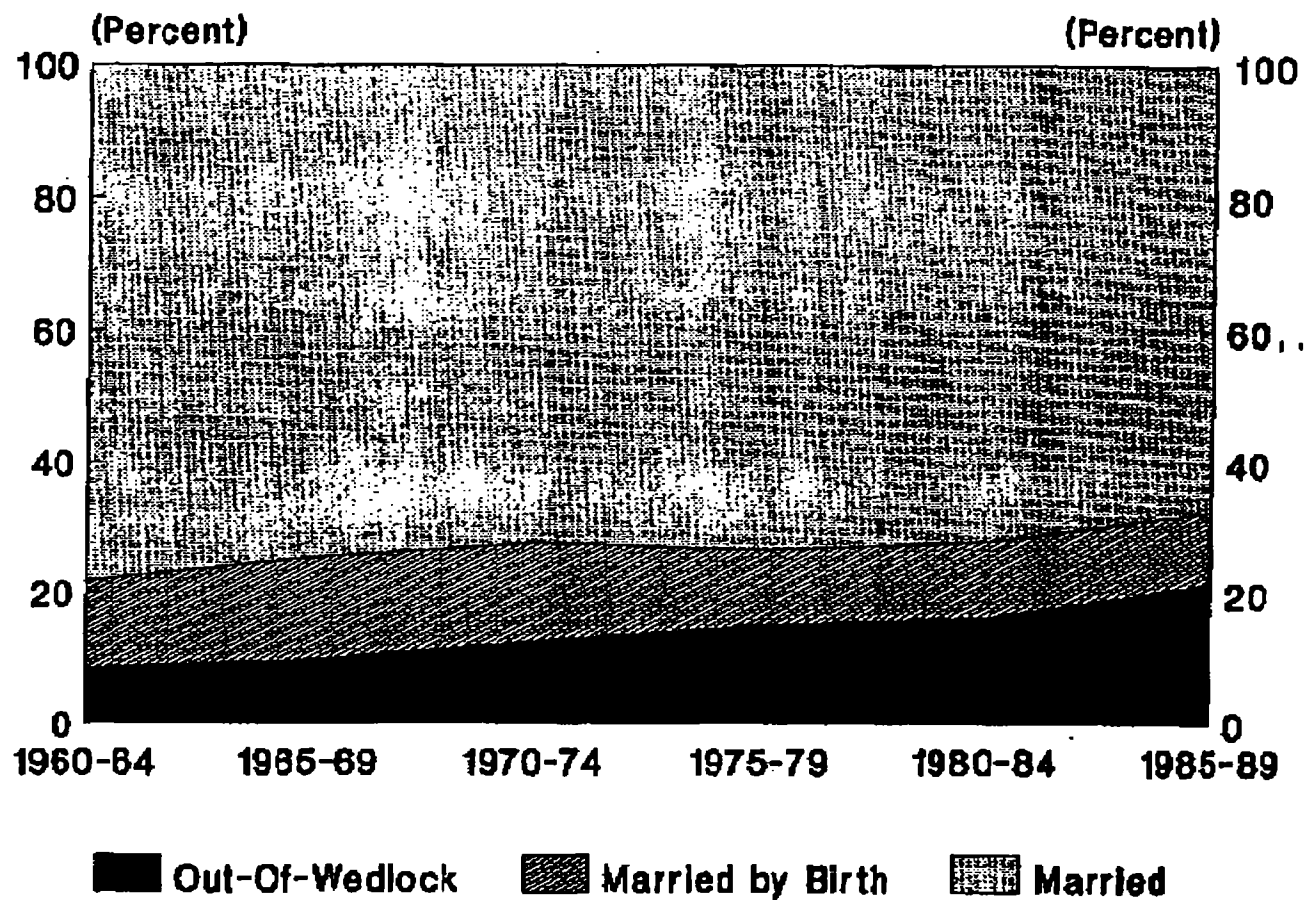
All Women



Source: Census Bureau

(6)

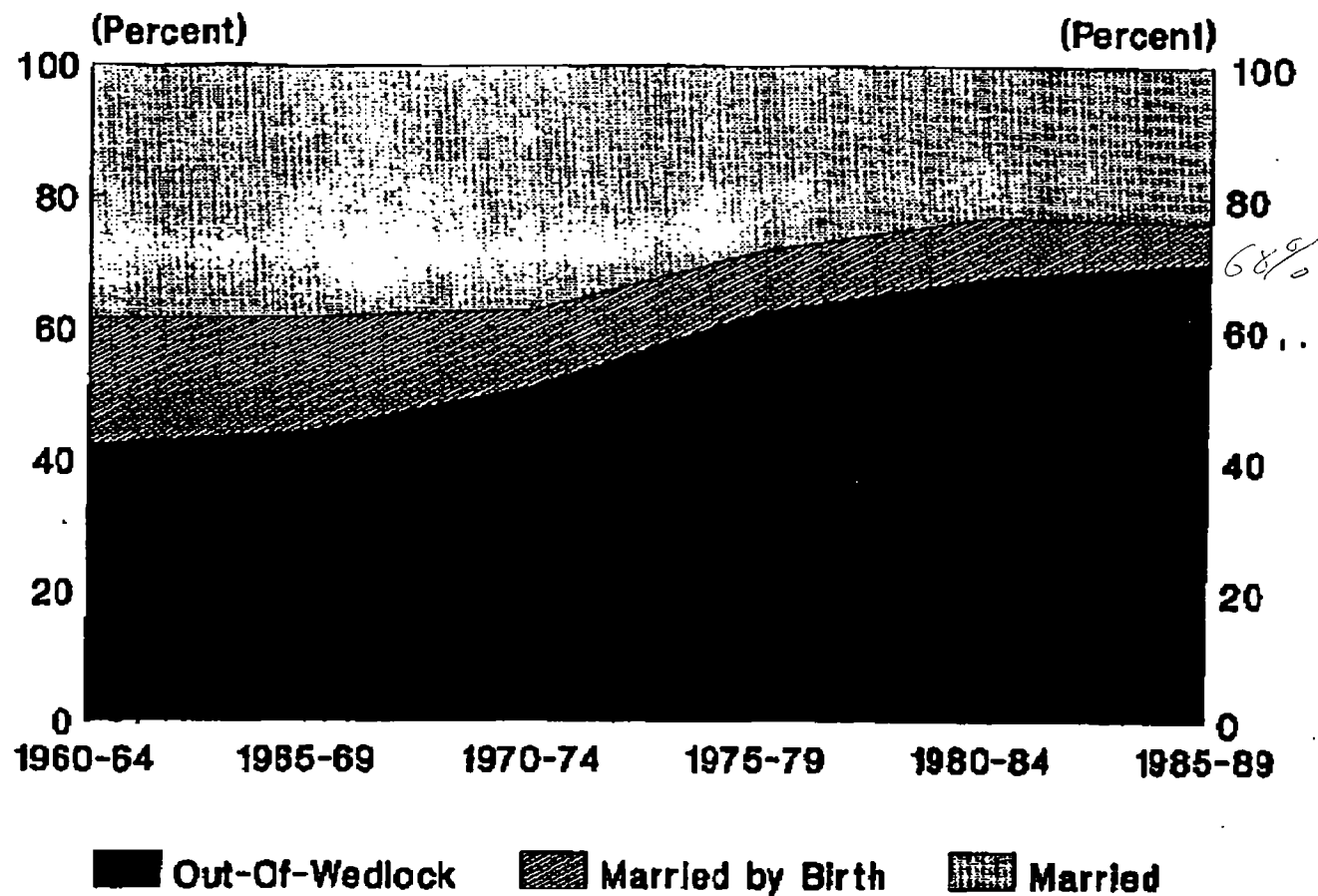
Marital Status at First Birth White Women



Source: Census Bureau

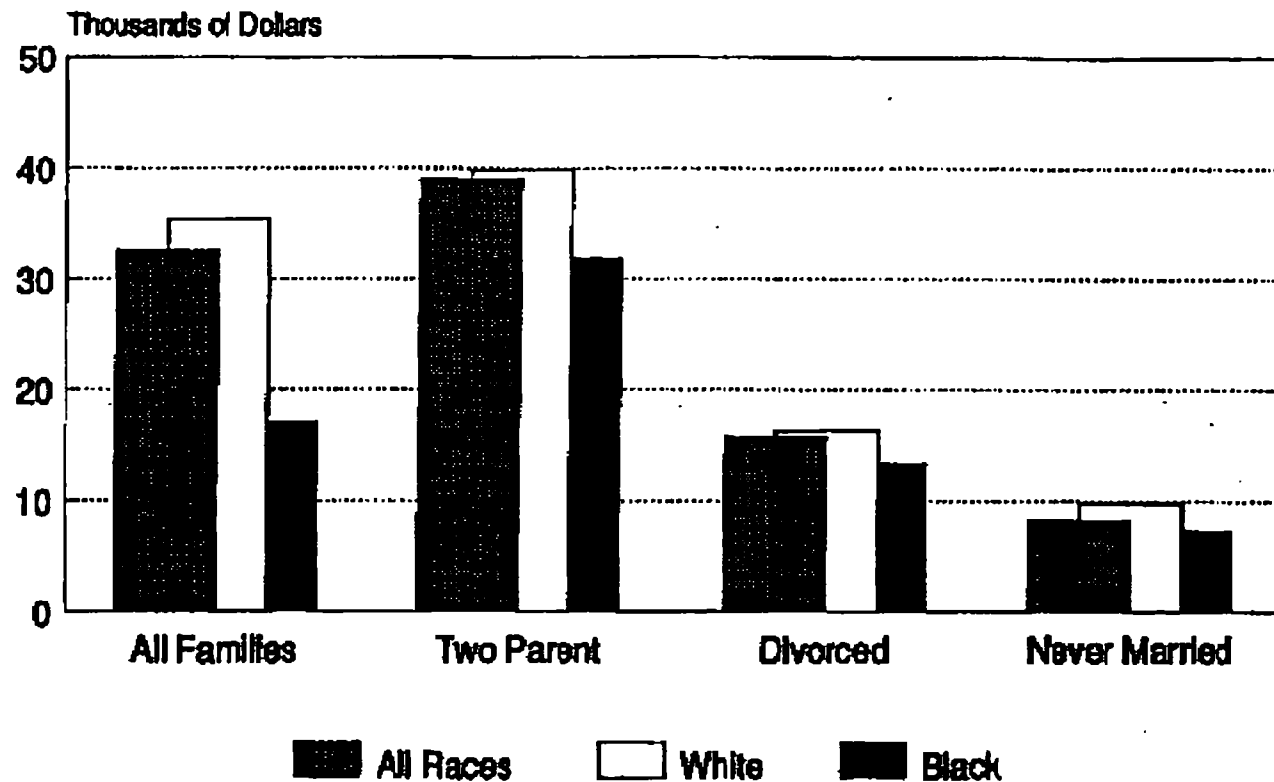
(7)

Marital Status at First Birth Black Women

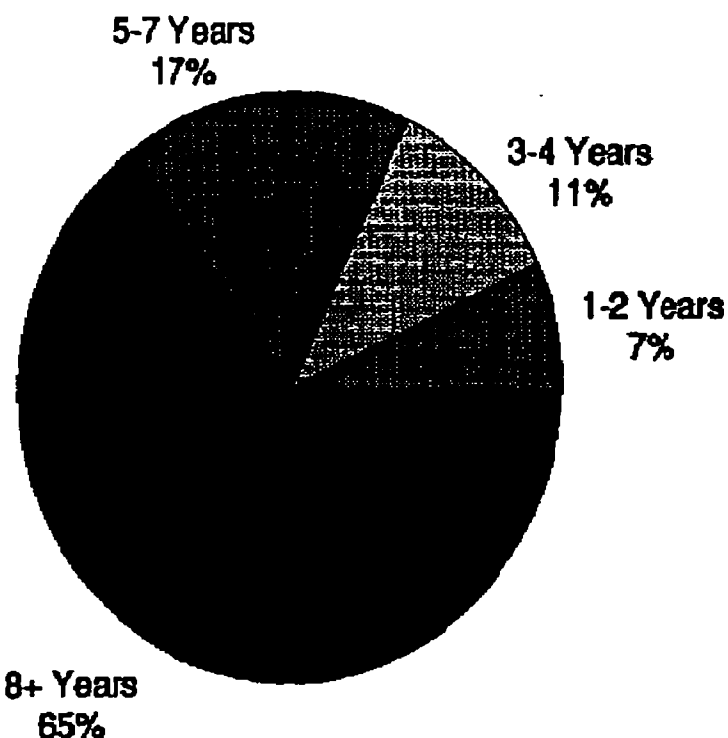


Source: Census Bureau

Median Family Income of Households By Race and Marital Status 1990

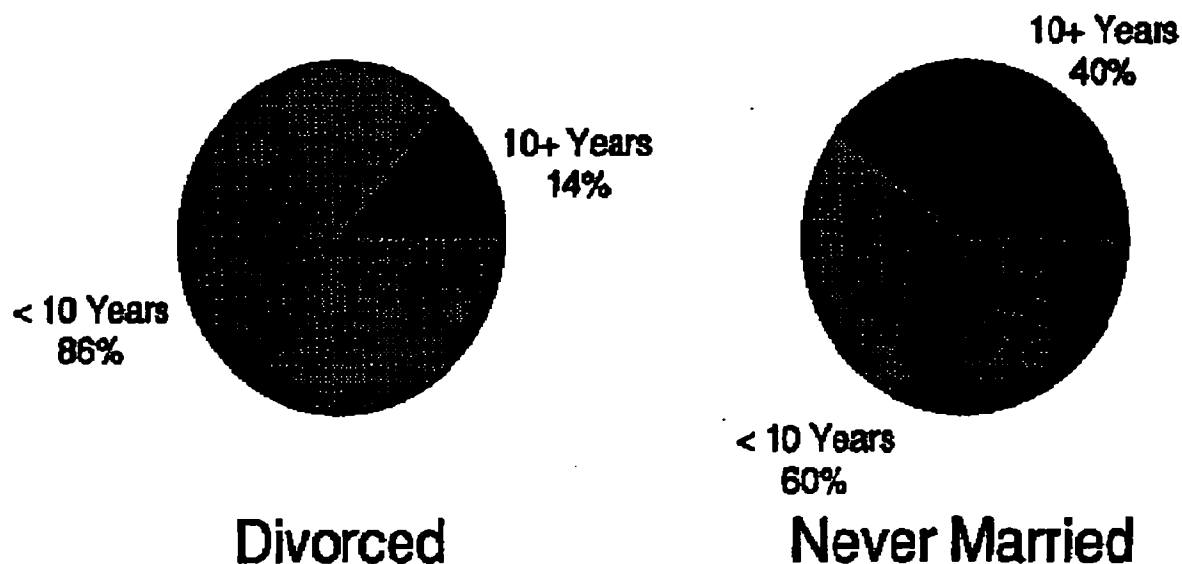


Persons on AFDC at a Point in Time By Length of Spell*

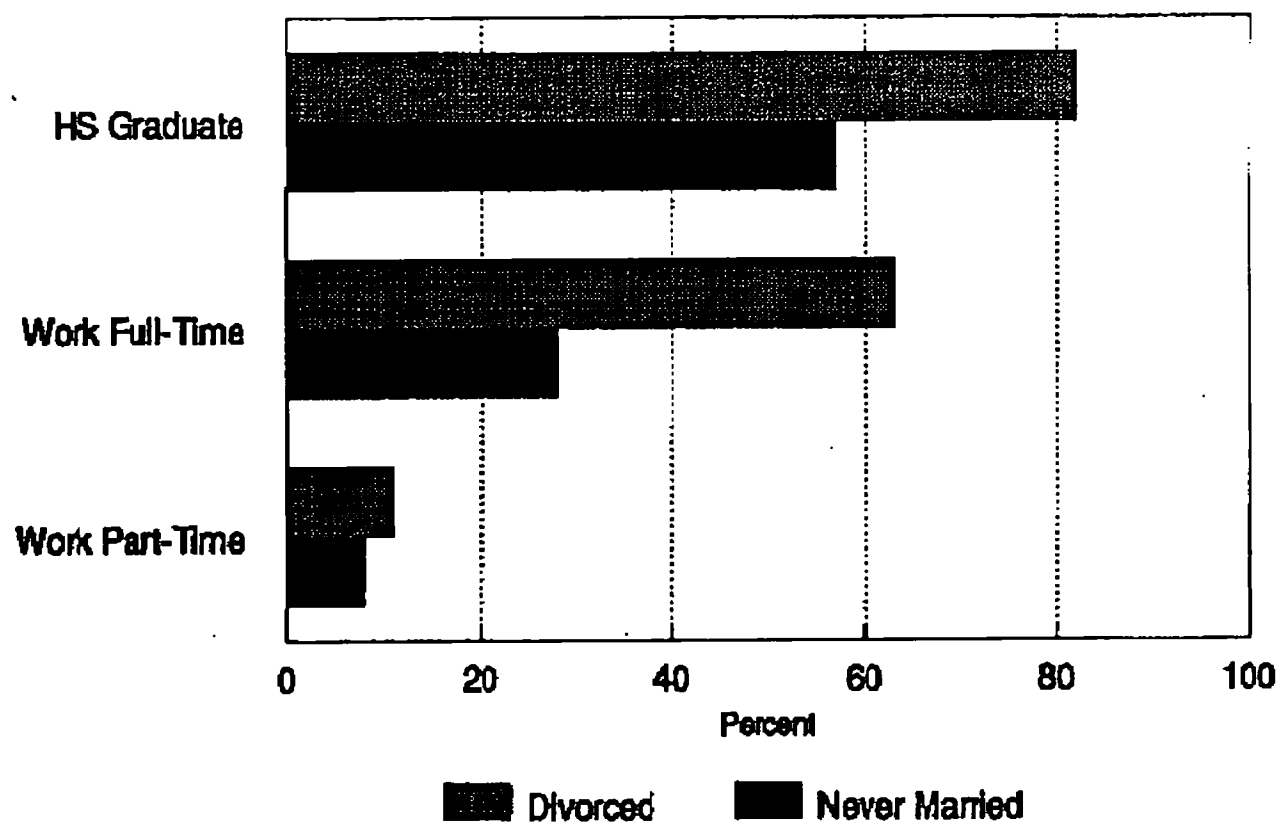


48% of people who enter AFDC in any one year are off within 2 years, but 65% of recipients at any point in time are on for 8 or more years

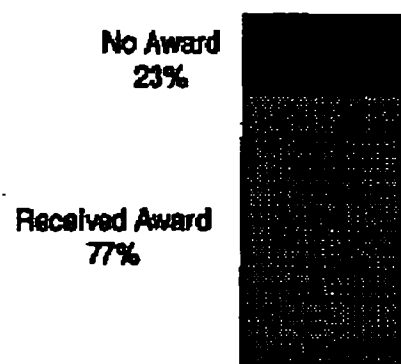
Recipients Who Will Have AFDC Spells of 10 or More Years, By Marital Status at Beginning of First Spell



Characteristics of Female Heads By Marital Status

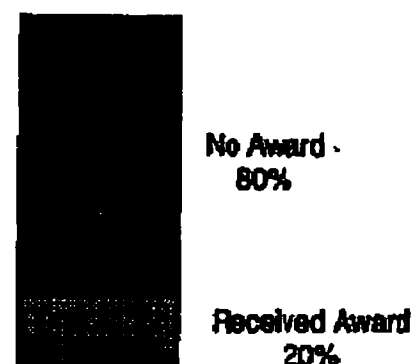


Mothers Awarded Child Support By Marital Status 1987



Divorced

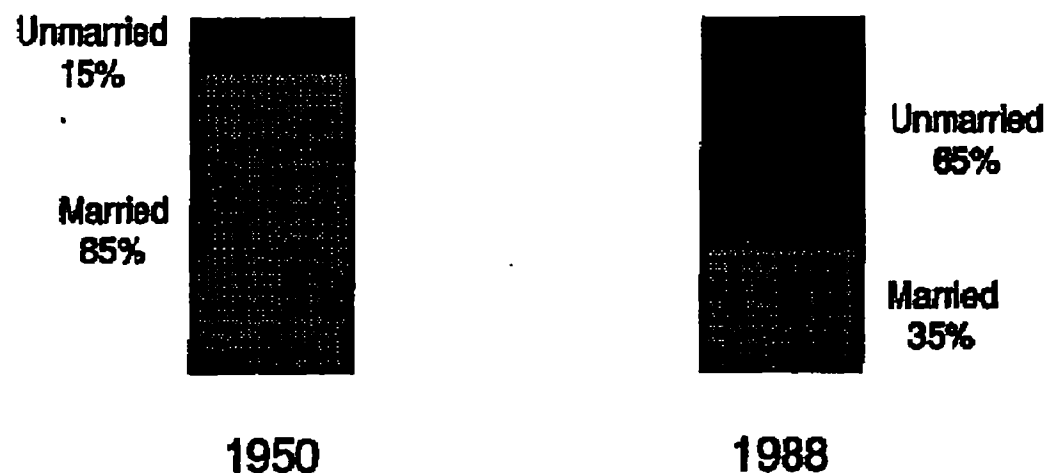
Average Annual Payment: \$3,073



Never Married

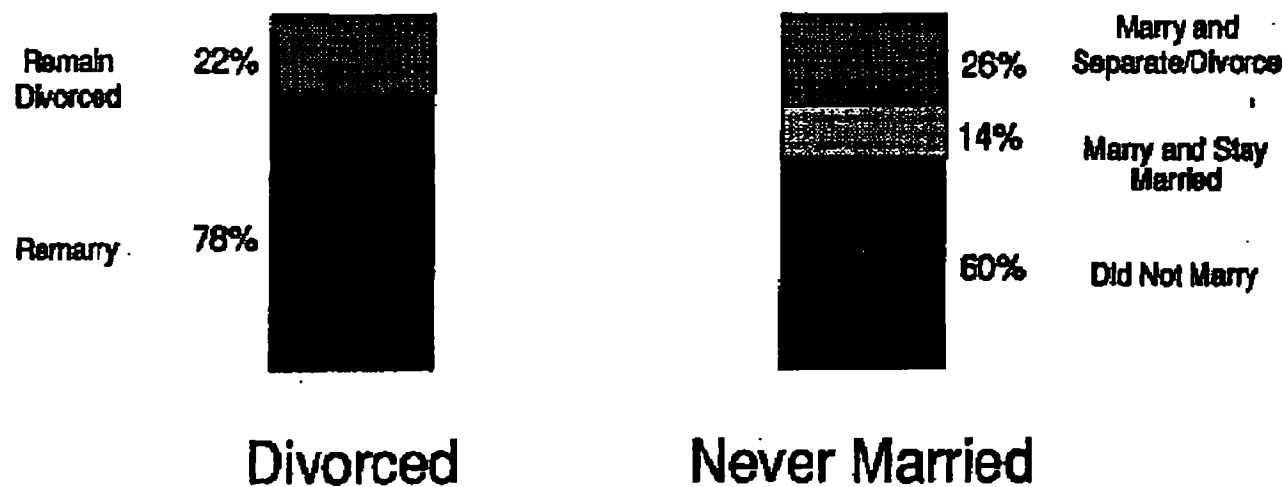
Average Annual Payment \$1,632

Births to Adolescents By Marital Status



**77% of unmarried adolescent mothers were AFDC recipients
within 5 years of their first birth**

Marriage and Remarriage by Female Household Head



Median interval of remarriage:
2.5 years

THE Public Interest

NUMBER 115, SPRING 1994

Does welfare bring more babies?

CHARLES MURRAY

LAST OCTOBER, I published a long piece on the op-ed page of the *Wall Street Journal* entitled "The Coming White Underclass." Its thesis was that white illegitimacy—22 percent of all live births as of the latest (1991) figures—is now moving into the same dangerous range that prompted the young Daniel Patrick Moynihan to write about the breakdown of the black family in 1964, and that the ensuing social deterioration in lower-class communities may be as devastating for whites in the 1990s as it was for blacks in the 1960s. The centerpiece of my solution was to abolish all federal support for single women with children.

The response was, for me, unique. It is not just that the piece aroused more intense reaction than anything I have written since *Losing Ground*, but that so many people agreed with me. This is not normal. After I publish something, my mail and phone calls are usually split about 50/50 pro and con. This time, almost everyone agreed that the problem of illegitimacy was just as bad as I described, and a surprising number of people, including some ordinarily prudent people in the public eye, endorsed my radical notion of ending welfare altogether.

All this leads me to believe that illegitimacy is about to re-

place abortion as the next great national social debate. It should; not because the nation spends too much on welfare but because, as Moynihan said first and best, a community that allows a large number of young men to grow up without fathers "asks for and gets chaos." I believe it is not hyperbole but sober fact that the current levels of illegitimacy already threaten the institutions necessary to sustain a free society.

And so I want to end welfare. But this raises an obvious question: do we have any reason to believe that ending welfare will in fact cause a large-scale reduction in illegitimacy? Does welfare cause illegitimacy?

The answer has seemed self-evident to people ranging from the man in the street to Nobel laureate economists. The answer has not been nearly so clear, however, to social scientists who have studied the problem, nor has the search for an answer been conducted with stately scholarly detachment. It has instead been a hard-fought battle stretching back many years. Almost everyone has brought convictions about what the answer ought to be, for few issues have been so politically charged. But with a few lapses, the combatants have played by the technical rules in making their points, and, after all this time, we have learned at least a few things on which we can agree.

Two detailed reviews summarize the academic evidence. One, by Brown University economist Robert Moffitt, is called "Incentive Effects of the U.S. Welfare System: A Review," and it appeared in the *Journal of Economic Literature* in March 1992. I wrote the other one, called "Welfare and the Family: The U.S. Experience," as part of a special issue of the *Journal of Labor Economics* in January 1993, devoted to a set of articles comparing American and Canadian social policy.

What follows summarizes the major area of agreement that has developed over the last ten years—necessarily simplifying many findings and ignoring nuances. Then I turn to the major remaining area of disagreement. It brings to the attention of a general audience—for the first time, to my knowledge—a major technical error in the understanding of black illegitimacy that has large consequences for the subsequent debate. Bluntly: an important and commonly used argument of those who say that welfare does not cause illegitimacy is 180 degrees wrong.

Where analysts agree

If the agreement could be summed up in a single sentence, it is that moderate differences in welfare benefits produce some differences in childbearing behavior, but only small ones. The main research strategy for reaching this conclusion has been to explore the effects of variations in AFDC (Aid to Families with Dependent Children) benefits across states. The hypothesis has been that since benefits vary widely, there should be differences in childbearing behavior as well, if indeed welfare is a culprit in producing illegitimacy.

Back in 1983, David Ellwood and Mary Jo Bane—both now senior officials in Clinton's Department of Health and Human Services—wrote the early version of a paper (still being circulated in typescript) during the debate over *Losing Ground* that everyone interpreted as proving that welfare doesn't cause increases in illegitimacy. That's not exactly what the analysis found—their approach to the issue was indirect and used a methodology so complex that evaluating the results is difficult even for specialists—but "Ellwood and Bane" is nevertheless still cited in the media as the definitive study that welfare does not affect illegitimacy.

Since then, several studies have explored the issue more directly, and the consensus has shifted to a tentative conclusion that welfare is implicated, but not dramatically. The results from the recent studies have many differences, and it would be unrealistic to try to draw a consensus from them about the magnitude of the effect of welfare. One study found a fairly large effect on childbearing behavior (for example, a predicted increase of 16 percent in the probability of teen births if welfare benefits rose 20 percent), but the effect was statistically insignificant. (This can happen when samples are small or the variation in results is very large.) Another found an effect that was in the same ballpark (a 6 percent increase in childbearing by unmarried women in response to a 10 percent increase in welfare benefits) and was also statistically significant. Other studies have found statistically significant effects without reporting the magnitude.

Until recently, studies of this issue have concluded that the effects of welfare are much easier to find among whites than among blacks. In two of the studies mentioned above, all of the

apparent effect of differing welfare benefits on childbearing behavior was accounted for by the behavior of whites. An additional study that was limited to black teenagers found only a small, statistically insignificant effect.

But the situation is changing. A recent detailed study by Mark Fossett and Jill Kiecolt in the *Journal of Marriage and the Family* using 1980 census data found a substantial and consistent relationship between the size of public assistance payments and illegitimacy among black women ages 20–24, even after controlling for a wide variety of economic, social, and demographic factors. Why did this study find a relationship where others had not? Partly because the analysis was more tightly focused than the others, using metropolitan areas rather than states; partly because the study focused on a particular age group (women ages 20–24) instead of lumping all women together. Much more work remains to be done regarding black illegitimacy and welfare, but the best bet at this time is that the results for blacks and whites will converge. Using what the social scientists call “cross-sectional data”—comparing different places at the same historical moment—it seems likely that welfare will be found to cause some portion of illegitimacy, but not a lot.

The area of agreement, limited though it may sound, has important policy implications. Even taking the studies showing the largest statistically significant effect of welfare on childbearing, there is no reason to suppose that reducing welfare benefits by 10 percent will produce more than about a 6 percent drop in childbearing among single women. This is not enough to make much difference in anything. More generally, if you were to ask scholars of various political viewpoints in the welfare/illegitimacy debate about the prospective effects of other welfare proposals that have been in the news recently—stopping the increase in benefits that kicks in when a second child is born, toughening workfare requirements, linking welfare to school attendance, and so forth—almost all of us would be pessimistic. We have different reasons for thinking that such changes would be good or bad, but the available data do not give much cause to think that such small changes will produce more than small effects.

There is another intriguing implication of this research, however, that has gone unremarked. The same regression coefficients that show small effects from small changes imply that

getting rid of welfare altogether would have large effects. If a 10 percent increase in welfare benefits elicits a linear 6 percent increase in extramarital childbearing (to take a middle-of-the-road finding), what would a 100 percent decrease produce? A 60 percent reduction in extramarital childbearing? The coefficients might not behave linearly in the real world, of course. The effects of reductions could diminish as the magnitude of the reduction in welfare approaches 100 percent, or they could as plausibly grow. The effects need not be symmetric for increases and decreases in welfare. None of the authors of the various studies has yet explored these tantalizing possibilities, but they obviously call for such exploration.

Where analysts disagree

The favored way of examining the effects of welfare, taking advantage of the natural variation in AFDC payments across states, has a number of defects.

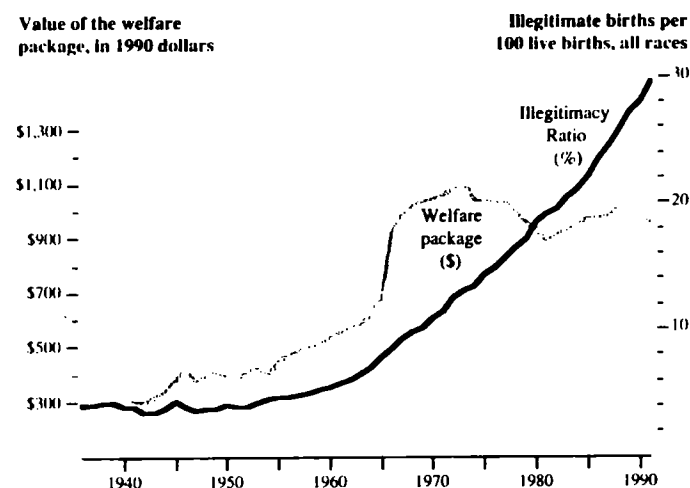
One problem with drawing comparisons across states is that state-by-state differences in welfare benefits are not so great as they seem. When you are first told that Louisiana has an average monthly AFDC payment of \$169 and California has a monthly payment of \$640 (the 1990 figures), the difference looks huge. But some federal benefits (such as food stamps) are more generous in low AFDC states, and Medicaid is available everywhere. Adding in everything, the proportional differences in the welfare packages available in different states shrink. And when you then put those differences in terms of the local economy, the difference nearly disappears. When the General Accounting Office compared the value of welfare packages in thirteen locations across the country in the late 1970s, when state-by-state AFDC differences were near their peak, the agency found that the San Francisco package turned out to provide an income equivalent to 66 percent of the median household income in San Francisco, while the New Orleans package provided an income equivalent to 65 percent of the median household income in New Orleans. Should we be surprised to find that welfare differences between Louisiana and San Francisco do not produce much difference in out-of-wedlock childbearing?

Another problem is that a powerful factor masks the effects of welfare on blacks when scholars base the analysis on states.

The black-white difference in illegitimacy goes back to the earliest post-Civil War data. No scholar has ever succeeded in explaining away this racial difference with any combination of economic, social, or educational control variables. The residual difference is astonishingly large. Based on the data from a large national database (the National Longitudinal Study of Youth), the probability that a baby will be born to a single woman is more than twice as high for blacks as whites after controlling for age, education, socioeconomic background, and poverty. For reasons that are still not understood, something in black culture tolerates or encourages birth out of wedlock at higher rates than apply to white culture in any given year, and this has been true before and after welfare was introduced. The problem is that "black culture" (a term I am using because no one knows how to describe it more specifically) is not spread evenly across the United States. The states in which blacks have the very lowest illegitimacy ratios are places like Idaho, Montana, North and South Dakota, Alaska, Hawaii, New Hampshire, and Maine, where AFDC payments are often well above the national average, but a very small black population lives in the midst of a dominating white culture (with its much lower illegitimacy ratios). Most of the states with the very lowest AFDC payments are in the Deep South, where blacks not only constitute a major portion of the population, but are densely concentrated in given areas—also, in other words, where whatever-it-is about black culture that produces high illegitimacy is likely to permeate the world in which black youngsters grow up. In statistical terms, this means that a great deal of noise is introduced when one analyzes the effect of varying AFDC payments. The same data that show no relationship between welfare and illegitimacy among blacks across states suddenly show such a relationship when one controls for the size and density of the black population.

The main problem with comparisons across states is that they ignore the overriding historical reality that welfare went up everywhere in the United States in a concentrated period of time, producing an overall national change that dwarfs the importance of between-state differences. Focusing on differences between states ignores the main effect.

Even when one takes a historical perspective, the story is a complex one. Here, pictorially, is the main battleground in the



Source: Illegitimacy data since 1960: National Center for Health Statistics, "Advance Report of Final Natality Statistics," *Monthly Vital Statistics Report*, vol. 42, no. 3 (S) (Sept. 9, 1993), table 16, and comparable tables in earlier volumes. Data prior to 1960: National Center for Health Statistics, *Vital Statistics*. Computation of the welfare package uses budget data from U.S. Bureau of the Census, *Statistical Abstract of the United States*, on AFDC, food stamps, public housing, and Medicaid. The method of computation is described in Charles Murray, "Welfare and the Family: The American Experience," *Journal of Labor Economics*, vol. 11, no. 1, pt. 2 (Jan. 1993).

debate over whether welfare causes illegitimacy.

There are many things to argue about in this figure. Probably the one you have heard most often involves the size of the welfare package. I have shown it as a combination of AFDC, food stamps, Medicaid, and public housing subsidies, using conservative methods for valuing these components. Those who argue for an expansion of welfare benefits would have shown a much different figure, showing just the AFDC benefit, which in real terms has retreated to 1950s levels.

But to focus on just the AFDC cash payment is an example of the bogus part of the welfare/illegitimacy debate that most parties to the debate are now beyond, at least when they talk among themselves. Statements such as "welfare benefits are now back to 1950s levels" often show up in congressional testimony and the network news shows, but no serious student will deny that food stamps, Medicaid, and housing benefits are part of the

relevant package available to a young woman with a baby and that those have expanded dramatically, along with a hodge podge of other benefits both federal (the Special Supplemental Food Program for Women, Infants, and Children for example) and state or municipal (heating fuel subsidies, eviction protection, for example). Arguments about the specific value of Medicaid and public housing subsidies could result in minor shifts in the trend line shown in the figure, but the overall shape must remain the same by any method of computation: a very large increase in the last half of the 1960s, a smaller drop in real value in the last half of the 1970s (because of inflation—the nominal value of benefits continued to rise), and only small changes since the early 1980s, when inflation subsided. This basic shape of the trend in welfare benefits sparks the authentic part of the debate, which may be summarized as follows.

Looking at the figure, we see that the real value of the welfare benefit first available in 1936 begins to rise in the mid-1940s. By the end of the 1940s, the illegitimacy ratio begins a modest rise too. The increase in the welfare package steepens somewhat in the mid-1950s, and within a few years the slope of the illegitimacy ratio steepens as well. Then in the mid-1960s the trend lines for both the value of the welfare package and illegitimacy shoot sharply upward. All of this is consistent with an argument that welfare is an important cause of illegitimacy.

But there is another side to this story, as shown in the graph after the early 1970s. After 1973, the value of the welfare package begins to drop, while illegitimacy continues to increase. This is inconsistent with a simple relationship of welfare to illegitimacy. Why didn't illegitimacy decrease a few years after the value of welfare began to decline?

At this point, the published research literature is little help. The "research," if it may be called that, has consisted mostly of pointing to the part of the graph that is consistent with one's position. But the contending parties in the debate must hold certain underlying assumptions about how causation is going to work in such a situation. Let's suppose you want to argue that the trend in illegitimacy should have flattened and reversed when the real value of welfare benefits stopped climbing. It seems to me that this implies two assumptions: (1) fertility behavior is highly sensitive to incremental changes in welfare benefits, inde-

pendent of existing fertility trends among single women, and (2) young women accurately and quickly discount nominal increases in welfare in keeping with changes in the Consumer Price Index.

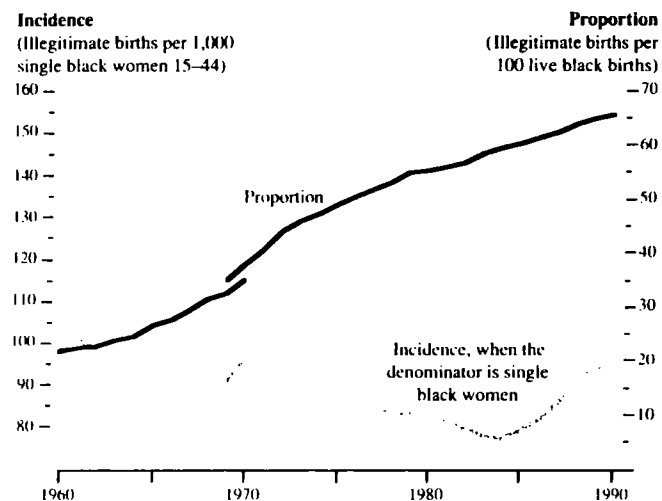
I do not find either of those assumptions plausible. In the late 1970s, social scientists knew that the real value of the welfare benefit was declining, but the young woman in the street probably did not. She was, after all, seeing her friends on welfare get checks that were larger every year, and health care and housing benefits that were more important every year as prices went up.

People like me also have to meet a burden, however. The main one, as I see it, is to spell out how a complex causal sequence is working, for, clearly, a simple causal link (fertility behavior among single women goes up and down with the value of the welfare check) doesn't work. One of the key features of my explanation is the assumption that many of the social restraints on illegitimacy erode as out-of-wedlock births become more common. Thus we may argue that the very large increase in benefits in the 1960s was indeed a major culprit in jacking up the illegitimacy ratio, but that the increased prevalence took on a life of its own in the 1970s. I find this plausible but, obviously, many who use the 1970s as evidence that welfare does not cause illegitimacy must not find it plausible. Here, the prescription to improve the quality of the debate is for both sides to spell out the assumptions that go into their causal arguments and test them against the data.

The great black fertility illusion

This brings us to the issue I mentioned earlier, that on one argument crucial to the debate, the accepted wisdom is 180 degrees wrong. It involves black illegitimacy, which has always been at the center of public concern about illegitimacy, and at the center of debate about causes. Many of you who have followed the welfare debate will recognize it, for the argument is made frequently and volubly. It goes like this:

Yes, the proportion of black children born to single women started to shoot up rapidly during the 1960s. But during that same period, the incidence of births among single black women was actually going down. If the increases in welfare during the 1960s had such terrible effects, why were fewer single black wo-

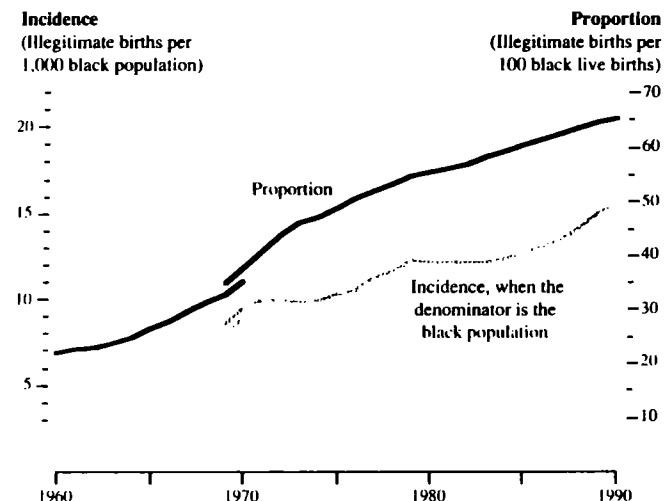


Line segments: 1960-70: All nonwhites. 1968-90: Blacks only.
Source: Computed from National Center for Health Statistics, "Advance Report of Final Natality Statistics," *Monthly Vital Statistics Report*, vol. 42, no. 3 (S) (Sept. 9, 1993), tables 1 and 17, and comparable tables in earlier volumes.

men having babies? Here are the trend lines for the proportion (represented by the line labeled proportion) and incidence (represented by the line labeled incidence).

As one writer put it: "Unmarried black women were having babies at a considerably lower rate in 1980 than they were in 1960. Further, the birth rate among black single women had fallen almost without a break since its high in 1961." The author? Me, writing in *Losing Ground*. At that time, like everyone else involved in the welfare/illegitimacy debate, I took for granted that the production of black illegitimate babies was falling, even though the proportion of black children born to single women was rising, and that this was something that those who would blame welfare for illegitimacy would have to explain away.

Such explanations are available because fertility rates were falling for married women as well. One may acknowledge that broad social forces can have an overriding influence on the propensity of women to have children and still argue that welfare has an independent role in shaping the marital circumstances surrounding the children who are born. But, given the



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figure shown here, it becomes implausible to make the more ambitious argument that welfare bribes women to have children, no matter how often social workers tell you that they know of many such cases. That is why, in the example of Harold and Phyllis, which became one of the best-known sections of *Losing Ground*, I was careful to begin the scenario with Phyllis already pregnant. I was persuaded by the evidence summarized in the paragraph above that a case could not be made that welfare caused more births, only that welfare raised the probability that a given birth would be illegitimate.

I was wrong. The figure on the previous page reflects a statistical illusion. Here, in the next figure, is the appropriate way to view the production of black babies out of wedlock from 1960 to 1990.

The line for the proportion remains unchanged, but what a dramatic difference in the measure of incidence. The incidence of black illegitimacy did not peak in 1960; on the contrary, it increased slowly until the late 1960s, when it shot up and then continued increasing with only short breaks through the end of

the 1980s.

What statistical game has been played? If you take a careful look at the labels in the figures, you may be able to figure it out for yourself—notice the difference between “illegitimate births per 1,000 single black women 15-44” in the first graph and “illegitimate births per 1,000 black population.”

Statistics don't lie, as long as everyone is clear on precisely what question is being asked and precisely what the statistic measures. Here, we are interested in two separate phenomena: proportion and incidence. Proportion can be measured only one way (divide the number of illegitimate babies by the total number of live births). But in the second and third figures, we used two different ways of measuring incidence, and they showed utterly different results. They cannot both be right. Which one is?

The underlying sense of “incidence” is “frequency relative to a consistent base.” If the size of a population were constant, then we could simply use the raw number of illegitimate births as our measure of incidence. But populations do not remain constant. Therefore we need to divide the number of births by some denominator that will hold the population factor constant. The usual way to do this is by using the number of single women as the denominator. This makes intuitive sense, since we are talking about illegitimate births. But it is an inferior measure of incidence because the real issue we are interested in is the production of illegitimate babies per unit of population. What few people, including me, thought about for many years is that it is possible for the production of illegitimate babies per unit of population to go up even while the probability that single women have babies goes down.

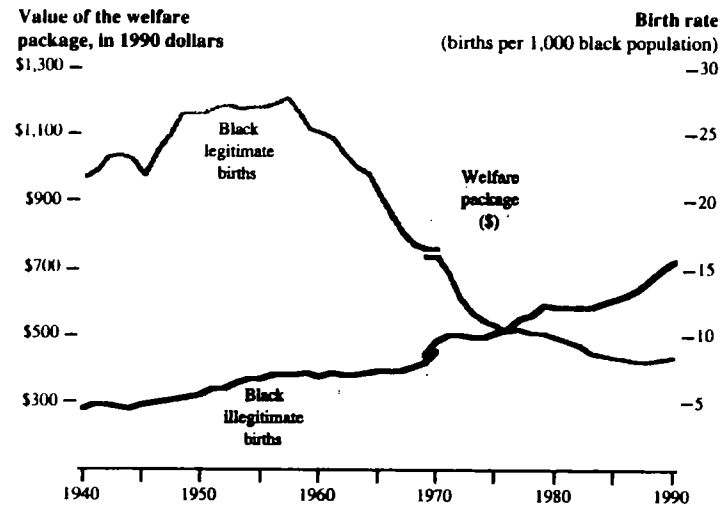
This seeming paradox can occur if the number of single women suddenly changes far out of proportion to the increase in the overall population, and that's what happened to blacks during the 1960s. In a mere five year period from 1965 to 1970, the proportion of black women ages 15-44 who were married plummeted by 9 percentage points, from 64 to 55 percent—an incredible change in such a basic social behavior during such a short period of time. (During the same period, the comparable figure for whites fell from 69 to 66 percent.) Black marriage continued to fall throughout the 1970s and 1980s, standing at about 36 percent in 1990.

To see what this does to the interpretation of fertility rates, think of the familiar problem of interpreting Scholastic Aptitude Test (SAT) scores. Whenever the scores go down, you read news stories pointing out that maybe education isn't getting worse but that more disadvantaged students (who always would have scored low, but had not been taking the SAT) have entered the SAT pool, therefore causing the scores to fall. It is a similar scenario with the pool of black single women: By 1970, a large number of black women who would have been married in the world of 1960 were not married. The pool was being flooded. Did these new additions to the pool of single women have the same propensity to have babies out of wedlock as the old pool of single women? The contrast between the two figures suggests that the plausible answer, no, is correct.

The crucial point is that the number of illegitimate babies in the black population—not just the proportion, but the number—produced in any given year among a given number of blacks nearly doubled between 1967 and 1990, even though the fertility rate among single black women fell. It increased most radically at the end of the 1960s, tracking with a plausible time lag the most rapid rise in welfare benefits. Or in other words, black behavior toward both marriage and out-of-wedlock childbearing during the period in which welfare benefits rose so swiftly behaved exactly as one would predict if one expected welfare to discourage women from getting married and induce single women to have babies.

When we then take the same measure and look at it over the fifty year sweep from 1940 to 1990, comparing black incidence of birth within marriage and outside marriage, all against the backdrop of the value of the welfare package, the figure on the following page is how the picture looks.

The figure is not in any way “proof” of a causal relationship. But it is equally important to confront the plain message of these data. At the same time that powerful social and economic forces were pushing down the incidence of black children born to married couples, the incidence of black children born to unmarried women increased, eventually surpassing the rate for married couples. Something was making that particular behavior swim against a very strong tide, and, to say the least, the growth of welfare is a suspect with the means and opportunity.



Line segments: 1960-70: All nonwhites. 1968-90: Blacks only.
Source: Sources used for figure 1.

This new look at black illegitimacy, then, contradicts one of the main arguments that has been used to exculpate welfare's role in promoting illegitimacy. This will not stop the debate. The map linking welfare and illegitimacy still has big gaps. Optimistically, the progress we have been making in the last decade will continue. Pessimistically, it had better. For if illegitimacy is as serious a problem as I think, we cannot afford to waste much more time in deciding what needs to be done.