DOCUMENT RESUME

ED 432 389 PS 027 773

TITLE Children and Welfare Reform: A Guide to Evaluating the

Effects of State Welfare Policies on Children.

INSTITUTION Child Trends, Inc., Washington, DC.

SPONS AGENCY John D. and Catherine T. MacArthur Foundation, Chicago, IL.;

Annie E. Casey Foundation, Baltimore, MD.; George Gund Foundation, Cleveland, OH.; Smith Richardson Foundation, Inc., Greensboro, NC.; Administration for Children and Families (DHHS), Washington, DC.; Office of the Assistant Secretary for Planning and Evaluation (DHHS), Washington,

DC.

PUB DATE 1999-00-00

NOTE 131p.

PUB TYPE Guides - Non-Classroom (055) -- Reports - Evaluative (142)

-- Reports - Research (143)

EDRS PRICE MF01/PC06 Plus Postage.

DESCRIPTORS *Children; *Evaluation Methods; *Evaluation Problems;

Evaluation Research; Measurement Techniques; Policy

Analysis; *Program Evaluation; Public Policy; Well Being

IDENTIFIERS *State Policy; State Policy; *Welfare Reform

ABSTRACT

Although targeted explicitly at changing adult behaviors and outcomes, welfare reform has direct implications for children. This guidebook details the results of the Project on State-Level Child Outcomes, designed to assist states in measuring child outcomes in the context of welfare reform programs. The guidebook is presented in three sections. Section 1 describes the Project study, in which representatives of state welfare agencies, federal government representatives, and researchers identified a set of child outcomes and agreed upon measurement techniques. This section also describes why child outcomes may be affected by adult-focused welfare programs, describes the conceptual model and common set of constructs, and describes several approaches to studying child well-being and the strengths and weakness of each approach. Section 2 presents the common core of constructs, including the rationales and sample questions to assess outcomes related to: (1) family income; (2) employment; (3) family formation and dissolution; (4) mother's psychological well-being; (5) absent parent involvement; (6) stability and turbulence; (7) consumption; (8) use of health and human services; (9) child care; (10) home environment and parenting practices; (11) children's education; (12) children's health and safety; and (13) children's social and emotional adjustment. Section 3 contains five appendices, including a copy of the child well-being survey and adult survey used in Florida, federal data sources, a description of surveys and measures from which sample measures were drawn. Contains approximately 125 references. (KB)

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CHILDREN AND WELFARE REFORM

A Guide to Evaluating the Effects of State Welfare Policies on Children



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- Dear Reader:

Will welfare reform be good or bad for children? Will it strengthen or weaken families? Will it help some children and families, but harm others?

These questions have long been a focus of Child Trends, a nonprofit, nonpartisan research center that studies children and families. For more than a decade, we have studied the implications of various approaches to welfare reform for children's development and well-being—the Federal JOBS program in the late 1980s and early 1990s, private experiments like New Chance, the welfare waivers granted to most states by the Federal government in the early 1990s, and now the major Federal welfare reform enacted in 1996. In the course of this work, we have developed and refined a conceptual model for how children might be affected by policies targeted primarily at adults—policies like mandatory work requirements and time limits on welfare receipt.

We were therefore delighted to work with officials from the U.S. Department of Health and Human Services, representatives from a dozen states selected by HHS, and colleagues in the Family and Child Well-being Research Network to design an evaluation of the effects on children of the welfare waivers implemented a few years ago. For many of these states, the reforms implemented under waivers became the basis of new state welfare policies enacted as part of the 1996 Federal welfare reform law. It was quickly apparent to us that the results of this work would provide a valuable blueprint to anyone wishing to assess how children are faring under welfare reform. With generous support from the MacArthur Foundation and continued funding from HHS, Child Trends therefore developed this guidebook for evaluating the effects of welfare reform on children.

We hope the state officials, researchers, advocates, and others who use this guide will find it a helpful tool for implementing thoughtful, rigorous, and thorough assessments of how children are faring under welfare reform. It is important, indeed critical, to our understanding of how key public policies affect some of the nation's most vulnerable children.

Kristin A. Moore, Ph.D. President and Senior Scholar Child Trends



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Acknowledgments

his guide to evaluating the effects of welfare reform on children grew out of a unique public-private partnership, the Project on State-Level Child Outcomes. This project originated in the Administration for Children and Families and the Office of the Assistant Secretary for Planning and Evaluation at the U.S. Department of Health and Human Services as a way to help 12 selected states add measures of child outcomes to evaluations of state welfare waivers. It quickly grew to include other federal agencies, private researchers, several foundations, and, of course, representatives from the states. Working intensively together over the course of a year, this very diverse group created a detailed plan for evaluating the effects of state welfare waivers on children. The potential impact of their work, however, goes well beyond assessing the effects of welfare waivers. It is also a blueprint for states that wish to assess the effects of the Temporary Assistance for Needy Families (TANF) program on children.

Federal Agencies

Within the federal government, several offices, agencies, and individuals played key roles in devising and supporting this ambitious project. The Department of Health and Human Services (HHS) initiated and led this effort, under the leadership of the Administration for Children and Families and the Office of the Assistant Secretary for Planning and Evaluation. Within HHS, the Centers for Disease Control and the National Institute for Child Health and Human Development (NICHD) provided considerable staff and financial support. The Department of Agriculture also made a financial contribution.

In particular, the following HHS staff provided their consistent leadership and considerable expertise to this effort:

Administration for Children and Families: Howard Rolston and Alan Yaffe.

Office of the Assistant Secretary for Planning and Evaluation: Martha Moorehouse and Ann Segal.

States

Representatives of twelve states brought their knowledge, experience, and expertise to this project:

California:

J. Oshi Ruelas.

Connecticut:

Mark Heuschkel, Jim Murkette, Nancy Wiggett, Ron Lucas and Marion Wojick.

Florida:

Don Winstead, Pat Hall, and Jeannee Elswick-Morrison.

Iowa:

Deb Bingaman.

Illinois:

Dave Gruenenfelder, Linda Brumleve, Joel Maxon, and Alan Whittaker.

Indiana:

Tracey Nixon, Charles Brandenburg, and Laura Nelson-Green.

Michigan:

Bob Lovell, Blair Steiber, James Commet, Stephen Smucker, Ching-Li Wang,

Susan Wright, and Subinoy Chakravarty.

Minnesota:

Charles Johnson and Joel Kvamme.



Acknowledgements vii

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Ohio:

Jackie Martin, Annette Murch, Eleanor Brock, Stan Sells, Joel Rabb, Paul Glock,

and Henry Zheng.

Oregon:

Marge Reinhart and Lily Sehon.

Virginia:

Carol Baron, Zandra Thompson, and Connie Hall.

Vermont:

Cheryl Mitchell, David Murphey, Roy Haupt, and Sandra Dooley.

Researchers

Child Trends: Staff from Child Trends worked closely with officials from HHS to conceptualize the project, provide substantive direction for the meetings, deliver presentations, develop meeting materials and summaries, and handle project logistics. The Child Trends team included: Kristin Moore, Martha Zaslow, Suzanne LeMenestrel, Sharon McGroder, Brett Brown, Tamara Halle, Kathryn Tout, M. Robin Dion, Christopher Botsko, Erin Oldham, Michelle Harper, Chisina Kapungu, Tawanda Greer, Laura Gitelson, Cheryl Oakes, Lauren Connon, and Fanette Jones.

NICHD Child and Family Well-Being Research Network: In addition, researchers from the National Institute for Child Health and Human Development's Family and Child Well-Being Research Network participated in the project's meetings. They include Kristin Moore (Child Trends), Jeanne Brooks-Gunn (Columbia University), Greg Duncan (Northwestern University), V. Jeffrey Evans (NICHD), and Natasha Cabrera (NICHD).

Technical Advisors to the States: The project further benefitted from the active participation of staff from several research and evaluation firms and one research center that are providing technical assistance to states evaluating their waivers projects. They include: David Fein, Chris Hamilton, Jean Layzer, Alan Werner, and Erik Beecroft (Abt Associates, Inc.); Barbara Goldman, Adria Gallup-Black, JoAnn Rock, and Greg Hoerz (Manpower Demonstration Research Corporation); Christine Ross, Nancy Fasciano, Lindsay Dobrzynski, and Martha Kovac (Mathematica Policy Research); and Bob Goerge and Mairead Reidy (Chapin Hall Center for Children, University of Chicago).

Other Researchers: Other researchers who participated in various meetings include Larry Aber (National Center for Children in Poverty, Columbia University), Tom Corbett (Institute for Research on Poverty, University of Wisconsin), Deborah Phillips (Board on Children, Youth and Families, National Academy of Sciences), and Don Hernandez (Board on Children, Youth and Families, National Academy of Sciences).

Foundations

Several foundations with a strong interest in understanding and promoting child well-being played an active role in this project. Barbara Blum, past president of the Foundation for Child Development, played a pivotal role in garnering foundation support for this effort. The Annie E. Casey Foundation, the Edna McConnell Clark Foundation, the George Gund Foundation, and the Smith Richardson Foundation also provided funding.

Senior staff from several foundations also contributed their considerable experience and expertise to the project. They include Bill O'Hare and Michael Laracy (Annie E. Casey



Foundation); Aimee Fitzpatrick and Tom Smith (Edna McConnell Clark Foundation); Jennifer Phillips (Charles Stewart Mott Foundation); Janice Molnar (formerly of the Ford Foundation); Ruby Takanishi (Foundation for Child Development); Judith Simpson (formerly of the George Gund Foundation); and Phoebe Cottingham (Smith Richardson Foundation).

The John D. and Catherine T. MacArthur Foundation provided support for writing and producing this guidebook.

About This Guidebook

The information in this guidebook was distilled from materials developed by Child Trends for the Project on State-Level Child Outcomes. Carol Emig oversaw the drafting, production, and dissemination of the guidebook. Section 1 of the book was drafted by Suzanne LeMenestrel and Kathryn Tout based on meeting summaries and presentations prepared by various Child Trends staff. The rationales presented in Section 2 were drafted by Laura Gitelson, with assistance from Suzanne LeMenestrel, based on work by Child Trends staff and other participating researchers, and the sample measures were selected by Suzanne LeMenestrel. The guidebook was carefully reviewed by Kristin Moore, Martha Zaslow, Sharon McGroder, Tamara Halle, Robin Dion, and Brett Brown at Child Trends, and by Martha Moorehouse, Ann Segal, Howard Rolston, and Alan Yaffe at HHS. Amber Moore at Child Trends directed the dissemination effort.

Child Trends is a nonprofit, nonpartisan research center that studies children and families. Additional information about Child Trends can be obtained from its web site, www.childtrends.org.

As noted above, funding for the development and dissemination of this guidebook was provided by the John D. and Catherine T. MacArthur Foundation. Additional support for dissemination was provided by the Office of the Assistant Secretary for Planning and Evaluation at the Department of Health and Human Services.



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SECTION 1

CHILDREN AND WELFARE REFORMS A FRAMEWORK FOR EVALUATION



Introduction

elfare reform, although targeted explicitly at changing adult behaviors and outcomes, has direct implications for children. In the last 10 years, policymakers and researchers have expressed a growing interest in understanding how and to what extent welfare policies affect children's health, cognition, school achievement, and social and emotional development.

The purpose of this guidebook is to share the results of a unique project designed to assist states in measuring child outcomes in the context of welfare reform programs. We hope this guidebook can be a helpful tool for state welfare agencies, nonprofit organizations, researchers, and others who seek to understand how state welfare policies, including those related to child care and child support, might influence child well-being.

The Project on State-Level Child Outcomes

Welfare reform began in states and counties before the passage of national welfare legislation in 1996. Between 1993 and 1996, more than 40 states received waivers from the federal government to launch their own welfare reform experiments. These states introduced a variety of new provisions to their welfare programs, including time limits on receipt of benefits, work requirements, family caps, and teenage parent residency and education requirements. Many of these policies were precursors to the 1996 welfare reform law (the Personal Responsibility and Work Opportunity Reconciliation Act), and many ultimately provided models for the new statewide policies that were implemented.

Because these state demonstration projects differed significantly from the national welfare program in place at that time (the Family Support Act of 1988), states were required to conduct an experimental evaluation of the impacts of their welfare reform demonstrations on adult outcomes and behavior. Recognizing the critical need to examine the effects of various welfare reform policies on children, the U.S. Department of Health and Human Services (HHS) initiated The Project on State-Level Child Outcomes in which representatives of state welfare agencies, federal government representatives, and researchers worked together to identify an important set of child outcomes and agree upon ways to measure them. The project proceeded in two phases: The Planning Phase and the Operational Phase.

The Planning Phase

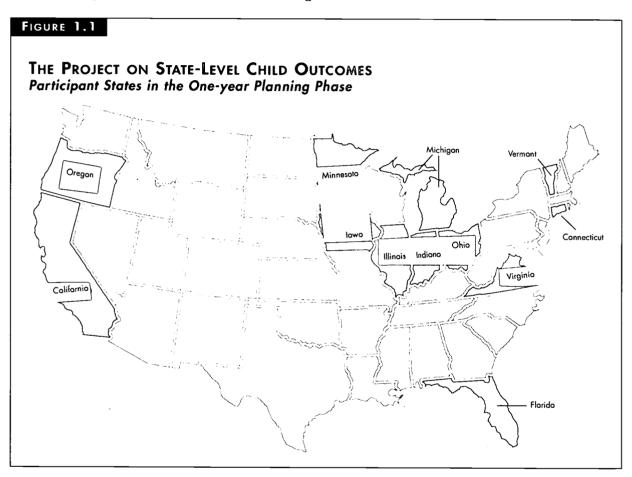
In the fall of 1996, 12 states (California, Connecticut, Florida, Illinois, Indiana, Iowa, Michigan, Minnesota, Ohio, Oregon, Vermont, and Virginia) (see Figure 1.1) with existing evaluations of their welfare reform demonstration programs were competitively awarded one-year planning grants from HHS to receive technical assistance from Child Trends, a nonprofit, nonpartisan research center, and other researchers who are part of the National Institute of Child Health and Human Development (NICHD) Family and Child Well-Being Research Network.

The primary goal of this planning phase was the selection of a common design and a common set of family and child well-being outcomes that could be measured in state welfare evaluations. To accomplish this goal, as well as to assist states in the development of social indicators of child



well-being, several meetings were organized and facilitated by Child Trends in the fall of 1996 and spring of 1997. The specific goals of the meetings were to:

- establish definitions and agree upon a set of important child and family variables that could be measured in state welfare evaluations;
- finalize the common set of constructs for states' evaluations:
- develop recommendations for including child care issues in state evaluations; and
- identify indicators of children's well-being at the state level.



The Operational Phase

The second phase of the project, the operational phase, began in the fall of 1997 and will continue for at least three years. Based on review of states' research proposals by HHS, five states (Connecticut, Florida, Indiana, Iowa, and Minnesota) received additional operational phase funding to add measures of child outcomes to their existing welfare reform evaluations. The five participating states are diverse in their welfare policies and programs, recipient populations, geography, and political climate. The states also have varied timetables for their evaluations. Minnesota was the first of the five states to field the child well-being survey, and Indiana will be the last. The final child impact study reports for all five states will be available by the fall of 2001.



In addition to the child impacts projects, HHS has funded a separate, complementary project called Advancing States' Child Indicator Initiatives, to assist states in developing and monitoring indicators of children's health and well-being. In coordination with Chapin Hall at the University of Chicago, states will receive technical assistance on conceptualization and measurement issues and will work with one another and with researchers, policy experts, and federal staff. The aim of the project is for states to institutionalize the use of indicators in the policy process at both the state and local levels. Although the development of indicators is not the primary focus of the material in this guidebook, it is nonetheless important to bear in mind that a research strategy incorporating a range of methodological approaches is critical for understanding the implications of welfare reform for children.

Overview of the Guidebook

This guidebook condenses and integrates the materials, discussions, and products from each phase of the Project on State-Level Child Outcomes to provide the tools needed to initiate or augment a study of child well-being in the context of welfare reform. It has three main sections that address the "why," "what," and "how" of examining child outcomes in a welfare reform study.

- Chapter 2, "Why Study Child Well-Being?" describes why child outcomes may be affected by adult-focused welfare programs.
- Chapter 3, "What Aspects of Child Well-Being Should Be Studied?" describes the conceptual model and common set of constructs developed by the researchers and state and federal officials participating in the project.
- Chapter 4. "How is Child Well-Being Studied?" describes several approaches to studying child well-being and the strengths and weaknesses of each of these approaches.
- Section 2 provides rationales and sample items (survey questions) for measuring the common set of constructs.
- Appendix A contains a copy of the child well-being survey and adult survey that is being used by Florida.
- Appendices B, C, and D contain (respectively) a list of federal data sources, descriptions of surveys and measures from which sample measures are drawn, and a glossary of commonly used research terms.



Why Study Child Well-Being?

relfare policies generally seek to change *adult* behaviors, such as whether and how much a parent works, whether a father pays child support, and whether a mother bears children outside of marriage. Why, then, do we look for *child* outcomes in an adult-oriented program? There are three primary reasons.

Welfare Benefits Are Intended to Assist Children

One reason to focus on children when studying welfare policies is simply because welfare was and is intended to ensure that families have sufficient income to meet their children's basic needs. This was the case when the Aid to Dependent Children program was established in 1935, and remained the case as the program changed over the decades. The 1996 welfare reform still seeks to ensure that families have sufficient income to support their children, although it does so through provisions that make parents' earnings, rather than public assistance, the source of that income. Thus one reason to examine child outcomes in the context of welfare policies is to evaluate the effectiveness of programs aimed at supporting children.

Different Welfare Policies May Affect Children in Different Ways

Researchers and policymakers also hope to understand whether and how families receiving welfare are affected by various policies that alter the requirements for receipt of welfare benefits (for example, by implementing work requirements or time limits on receipt of benefits). Interest has grown in the past decade for studying how program features and services affect adult outcomes, and in turn how they affect children's well-being. Along with three evaluations of previous welfare-to-work programs (New Chance, the Teenage Parent Demonstration Program, and the National Evaluation of Welfare-to-Work Strategies) and the five state evaluations that are part of the Project on State-Level Child Outcomes, a number of studies have been initiated to examine child outcomes under the most recent welfare legislation. Findings from the completed and ongoing evaluations indicate that welfare policies and programs can affect multiple dimensions of family life, such as parenting and maternal psychological well-being, that go beyond effects on family processes or employment.

Welfare Policies May Affect Family and Parental Factors

There is also a large body of research on child development documenting the multiple family and parental factors that affect child well-being, many of which are likely influenced by welfare policies. (Some of this research is briefly summarized in Section 2 of this guidebook.) For example, it is well-documented that maternal depression has negative implications for both parenting behaviors² and children's development.³ Maternal psychological well-being, such as depression, can be affected, either positively or negatively, by welfare reform policies such as mandated



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employment, earned income disregards, and sanctions for noncompliance with policies. It will be useful to know how the effects of welfare policies and programs on maternal depression in turn affect child well-being. Despite the considerable base of existing research on family processes and child development, many questions like this remain to be answered.

Thus, an additional reason for studying child well-being in the context of welfare programs is to expand the research examining the dynamic relationships among social policies, what goes on in families, and children's development.

Key Questions

We turn next to two key questions faced by investigators at the outset of a study of child wellbeing and welfare reform:

- What specific aspects of child well-being should be examined, and
- How should these aspects be studied?

The answers to these questions ultimately provide the *design* or blueprint for a research study. In the next two chapters, we outline the steps taken by the participants in the Project on State-Level Child Outcomes to address these questions. Their approach provides important guidance to other localities, states, and organizations wishing to assess the implications of welfare reform for children in their jurisdictions. Before describing this process, however, it is important to define key terms that will be used. These terms also appear in a glossary in Appendix D of this guidebook, along with other important terminology.

Key Terminology

Two sets of terms are used when describing the process of conducting a study of welfare reform and children:

The first set of terms refers to the theoretical basis for conducting a study of child outcomes in the context of welfare reform. Pathways are the hypothesized avenues through which welfare reform can affect children. In the following chapter, three types of pathway variables are described:

- the direct targets of welfare policies (like income or employment),
- other aspects of adult life that could be affected by welfare policies even though they are not targets of policies (like psychological well-being or residential stability), and
- aspects of the child's environment that are affected because of changes in adult life (like parenting practices and child care arrangements).

Child outcomes are aspects of children's development or well-being that, in the model described in Chapter 3, may be affected by various pathway variables. Finally, a conceptual model is a framework for outlining the various pathways and child outcomes that may be important to examine in a study of welfare reform and children.

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ILLUSTRATION OF KEY TERMS AND CONCEPTS							
DOMAIN	EDUCATIONAL OUTCOMES						
CONSTRUCTS	Engagement in School	SCHOOL Attendance	School Performance	SCHOOL Problems			
MEASURES		Number of		Number of			
	School	absences	Child's grades	suspensions			
	Engagement Scale	Number of times late for school	Grade repetition	Number of expulsions			
	¥	`	•				
SAMPLE ITEMS	•	owing statements, a think it is true, some- true. Would you say	How many days of so miss during the past fo school was in session	our weeks that			
	1 Carre abarrada:		None 1 or 2 days				
 Cares about doing well in school? Only works on schoolwork when 		3 or 4 days					
	forced to?		5 to 10 days				
	3. Does just enough schoolwork to get by?4. Always does homework?		More than 10 days				

A second set of terms is used when trying to describe more concisely the pieces of a conceptual model. Picturing these terms in a hierarchy, as shown in Figure 2.1, a **domain** is an overarching term referring to a broad substantive topical area. In Figure 2.1, educational outcomes is the domain. Within a domain are a series of more specific topics called **constructs**. School performance and school attendance are examples of constructs. A **measure** is a concrete way to assess a construct. Measures are typically made up of one **item** or a series of items called a **scale**. For example, number of absences from school and a child's grades are measures.



What Aspects of Child Well-Being Should Be Studied?

he participants in the Project on State-Level Child Outcomes followed a three-step process in determining what aspects of child well-being should be examined in an evaluation of welfare reform. First, they used previous research and knowledge about welfare policies and programs to construct a conceptual model of how welfare reform could affect children. Second, they discussed and agreed upon the pieces of the model they considered most important to study. Finally, they differentiated each piece into smaller, *measurable* pieces. In this chapter, we describe each phase of this process in detail.

Pathways of Influence: Understanding How Welfare Reform Affects Children

A critical first step in conducting research on welfare reform and children is to outline models of how welfare policies can affect child development. The concept of pathways is one useful way to explain this process.4 This concept and accompanying terminology were developed and introduced in earlier work by Martha Zaslow and her colleagues at Child Trends.⁵ The following discussion of pathways is drawn from concepts originally described in this work.

Pathways are the avenues through which children are affected, intentionally or unintentionally, by welfare reform. For instance, in the example on depression outlined in Chapter 2, one might expect maternal psychological well-being to be a pathway variable through which welfare reform policies affect child well-being. A second potential pathway variable could be the increased turbulence or increased stability that occurs in a family's life when a parent begins a job. If parental employment results in a more stable home life with more predictable routines, the impact on children could be positive. Alternatively, if parental employment makes a family's life more stressful and chaotic, the impact on children could be negative. A further possible child outcome is that the stress and turmoil associated with a parent starting a job may be temporary, yielding greater stability and other benefits to children once an initial adjustment is made.

In general, there are two key features of pathway variables:

- pathway variables are affected by welfare programs (whether or not they are explicitly targeted for change by the program); and, in turn,
- pathway variables affect child well-being.

It is important to study pathways to understand why observed child impacts come about, as well as to examine possible reasons why child impacts did not come about. If a welfare program had no impacts on children, it may have been because the program:

- did not activate any pathway variable through which a child could be affected;
- did activate pathway variables, but the changes were not of a sufficient size to lead to changes in child well-being; or
- activated multiple pathway variables, with the effects of some pathway variables being offset or counterbalanced by the effects of other pathway variables.

It is also possible that data collection on child well-being and/or pathways did not take place at a time when changes in these variables were likely to have occurred.



A Conceptual Framework

To understand better whether welfare reform policies affect children, and the specific pathways through which they do so, participants in the Project on State-Level Outcomes started with the conceptualization developed by Zaslow and colleagues, and modified and elaborated on it to reflect their understanding of state welfare policies and previous research on child development. This conceptual framework is illustrated in Figure 3.1. It depicts various pathway variables through which state policies targeted to adults could potentially affect children's wellbeing. This framework is consistent with other models that have been developed by researchers evaluating the effects of welfare programs and policies on children.

The conceptual framework begins by identifying those pathway variables (in the second column) that are the *direct targets* of welfare policies. These include:

- income;
- employment;
- family formation; and
- attitudes toward welfare and employment.

The model also highlights *other aspects of adult life* that are not directly targeted by state welfare policies but that could nevertheless be affected by these policies. These include:

- parent's psychological well-being (for example, depression);
- stability and turbulence in a family's life;
- absent parent involvement in the form of contact with the child;
- use of health and human services, such as Medicaid; and
- the consumption of goods and services.

The conceptual framework then identifies two important aspects of the child's environment that might be affected by welfare policies, because of changes brought about in an adult's life. These include:

- child care, including the quality of care, extent of use, and consistency of use; and
- home environment and parenting practices, such as the routinization of family life, the amount of aggravation and stress that parents feel when interacting with their children, and domestic violence.

Finally, the conceptual framework identifies three general types of *child outcomes* that might be affected by state welfare policies:

- educational outcomes, such as school performance and attendance;
- health and safety, including accidents and health status; and
- social and emotional adjustment, including positive, as well as negative, behaviors.

As this discussion indicates, the framework was designed to be followed from left to right. It begins with those aspects of adult life that are directly targeted by state policies, followed by other aspects of adult life that might also be affected. These in turn are expected to affect children's experiences in their primary care environments, which then could affect child outcomes.



HOW WELFARE POLICIES MIGHT AFFECT CHILDREN: A CONCEPTUAL FRAMEWORK						
	TARGET OF WELFARE POLICIES	OTHER ADULT AREAS	CHILD'S Environments	CHILD Outcomes		
	Income	Psychological Well-Being				
	Employment	Stability & Turbulence	Child Care	Education		
STATE POLICIES		Absent Parent Involvement		Health and Safety		
	Family Formation	Use of Health and Human Services	Home Environment and Parenting Practices	Social & Emotion Adjustment		
	Attitudes	Consumption				

Effects include both intended and unintended impacts. Both positive and negative outcomes for children are possible.8

However, more complex pathways are also possible. For example, the child care environment could have implications for the mother's employment. When child care is unreliable, a mother may miss work or arrive late because her child care arrangements have fallen apart. In addition, policies can have different effects on different pathways. The lack of arrows in Figure 3.1 showing specific lines of causation is intentional. Those who use this conceptual framework in their evaluations will want to fill in the arrows according to their states' policies and their specific hypotheses.

Working together, participants in the Project on State-Level Child Outcomes used the conceptual framework to select the specific domains and constructs they recommended for inclusion in an evaluation of welfare reform's effects on children. This "core" set of domains and constructs is referred to throughout the remainder of the guidebook as the Common Core of Constructs.

Development of the Common Core of Constructs

The purpose of agreeing upon a common core of constructs was to select a set of topics that would be measured similarly across states, thus providing a strong methodological basis from which results could be compared. The process began by asking state officials to articulate their



hypotheses about how policies in their states might activate pathway variables that, in turn, might affect children's well-being. These hypotheses were used to generate a more differentiated list of pathway variables and child outcomes. For example, the pathway variable of employment was broken down into a series of more specific topics aimed at providing more details about employment (e.g., wages, stability of employment, benefits). State officials were then given an expansive list of these constructs (i.e., the specific topics within a domain) and were asked to select those that were their highest priorities for inclusion in the common core. In the final step in the development of the common core, project participants, in close consultation with Child Trends' researchers, reviewed the conceptual framework and the chosen set of domains and constructs. Special attention was paid to identifying topics that research indicated should be included. The final common core of constructs appears in Figure 3.2.

The common core and suggested measures for the constructs were identified with several assumptions about the states' evaluations:

Flexibility for the States

It was assumed that the states might opt to go beyond the measures of the common core. States could also choose to drop sections of the common core, if, for example, the issues had already been addressed in previous surveys conducted in their state. They could also choose to drop sections of the common core if they provided justification that a pathway variable or child outcome was not likely to be affected by state policies. Where appropriate, administrative data could also be substituted for the proposed survey measures.

A Common Mode of Data Collection

In assembling a set of suggested measures for the common core, the technical assistance team assumed mixed mode administration of a survey; that is, telephone administration with an inhome follow-up of families who could not be reached by phone. It is important to note that all measures that can be administered by phone are also appropriate for in-home administration.

A Special Focus on Children Ages 5-12

While a set of questions in the surveys are asked about all children in the family, the states' child well-being surveys are focusing on children ages 5 to 12. This decision was based on the fact that the child outcome studies, in most cases, will be fielded several years after random assignment to the evaluations. This age range permits consideration of child outcomes for children who were preschoolers when their mothers became subject to welfare reform policies, and children who were already of school-age at this point in time. The states were also interested in focusing on outcomes for school-age children, where special services, both in and out of school, may need to be used for children experiencing difficulties.

Description of the Common Core of Constructs

Section 2 of this guidebook presents definitions, rationales, and sample measures for each domain and construct in the common core. We note that in some instances, the states have gone beyond the original core constructs to include measures recommended by Child Trends.



FIGURE 3.2

CORE CONSTRUCTS FOR THE PROJECT ON STATE-LEVEL CHILD OUTCOMES

TARGET OF WELFARE POLICIES OTHER VARIABLES LIKELY TO BE AFFECTED BY STATE POLICIES

ASPECT OF CHILD'S **ENVIRONMENT LIKELY TO BE** AFFECTED BY PREVIOUS COLUMNS

CHILD **O**UTCOMES

INCOME:

Total income

Sources of income (mother's earnings, father's earnings, child support, AFDC, food stamps, SSI, Foster Care/Adoption)

Stability of income

Financial strain/Material hardship

EMPLOYMENT:

Any vs. None

Health benefits through employment

Wages (hourly)

Hours of employment

Stability of employment

Education/Licenses

Hard job skills

Multiple jobs concurrently

Barriers to employment

FAMILY FORMATION:

Nonmarital birth/Marital birth

Child/Family living arrangements

Marital status, whether married to biological or non-biological

PSYCHOLOGICAL WELL-BEING:

Maternal depression

STABILITY AND TURBULENCE:

Foster care

Stability in child care

Stability in income

of moves of residence

Change in marital status or cohabitation

Reason child not living with family

ABSENT PARENT INVOLVEMENT:

Whether child support provided

Paternity establishment

Frequency of contact with child

USE OF HEALTH & HUMAN SERVICES:

Food stamps

Medicaid (awareness, use, eligibility)

Child care subsidy (awareness, use, eligibility)

Access to medical care

CONSUMPTION:

% of income spent on child care and rent

CHILD CARE:

Туре

Extent

Quality (group size, ratio, licensing, parent perception)

Stability

Child care history for last several years

HOME ENVIRONMENT AND PARENTING PRACTICES:

Child abuse/neglect (Admin. Data)

Domestic violence/abusive relationships

Family routines

Aggravation/stress in parenting

Emotional support and cognitive stimulation provided to child

EDUCATION:

Engagement in school (Focal Child)

School attendance (All Child)

School performance (All Child)

Suspended/expelled (All Child)

Grades (All Child)

HEALTH AND SAFETY:

Hunger/nutrition (Focal Child)

Child health status (Focal Child)

Regular source of care (Focal Child)

Teen childbearing (All Child)

Accidents and injuries (All

SOCIAL & EMOTIONAL ADJUSTMENT:

Behavior problems (Focal Child)

Arrests (All Child)

Social competence (Focal Child)

Constructs in italics—Only for those states fielding an in-home survey All Child—All children of the respondent Focal Child—One child aged 5-12

How is Child Well-Being Studied?

In the previous chapter, we described the first task in evaluating how children are faring under welfare reform: deciding which constructs to measure. The next task is deciding how to study child well-being. In doing so, the Project on State-Level Child Outcomes addressed two questions: (1) What methodological approach should be used, and (2) What data collection options should be used? The options weighed and decisions made by the project participants are described in this chapter. Each of the methodological approaches and data collection options has strengths and weaknesses, and these are also presented in this chapter so that users of the guidebook can get a full sense of available options.*

In reviewing this chapter, readers should bear in mind that research efforts aimed at understanding child well-being in the context of welfare reform are generally stronger when they employ a combination of approaches and data collection strategies.

Types of Methodological Approaches

In this section, we describe three types of methodological approaches to studying the effects of welfare reform on child well-being:

- impact studies;
- indicators studies; and
- inferential studies.

As described in Chapter 1, the states in the Project on State-Level Child Outcomes will be using two of these approaches: impact studies and indicators studies. Each approach has its advantages and disadvantages, and there is some overlap between the approaches. In the Project on State-Level Child Outcomes, these approaches are being combined to create a research portfolio which can provide short- and long-term information on children's well-being. For example, program impacts on children can be examined at one point in time, and indicators can be used to follow the well-being of children in the state over a longer period of time. As with any research design and data collection effort, it is important to weigh the options carefully and to assess, on multiple occasions, the quality of the data being gathered.

Impact Studies

Impact studies are experimental studies in which people are randomly assigned to either a treatment group or a control group. Members of the treatment group are exposed to a particular program or policy. Members of the control group are not exposed to that program or policy. They may be exposed to a contrasting program, or receive no program services or have no program requirements. *Impacts*, the measures of the effects of a policy or program, are assessed by contrasting outcomes for those in the treatment group with those in the control group.

An *impact* is best studied in the context of an evaluation study that involves random assignment of participants to a treatment or control group. Thus, for example, in the Project

Note that the descriptions of methodologies and the data collection options presented here were tailored specifically for those who are interested in evaluating the effects of welfare reform on children.



on State-Level Child Outcomes, welfare recipients were randomly assigned to treatment groups that incorporated the state welfare reform policy provisions that had been approved through the waivers process. In general, follow-up surveys will be conducted two or three years after the groups have been randomly assigned.

The primary strength of an impact study is that it enables researchers to make *causal* attributions. A statistically significant difference on a particular outcome can be attributed to the fact that a respondent was in either the treatment or control group. Random assignment assures researchers that the individuals who end up in the treatment and control group did not differ prior to their experience of the program or policy, thus ruling out alternative explanations for the impact.

Impact studies, do, however, have limitations.

- Impact studies are costly and take a relatively long time to complete.
- Impacts findings cannot necessarily be generalized beyond the kinds of families or individuals included in the study. For example, in the case of a welfare reform program evaluation, impacts findings can only pertain to the group that showed up and applied to participate in the program. The findings will not generalize to those who never appeared at the office to apply for the program or who did not qualify for the evaluation.
- A program must be implemented according to its plan in order to relate impacts findings to the program. Thus, researchers can only attribute impacts to features of the program when they know with certainty that the program was implemented with a high degree of fidelity.
- Finally, there may be reluctance to prevent the exposure of families in a control group to a program or policy that already has a known and positive track record (or to continue to expose families in the control group to a program or policy that appears fraught with problems). This can create ethical as well as practical challenges.

Despite these limitations, treatment-control group studies constitute the "gold standard" of evaluation in that they permit researchers to reach causal conclusions regarding the impacts of welfare reform on children and adults.

Indicators Studies

Another vital methodological approach employed in the Project on State-Level Child Outcomes is the use of indicator studies. An *indicator* is defined as a measure of a behavior, condition, or status that can be tracked over time, across people, and/or across geographic units. Economic indicators, for example, help us understand the overall strength of the nation's economy and the relative strength of various population groups and economic sectors. Similarly, social indicators or indicators of child and family well-being help us understand the overall status of children and families and the relative strengths of families from different backgrounds or in different regions of a state or the nation.

Whereas impact studies provide a point-in-time estimate of child well-being, indicators can give policy makers and researchers a tool for examining trends over time. It is important to note that the same measures (e.g., poverty, or being behind a grade in school) used in an impact study can also be used in an indicator study. The crucial distinction is the design of the study, specifically whether it derives from a random assignment experimental impact study or represents descriptive indicator data collected on a representative sample of the entire population of interest.



Brown and Corbett describe five policy-relevant uses for social indicators: 10

- Description: As descriptors, indicators produce knowledge and can be adopted for policy-related purposes. An example of an indicator as a descriptor is the number of children living in female-headed households.
- Monitoring: Indicators can also be used for monitoring purposes related to social action. In this capacity, they can be used to identify needs and plan programs. An example of an indicator used for monitoring purposes is an annual child poverty estimate for school districts, used to determine how Title I funds should be distributed.
- Goals-setting: Indicators can also be used to track progress toward specific goals. The goals can be broad and general, or quite specific. Examples of goals that can be tracked through indicators include the educational goals developed as part of the Goals 2000: Educate America Act (e.g., all children in America will start school ready to learn), and the Public Health Service's Healthy People 2000 health promotion and disease prevention goals and objectives (e.g., achieve access to preventive services for all Americans; increase to at least 75 percent the proportion of primary care providers who screen for alcohol and other drug use problems and provide counseling and referral as needed).
- Outcomes-based accountability: Indicators are used for accountability purposes when they track progress toward goals with consequences attached to them. An example includes states' accountability to the Federal government under the current welfare reform law for specific results, such as having a certain percentage of all families engaged in work at least 20 hours per week for each fiscal year. States can have their family assistance grants reduced for the next year by up to 5 percent for failing to meet the work participation rates for a particular fiscal year.
- Evaluation: Indicators can be used for evaluation, though great caution is necessary since causal conclusions cannot be drawn based on indicator data. When conducting evaluations, researchers are attempting to determine scientifically whether policies are effective or destructive and why. To evaluate programs, researchers are advised to use one of several other methodologies, such as an experimental method (see section on impacts), a quasi-experimental method (see section on inferential studies).

Indicators data have several strengths.

They can present a picture of how children are faring over time. (In contrast, impact studies generally capture outcomes at one point or relatively few points in time.) Cornelius Hogan, the Secretary of the Vermont Agency of Human Services, said that indicators are important if not essential because they can "tell you where you've been, where you are, and can guide you to where you need to be." In addition, when policy changes occur quickly or in multiple areas, indicators may serve as the only source of information on the direction of changes for children. Indicators data can also complement the data collected from impact studies of welfare reform by placing results in the context of broader social and economic trends. For instance, indicators used in the context of welfare reform studies can track trends in entry into the welfare system. If new policies are intended to discourage entry into the welfare system, indicators data can be used to assess whether fewer entries are actually occurring.



Data can be collected on all children in a state, not just a sample of children. In this capacity, indicators can help states understand how they are doing in comparison to other states or countries and provide an impetus for change. Well-constructed indicators collected over time can also build budgetary, community, business, and political support. 12 However, since well-being is determined by many factors, states should be very cautious about using indicators to assess accountability (for example, to hold state public health officials solely responsible for trends in adolescent childbearing).

As with any measure, there are also challenges involved in developing a data system that includes indicators of child well-being.

- First, careful attention must be paid to the selection of a meaningful set of indicators that are appropriate in a welfare reform context.
- Second, political challenges may affect the successful use of indicators to inform policy. For example, political pressures and partisan considerations may lead to the inappropriate use of indicators. 13
- Third, existing data systems may need to be linked together, or new data may need to be collected in order to create the desired set of indicators.
- Fourth, indicators, unlike impacts, cannot demonstrate causality. For instance, one cannot conclude with certainty that changes in indicators of child well-being are caused by a particular program or policy.
- Finally, there are also issues of measurement quality and of training the users of indicators. 14 Measures should assess the concepts that they were intended to assess (validity), and measure the same thing over time and equivalently for different subgroups (reliability). With regard to training, it is also important that users of indicators (including policy makers and service providers) are given sufficient training to use them correctly.

Inferential Studies

Another methodological approach, although not one being used by the Project on State-Level Child Outcomes, is the use of inferential studies. Inferential studies go beyond indicators studies in that they attempt to assess causality, but they fall short of the requirements of an impact study in that they do not randomly assign participants to experimental and control groups. Like indicators studies, inferential studies are often concerned with being able to generalize the results beyond the study sample. Thus, an important feature of these studies is selecting an unbiased or representative sample. Examples of inferential studies include:

- correlational studies, in which one assesses whether there is a statistically significant relationship between two or more variables;
- multivariate studies, in which one is examining the simultaneous relationship between three or more variables; and
- quasi-experimental studies, in which one is estimating program or treatment effects based on either a non-randomly assigned comparison group, or by collecting data pre- and posttreatment. 15



Inferential studies have several strengths, including:

- They are typically less expensive to conduct than impact studies, though this may depend on the size of the sample and the mode of data collection that is used.
- Results are usually available in a shorter period of time than in impact studies.
- Quasi-experimental design studies provide an approximation to experimental design studies without some of the practical and ethical challenges.¹⁶

The chief limitation of inferential studies is that they cannot provide definitive evidence regarding causality. For example, with quasi-experimental designs, there is the risk that the comparison group is biased in some way. Accordingly, there is the risk that results from inferential studies will be misused and conclusions will be made that the design cannot support.

In sum, each approach to measurement—impacts, indicators and inferential studies—has strengths and limitations which need to be weighed when decisions are made regarding the design of a study. Using a combination of approaches, as has been done in the Project on State-Level Child Outcomes, is perhaps the most optimal.

Data Collection Options

We turn now from the issue of the *design* of a study to assess how welfare policies affect children, to the issue of the *mode* through which data will be collected. As states consider how to assess the implications of welfare reform for families and children, there are multiple data collection options available to them. Although each data collection option has strengths and weaknesses, different options can be combined to optimize the quality and utility of the data that are collected.

Seven data collection options may be appropriate for states that are evaluating the effects of welfare reform on children. As with the choices for study design, each mode of data collection has strengths and weaknesses. These include:

- administrative records;
- telephone surveys;
- teacher surveys;
- in-home surveys;
- direct child assessments;
- self-administered questionnaires; and
- in-home observational studies.

Each option is discussed below.

Administrative records

There are two features of administrative records that make them a useful source of data.

- Administrative records are available through a wide variety of sources, and are often the first option that is considered in an evaluation precisely because they are so readily available.
- Administrative records often describe benefits or services that individuals have received or participated in, such as programs or funding for child care. Data are often available for an



entire state, city or county population, and (if common identifiers are available) can be linked to survey data.

However, administrative records have several weaknesses.

- Administrative data often do not provide detailed information on *why* people need services, such as information about disabilities.
- Administrative data bases do not have detailed child outcome measures in areas such as behavior problems or nutrition because they are collected for purposes other than to track child well-being. Compared to the information about a particular individual collected in surveys, a large amount of information will not be available for each individual in administrative data bases.
- It is often difficult to change a system to collect new data because it necessitates statewide changes such as new forms and computer programs.
- Missing data are common, and data quality is variable.
- Administrative data are generally available for those who received a benefit or service, but not for others. Yet information about those who did not receive a service or benefit may be important to the research.

Telephone surveys

Telephone surveys have several advantages.

- Surveys provide a richer source of data than administrative records with the potential to collect more information about each respondent. Interviewers can also probe respondents when they give incomplete or ambiguous responses, they can answer respondents' questions, and they can follow complex skip patterns, particularly if they are using Computer-Assisted Telephone Interviewing or CATI.
- They are often less expensive to field than other modes of data collection, such as in-home surveys.
- Higher response rates are achieved through telephone surveys than other types of data collection, such as mail surveys.

But telephone surveys also have several weaknesses.

- The questions and the response categories administered by telephone need to be kept simple, and interviewers cannot use any visual aids on the phone, such as exhibit cards that display a list of choices or response categories.
- When interviews are conducted by phone, rather than in person, it is easier for respondents to break off an interview, or to refuse to participate at the outset.
- Telephone interviewers cannot rate the home environment, interactions between parents and children, or the surrounding neighborhood, and they cannot complete child assessments.
- Telephone surveys can be biased because some lower-income families do not have their own telephones and/or have higher phone disconnection rates. It is possible to reach these families and thus correct for the potential bias, but interviewers need to go in person to households, increasing the cost of the survey.



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□ For some respondents, there might be issues of privacy or confidentiality because responses can be overheard by others in the home.

Teacher surveys

Collecting data from teachers has several advantages.

- Teachers may be less subjective or more experienced raters of children's behavior than parents and may provide an important source of comparative data. They see a child's behavior or school progress relative to that of many other children. When combined with parent data, teacher surveys can help researchers construct a more comprehensive profile of children.
- □ Teachers observe children's behavior in school, a critical setting for child development.
- Teacher surveys can provide data on some outcomes that are directly relevant to policy makers, such as social competence, behavior problems in school, and school climate. This information is not available through school administrative records or through parent interviews.
- Teacher surveys are also less expensive than conducting in-person interviews because they are typically mailed to teachers or conducted over the telephone.

On the other hand, teacher surveys might be more challenging to field and have some disadvantages.

- Parental permission to collect data is necessary, and the name and address of the school must be obtained. This information might be difficult to obtain if a survey with the parent is not also being conducted.
- Teacher surveys are also restricted to school-aged children enrolled in school. Thus, information cannot be obtained on youth who drop out of school, those children or adolescents who are in special treatment facilities, or children who have not yet started school or a formal child care setting, such as preschool, Head Start, or a child care center. It might also be difficult to collect data from teachers when children are living apart from their parents, if parents are the primary respondents in a survey.
- Teachers generally rate children's behavior and academic progress in relation to other children in that particular school. As a result, ratings reflect not only the child's behavior, but the norm for that school. Children's behavior and academic progress are also subject to variation in resources available to schools.
- Teachers see how children behave in one setting. While school is an important setting, it is still only one setting in which children develop. Teachers cannot report on behaviors in the home or report on behaviors in an unstructured setting. For example, teachers may be more sensitive to children who display behaviors that are disruptive to their classroom than to children who are depressed, or who may be quiet and withdrawn.
- Direct child assessments of outcomes such as academic achievement or health may be collected by teachers, but are more challenging because of time and logistical constraints.

In-home surveys

Although in-home surveys are often the most expensive mode of data collection, they also have many strengths.



- It is usually easier to get respondents to participate in an in-home survey than in a telephone survey because trust and rapport can be built with respondents. In addition, it is often easier to persuade a reluctant individual to participate in a survey or complete the survey when there is face-to-face contact between interviewers and respondents.
- Data can be collected using multiple methods when in the home. These include direct child assessments, self-administered questionnaires, and interviewer observations of the home environment and the neighborhood.
- □ Interviewers can probe, answer questions, and follow complex instructions and skip patterns in a questionnaire.
- In-person interviews can last longer than telephone interviews given the rapport that is developed between the respondent and the interviewer, and the multiple procedures that can be completed in the home (e.g., some time allocated to direct interviewing, some time allocated to a self-administered questionnaire, some to child assessments). While an inhome interview can be terminated by the respondent (as is noted usually in informed consent forms), it is rare that this occurs.

However, in-home surveys have several weaknesses in addition to cost.

- For some respondents, there might be issues of privacy or confidentiality, particularly for sensitive topics such as domestic violence, because responses can be overheard by others in the home. These issue have been addressed through the use of headsets and self-administered questionnaires, but investigators should remain alert and sensitive to these potential problems.
- Appointments sometimes need to be scheduled in advance, which can be challenging, particularly when it is necessary for a parent and child to be home at the same time (e.g., to do home observations or direct child assessments).
- Interviewers also need to be well-trained to handle any type of home environment that they might encounter.
- □ There may be concerns about particular neighborhoods as places for interviewers to go from a safety point of view.

Direct child assessments

These are standardized measures administered by trained interviewers, generally to assess child well-being and development. Examples include standardized achievement tests or assessments of school readiness, such as the Woodcock-Johnson-Revised Achievement Battery; assessments of cognitive development, such as the Bayley Scales of Infant Development; assessments of language production and comprehension, such as the Illinois Test of Psycholinguistic Abilities; and assessments of social competence such as the Social Skills Rating System.

Direct child assessments have several strengths.

- Child assessments often allow comparisons of children in a research sample to national samples of children.
- Direct assessments involve safeguards against bias that may arise, for example, when a mother reports about a child's adjustment. Interviewers are carefully trained to eliminate evaluative comments or biasing behaviors during tests, and the assessments themselves are usually evaluated from the point of view of potential racial bias or response biases.



■ Direct child assessments are also useful because consistent data often cannot be obtained from other sources, such as school districts. For instance, different school districts use different standardized tests, the timing of testing varies across school districts, and there are confidentiality issues with school districts about releasing data.

Nevertheless, assessments also have several weaknesses.

- Standardized tests are often expensive to purchase, and the training of interviewers is more intensive if using survey interviewers.
- Interviewers need to be monitored initially and on a periodic basis to assure the correct administration of test procedures.
- The interviewers do not always have optimal testing conditions, such as a quiet place or a table in a home setting.
- While they are generally evaluated for possible biases, some widely-used assessments are still being scrutinized for racial bias.
- The assessment may not have been tested or normed on the subpopulation of interest (e.g., poor children) and therefore may have unknown psychometric properties for this population. Also, the assessment might not be available in languages as other than English.

Self-administered questionnaires

A self-administered questionnaire, or SAQ, is a questionnaire that is completed privately by a respondent. It can be completed by mail or in the home (either on paper or on a computer), and can be completed by adults as well as children and teens. SAQs have several strengths.

- They provide privacy for the respondent and thus enable a researcher to ask more sensitive questions.
- If the respondent completes the SAQ while the interviewer does other tasks such as assessments with the child, more data can be collected in the same total amount of time in the household.

But SAQs, like other modes of data collection, also have limitations.

- For those SAQ's that require reading, the reading level of a respondent or a language barrier might pose a problem in completing the questionnaire. The SAQ can then be administered as an interview. However, interviewers need to be prepared to detect such problems quickly and alter the mode of administration. If they do alter the mode, they need to take special steps to protect respondent privacy to sensitive questions.
- The interviewer cannot monitor or review the respondent's understanding of the individual questions, or how well he or she adheres to the skip patterns in the questionnaire.
- Using SAQs necessitates a very simple questionnaire design, though Computer-Assisted Personal Interviewing (CAPI) is one way to make it easier for respondents to follow complicated skip patterns in a questionnaire.

In-home observations

In-home observations are direct observations by interviewers of structured or unstructured interactions, typically involving mothers and children. They are often videotaped. They are



generally used to collect data on pathway variables, such as parenting styles, and child outcomes, such as children's language development. In-home observations have several strengths.

- They allow researchers to collect information that parents and interviewers may not adequately summarize verbally, such as how a parent teaches her child a new idea, or for which there may not be survey tools.
- A videotaped interaction can be coded repeatedly for many different constructs beyond those that were originally intended, for example, how children respond to their parent's teaching them a new idea.
- Coders of videotapes can be "blind" to the research group that the family is in, which eliminates possible bias.
- Although some families might be on their best behavior when they know that they are going to be observed or filmed, researchers using this methodology still find meaningful variability in behaviors.

Of course, in-home observations also have several trade-offs.

- It is expensive to field these types of studies, and to code the videotapes or train the observers.
- The sample size might also have to be smaller because of the costs involved.
- Interviewers need special training to carry out the procedures.

Conclusion

In the Project on State-Level Child Outcomes, the states and evaluators chose to combine four of these options including the use of administrative records, telephone surveys, in-home surveys, and self-administered questionnaires. Each option has strengths and weakness.

Administrative records data are generally low in cost but are usually not very rich in detail and not very broad with regard to constructs because they are collected for program monitoring purposes. They do, however, have the *potential* to be more extensive in terms of the child data that can be collected. In addition, they can be more expensive if several different data bases are being integrated, if new data bases are being developed, and if one is maintaining a high quality and complete administrative data base. The cost might also be low initially, but if researchers must spend time processing the data, the cost increases.

Telephone and teacher surveys and self-administered questionnaires are also usually low in cost relative to some of the other data collection strategies, and have medium to high levels of detail and breadth. Self-administered questionnaires are less expensive when they are mailed to respondents. Costs increase when they are completed in-person and/or when they are completed using computer-assisted technology. In-home surveys are more expensive than these options, but provide a greater level of depth and breadth of child data. Finally, in-home observational studies pose the greatest cost, but also provide the richest child data.

There is no single best data collection strategy. Ideally, combining strategies is the preferred approach, although this is not always feasible. Evaluators can consider possible tradeoffs such as reducing the sample size in order to collect in-home data. Other options include collecting more indepth information on a subset of the sample. At any rate, evaluators need to take into consideration the goals of the study, what data are already available, the additional data needs of their study, and their financial resources when selecting the appropriate data collection strategy or strategies.



Section 1: A Framework for Evaluation 23

SECTION 2

The Common Core of Constructs: Rathonalies and Sample Questions

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n the pages that follow, we describe the domains and common core of constructs agreed upon by the participants in the Project on State-Level Child Outcomes. For each domain (i.e., a broad substantive topical area like "income"), we provide:

- definitions for the constructs (i.e., sub-topics) within that domain;
- a brief rationale for why a particular domain and/or construct would be important to study in the context of a welfare reform evaluation;* and
- sample measures for each construct (i.e., illustrative items that provide a concrete way to assess a construct). In some cases, the full set of items that measure a construct is included. In other cases, only selected items are provided. Portions of the survey used in the Florida evaluation are available in Appendix A. The Florida survey is a slight modification of the surveys used in Minnesota and Iowa. A list of surveys and other sources from which these sample measures were drawn and a brief description of each of the surveys appear in Appendix C. The full set of measures recommended for each construct is available, upon request, in a companion document. This document also includes measures for constructs that were determined by project participants to be optional rather than agreed-upon common core constructs.**

While the following selection of domains and constructs is extensive, it is not meant to be exhaustive. The domains and constructs were chosen based on the specific interests and expertise of the project participants, and they were intended to be relevant to the assessment of a wide range of policies and programs. However, users of this guidebook may want to add or subtract domains from those outlined here. They may want to expand or elaborate on specific constructs. We strongly encourage users to modify or tailor the set of topics we have included here so that it is most relevant to the set of policies or program features being evaluated.

Measures for the Final Common Core of Constructs, Washington, DC: Child Trends.



Longer rationales with more extensive references are available in the document Rationales for the Common Core of Constructs: Prepared for the Second National Level Meeting of the Planned Phase (February 27-28, 1999). Washington, DC: Child Trends.



he primary goal of welfare reform is to move people off welfare and into jobs. The federal government provided the states with a number of policy guidelines for achieving this goal, including giving states the option of altering the size of benefits as well as imposing time limits on how long a family could receive benefits. These policies are likely to affect the stability, source or amount of income of families on welfare. The income of welfare recipients could increase or decrease depending on the direction of state policies:

- Increased income disregards (the amount that you can earn before your welfare benefit is decreased) may increase family income.
- Greater emphasis on employment may mean a greater percentage of income comes from work rather than welfare.
- Sanctions (financial penalties for not following program rules) may decrease family income.
- The unsteady nature of low-skill employment may lead to greater instability in income.

There are many ways in which parents' income may affect the achievements, health, and behavior of children. ¹⁷ For example:

- Increased income may allow the parent to purchase better quality child care, food, health care, and educational resources.
- More money provides an opportunity for families to live in safer neighborhoods.
- Declining or unstable income may increase parental stress levels and decrease the resources available for the child.¹⁸
- Declining or unstable income may make it difficult to pay the rent, which may, in turn, lead
 a family to move or double-up with other families.
- Continual uncertainty in resources may lead children in low-income homes to experience more instability in both their daily lives (e.g. in their child care arrangements) as well as over time (e.g., moving from neighborhood to neighborhood over short periods of time). (See discussion of Stability and Turbulence, p. 40)

In evaluating the impact of welfare reform on children, it is important for researchers to assess absolute levels of income as well as to find out whether various types of income are falling, rising, or staying the same as a result of the policy changes.



SAMPLE ITEMS (Sources for items are noted in porentheses.)

Total Income (Milwaukee Survey, Modified)

Now think about your household's total income during 1997. Again, include income from welfare, other public assistance, food stamps, child support, money from your child(ren)'s other parent, earnings from formal jobs, and earnings from odd jobs, side jobs, under-the-table jobs, and other activities.

What was the total income of all members of your household—including yourself—and from all sources before taxes and deductions?

Sources of Income: Mother's Earnings (lowa Questionnaire)

How much are your weekly or monthly earnings before taxes and other deductions? Please include tips, bonuses, commissions, and regular overtime pay you may have received. (\$___, per day, per week, once every two weeks, twice a month, per month, per year)

In (LAST MONTH), did you have any income from odd jobs, side jobs, under-the-table jobs, or any other activities? Do not include income from gifts, child support, lottery winnings, and things like that. (Yes, No)

Sources of Income: Father's Earnings (Limited Benefit Plan Survey, Modified)

The next question is about money earned by all of your household members from jobs or a family business. Please include full- and part-time jobs as well as any odd jobs, work done off the books or on the side, or income from other activities and please be sure to include yourself, (your spouse/partner), and any other persons living with you. Last month, that is in (LAST MONTH), what were your total household earnings from jobs or a family business before taxes and other deductions?

Sources of Income: Child Support (Minnesota Family Investment Program Questionnaire)

In (PRIOR MONTH), did you or anyone else in your household receive any income from child support payments? Did you receive child support payments?

During (PRIOR MONTH), how much did you receive from child support?

Did anyone else in your household receive child support payments?

During (PRIOR MONTH) how much did all of the other people in your household receive from child support?

Sources of Income: Government Assistance (Indiana Survey, Modified)

Now I'd like to ask you some questions about sources of income and support. In (LAST MONTH), have you, (your spouse), your (child/children), (or any other member of your household) received any of the following types of government assistance:

AFDC/(NAME OF CASH ASSISTANCE PROGRAM)/cash assistance?

Food stamps?

SSIS

Foster care or adoption assistance?

Who received (TYPE OF ASSISTANCE) last month? (Respondent, spouse, kids, other members of household)? How much did you/your spouse/your child/children receive last month?

How much did other members of your household receive, in total, last month?



Stability of Income

To measure stability in income, we recommend creating this measure from administrative records data such as earnings from UI records, AFDC and food stamp payments.

Financial Strain/Material Hardship (Selected items from the Material Hardship Scale; Minnesota Family Investment Program Survey)

Please tell me how much do you agree or disagree with each of the following statements: (strongly agree; somewhat agree; somewhat disagree; strongly disagree)

- a. My financial situation is better than it's been in a long time.
- b. I worry about having enough money in the future.



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Employment

relfare reform seeks to make parental employment, rather than public support, the chief source of a family's income. States are pursuing the goal of increasing parental employment largely through stricter work requirements, which could have the following effects:

- Stricter work requirements may lead to higher rates of employment.
- Work requirements may lead more parents to take jobs they might otherwise have turned down, perhaps leading to an increase in jobs characterized by shift work or irregular hours.
- Work requirements may result in more ill-prepared individuals entering the labor force, who may be unable to retain jobs for a substantial period of time.

There are many ways in which parental employment* might affect children. 19 On the one hand, a job may reduce the time available to care for young children, monitor the activities and behavior of older children, and carry out household responsibilities. Having a job may also increase a mother's stress. On the other hand, working and increased income may increase a family's financial security, a mother's self-esteem, and a community's respect for her efforts.

Among the ways that a parent's employment could affect children are the following:

- It could lead a parent to establish or strengthen daily routines that could protect a child from negative influences and lead to better school performance.
- If children see their parent(s) succeeding at work, it may lead to an increase in children's hopes and aspirations for the future.
- Parents who fail to get a job or get fired from a job may become depressed, which could affect a child in a variety of negative ways (see the discussion of Maternal Psychological Well-Being, p.36);
- Steady employment could allow parents to find stable, high-quality child care which could affect a child in a variety of positive ways (see the discussion of Child Care p.46).
- A parent with irregular or nontraditional work hours may have to place a child in a poor quality child care situation, or use unstable and frequently-changing child care arrangements, which could threaten a child's development and safety.

Children's activities and time use are very likely to be affected by changes in maternal employment. For example, younger children are likely to experience an increase in nonparental child care. The extent and quality of child care in turn have the potential to affect children's develop-ment. Older children may also experience changes in their activities, with possibilities including increased nonparental care (for example, in after-school programs), self-care, and increased responsibilities for the care of younger siblings and for household tasks. These responsibilities could have positive or negative implications for older children's development.

Researchers have also found that the type of job a parent has can affect how parents interact with and teach their children. For example, jobs that are repetitive, unstimulating, and that offer little opportunity for self-direction may be associated with child-rearing values that emphasize obedience to adults. By contrast, when jobs involve greater variety, stimulation, and self-direction,

We refer to parental employment, but note that most adults on welfare are mothers.



parents are more likely to use strategies of reasoning in disciplining their children, and to expect self-direction from their children in their behavior. When a parent's job is more stimulating, a parent's interactions with his/her child may, in turn, be more interesting and varied and thus create a more intellectually stimulating environment.²⁰ Therefore, the kinds of jobs that welfare recipients get are likely to affect the way the recipients act as parents, and in that way affect the children's development.

SAMPLE DIBMS (Sources for items are noted in parentheses.)

Any vs. None (Minnesota Family Investment Program Questionnaire)

The next questions are about all paid jobs you've had, including paid baby-sitting or housekeeping jobs or any other jobs you have had since (Random Assignment).

Since (Random Assignment), have you worked for pay at all? Are you currently working for pay?

Health Benefits Through Employment (Minnesota Family Investment Program Questionnaire)

Does your employer offer any of the following benefits to you?

- A. Sick day, with full pay?
- B. Dental benefits?

Does your employer offer you a health plan or medical insurance?

Hourly Wages (Iowa Questionnaire)

What is your hourly rate of pay, before taxes and deductions?

Hours of Employment (Iowa Questionnaire)

How many hours do you usually work in an average week?

Stability of Employment (Iowa Questionnaire)

When did you start working for (EMPLOYER)? When did you stop working for (EMPLOYER)?

Education/Licenses (National Evaluation of Welfare-to-Work Strategies; Minnesota Family Investment Program Questionnaire)

These next questions are about different kinds of schools you may have attended, and about different licenses or certificates you might have.

Do you have.....

- ...a trade license? When did you receive it?
- ...a GED certificate? When did you receive it?
- ...a high school diploma? When did you receive it?

Do you have any college or university degrees?

Which one? (Associate's degree, Bachelor's degree, Master's degree, Other degree)

(For each degree...) When did you receive it?

Since (Random Assignment), have you earned any credits toward an associate's or a bachelor's degree?

Hard Job Skills (Panel Study of Income Dynamics)

- 1. How much formal education is required these days to get a job like yours?
- 2. Is it (also) necessary to have some work experience or special training to get a job like yours?
- 3. On a job like yours, how long would it take the average new person to become fully trained and qualified?



2 Children and Welfare Reform

Multiple Jobs Concurrently (Minnesota Family Investment Program Questionnaire)

How many jobs do you currently have? Please count each employer as a separate job.

Barriers to Employment (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Some women find that some of the people who are important to them don't want them to work. Some of these women have said people such as their husbands or boyfriends, friends, or other family members did things that made it difficult to find or keep a job.

- 1. Since (Random Assignment), has it been difficult for you to find or keep a job because someone tried to discourage you from finding a job or going to work? Who made it difficult? (Your current or former spouse, boyfriend, or girlfriend?; Your friend(s)?; Your parent or stepparent?; Your children?; Other family member?; Someone else?)
- 2. Since (Random Assignment), has it been difficult for you to find or keep a job because someone refused to help you, or went back on promises to help you, with child care, transportation, or housework? Who made it difficult? (Your current or former spouse, boyfriend, or girlfriend?; Your friend(s)?; Your parent or stepparent?; Your children?; Other family member?; Someone else?)
- 3. Since (Random Assignment), has anyone prevented you from finding a job or going to work? Who was that? (Your current or former spouse, boyfriend, or girlfriend?; Your friend(s)?; Your parent or stepparent?; Your children?; Other family member?; Someone else?)



Family Formation and Dissolution

iscouraging childbearing outside of marriage is an explicit goal of welfare reform. Welfare reform encourages states to enact policies that will discourage teen pregnancies as well as nonmarital pregnancies among all women of childbearing age. It also requires states to be more active in pursuing child support from absent fathers. 21

Depending on state policies, welfare reform could affect family formation and dissolution in several ways:

- Research shows reduced fertility among employed mothers. Welfare reform provisions that
 increase employment, such as work requirements, time limits, and sanctions may therefore
 reduce childbearing among welfare recipients who obtain employment.
- Family cap policies may also discourage further childbearing.
- Stronger child support enforcement may discourage parenthood outside of marriage.
- TANF requires that teen parents live with their own parents in order to receive benefits, when they might otherwise have moved out on their own.

In turn, changes in family formation and dissolution could affect children in several ways:

- Smaller families may enhance child development by increasing the amount of a parent's time available to each child in a family.
- Two-parent families may have higher incomes; they may also have greater resources to monitor their children and establish routines.
- High conflict marriages/unions may undermine children's development.
- Living with a grandparent may be supportive for parents and children.
- Doubled-up households may be crowded and increase the risk of abuse or violence.

Reducing nonmarital births is an explicit goal of welfare reform, and reducing divorce may be an unintended effect of welfare reform. Therefore, it is important to collect information on family formation and dissolution. Research has shown that parents' separation or divorce can negatively affect a child's development, resulting in emotional distress, 22 declines in school achievement, and increases in problem behaviors in school. In addition, living in a single-parent household also can have negative effects that are not entirely explained by differences in income. For example, children in single-parent households are more likely to have problems in school and to become teen or single parents. 4

On the other hand, if new policies encourage families that otherwise would have broken up to stay together, there could be negative effects on children. Research has also shown that when children grow up with married parents whose relationships are characterized by a high level of conflict, they are subject to many of the same disadvantages as children who grow up in single-parent families. In centives that lead adults to stay in high-conflict relationships may not result in benefits to children. In the case of married-couple families, it is also important to measure levels of marital conflict.



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SAMPLE ITEMS

Nonmarital Birth/Marital Birth (Child Trends)

Have you had a baby/fathered a baby since (Random Assignment)? If yes, were you married to the father/mother of your child when the child was born? Or, Have you married the father/mother of your child since the child was born?

Child/Family Living Arrangements (Limited Benefit Plan Survey, Milwaukee Survey)

Have you been homeless and living on the street at any time in the past year, that is since (MONTH, LAST YEAR)?

During the time you were homeless and living on the street, how often were your children with you? Would you say... all of the time, most of the time, some of the time, or none of the time?

Have you lived in a homeless shelter, emergency shelter, or a domestic violence shelter at any time in the past year, that is since (MONTH, LAST YEAR)?

During the time you were living in shelters, how often were your children living with you? Would you say... all of the time, most of the time, some of the time, or none of the time?

(New Hope Survey)

Since (Random Assignment), did you set up your own household, so you wouldn't have to share a place with family or friends? How many times since (Random Assignment)?

(National Evaluation of Welfare-to-Work Strategies Descriptive Study Survey)

Since (Random Assignment), have there been any times lasting a month or more when (CHILD) did not live with you?

Altogether, how many months did (CHILD) live somewhere else? Since (Random Assignment), which months did (CHILD) live somewhere else?

When (CHILD) was not living with you for a month or more, did he/she ever spend time living... (with his/her mother/father; with his/her grandparents; with his/her aunt/uncle; with other relatives; in foster care; in a group home; any other place?)

Why was (CHILD) living in this/these other arrangement(s)?

Marital Status (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Have you ever been married?

In (PRIOR MONTH), were you: married and living with your (husband/wife); Separated or living apart from your (husband/wife); Divorced; or Widowed?

In (PRIOR MONTH), were you living as a couple with a boyfriend/girlfriend or partner?

Whether Married to Biological or Non-Biological Father (Iowa Questionnaire)

Were you married to (CHILD's) biological father when he/she was born? Does (CHILD's) biological father currently live in your household? What is his current relationship to you?





Mother's Psychological Well-Being

epression is defined as a negative mood state so extreme that it interferes with daily functioning and productive activity. In general, the highest rates of depression are found among people with low incomes, women, parents with young children, young adults, unmarried people, the poorly educated, and the unemployed. Not surprisingly, then, single mothers on AFDC with young children have been found to have high levels of depressive symptoms. Researchers have found significant levels of depression in samples of low income mothers, AFDC recipients, 28 and AFDC recipients who had given birth as teens. 29

One study in the state of Washington found that a sample of mothers on public assistance had higher levels of depression than other groups. In addition, longer stays on welfare were associated with more depression. However, women in the study who were enrolled in school or a training program, and those with jobs, were less likely to be depressed. Other studies have also found that employed women tend to have better psychological health than women who are not employed. It

It is not clear whether state welfare reform policies will increase or decrease levels of maternal depression, have no effect at all, or have differing effects at different points in time (e.g., in relation to whether or not the family has reached a time limit). There appear to be two basic ways in which welfare reform may affect depression:

- Working in low paying, unstimulating jobs, reaching a time limit, failing to locate steady employment, or receiving sanctions may increase depression.
- Becoming self-sufficient may put mothers into a more positive state of mind and therefore decrease the symptoms of depression.

Depression can interfere with day-to-day activities, including parenting.³² It has been found to be associated with parenting that is more harsh, hostile, and less emotionally supportive of the child.³³ This, in turn, has significant implications for children. Specifically, children of depressed parents:

- have higher levels of both externalizing (e.g., aggressive) and internalizing (e.g., anxious, depressed) behavior problems;
- lack social skills and have trouble with academic achievement; and
- are in poorer physical health.³⁴

Given the potential impacts that welfare reform could have on maternal depression, and the resulting effects this increase or decrease in depression could have on child development, it is important to include measures of maternal depression in evaluations of welfare reform.



SAMPLE ITEMS

Depressive Symptoms (20-item Center for Epidemiologic Studies-Depression Scale 39)

The following questions are asked to find out how you have felt about yourself and your life during the past week. There are no right or wrong answers.

Please circle the number that best describes how often you felt or behaved this way for each statement—during the past week. The numbers have the following meanings:

- 1. means rarely or none of the time, that is, less than one day this past week;
- 2. means some or a little of the time, that is, one to two days this past week;
- 3. means occasionally or a moderate amount of time, that is, three to four days; and
- 4. means most or all of the time, that is, five to seven days.

I was bothered by things that usually don't bother me.

I did not feel like eating; my appetite was poor.

I felt that I could not shake off the blues even with help from my family or friends.

I felt that I was just as good as other people.

I had trouble keeping my mind on what I was doing.

I felt depressed.

I felt that everything I did was an effort.

I felt hopeful about the future.

I thought my life had been a failure.

I felt fearful.

My sleep was restless.

I was happy.

I talked less than usual.

I felt lonely.

People were unfriendly.

I enjoyed life.

I had crying spells.

I felt sad.

I felt that people disliked me.

I could not get going.



Absent Parent Involvement

uring the debate over welfare reform, much attention was given to the role that absent fathers do or do not play in the lives of their children. Welfare reform policies addressed this concern in the context of paternity establishment and the enforcement of child support collection. The aim is to increase the participation of absent parents — usually fathers — in their children's lives, primarily by requiring mothers to establish paternity in order to receive benefits, and then pursuing fathers who are not fulfilling their child support obligations. These provisions could affect the lives of children in a variety of ways:

- Enforcement of child support and paternity establishment may increase contact between nonresident parents and their children.
- Requiring fathers to acknowledge their paternity and pay for child support may lead the father to have feelings of anger and resentment toward both the mother and the child.
- Enforcement of formal child support payments may affect the nonresident parent's provision of informal support, (i.e., providing money directly to the mother instead of passing it through the state, or providing non-cash support such as gifts, clothing, or food).

The changed nature of father involvement could also influence child development in more than one way:

- Increased involvement by absent parents in the form of child support might have positive implications for children's well-being, particularly in terms of cognitive development, better academic achievement, and fewer behavioral problems;³⁶
- Increased stress and conflict between parents due to child support enforcement may have a detrimental effect on children's well-being. Children may observe and respond to conflict between their parents, and the quality of their relationships with either or both parents may be affected unfavorably.³⁷

For these reasons, it is important that evaluations of welfare reform examine the effect that increased state interest in absent parent involvement has on the provision of both informal and formal child support, as well as the impact that support requirements have on the child's relationships with both parents.



Children and Welfare Reform

SAMPLE ITEMS

Whether Child Support Provided (National Evaluation of Welfare-to-Work Strategies Child Outcomes Evaluation Descriptive Study Survey; Minnesota Family Investment Program Questionnaire)

Is (CHILD) covered by a child support order?

During the past 12 months, did you or (CHILD) receive any money from his/her father for child support through the child support office or child support enforcement agency?

Is cash paid directly from the father to help with expenses for (CHILD)?

During the past 12 months, has (CHILD)'s father given you money for (CHILD) regularly, so that you could count on almost always getting the money? Please do not include money paid through the welfare office.

Paternity Establishment (Minnesota Family Investment Program Questionnaire)

Were you married to (CHILD)'s father when he/she was born?

If no, have papers been filed with a court or legal agency that establish (CHILD)'s father as his/her legal father?

Frequency of Contact with Child (National Evaluation of Welfare-to-Work Strategies Child Outcomes Evaluation 2-Year survey)

In the past 12 months, about how often has (CHILD) seen his/her biological father? (Almost every day, 2-5 times per week, about once a week, 1-3 times per month, 2-11 times in the past 12 months, once in the past 12 months, 0 times in the past 12 months)

(Panel Study of Income Dynamics Child Supplement)

During the past 12 months, about how often did (CHILD) talk on the telephone or receive a letter from his/her biological father? Would you say...about once a year, several times a year, one to three times a month, about once a week, or several times a week?





Stability and Turbulence

urbulence involves the experience of multiple changes in life circumstances that disrupt the important routines of a child's life. Turbulence for children may emerge from the effects of welfare reform on:

- changes in family structure and living arrangements;
- changes in residence;
- changes in schools and/or child care arrangements; and
- fluctuations in family income.

Welfare policies could increase either stability or turbulence in family life. Some programs include support services that may reduce turbulence, and steady parental employment may lead to a more stable environment for children. Yet other welfare provisions may lead to a greater degree of turbulence. Examples of how welfare reform might increase or decrease turbulence in a family's life include:

- Parents who are sanctioned may be unable to pay rent and end up moving in with friends or relatives or changing residences frequently.
- Parents who get jobs may use child care assistance to put their children in stable, long-term child care situations.
- Work requirements could result in a job which requires "off-hours" or shift work, leading parents to rely on many different child care arrangements.
- Work requirements may lead parents to get a steady job with a stable income.

Researchers have linked turbulence in children's lives to some of the behaviors that policy makers hope that welfare reform will reduce. Obtaining data on various types of turbulence in the lives of children may provide an early indicator of changes that either support or undermine children's development.

Frequent changes in living arrangements and family structure. Researchers have found that the number of changes in family structure or living arrangements during childhood was associated with the probability of a woman having a premarital birth before she was 18 years old.³⁸ Turbulence resulting from changes in family situations is also linked to doing poorly in school, which can affect a child's ability to get a job in the future.³⁹

Frequent moves during childhood. The frequency of moves during childhood has been found to be related to children's success in a number of ways. For example, the more moves a child makes, the more likely the child is to do poorly in school,⁴⁰ the more likely the child is to repeat a grade and have behavioral problems,⁴¹ and the less likely he or she is to complete high school and college.⁴²

One researcher found that the number of moves during childhood helped predict whether or not a 15-to 19-year-old girl has had premarital sex. This remained true even when the researcher took other factors into account, such as whether the girl's family was intact, how religious the family was, the race of the girl, and the sexual attitudes and behaviors of the girl's friends and peers.⁴³



Frequent changes in child care arrangements. Turbulence in child care may occur because a parent changes arrangements, or because of a high turnover of caretakers within a single child care setting. Children who experience a greater number of changes in child care arrangements have been shown to engage in less complex forms of play⁴⁴ and to have more problems in school as first graders.⁴⁵ Researchers have found that children in centers with higher annual teacher turnover rates spent less time engaged in social activities and more time wandering aimlessly.⁴⁶ A greater number of changes in the primary caregiver in a day care setting has been found to be associated with a greater occurrence of aggressive behavior.⁴⁷

Income instability. Associations have been found between fluctuations in family income levels and outcomes for children. Such fluctuations create uncertainty about resources. Families may overspend when income is at higher levels, which may compound the difficulty of getting by on income that is low overall. One researcher found that fluctuations in income increased the likelihood of a woman giving birth outside of marriage regardless of level of income. He also found that a decrease in income could be worse than just having low income in the first place.⁴⁸ Fluctuations in income were also found to be associated with lower reading scores, lower math scores, and a greater number of reported behavior problems among children 7 to 12 years old.⁴⁹

School changes. Moving often requires a child to change schools. Most of the studies that examine the link between moving and child outcomes do not include measures of whether or not the child changed schools. However, there is some research that looks at school change in relation to child outcomes. The existing evidence indicates that even the "normal" transition from elementary school to junior high school can have negative implications for a child's self-esteem and grades. The possibility exists that a transition that involves an improvement in school environment would be associated with improved child outcomes.

SAMPLE ITEMS

Stability in Child Care

See Stability in CHILD CARE on page 47.

Stability in Income

To measure stability in income, we recommend creating this measure from administrative records data such as earnings from UI records, AFDC and food stamp payments.

Number of Moves of Residence (New Hape Survey)

Did you move (since random assignment/since specific time frame)? How many times did you move (since random assignment/since specific time frame)?

Number of School Changes (National Survey of America's Families)

How many times did (CHILD) change schools in the past (insert number) years? (None, 1 time, or 2 or more times?)



Change in Cohabitation (New Hope Survey)

Did you start living with a partner (since random assignment/since specific time frame)? How many times did you start living with a partner (since random assignment/since specific time frame?)

Did you stop living with a partner (since random assignment/since specific time frame)? How many times did you stop living with a partner (since random assignment/since specific time frame)?

Change in Marital Status (Iowa Questionnaire)

What is your current marital status? (Single, never married; married; separated; divorced; or widowed)

During what month and year were you (married/separated/divorced/widowed?)

Have there been any other changes in your marital status since (random assignment date?)

During what months(s) and year(s) did you experience a change in your marital status? How has it changed?

Why Child Not Living with Family (National Evaluation of Welfare-to-Work Strategies Child Outcomes Evaluation Descriptive Study Survey)

- 1. Have there been any times lasting a month or more when (CHILD) did not live with you?
- 2. When (CHILD) was not living with you for a month or more, did he/she ever spend time living (with his/her mother; with his/her grandparents; with his/her aunt/uncle; with other relatives; in foster care; in a group home; any other place)?
- 3. Why was (CHILD) living in this/these other arrangements? (Court or agency removed child from home/foster care; child has been adopted; child is visiting relatives; other parent has primary custody of the child; child is in juvenile detention/jail; child is institutionalized or in a residential program; lives with relative in a better area; mother in residential program—children not allowed; mother cannot care for child; other)

Foster Care

See sample items under section entitled Why child not living with family.



12 C

Consumption

'elfare reform is likely to affect how much income a family receives, as well as how a family spends the money it has. Depending on a family's individual situation and state policies, family income may rise or fall as a result of welfare policies. For example:

- Increased income from higher income disregards—the amount of income a family is allowed to earn before their welfare benefits are reduced—may decrease the percentage of income needed for housing and food, making more money available for other purposes.
- Sanctions may reduce income, making it more difficult for a family to pay the rent or meet other basic needs.
- Net family income could decline when a parent becomes employed and faces expenses related to child care, health insurance, or unsubsidized rent. Again, this could result in fewer resources available to meet basic needs.

Two measures of consumption are suggested for possible inclusion in evaluations of welfare reform and children: the percentage of income spent on child care and the percentage of income spent on rent.

- Changes in the quality and stability of child care settings can affect a child's development both positively and negatively (see the discussion of Child Care, p.46). The percentage of income spent on child care may be related to the quality of that care.
- Housing is often a family's single largest expenditure. The greater the percentage of income a family spends on housing, the less that is available for other uses. Housing affordability is measured by the percentage of income that a family spends on housing, and the percentage may change as a result of changes in a family's welfare status or income. Families with affordability problems are at risk of having to move, of needing to double up with another family, or of becoming homeless. They are also more likely to be experiencing high levels of stress. These changes have implications for children's well-being (see the discussion of Stability and Turbulence, p.40).

SAMPLE ITEMS

Percent of Income Spent on Rent (New Hope Evaluation Survey)				
	Altogether, in (PRIOR MONTH), what did your household spend on housing? Include rent or mortgage, and, il			
	applicable, home insurance and property taxes.			
	\$			

Did that housing expenditure in (PRIOR MONTH) include any utilities, such as gas, heat, or electricity?

Percent of Income Spent on Child Care (Minnesota Family Investment Program Questionnaire) How much do you or your household usually pay out per week for child care when you are working, whether you are paid back or not?





Use of Health and Human Services

s parents on welfare have contact with caseworkers and program administrators, they may learn about other benefits and services for which they are eligible. Some states' welfare policies and practices include extensive case management with the goal of identifying families' service needs and improving their access to needed services, particularly if, in doing so, mothers become more able to leave welfare for employment. Such benefits include child care subsidies and Medicaid (including "transitional" child care and "transitional" Medicaid for up to 12-24 months after mothers earn their way off welfare), and food stamps.

In addition to supporting mothers' transition from welfare to work, these benefits are likely to assist children directly in the following ways:

- Food Stamps may allow the family to buy additional and more nutritious food, thus contributing to children's health and development.
- Quality child care benefits children's health, educational, and socioemotional development (see discussion of Child Care, p. 46), though subsidies do not necessarily buy high quality child care.
- Medicaid can help parents get appropriate medical care for their children, therefore improving children's health.

SAMPLE ITEMS

Food Stamps (Indiana Survey, Modified)

Now I'd like to ask you some questions about sources of income and support. In (LAST MONTH), have you, (your spouse), your (child/children), (or any other member of your household) received food stamps?

Who received food stamps last month? (Respondent, spouse, kids, other members of household)

How much did you/your spouse/your child/children receive last month? How much did other members of your household receive, in total, last month?

Medicaid (Use, Eligibility, Awareness)

(Minnesota Family Investment Program Questionnaire; Iowa Core Questionnaire)

The next few questions are about health insurance.

Do you (your spouse), or your (child/children) under age 18 and living with you currently have any of the following types of health insurance?

Medicaid?

Who in your family is covered by Medicaid?

How many of your children under age 18 and living with you are covered by Medicaid?

Since (Random Assignment), has there been any time when you had no health insurance, either from a private health plan or HMO, Medicaid or Medicare?

Were you ever informed by (NAME OF WELFARE PROGRAM) that Medicaid coverage is available for a limited time to families who leave (NAME OF WELFARE PROGRAM) and become employed?



Access to Medical Care (Minnesota Family Investment Program Questionnaire; Iowa Questionnaire)

The next few questions are about health insurance.

Do you (your spouse), or your (child/children) under age 18 and living with you currently have any of the following types of health insurance?

Medicaid? Medicare? A private health plan or health insurance or an HMO?

Who in your family is covered by Medicaid? Medicare? A private health plan or health insurance or an HMO? How many of your children under age 18 and living with you are covered by Medicaid? Medicare? A private health plan or health insurance or an HMO?

(Survey of Income and Program Participation)

In the past 12 months, has there been a time when your household... Had someone who needed to see a doctor or go to the hospital but couldn't go? Had someone who needed to see a dentist but couldn't go?

(National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Is there a particular clinic, health center, doctor's office, or other place where CHILD is usually taken if he/she is sick, not including accidents?

Is that particular place a hospital emergency room or some other place?

Is there a particular clinic, health center, doctor's office, or other place where CHILD is usually taken for routine care, such as getting check-ups or shots?

How long has it been since CHILD last saw a dentist or dental hygienist for dental care? (Less than one year, at least one year, but less than two years, at least two years, but less than three years, three years or more, never seen a dentist or dental hygienist for routine care)

About how long has it been since CHILD last saw a medical doctor or other health professional for a checkup, shots, or other routine care?

(Less than one year, at least one year, but less than two years; at least two years, but less than three years; three years or more; never seen a doctor for routine care)

Child Care Subsidy (Use, Eligibility, Awareness) (Iowa Questionnaire)

I'm going to read a list of people or programs who may pay for or subsidize child care costs, and I'd like you to tell me if any of these people or programs currently pay for or subsidize some or all of your child care costs. (Family member or relative; a friend; an employer; a discount or scholarship program from a child care provider; WELFARE PROGRAM; another government program; some other program)

How many of your children are covered by the child care payments from (NAME OF WELFARE PROGRAM)/ that government program?

Were you ever informed by (NAME OF WELFARE PROGRAM) that state-funded child care assistance is available for a limited time to families who leave (NAME OF WELFARE PROGRAM) and become employed?



RATIONALE

Child Care

hild care is typically defined as any child care arrangement that does not involve one of the child's parents. Types of child care include child care centers, family day care homes, care by a relative or other caregiver in or out of the parent's home, Head Start and other preschool programs, and before or after school care. Once a child is school-age, the notion of child care is expanded to include extra-curricular lessons, regular activities, and self-care.

If welfare reform succeeds at moving more welfare recipients into jobs, it will lead to an increased demand for child care. In a study of the JOBS program, researchers found that child care use by participants increased substantially soon after enrollment for those with mandatory work, job training or education requirements.⁵² Welfare reform could be related to the use of child care in several ways:

- Increased work participation could lead to increased use of child care.
- Increased child care subsidies and transitional benefits could lead to increased use of child care and use of child care over long periods.
- Reliable child care could contribute to sustained employment, while unreliable child care could result in a mother being unable to keep a job.
- Increased demand for child care could lead to increased use of unregulated care.

The use of child care by welfare recipients is likely to affect children's development. Depending on the quality of care, child care could either enhance or compromise children's cognitive and socio-emotional development. While high quality child care can enhance the development of children of all income levels, it may have the greatest influence on poor children's development. Children from low-income families appear to reap the greatest benefits from high-quality child care in terms of improved reading and math skills and in their ability to relate to others. S4

In the past, researchers have found that children of the working poor are likely to receive the lowest quality child care. This happens when families earn too much to qualify for subsidies available to poorer families, but not enough to afford higher quality care.⁵⁵ As a result, in evaluating the impact of welfare reform on children, it is important to find out what happens to low income children whose families do not receive subsidies and what happens to children when their families leave welfare and join the working poor.

Welfare reform policies likely have complex effects on families' use of child care. Child care, in turn, has potentially complicated and possibly profound effects on children and mothers. For these reasons, it is important to include fairly detailed questions about child care in evaluations of welfare reform.



SAMPLE ITEMS

Type (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Here is a list of different kinds of arrangements that parents use to care for their children. Please look at the list and tell me which arrangements you have used for (CHILD) at least once a week for the past four weeks. (Examples include: child cares for himself/herself; Respondent's partner; child's other biological parent; child's sibling/halfsibling; child's other relative; family day care; Head Start; summer day care)

Extent (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

During the last full week from Monday to Sunday, how many hours did (CHILD) spend altogether in (all of) the care arrangement(s) you mentioned?

Quality

Group size, ratio of children to adults (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Is there more than one group or room of children in that arrangement?

How many children are usually cared for in (CHILD)'s group, including (CHILD)?

What is the usual number of people caring for your child and the other children in (CHILD)'s group in that arrangement?

Licensing (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

As far as you know, is your primary child care provider licensed or regulated by the state?

Parent perception (Emlen Oregon Child Care Research Partnership Quality of Care Subscale)

(never, sometimes, often, always)

- 1. (CHILD) feels safe and secure in child care.
- 2. (CHILD) gets lots of individual attention.
- (CHILD)'s child care provider is open to new information and learning.

Stability

This information can be collected using a child care calendar. See CHILD CARE HISTORY.

Child care history

We recommend that these data be collected using a child care calendar. Below are instructions to a calendar that is being used in the Minnesota Family Investment Program Questionnaire:

Now I'd like to make a calendar showing the history of (CHILD)'s child care since (Random Assignment). On this calendar, the months go across the top and the bottom and the years go down the left and right sides. For each month since (Random Assignment), I'd like to know the child care arrangements you used for (CHILD). If you did not use an arrangement that month, please let me know. Also, please remember to include only those arrangements you reported using since (Random Assignment) for a month or more.

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Home Environment and Parenting Practices

he home environment is an important influence on child development. However, it has been understudied in the context of welfare reform. The home environment is likely to be affected by welfare reform's effects on parents. Welfare reform policies could affect parenting through their influence on:

- m employment;
- maternal depression; and
- stability and turbulence.

In turn, child development could be affected through changes in parenting and family environment (see discussions of Employment, p.31, Mother's Psychological Well-being, p.36, Stability and Turbulence, p. 40). Four aspects of the home environment which are likely to be affected by welfare reform are:

- family routines;
- me emotional support and cognitive stimulation provided to children;
- aggravation/stress in parenting; and
- domestic violence and child abuse and neglect.

Family routines. When a welfare recipient starts a job, there are almost certainly accompanying changes in a family's daily schedule and routines. New routines could be formed and old routines may need to be adjusted to a new schedule.⁵⁶ This, in turn, could have implications for child outcomes. For example, children may benefit from a firmly established routine for bedtime, meal time, and other daily events.⁵⁷ Alternatively, the home environment may become more disorganized and less routinized as a result of increased stress or because employment (and child care) occur sporadically or at varying hours.⁵⁸

Emotional support and cognitive stimulation. The receipt of both stimulation and support from the home environment is necessary to children's well-being. Parents can contribute to their children's cognitive development both directly, through interactions with the child, and indirectly, through the structuring of children's experiences.⁵⁹

A number of studies have used the Home Observation for Measurement of the Environment (HOME) scale to examine the quality of the home environment (including both cognitive stimulation and emotional supportiveness) for its importance for children's development. Studies have demonstrated that the HOME predicts children's outcomes, even among low-income families. For example, in one study, scores on the HOME predicted reading, language, and mathematics scores in first grade. 61

Aggravation/stress in parenting. Changes in a family's life as a result of changing welfare policies can increase or decrease a parent's level of stress, which may in turn affect his/her parenting. Increased stress could lead to more impatient, more aggravated parenting practices. For example, the need to balance work with child care arrangements and family life could lead a



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parent to show more frustration to his/her children. Greater parenting aggravation is associated with poorer child outcomes. Alternatively, if parents have positive experiences outside the family this could make them less frustrated and aggravated with parenting.

Domestic violence and child abuse and neglect. As states try to move welfare recipients into jobs, it is important to understand what factors contribute to getting and maintaining jobs. There is a growing concern among policy makers about the influence that family, friends, and partners can have on a woman's perceptions of the barriers to employment. There is growing evidence that women on welfare are more likely than other women to be victims of domestic violence, 62 as well as evidence linking low income and family violence. 63 Both physical and emotional abuse could make it more difficult for women to get and keep jobs. 64

Researchers report that witnessing domestic violence can traumatize a child as well as lead to future behavior problems and delinquency. Children in homes where domestic violence is happening between adults are also much more likely to be battered themselves. Seventy-five percent of battered women report that their children are abused as well. In addition to causing immediate harm to children, abuse also affects a child's social and emotional development. Researchers have found that children assaulted by parents were more violent toward brothers, sisters, parents and persons outside the family. They were also more likely to have adjustment difficulties at school, to be involved in property crime and to be involved with the police.

SAMPLE ITEMS

Emotional Support and Cognitive Stimulation Provided to Child (Selected items from the Home Observation for Measurement of the Environment-Short Form)*

About how many books does your child have? (None, 1 or 2, 3 to 9, 10 or more)

About how often do you read stories to your child? (Never, several times a year, several times a month, about once a week, at least 3 times a week, every day)

Is there a musical instrument (for example, piano, drum, guitar, etc.) that your child can use here at home? (Yes, No)

How often has any family member taken or arranged to take your child to any type of museum (children's, scientific, art, historical, etc.) within the past year? (Never, once or twice, several times, about once a month, about once a week or more often)?

About how often does your whole family get together with relatives or friends? (Once a year or less, a few times a year, about once a month, two or three times a month, about once a week or more)

Interviewer ratings:

(Mother/guardian) encouraged child to contribute to the conversation (Yes, No, Not observed) (Mother/guardian)'s voice conveyed positive feeling about this child (Yes, No, Not observed) Interior of the home is dark or perceptually monotonous. (Yes, No, Not observed) All visible rooms of the house/apartment are minimally cluttered (Yes, No, Not observed)

^{*} In addition to mother-report survey items, the HOME-Short Form requires a visit to the home so that the interveiwer can rate the home environment as well as mother-child interactions.



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Family Routines (Selected items from the Family Routines Scale from the Early Head Start study)

"I'm going to read some statements and I'd like you to tell me if your family does these things every day, three to five days per week, one or two days per week, or never.

- a. At least some of your family eats breakfast at a regular time.
- b. Your child(ren) go(es) to bed at a regular time, that is, generally around the same time at night.

Parental Monitoring of Child Activities (NICHD Methods Project) (This was not an original coreconstruct, but all states are including these items in their surveys)

How often do you know who child is with when he/she is away from home and not in school? (Almost never, sometimes, often, almost always, or always?)

How often do you know where child is when he/she is away from home and not in school? (Almost never, sometimes, often, almost always, or always?)

How often do you know if child arrived back home when he/she was supposed to? (Almost never, sometimes, often, almost always?)

How often do you know whether child has finished any homework? (Almost never, sometimes, often, almost always, or always?)

Aggravation/Stress in Parenting (Selected items from the National Evaluation of Welfare-to-Work Strategies Aggravation in Parenting Scale)

Please tell me how much during the past month have you....
(all of the time, most of the time, some of the time, none of the time)

Felt you are giving up more of your life to meet your child's needs than you ever expected? Felt angry with your child?

Felt your child is much harder to care for than most?

Child Abuse

These are sensitive issues to raise with parents. However, some surveys have included items such as the ones below to measure incidences of child abuse.

(The Parent-Child Conflict Tactics Scale-Revised)

Children often do things that are wrong, disobey, or make their parents angry. We would like to know what you or your partner have done when your CHILD did something wrong or made you or your partner upset or angry. I am going to read a list of things you or partner might have done in the past year and I would like you to tell me whether the two of you have done it once in the past year, done it twice in the past year, 3-5 times, 6-10 times, 11-20 times, or more than 20 times in the past year. If you haven't done it in the past year but have done it before that, I would like to know this too.

Explained why something was wrong.

Told him/her to stop (or start) doing something.

Put him/her in "time out" or sent to his/her room.

Shook him/her.

Hit him/her on the bottom with something like a paddle, brush or belt.

Gave him/her something else to do.

Shouted, yelled, or screamed at him/her.

Hit him/her with a fist or kicked him/her hard.

Swore or cursed at him/her.

Spanked him/her on the bottom with your bare hand.

Choked him/her.



5.5

Beat him/her up, that is you hit him/her over and over as hard as you could.

Said you would send the child away or kick him/her out of the house.

Burned or scalded him/her on purpose.

Threatened to spank or hit him/her.

Hit him/her with a stick, belt, or bat on some other part of the body besides the bottom.

Slapped him/her on the hand, arm, or leg.

Took away privileges or grounded him/her.

Pinched him/her.

Threatened him/her with a knife or gun.

Threw or knocked him/her down.

Called him/her names, such as dumb, ugly, or useless.

Slapped him/her on the face or head or ears.

Child Neglect (Parent-Child Conflict Tactics Scale - Revised)

Sometimes things can get in the way of caring for your child the way you and your partner would like to: for example, money problems, personal problems, or having a lot to do. Tell me how many time is in the last year the following has happened to you or your partner in trying to care for your child.

Were not able to make sure he/she got the food he/she needed.

Had to leave him/her home alone, when you thought some adult should be with him/her.

Were so drunk or high that you had a problem taking care of him/her.

Were unable to make sure she/he got to a doctor or hospital when he/she needed it.

For a few days when you were with him/her, you were not able to show or tell him/her that you loved him/her.

Domestic Violence/Abusive Relationships (National Evaluation of Welfare-to-Work Strategies 5-Year Survey

Since (Random Assignment), did anyone ever....

Yell at you all the time, put you down on purpose, or call you names in order to make you feel bad about yourself as a person?

Threaten you with physical harm?

Hit, slap, kick, or otherwise physically harm you?

When this happened was the person or people who did these things your (husband/wife; ex-husband/exwife; boyfriend/qirlfriend; ex-boyfriend/ex-girlfriend; female/male partner; parent or stepparent; other family member; someone at your job; a stranger; someone else?)

How long ago did the most recent event happen? (Within the past 7 days; a week ago; a month ago; six months ago; a year ago; two years ago; more than 2 years ago)



Children's Education

here are several ways in which welfare reform might positively affect children's educational progress:

- For young children, participating in high-quality child care settings could help prepare them for school.
- For school-age children, parents who participate in work might establish regular routines for their children, including regular school attendance and nightly homework sessions.
- Many states have specific provisions to insure that teenagers, particularly teen parents, remain in school.
- Some states sanction parents if children are not attending school.
- Increases in family income due to employment or income disregards may allow parents to purchase more educational books and toys, and may allow parents to afford educational family outings.

There are also several ways in which welfare reform could negatively affect children's educational progress:

- It is possible that as parents move into jobs, they will have less time for monitoring their children's behavior both in and out of school.
- If children are placed in poor quality child care settings, it could negatively affect their development.
- Welfare reform could cause families to move more often. An increase in the number of times someone moves during childhood is associated with a decrease in the probability of completing high school and college,⁶⁸ with an increase in the probability of repeating a grade and having behavioral problems,⁶⁹ and with lower levels of academic achievement.⁷⁰ (See the discussion of Stability and Turbulence on page 40).

Education is one of the most critical predictors of children's eventual economic well-being.⁷¹ On a societal level, a more skilled work force is more productive, earns higher wages, and pays more taxes. Well-educated individuals are less likely to experience spells of unemployment or to be economically dependent.

There are several education measures that provide insights into a child's or adolescent's ability to learn, to advance in school, and ultimately to succeed in the labor force. Some of these measures assess a very young child's level of preparedness for school; others measure achievement in school; and still others assess mastery of a curriculum.

Some aspects of education that are important to measure include:

- Children's engagement in school: "behaviors, emotions, and a psychological orientation when doing academic work that reflect commitment, interest, and enjoyment." 72
- School attendance and grade repetition: how often a child misses school and whether or not a child has been held back a grade.
- Behavior problems in school, such as suspensions and expulsions from school.
- Academic performance (grades in school).



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SAMPLE ITEMS

Engagement in School (Connell School Engagement Scale used in the National Survey of America's Families

For each of the following statements, please tell me if you think it is not true, sometimes true, or often true. Would you say (CHILD)....

- 1. Cares about doing well in school?
- 2. Only works on schoolwork when forced to?
- 3. Does just enough schoolwork to get by?
- 4. Always does homework?

School Attendance (Prospects Survey)

- 1. How many days of school did CHILD miss during the past four weeks that school was in session? (None, 1 or 2 days, 3 or 4 days, 5 to 10 days, more than 10 days)
- 2. How many times was CHILD late for school during the past four weeks that school was in session? (None, 1 or 2 days, 3 or 4 days, 5 to 10 days, more than 10 days)

School Performance

Since (Random Assignment), have any of your children received an academic honor or award for his/her schoolwork?

Which child was that?

Since (Random Assignment), has CHILD repeated a grade—including kindergarten—for any reason?

Suspended/Expelled (National Household Education Survey)

Since (Random Assignment), has your child/have any of your children ever been suspended or expelled from school? (This includes both in-school and out-of-school suspensions).

Which child was that?

Grades (New Hope Survey)

Based on your knowledge of CHILD's schoolwork, including his/her report cards, how has he/she been doing in school overall? Would you say....

Very well, well, average, below average, or, not well at all?



Children's Health and Safety

elfare reform could affect several areas of health and safety in children's lives. Five domains are particularly important to measure when evaluating the impact of welfare reform on children:

- hunger/nutrition;
- children's overall health;
- whether children have access to a regular source of health care;
- accidents and injuries; and
- teen childbearing.

Hunger/nutrition. By increasing or decreasing a family's income, changes in welfare policies can affect the amount and type of food available to families. There is some controversy over the extent of hunger among children in the U.S., but there is consensus that children's healthy development depends on a diet containing sufficient nutrients and calories. Serious food deficiencies can have lasting effects on a child's physical and mental health.⁷³

Families who do not have enough food may be able to overcome this problem through the use of food banks or soup kitchens. Thus, there may be a change in food sources that is not picked up with measures of consumption. This suggests that evaluators might want to consider an additional question that examines the reliance on charitable organizations to increase the family's food supply.

Rating of children's health. Children's health status is an important measure of child well-being. Changes may occur if income declines, if the parent's access to health care changes, or if parents are able to obtain quality health care as a result of being employed. A parent's ability to work may be limited if a child is experiencing physical or mental health problems.

Regular source of health care. Having a regular source of health care is related to the quality of children's health, as well as whether children are covered by health insurance.⁷⁴ Regular health care also increases the continuity of care, which is associated with more positive health outcomes.

Accidents and injuries. If welfare is successful at moving parents into jobs, it is likely that children, as well as parents will spend more time outside the home. If parents do not have reliable child care arrangements, children may be at greater risk for accidents and injuries. Children caring for themselves or for their younger siblings may be at risk, or put the children they are watching at risk. If parents' levels of stress are high, it is possible that they could turn to harsher punishments for children, which, if extreme, could result in injury to a child. Finally, loss of income may force welfare recipients into unsafe housing or neighborhood conditions, while increases in income may enable recipients to move to safer housing.



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Teen Childbearing. Reducing teen childbearing is a high priority for most states as they implement welfare reform. Welfare policies could have any number of possible effects on teen childbearing. On the one hand, if welfare reform is successful at moving parents into jobs, parents may have less time to monitor their children's activities. On the other hand, increased parental employment may provide teens with a positive role model, leading to increased expectations for achievement and decreased teen childbearing.

Risk factors for teen pregnancy include:

- growing up in a single-parent family;
- living in poverty;
- early behavior problems;
- poor school performance; and
- having parents with low educational attainment.⁷⁵

Poor outcomes for the adolescent parents and their children are only partly due to the early childbearing itself. They also reflect other factors, such as single parenthood, school completion, social and economic circumstances and the role of the fathers. 76 Thus, all of these factors can contribute to positive or negative outcomes for the teen and especially the child. In addition, researchers have found that children born to mothers under the age of 18 are disadvantaged in terms of their home environments, their cognitive development and their academic achievement.77

SAMPLE TEMS

Hunger/Nutrition (U.S. Department of Agriculture Food Security Scale)

Now I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for you or the other members of your household in the last 12 months. The first statement is:

The food that we bought just didn't last, and we didn't have money to get more.

We couldn't afford to eat balanced meals.

In the last 12 months since (current month) of last year, did (you/you or other adults in your household) ever cut the size of your meals or skip meals because there wasn't enough money for food? Yes, no, DK or refused

How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?

In the last 12 months, did you ever eat less than you felt you should because there was not enough money to buy food? Yes, no

In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food? Yes, No



(Minnesota Family Investment Program questionnaire)

Which of these statements best described the food eaten in (PRIOR MONTH)?

Enough of the kinds of food we want

Enough but not always the kinds of food we want to eat

Sometimes not enough to eat, or

Often not enough to eat?

DON'T KNOW

REFUSED

Child Health Status (National Evaluation of Welfare-to-Work Strategies 5-Year Survey)

Would you say that CHILD's health in general is...... excellent, very good, good, fair, or poor?

Regular Source of Care (National Evaluation of Welfare-to-Work Strategies Descriptive Study Survey)

Is there a particular place, such as a hospital, doctor's office, clinic, or health center that CHILD usually goes to for medical care?

Teen Childbearing (National Evaluation of Welfare-to-Work Strategies 5-Year survey)

Since (random assignment date), has your child/have any of your children had or fathered a baby? Which child was that? How old was that child when his/her baby was born?

Accidents and Injuries (National Evaluation of Welfare-to-Work Strategies 5-Year survey)

Since (random assignment date), has your child/have any of your children had an accident, injury, or poisoning requiring a visit to a hospital emergency room or clinic? Which child was that?





Children's Social and Emotional Adjustment

hildren's social behavior is a reflection of their individual temperaments, interactions with caregivers, experiences in structured (e.g., school) and unstructured environments (e.g., neighborhoods), as well as their past experiences. Welfare reform, through its effects on parenting and children's environments, can potentially influence children's social behavior in two primary domains:

- Behavior problems. These include internalizing behaviors (such as being withdrawn, unhappy, or depressed) and externalizing behaviors (such as acting out by breaking things, cheating, or being a bully). Other behavior problems include participation in illegal activities, gang membership, school suspension and drug or alcohol abuse. These behaviors are important to track because they are related to negative outcomes later in development. 78 In early childhood, preschool children who are depressed, anxious, or withdrawn are at risk for a difficult adjustment to school. 79 In early adolescence, having been suspended from school is associated with lower literacy scores in later school years.80
- Positive behaviors. These are often measured as the absence of negative behaviors, but can also include prosocial behavior (such as sharing, cooperating and helping) and social competence. Children who engage in these behaviors may be at diminished risk for later problems in school and relationships.

Welfare reform could affect behavior problems and positive behaviors in a number of ways:

- Sanctions, time limits, or grant reductions may increase maternal stress or depression. Previous research has shown that maternal depression is related to an increased incidence of behavior problems in children.81
- Parents mandated to participate in work or training activities might have enhanced skills and an increased sense of efficacy and self-esteem; such increases could positively affect children's development.
- If a welfare provision affects the family's living arrangements or socioeconomic status, changes in behavior problems may also result. For example, one study found that (for white girls) having a father present was related to fewer behavior problems, but that having a father-figure depart or arrive was related to increased behavior problems.⁸²
- Living in neighborhoods with more low-income residents is associated with a higher incidence of children's externalizing behaviors, such as destroying things and throwing temper tantrums.83
- If welfare programs decrease maternal depression, improve family economic well-being, and/or contribute to residence in a better neighborhood, behavior problems could diminish.



SAMPLE ITEMS

Behavior Problems (Selected items from the Behavior Problems Index)

My child..... (Not true, Sometimes true, Often true)

- 1. Has sudden changes in mood or feelings
- 2. Feels or complains that no one loves him or her
- 4. Cheats or tells lies
- 7. Has difficulty concentrating, cannot pay attention for long
- 9. Bullies or is cruel or mean to others
- 10. Is disobedient at home
- 12. Has trouble getting along with other children
- 13. Is impulsive, or acts without thinking

Social Competence (Selected items from the Positive Behaviors Scale, Social Competence Subscale)

Different children have different personalities and different good qualities. Using a scale of "0 to 10" when "0" means "not at all like your child" and "10" means "totally like your child," please tell me how well each statement describes CHILD. You may use any number between 0 and 10 to show how much like your child each description is.

My child:

- a. Is warm, loving
- b. Tends to give, lend, and share
- c. Is helpful and cooperative

Arrests (National Longitudinal Survey of Youth 1997)

Has your child/have any of your children every been arrested by the police or taken into custody for an illegal or delinquent offense? Please do not include arrests for minor traffic violations.

Who has been arrested or taken into custody for an illegal or delinquent offense?



SECTION 3

APPINDICIES



Excerpts from the Florida Survey

The Florida Survey

Florida is one of the five states to receive funding from the U.S. Department of Health and Human Services to field its child outcomes survey. This survey reflects the work of the Project on State-Level Child Outcomes and is very similar to those fielded by Minnesota and Iowa. It has two separate questionnaires, one addressing adult outcomes and one addressing child outcomes. The Florida survey is being used to evaluate adult and child outcomes related to Florida's Family Transition Program, which is described below.

This appendix includes sections of the adult survey that relate to children as well as the entire child survey, which incorporates the common core of constructs from the Project on State-Level Child Outcomes. Pound signs (###) before and after sections of the adult survey indicate that material that is not related to child outcomes has been deleted. A copy of the complete Florida survey is available from Manpower Demonstration Research Corporation (MDRC).*

MDRC is the evaluator for Florida and the survey is being fielded by Abt Associates. For those respondents who have a child between the ages of 5 and 12, both the adult and the child well-being surveys were conducted by an interviewer in the respondent's home. The more sensitive questions, such as those which ask about domestic violence, were administered using a paper and pencil self-administered questionnaire.

The child survey was fielded between August 1998 and July 1999. A final child impact study report will be available in February of 2000. The survey sample includes 5,430 individuals, 4,808 of whom are single parents. Nearly half of the sample is African-American, and slightly less than half is white. MDRC anticipates that the child outcomes sample will consist of 3,300 families, with 2,300 children ages 5-12 at the time of the survey.

Florida's Family Transition Program

Florida's welfare reform program, the Family Transition Program (FTP), began under a federal waiver in Alachua and Escambia Counties in February 1994.** FTP later became the model for Florida's statewide welfare reform program, Work and Gain Economic Self-Sufficiency (WAGES). FTP's focus is on time-limited receipt of cash benefits together with incentives and services to promote employment and self-sufficiency. Most participants in FTP are limited to 24 months of cash assistance in any 60-month period. Additional components of FTP include "make work pay" provisions such as an earned income disregard and enhanced employment services; enhanced child support enforcement; a requirement that unemployed noncustodial parents participate in employment-related activities; immunization and school attendance requirements; and requirements that parents have regular contact with school personnel through conferences. The control group in the evaluation of the FTP is subject to AFDC rules, including employment and training participation requirements, though it is not subjected to the time limited receipt of cash assistance.

Special Thanks

Child Trends gratefully acknowledges MDRC and the state of Florida for providing the survey for reproduction in this guidebook.



A copy of the entire adult survey can be ordered by calling Greg Hoerz at Manpower Demonstration Research Corporation, 212-340-8670. Child Trends has also produced a codebook with detailed instructions on how to create the "common core" variables using items that appear in the state surveys. This codebook is available by contacting Child Trends' publications department.

The program was discontinued in Alachua County, but was continued in Escambia County, the site of Florida's waiver evaluation and child impact study.

START TIME:	:	
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Florida Adult Impact Study

Introduction:

Hello, my name is______. I'm calling from Abt Associates in Amherst, Massachusetts. A week ago we sent you a letter saying that we would be calling to talk to you about your experiences with the Department of Children and Families, which you may also know as the Department of Health and Rehabilitation Services (HRS) in your county. Do you remember receiving this letter?

 YES (READ INTRO B)
 1

 NO (PROBE: We enclosed \$1 with the letter.
 2

 The letter came in a blue envelope. Do you remember receiving the dollar?
 YES (READ INTRO "B")
 1

 NO (READ INTRO "A")
 2

 DK (READ INTRO "A")
 8

INTRO A:

(INTERVIEWER: IF R IS NOT AVAILABLE AND ANSWERING PARTY ASKS WHY WE ARE CALLING, DO NOT SAY WE WANT TO SPEAK WITH R ABOUT RECEIVING AFDC. SAY ONLY THAT WE WANT TO SPEAK WITH R ABOUT RECENT EMPLOYMENT, TRAINING, AND EDUCATIONAL OPPORTUNITIES.)

The letter explained that we're doing a study of AFDC applicants and recipients. The state of Florida has given us your name as someone who has applied for or received AFDC. We'd like to ask you about your experiences with the Department of Children and Families or HRS, and also about your education and employment. Your individual answers will be confidential and your name will not be identified with any answers you give. Also, your interview with me cannot affect your status with any agency now or in the future. I want to thank you in advance for participating.

The interview will take about 35 minutes and after the interview is completed we will send you \$15 to help compensate for your time.

First I'd like to confirm that I'm talking with the correct individual. Can you tell me your date of birth? (INTERVIEWER: CHECK DATE OF BIRTH ON RIB. IF DOES NOT MATCH, CHECK SSN. IF NO MATCH FOR EITHER DATE OF BIRTH OR SSN, TERMINATE INTERVIEW AND NOTIFY SUPERVISOR.)

Throughout this interview we'll be referring to some specific time periods. You may recall that in (RAD) you were in contact with the HRS or AFDC office. We are interested in learning about your experiences since that time and since (RAD + 2 YEARS).

INTRO B:

(INTERVIEWER: IF R IS NOT AVAILABLE AND ANSWERING PARTY ASKS WHY WE ARE CALLING, DO NOT SAY WE WANT TO SPEAK WITH R ABOUT RECEIVING AFDC. SAY ONLY THAT WE WANT TO SPEAK WITH R ABOUT RECENT EMPLOYMENT, TRAINING, AND EDUCATIONAL OPPORTUNITIES.)

Good! As we mentioned in the letter, we're doing a study of AFDC applicants and recipients. The state of Florida has given us your name as someone who has applied for or received AFDC. We'd like to ask you about your experiences with the Department of Children and Families, and also about your education and employment. Your individual answers will be confidential and your name will not be identified with any answers you give. Also, your interview with me cannot affect your status with any agency now or in the future. I want to thank you in advance for participating.

The interview will take about 35 minutes and after the interview is completed we will send you \$15 to help compensate for your time.

First I'd like to confirm that I'm talking with the correct individual. Can you tell me your date of birth? (INTERVIEWER: CHECK DATE OF BIRTH ON RIB. IF DOES NOT MATCH, CHECK SSN. IF NO MATCH FOR EITHER DATE OF BIRTH OR SSN, TERMINATE INTERVIEW AND NOTIFY SUPERVISOR.)

Throughout this interview we'll be referring to some specific time periods. You may recall that in (RAD) you were in contact with the HRS or AFDC office. We are interested in learning about your experiences since that time and since (RAD + 2 YEARS).





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SECTION E: MARITAL STATUS, CHILD BEARING, HOUSEHOLD COMPOSITION, AND CHILD CARE

Now I'd like to ask you some questions about your household.

Е1.	Are you currently Married and living with your (husband/wife)? 1 Separated or living apart from your (husband/wife)? 2 Divorced, or 3 Widowed? 4 Never married 5 REFUSED 7 DON'T KNOW 8
IF R 1	S MALE, GO TO E3.
E2.	Have you been pregnant since (RAD)? 1 YES 1 NO (SKIP TO E3) 2 REFUSED (SKIP TO E3) 7
E2a.	Are you currently pregnant? 1 YES 1 NO 2 REFUSED 7
E2b.	Have you had a baby since (RAD)? 1 YES 1 NO 2 REFUSED 7
E3.	My next questions are about the people who lived in the same household with you at least two nights a week during (PRIOR MONTH). Let's start with the names of the people 18 years old and older. Please list all of the adults who lived in the same household with you at least two nights a week during (PRIOR MONTH).
INTE	RVIEWER: IT IS NOT NECESSARY TO GET ACTUAL NAME; AN INITIAL IS SUFFICIENT

INTERVIEWER: IT IS NOT NECESSARY TO GET ACTUAL NAME; AN INITIAL IS SUFFICIENT. INTERVIEWER: IF RESPONDENT SAYS "NONE" ENTER "NONE" FOR PERSON #1's NAME AND GO TO E4.

INTERVIEWER: GET NAMES OF ALL ADULTS IN HOUSEHOLD IN E3a, THEN ASK E3b AND E3c FOR EACH.

(Editor's note: The following grid may be expanded to include more than three household members where applicable.)



E3a. NAMES	PERSON #1	PERSON #2	PERSON #3
INTERVIEWER: Does that	t include everyone 18 years old or older	who usually lives here, but may be a	way from home at this time?
E3b. What is (NAME's) relationship to you?	SPOUSE 01 BOYFRIEND/GIRLFRIEND/ PARTNER 02 NATURAL OR 03 ADOPTED CHILD 03 STEPCHILD 04 GRANDCHILD 05 OTHER CUSTODIAL CHILD/FOSTER CHILD 06 MOTHER 07 FATHER 08 STEPPARENT 09 AUNT/UNCLE/GREAT-AUNT/GREAT-GRANDPARENT/GREAT-GRANDPARENT 11 SIBLING 12 NEPHEW/NIECE 13 COUSIN 14 OTHER RELATIVE OR 11 NON-RELATIVE (INCLUDING ROOMER/BOARDER) 16	SPOUSE 01 BOYFRIEND/GIRLFRIEND/ PARTNER 02 NATURAL OR ADOPTED CHILD 03 STEPCHILD 04 GRANDCHILD 05 OTHER CUSTODIAL CHILD/ FOSTER CHILD 06 MOTHER 07 FATHER 08 STEPPARENT 09 AUNT/UNCLE/GREAT-AUNT/GREAT-UNCLE 10 GRANDPARENT/GREAT-GRANDPARENT 11 SIBLING 12 NEPHEW/NIECE 13 COUSIN 14 OTHER RELATIVE OR IN-LAW 15 NON-RELATIVE (INCLUDING ROOMER/BOARDER) 16	SPOUSE O BOYFRIEND/GIRLFRIEND/ PARTNER O NATURAL OR ADOPTED CHILD O STEPCHILD O GRANDCHILD O OTHER CUSTODIAL CHILD/ FOSTER CHILD O MOTHER O STEPPARENT O STEPPARENT O GRANDPARENT/GREAT- AUNT/UNCLE/GREAT- AUNT/GREAT-UNCLE I GRANDPARENT/GREAT- GRANDPARENT I SIBLING I NEPHEW/NIECE I COUSIN O OTHER RELATIVE OR IN-LAW I NON-RELATIVE (INCLUDING ROOMER/BOARDER) I OTHER ROOMER/BOARDER I OTHER ROOMER
E3c. How old was (NAME) on (his/her) last birthday?	YEARS	YEARS	YEARS

E4. Now I want to ask you about all of the members of your household who are 17 years of age or younger who you are not responsible for. This may include nieces or nephews who are staying with you temporarily, or children of other adults in the household.

INTERVIEWER: GET NAMES OF CHILDREN 17 YEARS OLD AND YOUNGER IN E4a, THEN ASK E4b-c FOR EACH.

IF RESPONDENT SAYS "NONE," ENTER "NONE" FOR PERSON #1's NAME AND GO TO E5.

(Editor's note: The following grid may be expanded to include more than three children where applicable.)

E4a.	NAMES	PERSON #1	PERSON #2	PERSON #3
E4b.	What is (NAME's) relationship to you?	GRANDCHILD .05 SIBLING .11 NEPHEW/NIECE .12 COUSIN .13 OTHER RELATIVE OR IN-LAW .14 NON-RELATIVE (INCLUDING ROOMER/BOARDER) .15	GRANDCHILD	GRANDCHILD
E4c.	How old was (NAME) on (his/her) last birthday?	YEARS	YEARS	YEARS

INTERVIEWER: Is there anyone else who lives with you who is 17 or younger who you are not responsible for, who you may not have mentioned?

IF YES, GO TO E4a AND RECORD NAME AND ASK E4b AND E4c. IF NO, GO TO E5.





E5. Next I am going to ask you about all of your biological children, adopted children, or foster children and any other children for whom you are responsible who are 17 years old or younger. Please tell me the names of all of the children you are responsible for, starting with the oldest and working your way down. Please name all of your children, even if they are not living in your household right now.

INTERVIEWER: GET NAMES OF ALL OF R'S CHILDREN 17 YEARS OLD AND YOUNGER IN E5a, THEN ASK E5b-E5w FOR EACH.

IF RESPONDENT SAYS "NONE," ENTER "NONE" FOR PERSON #1's NAME AND GO TO SECTION F.

(Editor's note: Although it is not included in the following items, a question should be added asking the gender of each child listed in the grid. The following grid may be expanded to include more than three children where applicable.)

E5a.	NAMES	PERSON #1	PERSON #2	PERSON #3		
usual	Did we list all of your children and any other children you are responsible for who are 17 years old or younger, including small children, who usually live with you but may be away from home at this time? This would also include any children who are under 17 who you were responsible for, but are now deceased. YES (GO TO E5b)					
E5b.	What is (NAME's) relationship to you?	NATURAL OR ADOPTED CHILD .03 STEPCHILD .04 GRANDCHILD .05 OTHER CUSTODIAL CHILD/FOSTER CHILD .06	NATURAL OR ADOPTED CHILD	NATURAL OR ADOPTED CHILD .03 STEPCHILD .04 GRANDCHILD .05 OTHER CUSTODIAL CHILD/FOSTER CHILD .06		
E5c.	How old was (NAME) on (his/her) last birthday?	YEARS	YEARS	YEARS		
E5d.	What is (NAME)'s date of birth?	month day year	month day year	//		
E5e.	Does (NAME) live with you in your household?	YES (GO TO E5h) .1 NO .2 DECEASED (SKIP TO NEXT CHILD OR GO TO E6 IF NO MORE CHILDREN) .3	YES (GO TO E5h)	YES (GO TO E5h)		
E5f.	Where does (he/she) live? (PROBE: Who has primary responsibility for (him/her) now?	CHILD'S FATHER/MOTHER1 CHILD'S GRANDPARENTS2 CHILD'S AUNT, UNCLE, GREAT- AUNT, OR GREAT-UNCLE3 OTHER RELATIVE OF CHILD (SPECIFY:)	CHILD'S FATHER/MOTHER	CHILD'S FATHER/MOTHER		



E5a.	NAMES	PERSON #1	PERSON #2	PERSON #3
E5g.	What is the main reason (he/she) does not live with you?	COURT OR AGENCY REMOVED CHILD FROM HOME/FOSTER CARE	COURT OR AGENCY REMOVED CHILD FROM HOME/FOSTER CARE	COURT OR AGENCY REMOVED CHILD FROM HOME/FOSTER CARE 1 CHILD HAS BEEN ADOPTED 2 CHILD IS VISITING RELATIVES 3 OTHER PARENT HAS PRIMARY CUSTODY OF THE CHILD 4 CHILD IS IN JUVENILE DETENTION/JAIL 5 CHILD IS INSTITUTIONALIZED OR IN A RESIDENTIAL PROGRAM (NOT JAIL OR JUVENILE FACILITY) 6 LIVES WITH RELATIVE IN A BETTER AREA (BETTER SCHOOL OR OTHER FEATURE) 7 LIVES WITH RELATIVE (BECAUSE OF FINANCES) 8 R IN RESIDENTIAL PROGRAM—CHILDREN NOT ALLOWED (E.G., JAIL, MILITARY, TRAINING, DETOX) 9 OTHER (SPECIFY:) 10
EEL				
ESh.	Has anyone besides you regularly taken care of (NAME) at least once a week for the past month or more, like a relative, sitter, child care center, or family day care home?	YES	YES	YES
E5i.	Who has taken care of (NAME) at least once a week for a month or more?	CHILD'S OTHER BIOLOGICAL PARENT	CHILD'S OTHER BIOLOGICAL PARENT	CHILD'S OTHER BIOLOGICAL PARENT
	PROBE FOR RELATIONSHIP IF R GIVES NAME OF CARETAKER. PROBE: Anyone else?	CHILD'S GRANDPARENT/ GREAT-GRANDPARENT	CHILD'S GRANDPARENT/GREAT-GRANDPARENT	CHILD'S GRANDPARENT/GREAT-GRANDPARENT
	(CIRCLE ALL THAT APPLY)	IN CHILD'S HOME07 FAMILY DAY CARE OR NON- RELATIVE IN ANOTHER	IN CHILD'S HOME	IN CHILD'S HOME
ONE IF ON	RVIEWER: IF MORE THAN ANSWER ASK E5j; ILY ONE ANSWER O E5k.	PRESCHOOL, NURSERY SCHOOL OR DAY CARE CENTER	NON-RELATIVE IN ANOTHER HOME	NON-RELATIVE IN ANOTHER HOME
		EXTENDED-DAY, BEFORE/ AFTER SCHOOL PROGRAM/ LESSONS OR ACTIVITIES/BOYS OR GIRLS CLUB, YMCA OR YWCA	EXTENDED-DAY, BEFORE/ AFTER SCHOOL PROGRAM/ LESSONS OR ACTIVITIES/BOYS OR GIRLS CLUB, YMCA OR YWCA	EXTENDED-DAY, BEFORE/ AFTER SCHOOL PROGRAM/ LESSONS OR ACTIVITIES/BOYS OR GIRLS CLUB, YMCA OR YWCA



E5a.	NAMES	PERSON #1	PERSON #2	PERSON #3
E5j.	Who usually takes care of (NAME) for the most hours? Please exclude time (NAME) spends in school during the regular school day. (CIRCLE ONE)	CHILD'S OTHER BIOLOGICAL PARENT	CHILD'S OTHER BIOLOGICAL PARENT	CHILD'S OTHER BIOLOGICAL PARENT
E5k.	During a typical week, how many hours altogether is (NAME) in child care? (PROBE: Please include time (NAME) spends in all the various child care arrangements (he/she) may have but exclude any time (he/she) spends in school during the regular school day. Your best estimate is fine.)	HOURS	HOURS	HOURS
E5I.	IF CHILD IS LESS THAN 5 YEARS GO TO NEXT CHILD,OR GO TO E6 IF NO MORE CHILDREN. About how many hours a week does (NAME) spend without adult supervision?	HOURS	HOURS	HOURS



,	LO.	riow much in total did you pay for child care in (PAST MONTH) for all of your children?
		\$AMOUNT
		INTERVIEWER: IF R SAYS DID NOT PAY FOR CHILD CARE LAST MONTH, ENTER "0". INTERVIEWER: IF ANSWER IS LESS THAN \$100, VERIFY THAT ANSWER IS PER MONTH.
		DID NOT PAY FOR CHILD CARE0
		INTERVIEWER: IF DON'T KNOW, PROBE FOR ESTIMATE: Do you think it was
		Less than \$100
		\$101-250
		\$301-7504
		\$751-800
		REFUSED
		DON'T KNOW8
I	E7.	At any time since (RAD), did you have to quit a job, quit school, a job search, or a training activity because you had problems arranging child care or keeping a child care arrangement?
		YES1
		NO
		DON'T KNOW8
]	E8.	At any time since (RAD) did you not take a new job or start a training program because you had problems arranging child care or keeping a child care arrangement?
		YES1
		NO
]	E9.	Were you ever informed by FTP, HRS or PI that state-funded child care assistance is available for a limited time to families who leave welfare and become employed?
		YES1
		NO
		REFUSED
		###
SEC	CTIO	N F: HOUSING
7	These	questions are in regard to your housing.
]	INTE	RVIEWER: IF R IS CURRENTLY HOMELESS AND LIVING ON THE STREET (F1=7), CIRCLE "1" IN F14 AND GO TO F15.
]	F14.	Have you been homeless and living on the street at any time in the past year, that is, since (MONTH, LAST YEAR)?
		YES .1 NO (GO TO F17) .2 REFUSED (GO TO F17) .7 DON'T KNOW (GO TO F17) .8



F15.	Approximately how much time have you been homeless and living on the street since (MONTH, LAST YEAR)? (PROBE: Your best estimate is fine.)
	DAYS/WEEKS/MONTHS
	RECORD NUMBER AND CIRCLE CORRESPONDING TIME PERIOD BELOW:
	DAYS/NIGHTS 1 WEEKS 2 MONTHS 3 REFUSED 7 DON'T KNOW 8
F16.	During the time you were homeless and living on the street, how often were your children with you? Would you say
	All of the time .1 Most of the time .2 Some of the time .3 None of the time .4 REFUSED .7 DON'T KNOW .8
INTE	RVIEWER: IF R CURRENTLY LIVES IN A SHELTER (F1=6), CIRCLE "1" IN F17 AND GO TO F18.)
F17.	Have you lived in a homeless shelter, emergency shelter, or a domestic violence shelter at any time in the past year, that is, since (MONTH, LAST YEAR)? Please do not include shelter visits that were the result of a natural disaster.
	YES 1 NO 2 _ GO TO F20 REFUSED 7 _ GO TO F20 DON'T KNOW 8 _ GO TO F20
F18.	Approximately how much time have you spent in shelters since (MONTH, LAST YEAR)? (PROBE: Your best estimate is fine.)
	DAYS/WEEKS/MONTHS
	RECORD NUMBER AND THEN CIRCLE CORRESPONDING TIME PERIOD BELOW:
	DAYS/NIGHTS 1 WEEKS 2 MONTHS 3 REFUSED 7 DON'T KNOW 8
F19.	During the time you were living in shelters, how often were your children living with you? Would you say
	All of the time 1 Most of the time 2 Some of the time 3 None of the time 4 REFUSED 7 DON'T KNOW 8



F20. Next, I have a few questions about your neighborhood. By your neighborhood, I mean the area right around where you live now.

Please tell me how much of a problem you think each of the following is in your neighborhood—a big problem, somewhat of a problem, or not a problem at all? How big of a problem is: (READ CATEGORIES AND CODE ONE FOR EACH.)

		Big Problem	Somewhat of a Problem	Not a Problem at All	DON'T REF	KNOW
a.	Unemployment?	1	2	3	7	8
b.	Drug users or pushers?	1	2	3	7	8
c.	Crime, assaults, or burglaries?	1	2	3	7	8
d.	Run-down buildings and yards?	1	2	3	7	8
e.	Noise, odors, or heavy traffic?	1	2	3	7	8

F21. As a place to live and raise children, would you say your neighborhood is...

Excellent,	
Very good,	2
Good,	3
Not too good, or	4
Poor?	
REFUSED	
DON'T KNOW	8

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G11. Including all the sources we just talked about, and any other sources, what was the total income of all members of your household—including yourself— and from all sources before taxes and deductions in (LAST YEAR)? (PROBE: Your best estimate is fine.)

\$,	(GO TO G15)	
REFUSED		
DON'T KNOW		8

G12. Would you say your household income during (LAST YEAR) was more than \$20,000 or less? (IF RESPONDENT SAYS DON'T KNOW, PROBE FOR BEST ESTIMATE.)

MORE THAN \$20,000	
LESS THAN \$20,000	GO TO G14
REFUSED	
DON'T KNOW8	_ GO TO G15

G13. Would you say it was...

В	Setween \$20,000 and \$25,000
В	Setween \$25,000 and \$30,000
В	Setween \$30,000 and \$35,000, or
N	Iore than \$35,000?
R	EFUSED7
Γ	OON'T KNOW

GO TO G15.

G14. Would you say it was...

Between \$15,000 and \$20,000
Between \$10,000 and \$15,000
Between \$5,000 and \$10,000 or
Less than \$5,000?
REFUSED7
DON'T KNOW

SECTION H: NON-CASH BENEFITS AND MEDICAL INSURANCE

The next few questions are about health coverage for you and your family. (ASK ABOUT COVERAGE FOR CHILDREN ONLY IF LIVING WITH RESPONDENT).

H3. Thinking about all your children under age 18 who lived with you in (prior month), were all of your children covered by Medicaid, were some of them covered, or were none of them?

ALL (GO TO NEXT SECTION)	 	 	1
SOME	 	 	2
NONE	 	 	3

H3a. Thinking about the children who were not covered by Medicaid, were all of them covered by any other health insurance plan, were some of them covered by another health insurance plan, or were none of them covered?

ALL (GO TO NEXT SECTION)	 .1
SOME	 .2
NONE	 .3

H3b. What is the main reason your children who are not covered by Insurance are not covered by Medicaid?

INTERVIEWER: RECORD VERBATIM.

GO TO NEXT SECTION.

H4. In (PRIOR MONTH) was your child covered by Medicaid?

YES	3	((G	C	۱ (T	0]	N.	E	X	T	5	3	E	C	7	ľ	C)]	N)				 								l
NO																																	. 2	2

H4a. In (PRIOR MONTH) was your child covered by any health insurance plan?

YES (GO TO NEXT SECTION)	
NO	

H4b. What is the main reason your child was not covered by Medicaid?

INTERVIEWER: RECORD VERBATIM.

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SECTION J: MATERIAL HARDSHIP SCALE

Now I have some questions about how things are going for you these days.

J1. In the past 12 months, has there been a time when your household...

		YES	NO	REF	DK
a.	Did not pay the full amount of the rent or mortgage?	1	2	7	8
b.	Was evicted from your home or apartment for not paying the rent or mortgage?	1	2	7	8
c.	Did not pay the full amount of the gas, oil, or electricity bills?	1	2	7	8
d.		1	2	7	8



		YES	NO	REF	DK
e.	Had service disconnected by the telephone company because payments were not made?	1	2	7	8
f.	Had someone in your household who needed to see a doctor or go to the hospital but couldn't go?	1	2	7	8
g	Had someone who needed to see a dentist but couldn't go?	1	2	7	8

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SECTION K: HOUSEHOLD FOOD INSECURITY

These next few questions are about the food eaten in your family. People do different things when they are running out of money for food in order to make their food or their food money go further.

K1.	In the last 12 months, since (DATE 12 MONTHS AGO), did you (or other adults in your
	household) ever cut the size of your meals or skip meals because there wasn't enough money for
	food?

YES	.1
NO	.2 _ GO TO K3
REF	
DK	

K2. How often did this happen—almost every month, some months but not every month, or in only one or two months?

ALMOST EVERY MONTH
SOME MONTHS
ONLY 1 OR 2 MONTHS
REFUSED
DON'T KNOW8

K3. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

YES1	
NO2	
REFUSED	
DON'T KNOW	

K4. In the last 12 months, since (DATE 12 MONTHS AGO), were you ever hungry but didn't eat because you couldn't afford enough food?

YES
NO
REFUSED7
DON'T KNOW8

Now I'm going to read you two statements that people have made about their food situation. For these statements, please tell me whether the statement was often, sometimes, or never true for you (or the other members of your household) in the last 12 months.

K5. The first statement is, "The food that (I/we) bought just didn't last, and (I/we) didn't have money to get more." Was that often, sometimes, or never true for you in the last 12 months?

OFTEN TRUE
SOMETIMES TRUE
NEVER TRUE
REFUSED
DON'T KNOW8

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K6.	"(I/We) couldn't afford to eat balanced meals." Was that often, sometimes, or never true for you in the last 12 months?				
	OFTEN TRUE .1 SOMETIMES TRUE .2 NEVER TRUE .3 REFUSED .7 DON'T KNOW .8				
K7.	Which of these statements best describes the food eaten in (PRIOR MONTH)				
	enough of the kinds of food we want,				



Florida Child Impact Study

	TIME STARTED: am01 pm02
	DATE OF INTERVIEW: / / 19 Month Day Year
Thank you for you welfare system. We are children. To limit the a each household. In you This interview wil and any child care are about you, other family and will in no way affer	CTION/SCREENER or participation in the first part of our survey about your experiences with FTP and the e interested in collecting more information on families and, in particular, 5-12 year old amount of time involved, we have randomly selected one child from all 5-12 year olds in ar household, the child born on (FOCAL DATE) has been selected. Il cover such topics as (FOCAL CHILD'S) health and well-being, school experiences, angements you may have for (him/her). There will also be some additional questions y members, and family routines. Everything that you tell me is completely confidential ect any benefits you may be receiving. This part of the interview will take about one
INTERVIEWER:	questions before we begin? REFER TO "COMMONLY ASKED QUESTIONS" SHEET AS NEEDED. ASK FOR FOCAL CHILD'S NAME. IF RESPONDENT EXPRESSES CONCERN REGARDING PRIVACY ASK FOR AN INITIAL ONLY TO USE FOR REFERENCE.
A1. First, what RESPOND	t is your relationship to (FOCAL CHILD)? IF SAMPLE MEMBER (SM)/ DENT ANSWERS "MOTHER" OR "FATHER," PROBE FOR SPECIFIC TYPE.
	BIOLOGICAL MOTHER 1 BIOLOGICAL FATHER 2 STEPMOTHER 3 STEPFATHER 4 ADOPTIVE MOTHER 5 ADOPTIVE FATHER 6 FOSTER MOTHER 7 FOSTER FATHER 8 LIVE-IN PARTNER OF PARENT 9 GRANDMOTHER 10 GRANDFATHER 11 AUNT 12 UNCLE 13 OTHER (SPECIFY) 14 REFUSED .97
A2. Does (FOC	AL CHILD) currently live in your household?
	YES
A3. How many	days per week does (FOCAL CHILD) currently live with you? DAYS PER WEEK
	EVERY DAY 7
	ONLY ON WEEKENDS 6

GO TO SECTION B.



A4. When did (FOCAL CHILD) move away from your household?

A5. Who does (FOCAL CHILD) currently live with?

OTHER PARENT
GRANDPARENT(S)
AUNT/UNCLE
FOSTER CARE4
OTHER (SPECIFY)

A6. How often have you seen (FOCAL CHILD) in the last three months? Have you seen (him/her)...

Almost every day	L
2-5 times per week	
About once a week	
Less than once a week	
Never	5

INTERVIEWER INSTRUCTION: IF R HAS HAD AT LEAST WEEKLY CONTACT WITH FOCAL CHILD (A6 = 1, 2 OR 3), ASK ALL SECTIONS. IF R HAS NOT HAD WEEKLY CONTACT WITH FOCAL CHILD (A6 = 4 OR 5), GO TO SECTION B AND FOLLOW SKIP INSTRUCTIONS FOR NO FOCAL CHILD.



B. HOME ENVIRONMENT

B1. Next I'd like to ask you some questions about family routines. I'm going to read some statements and I'd like you to tell me if your family does these things every day, three to five days per week, one or two days per week, or never. These categories are listed on Card A.

HAND EXHIBIT CARD TO SM/RESPONDENT AND SHOW SM/RESPONDENT LOCATION OF CARD A.

INTERVIEWER: IF SM/RESPONDENT ASKS WHAT "REGULAR" MEANS FOR ANY OF THESE, SAY THAT IT MEANS "GENERALLY AROUND THE SAME TIME".

	ART	EVERY DAY OR NEARLY EVERY DAY	THREE TO FIVE DAYS A WEEK	ONE OR TWO DAYS A WEEK	NEVER	DOES NOT APPLY
a.	At least some of your family eats breakfast at a regular time. {Does your family do this}	1 .	2	3	4	5
b.	(IF NO FOCAL CHILD, GO TO B1c) (FOCAL CHILD) has breakfast at a regular time. (Does this happen)	1	2	3	4	5
c.	Your family eats the evening meal together. (Does your family do this)	1	2	3	4	5
d.	The evening meal is served at a regular time, that is, generally around the same time of the (day/evening). [Does your family do this]	1	2	3	4	5
e.	Household chores get done at a regular time. (Does this happen)	1	2	3	4	5
f.	Your (child[ren]) go(es) to bed at a regular time, that is, generally around the same time at night. (Do(es) your child(ren) do this)	1	2	3	4	5
g.	You and your (child[ren]] do special things at bedtime, like sing a song, say a prayer, or tell a story. (Does your family do this	1	2	3	4	5

B2. Here are a few more questions about your family.

NEW
CHANCE

How often does your family get a *newspaper*, either on the newsstand, by subscription, or from friends?

Every day,
Most days,
Once or twice a week,
Once in a while, or
Never?
REFUSED
DON'T KNOW8

INTERVIEWER INSTRUCTION: IF NO FOCAL CHILD, GO TO B14.

B3. How often do you read stories to (FOCAL CHILD)?

NLSY	Every day,
	At least 3 times a week,
	About once a week,
	Several times a month,4
	Several times a year, or
	Never?
	REFUSED
	DON'T KNOW8



B4.	How often does (FOCAL CHILD) read for enjoyment?
NLSY	Every day, .1 Several times a week, .2 Several times a month, .3 Several times a year, or .4 Never? .6 REFUSED .7 DON'T KNOW .8
B5.	About how many books does (FOCAL CHILD) have of (his/her) own?
HOME/ NLSY	None .1 1 or 2 .2 3 to 9 .3 10 or more .4
B6.	How often do you and (FOCAL CHILD) go to the library?
HOME/ NLSY	About once a week, .1 Two or three times a month, .2 Once a month, .3 Several times a year, or .4 Never? .5
B7.	Please think for a moment about a typical <i>weekday</i> for your family. How much time would you say (FOCAL CHILD) spends watching television on a typical <i>weekday</i> ? ROUND TO NEAREST WHOLE HOUR.
	HOURS PER WEEKDAY
	LESS THAN 1 HOUR PER WEEKDAY
B8.	Now, think for a moment about a typical <i>weekend day</i> for your family. How much time would you say (FOCAL CHILD) spends watching television on a typical <i>weekend day</i> ? ROUND TO NEAREST WHOLE HOUR.
	HOURS PER WEEKEND DAY
	LESS THAN 1 HOUR PER WEEKEND DAY
B9.	Is there a musical instrument like a piano, drum, or guitar that (FOCAL CHILD) can use here a home?
	YES
B10.	Do you or your family encourage (FOCAL CHILD) to start and keep doing hobbies?
NLSY	YES
B11.	Does (FOCAL CHILD) get special lessons or belong to any organization that encourages activities such as sports, music, art, dance, drama, etc.
14201	YES



NLSY	How often has a family member or you taken or arranged to take (FOCAL CHILD) to any musical or theatrical performance within the past 12 months?	
INLOT	Never, 1 Once or twice, 2 Several times, 3 About once a month, or 4 About once a week or more often? 5	
B13. HOME/ NLSY	How often has any family member or you taken or arranged to take (FOCAL CHILD) to any typo of museum such as a children's, scientific, art, or historical museum within the past 12 months? Never,	jе
	Several times,	
B14.	About how often does your whole family get together with relatives or friends?	
HOME/ NLSY	Once a year or less, 1 A few times a year, 2 About once a month, 3 Two or three times a month, or 4 About once a week or more? 5 Every day 6 Never 7	
INTE	CRVIEWER INSTRUCTION: IF NO FOCAL CHILD, GO TO SECTION H.	
C. P	PATERNAL INVOLVEMENT	
C. F	PATERNAL INVOLVEMENT INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)?	
	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL	
C1.	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)? YES	
C1.	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)? YES	
C1.	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)? YES	
C1.	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)? YES	
C1. C2. MFIP C3.	INTERVIEWER: REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL OR ADOPTIVE FATHER (A1=CODE 02 OR 06)? YES	

C5.	Were you married to (FUCAL CHILD's) father when (ne/sne) was born?
	YES
C6.	How often does (FOCAL CHILD) eat a meal with both you and (his/her) biological father?
NLSY	More than once a day, .1 Once a day, .2 Several times a week, .3 About once a week, .4 About once a month, or .5 Never? .6
C7.	When your family watches TV together, do you or your child's biological father discuss TV programs with (him/her)?
NLSY	YES
C8.	About how often does (FOCAL CHILD) spend time with (his/her) biological father in outdoor activities?
NLSY	Once a day or more often, .1 At least 4 times a week, .2 About once a week, .3 About once a month, .4 A few times a year or less, or .5 Never? .6
GO T	O F1.
C9.	Where does he live? Does he live
JOBS 5	in your neighborhood nearby,
C9a.	What is his current relationship to you?
	CIRCLE ONE
NLSY	SPOUSE .1 EX-SPOUSE .2 LIVE-IN PARTNER .3 FRIEND .4 SON .5 SOMETHING ELSE (SPECIFY) .6
C10.	During the past 12 months, has (FOCAL CHILD's) biological father ever
MFIP	a. bought clothes, toys, or presents for (him/her)? b. bought groceries for (him/her)? c. babysat for (him/her)? d. cared for (him/her) overnight? e. talked to (him/her) on the phone? f. talked to (him/her) on the phone? f. talked to (him/her) on the phone?



CII.	INTERVIEWER:	HAS FOCAL CHILD'S BIOLOGICAL DAD TALKED ON THE PHONE WITH (HIM/HER) OR SENT A LETTER OR CARD IN THE PAST 12 MONTHS (C10e OR C10f="YES," CODE 01)?
	YES NO	
C12.	During the past 12 n receive a letter from	nonths, about how often did (FOCAL CHILD) talk on the telephone or (his/her) biological father?
Supplement	Several t One to th About on	ce a year, .1 imes a year, .2 ree times a month, .3 ce a week, or .4 imes a week? .5
C13.	In what month and y	rear did (FOCAL CHILD) last see (his/her) biological father?
PSID Child Supplement		19 YEAR
	HAS NEV	VER SEEN0
C14.	INTERVIEWER:	REFER TO C2 AND C9. IS BIOLOGICAL FATHER DECEASED (C2=-4 OR C9=06)?
	YES NO	
C15.	INTERVIEWER:	REFER TO C13. HAS FOCAL CHILD SEEN BIOLOGICAL FATHER IN LAST 12 MONTHS?
	YES NO	
C16.	In the past 12 month	s, about how often has (FOCAL CHILD) seen (his/her) biological father?
JOBS 2	2-5 TIME ABOUT (1-3 TIME 2-11 TIM ONCE IN	EVERY DAY 01 S PER WEEK 02 DNCE A WEEK 03 S PER MONTH 04 ES IN PAST 12 MONTHS 05 THE PAST 12 MONTHS 06 IN THE PAST 12 MONTHS 07
C17.	INTERVIEWER:	REFER TO A1. IS SM/RESPONDENT FOCAL CHILD'S BIOLOGICAL MOTHER (A1 = CODE 01)?
	YES NO	
C18.	Were you married to	(FOCAL CHILD's) father when (he/she) was born?
MFIP	NO	
C19.	Have papers been file (his/her) legal father?	ed with a court or legal agency to establish (FOCAL CHILD's) father as
	YES NO	······································
C20.	INTERVIEWER:	IS SM/RESPONDENT A MALE?
	YES NO	
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Othe or ou	r than (FOCAL CHILD's) biological father, is there some other man who lives either inside tside your household, who you think acts as a father-figure to (FOCAL CHILD)?
	YES
How	is he related to (FOCAL CHILD)?
	STEPFATHER .01 LIVE-IN PARTNER OF PARENT .02 ADOPTIVE FATHER .03 FOSTER FATHER .04 GRANDFATHER .05 UNCLE .06 OTHER (SPECIFY) .07
Wha	t is his relationship to you?
	SPOUSE 01 EX-SPOUSE 02 LIVE-IN PARTNER 03 BOYFRIEND 04 EX-BOYFRIEND 05 FRIEND 06 FATHER 07 GRANDFATHER 08 BROTHER 09 UNCLE 10 SOMETHING ELSE (SPECIFY) 11
Abou	t how often does (FOCAL CHILD) spend time with (his/her) (stepfather/father-figure)?
	Once a day or more often, 1 At least 4 times a week, 2 About once a week, 3 About once a month, 4 A few times a year or less, or 5 Never? 6
How figur	often does (FOCAL CHILD) eat a meal with both you and (his/her) (stepfather/fathere)?
	More than once a day, 1 Once a day, 2 Several times a week, 3 About once a week, 4 About once a month, or 5 Never? 6
	n your family watches TV together, do you or your child's (stepfather/father-figure) discuss rograms with (him/her)?
	YES
	at how often does (FOCAL CHILD) spend time with (his/her) (stepfather/father-figure) in oor activities?
	Once a day or more often, .1 At least 4 times a week, .2 About once a week, .3 About once a month, .4 A few times a year or less, or .5 Never? .6



D. C	HILD SU	PPORT		
D1.	INTERVIE OR C9=6)?	EWER:	REFER TO C2 AND C9. IS BIOLOGICAL FATE	HER DECEASED (C2=3
		YES NO		_ GO TO F1 ON PAGE 18 _ASK D2
D2.	Is (FOCAL	CHILD) co	overed by a child support order?	
		YES NO		_ GO TO D4
D3.	In what sta	ite was the	award made?	
JOBS DESCRIPTIVE		FLORIDA OTHER S'		
D4.	During the for child su	past 12 mo	onths, did you or (FOCAL CHILD) receive any mo ugh the child support office or child support enfor	oney from (his/her) father cement agency?
D5.	Is cash paid	directly b	y the father to help with expenses for (FOCAL C	HILD)?
		YES NO		
D6.	regularly, s	o that you	onths, has (FOCAL CHILD's) father given you mo could count on almost always getting the money? he welfare office.	oney for (FOCAL CHILD) Please do not include
		NO		
(Section nonresiden	on E has been tial mothers	n removed s.)	because it pertained to maternal involvement for	those children with
F. C	HILD CAF	RE		
F1.			a some questions about people who care for (FOC For these questions, please think about the last	
	herself. Oth	iers use a r nours altog	ysitters or day care. Some feel their child can tak nix of these. Thinking about the last full week fro ether did (FOCAL CHILD) take care of (himself/h UMBER.	om Monday to Sunday.
		II_I NUMBER		
F2.	such as in a	ı day care c	s (FOCAL CHILD) cared for by anyone other than center, a before or after school program, or by a ba cor, or professional babysitter?	n yourself (or your spouse) abysitter including a
	PROBE:	The last fu	ll week from Monday to Sunday.	
		YES NO		_ GO TO G1

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F3.			e or any of these child care programs care for (FOCAL CHILD) at least st four weeks?
JOBS 5			
F4.	tell me whi	ome differe ich arrange	nt kinds of arrangements that parents use to care for their children. Please ments you have used for (FOCUS CHILD) at least once a week for the past
	four weeks PROBE:	. CIRCLE (Any others	JNDER F4 BELOW.
	TRODE.	Thiy outer.	CIRCLE ALL
		ARRANGEME	NT THAT APPLY
		SM/RESPONIC (IF NOT LIVIN CHILD'S GRAN CHILD'S SIBLIN CHILD'S OTHE BABYSITTER C FAMILY DAY C HEAD START, EXTENDED-DA ACTIVITIES/BU SUMMER DAY OTHER (SPEC	FOR HIMSELF/HERSELF
F5.			eek from Monday to Sunday, how many hours did (FOCAL CHILD) spend he care arrangement(s) you mentioned?
ЈОВЗ 3	INTERVI	EWER:	IF NECESSARY READ BACK ARRANGEMENTS SELECTED IN F4 FOR RECALL OF ALL TYPES OF DAY CARE.
		_	HOURS
F6.	INTERVI	EWER:	REFER TO F4. DID SM/RESPONDENT MENTION USING MORE THAN ONE CHILD CARE ARRANGEMENT IN THE PAST WEEK?
		YES NO	
F7. JOBS 5 MODIFIED	Of the regu CHILD) sp	alar child ca end the mo	are arrangements you used during this past week, which did (FOCUS est time in?
		RECORD LIST IN F	PRIMARY CARE PROVIDER CODE FROM
F8.	Thinking CARE PRO		week, how many hours did (FOCAL CHILD) spend with this (PRIMARY
CREATED		III	HOURS
F9.	INTERVI	EWER:	IS "CHILD CARES FOR HIMSELF/HERSELF" THE PRIMARY CHILD CARE ARRANGEMENT (F4 OR F7=CODE 01)?
			1 _ GO TO G1 2 _ ASK F10



F10.	Is the (main) person who c	ares for your ch	ild in this arr	angement		
	13 to 17, or	ars old, or older?			2	•
F11.	As far as you know, is your	primary child	care provider	licensed or reg	ulated by the s	state?
JOBS	YES NO DON'T KNOW				?	
F12.	How much do you pay per	week to (FOCA)	CHILD's) pr	rimary child ca	re provider?	
	INTERVIEWER: ROUND	TO THE NEAL	REST DOLLA	.R.		
	\$ CARE WAS FR DON'T KNOW REFUSED	EE	• • • • • • • • • • • • • • • • • • • •		98 _ GO TO F 99	
F13.	Is this amount the cost of c children you may have in c	hild care for (Fo hild care?	OCAL CHILD) only or does i	t also cover ar	y other
	FOCAL CHILD	ONLY			_ GO TO F15	
	FOCAL CHILD CHILD(REN)					
F14.	How many of your children	are cared for b	y this child ca	re provider?		
	# OF	CHILDREN				
TO 1 E						
F15.	Now I am going to ask you CARE ARRANGEMENT II please let me know which a	N F7). Please lo	ok at Card C.	For each of the	e following star	IARY CHILD tements,
	CARE ARRANGEMENT II	N F7). Please lo	ok at Card C.	For each of the	e following star	IARY CHILD tements, Don't Know
MFIP a. (FC	CARE ARRANGEMENT II please let me know which a	N F7). Please lo answer best des	ok at Card C. cribes your ch Some	For each of the ild care experi	e following star ence.	Don't
a. (FC	CARE ARRANGEMENT II please let me know which a	N F7). Please lo answer best des	ok at Card C. cribes your ch Some	For each of the ild care experi	e following star ence. Always	Don't Know
a. (FC	CARE ARRANGEMENT II please let me know which a CCAL CHILD) feels safe and cure in (PRIMARY CHILD ARE) CCAL CHILD) gets lots of	N F7). Please locations N F7). Please locations were best described by the Never	ok at Card C. cribes your ch Some- times	For each of the ild care experi	e following star ence.	Don't
a. (FC see CA b. (FC inc	CARE ARRANGEMENT II please let me know which a CCAL CHILD) feels safe and cure in (PRIMARY CHILD ARE) CCAL CHILD) gets lots of dividual attention in (PRIMARY	N F7). Please locations N F7). Please locations were best described by the Never	ok at Card C. cribes your ch Some- times	For each of the ild care experi	e following star ence. Always	Don't Know
a. (FC see CA b. (FC inc	CARE ARRANGEMENT II please let me know which a CCAL CHILD) feels safe and cure in (PRIMARY CHILD ARE) CCAL CHILD) gets lots of	N F7). Please locals answer best described by the local loca	ok at Card C. cribes your ch Some- times	For each of the ild care experi	e following starence. Always	Don't Know
a. (FC see CA b. (FC inc Ch c. (FC pro	CARE ARRANGEMENT II please let me know which a please let me know which a cure in (PRIMARY CHILD ARE) DCAL CHILD) gets lots of dividual attention in (PRIMARY HILD CARE) DCAL CHILD's) child care povider is open to new	N F7). Please locanswer best described in Never	ok at Card C. cribes your ch Some- times 2 2	For each of the ild care experi	e following starence. Always	Don't Know
a. (FC see CA b. (FC inc Ch c. (FC proinf)	CARE ARRANGEMENT II please let me know which a please let me know which a cure in (PRIMARY CHILD ARE) DCAL CHILD) gets lots of dividual attention in (PRIMARY HILD CARE) DCAL CHILD's) child care ovider is open to new ormation and learning	N F7). Please locals answer best described by the local loca	ok at Card C. cribes your ch Some- times	For each of the ild care experi	e following starence. Always	Don't Know
a. (FC see CA b. (FC inc c. (FC pro inf d. (FC)	CARE ARRANGEMENT II please let me know which a please let me know which a cure in (PRIMARY CHILD ARE) DCAL CHILD) gets lots of dividual attention in (PRIMARY HILD CARE) DCAL CHILD's) child care ovider is open to new ormation and learning DCAL CHILD's) child care	N F7). Please locanswer best described in Never	ok at Card C. cribes your ch Some- times 2 2	For each of the ild care experi	e following starence. Always 4 4	Don't Know
a. (FC see CA b. (FC pro inf. d. (FC pro	CARE ARRANGEMENT II please let me know which a please let me know which a cure in (PRIMARY CHILD ARE) DCAL CHILD) gets lots of dividual attention in (PRIMARY HILD CARE) DCAL CHILD's) child care ovider is open to new ormation and learning	N F7). Please locanswer best described in Never	ok at Card C. cribes your ch Some- times 2 2	For each of the ild care experi	e following starence. Always 4 4	Don't Know
a. (FC see CA b. (FC inc CH c. (FC pro inf d. (FC pro the	CARE ARRANGEMENT II please let me know which a please let me know which a plea	N F7). Please locanswer best descent	ok at Card C. cribes your ch Some- times 2 2 2	For each of the ild care experi	e following starence. Always 4 4	Don't Know
a. (FC see CA b. (FC inc CH c. (FC pro inf d. (FC pro the	CARE ARRANGEMENT II please let me know which a please let me know which	N F7). Please locanswer best descent leads to the local leads to the l	ok at Card C. cribes your ch Sometimes	For each of the ild care experi	e following starence. Always 4 4 4	Don't Know 8 8 8
a. (FC see CA b. (FC inc CH c. (FC pro inf d. (FC pro the	CARE ARRANGEMENT II please let me know which a please let me know which a plea	N F7). Please locanswer best descent leads to the local leads to the l	ok at Card C. cribes your ch Sometimes	For each of the ild care experi	e following starence. Always 4 4 4	Don't Know 8 8 8
a. (FC see CA b. (FC inc inf	CARE ARRANGEMENT II please let me know which a please let me know of please let me know which a please let me know	N F7). Please locanswer best descended by the second secon	ok at Card C. cribes your ch Some- times 2 2 2 2	For each of the ild care experi Often 3 3 3 3	e following starence. Always 4 4 4 MONTH, YEA	Don't Know 8 8 8 8 AR TWO
a. (FC see CA b. (FC inc inf	CARE ARRANGEMENT II please let me know which a please let me know which a please let me kn	N F7). Please locanswer best descended by the second secon	ok at Card C. cribes your ch Some- times 2 2 2 2	For each of the ild care experi Often 3 3 3 3	e following starence. Always 4 4 4 MONTH, YEA	Don't Know 8 8 8 8 AR TWO

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		II_I MONTHS			
G3.	Since (MO) else?	NTH, YEAR TWO YEARS	AGO), which month	ns did (FOCAL CHILD) liv	e som
	INTERVI	EWER: RECORD MO	NTHS LIVING ELS	SEWHERE.	
G4.		CAL CHILD) was not livin	g with you for a mo	nth or more, did (he/she) e	ver sp
OBS CRIPTIVE	living		YES	NO	
	J a. with (his	s/her) (father/mother)?	1	2	
		s/her) grandparents?	1	2	
		s/her) aunt or uncle?	1	2	
	d. with oth	ner relatives?	1	2	
	e. in foster	r care?	1	2	
	f. in a gro	oup home?	1	. 2	
				CIRCLE ALL THAT APPLY	
		COURT OR AGENCY REMOVED OF FOSTER CARE	JSTODY OF THE CHILD ION/JAIL OR IN A RESIDENTIAL LE FACILITY)		
		MOTHER WAS IN RESIDENTIAL PI ALLOWED (E.G., JAIL, MILITARY, T MOTHER COULD NOT CARE FOR OTHER (SPECIFY)	RAINING)		

а preschool program for a month or more?

YES																						.1
NO.																						.2

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G7. Here are some questions about all of the child care arrangements you may have had for (FOCAL CHILD) during the past two years, that is since (THIS MONTH, YEAR TWO YEARS AGO).

I'm going to read you a list of different kinds of arrangements that parents use to care for their children. I'd like you to tell me which ones you have used regularly for (FOCAL CHILD), that is, at least once a week for a month or more.

READ DOWN LIST FOR G7 FIRST. THEN FOR EACH "YES," ASK QUESTIONS ACROSS IN G8 AND G9 WHEN REQUIRED.

G7.			G8.	G9.
			(IF G7d-h): In the past two years, how many different (CHILD CARE PROVIDER's) cared for (FOCAL CHILD) for a month or more?	How old was (CHILD CARE PROVIDER) who cared for your child?
During the past two years, that is since (MONTH, YEAR TWO YEARS AGO), have any of the following been used regularly, at least once a week for a month or			(IF G7i-I): In the past two years, how many different (ARRANGEMENTS) did (FOCAL CHILD) attend for a month or more?	INTERVIEWER: IF MORE THAN ONE PROVIDER, ASK FOR AGE OF THE PRIMARY PROVIDER.
more? How about (READ a-I)	YES	20		RECORD CHILD CARE PROVIDER'S AGE WHEN HE/SHE FIRST BEGAN CARING FOR CHILD WITHIN PAST TWO YEARS.
a. Your child cared for (himself/herself)?	1	2		-
b. A partner (boyfriend/girlfriend)?	1	2		
c. (IF NOT LIVING IN HH) Child's other biological parent?	1	2		
d. Child's grandparent/great grandparent?	1	2	III NUMBER	
e. Child's sibling/half-sibling?	1	2	III NUMBER	Under 13 years old? Between 13 and 17 years old? .2 Or 18 years old or older? .3
f. Child's other relative?	1	2	III NUMBER	Under 13 years old? Between 13 and 17 years old? .2 Or 18 years old or older? .3
g. Babysitter or nonrelative in the child's home?	1	2	III NUMBER	Under 13 years old? .1 Between 13 and 17 years old? .2 Or 18 years old or older? .3
h. Family day care or nonrelative in another home?	1	2	III NUMBER	Under 13 years old? Between 13 and 17 years old? .2 Or 18 years old or older? .3
i. Head Start, preschool, nursery school, or day care center?	1	2	III NUMBER	
j. Extended-day, before/after school program/lessons or activities/boys or girls club/YMCA or YWCA?	1	2	II_I NUMBER	
k. Summer day care, camp, or summer school classes?	1	2	III NUMBER	
I. Any other child care arrangement? (SPECIFY)	1	2	II_ NUMBER	Under 13 years old? .1 Between 13 and 17 years old? .2 Or 18 years old or older? .3

G10.	INTERVIEWER:	DOES $G7a = "YES (CODE 1)?$
G11.	How old was (FOC supervision?	AL CHILD) when (he/she) first cared for (himself/herself) alone, without any
	11_	I YEARS AND III MONTHS
G12.	INTERVIEWER:	REFER TO G7. HAS SM/RESPONDENT USED ANY TYPE OF CHILD CARE DURING THE PAST TWO YEARS?
	YES NO	
G13.		ke a calendar showing the (different) child care arrangement(s) you have used D) during the past two years.
	Let's begin by reco past two years, ha	rding any months that you may have worked during the past two years. In the ve you worked for pay for a month or more?
	IF "NO," PROBE: ends meet. Have y	A lot of people have occasional jobs or do other things on the side to make ou done any jobs like that for pay for a month or more during the past 2 years.
	YES . NO	
G14.	Which months did	you work outside of the home?
	PROBE: Any ot	hers?
	INTERVIEWER:	RECORD EACH MONTH SM/RESPONDENT WORKED.
G15.	Now let's record as two years.	ny months that you may have attended school or job training during the past
	Have you ever bee past two years?	n enrolled in school or in a job training program for a month or more in the
	YES . NO	
G16.	Which months we	re you in school or job training?
	PROBE: Any ot	hers?
	INTERVIEWER:	RECORD EACH MONTH.
G17.	Since child care as record whether yo	rangements can be different during the school year and summer vacation, let's ur child was in school or on summer break for each month.
	INTERVIEWER:	BEGINNING WITH THE FIRST MONTH, ASK WHETHER THE FOCAL CHILD WAS IN SCHOOL OR ON VACATION. IF IN SCHOOL, MARK AN "S" FOR THAT MONTH IN G17. IF ON VACATION, MARK A "V".
	For each month th	eat (FOCAL CHILD) has lived with you since (MONTH, YEAR TWO YEARS

For each month that (FOCAL CHILD) has lived with you since (MONTH, YEAR TWO YEARS AGO), I'd like to know what child care arrangements you have used. If you did not use an arrangement that month, please let me know. Also, please remember to include only those arrangements you used for a month or more.

First, I'm going to indicate on the showcard the arrangements you reported using for a month or more.

INTERVIEWER:

REFER TO G7 AND ON CARD B OF THE SHOWCARD, CIRCLE RESPONSE CODE FOR EACH CHILD CARE ARRANGEMENT USED. HAND SHOWCARD TO THE RESPONDENT.



G18.	Which of t	hese child NTHS FOC	care arrangements were you AL CHILD WAS LIVING IN	ı using in (I HH.	MONTH AND Y	EAR)? ASK ONLY
	PROBE:	Any othe	rs?			
	PROBE:	And the	next month?			
	INTERVI	EWER:	RECORD THE PARTICU IN EACH MONTH. SM/R ONE ARRANGEMENT II USED, ENTER 95.	ESPONDI	ENT MAY REPO	RT MORE THAN
G19.	work back	in time. P	the most recent month that lease tell me the average nu nswer categories can be foun	mber of ho	urs <i>per week</i> you	rangements and r child spent in each
	PROBE:	Your best	estimate will do.			
·	INTERVI	EWER:	FOR EACH MONTH SM/ ARRANGEMENT(S), REG SPENT THERE EACH W	CORD THI	DENT USED CHI E AVERAGE NUI	ILD CARE MBER OF HOURS
G20.	Since (RA injury, or p	DATE), who isoning r	nile in a child care arrangem equiring a visit to a hospital	ent, has (F emergenc	OCAL CHILD) ey room or clinic?	ever had an accident
		NO	NOW			
н. і	IVING SI	TUATIO	NS			
H1.	Next I'd li	ke to ask y	ou about your living situatio following things have happer	on since (M ned in your	ONTH/YEAR 2 Yelife during the t	TEARS AGO). Please wo years since then?
	INTERVI	EWER:	READ DOWN LIST FIRS RESPONSE IN H1.	T, THEN A	ASK H2 FOR EAC	CH "YES"
H2.	How many	times (IN	SERT a-j) in the past two ye	ears?		
	PROBE:	Your best	guess will do.			
					H1.	H2. Number of Times During the Past
				YES	NO	Two Years
			ring with a partner? ing with a partner?	1 1	2 _ GO TO b 2 _ GO TO c	_ - -
	INTERVI FOCAL CI		STRUCTION: IF NO TO H2e.			
			IILD) go and live		0. 00 50 1	
	d. Did ()		IILD) return home after	1	2 _ GO TO d	''_
	e. Did a	somewher nother chil	ld of yours under 18 years	1	2 _ GO TO e	'''
	of age	go to live	somewhere else?	1	2 _ GO TO f	

H.

f.

1

2_GO TO I1

Did another child of yours under 18 years of age, return home after living somewhere else?

I. SCHOOL PERFORMANCE

I1.

My next questions are about your children and how they are doing in school. Because school is a place where children spend a great deal of time, we want to know about this important part of your children's lives.

Here is a question about your hopes and aspirations for all of your children. How far would you like to see your children go in school?

Some high school,1
Finish high school,
Technical school after high school,
Some college,
Finish college, or
Graduate or professional school
after college

I2.

MODIFIED

JOBS 5

INTERVIEWER: REFER TO E5a OF NON-CHILD QUESTIONNAIRE FOR NAME(S) OF CHILD(REN) THE RESPONDENT IS RESPONSIBLE FOR WHO ARE 17 YEARS OLD AND YOUNGER.

Now I have some questions about the children you are responsible for who are 17 years of age or younger, whether or not they reside in your household.

RECORD NAME(S) OF CHILD(REN) IN GRID THAT FOLLOWS.

INTERVIEWER: RECORD NAME AS GIVEN IN E5a OF NON-CHILD INTERVIEW.



INTERVIEWER: BEGINNING WITH THE FOCAL CHILD, LIST FIRST NAMES OR INITIALS OF SM/RESPONDENT'S CHILDREN ACROSS TOP OF GRID IN 12. THEN FOR EACH CHILD LISTED, ASK 14-118.

IF NO FOCAL CHILD, LIST ALL OTHER CHILDREN STARTING WITH THE CHILD 2 COLUMN IN 12, AND ASK 14-118 FOR EACH.

12. FOR EACH CHILD:

13 O	MITTED	FOCAL CHILD:	CHILD 2:	CHILD 3:
14.	Is (CHILD) regularly attending school?	YES	YES	YES
PLAC CHIL	IE: IF INTERVIEW TAKES EE IN THE SUMMER AND D IS BETWEEN GRADES, DE "YES" 01.	HOME SCHOOL3	HOMESCHOOL	HOME SCHOOL3
14a.	—	III GRADE	III GRADE	III GRADE
HO	1	PRESCHOOL .1 KINDERGARTEN .2 UNGRADED .3 DON'T KNOW .8 REFUSED .7	PRESCHOOL 1 KINDERGARTEN 2 UNGRADED 3 DON'T KNOW 8 REFUSED 7	PRESCHOOL 1 KINDERGARTEN 2 UNGRADED 3 DON'T KNOW 8 REFUSED 7
I5.		Very well, .1 Well, .2 Average, .3 Below average, or .4 Not well at all? .5 DON'T KNOW .8 REFUSED .7	Very well, .1 Well, .2 Average, .3 Below average, or .4 Not well at all? .5 DON'T KNOW .8 REFUSED .7	Very well, 1 Well, 2 Average, 3 Below average, or 4 Not well at all? 5 DON'T KNOW 8 REFUSED 7
		GO TO NEXT CHILD OR 18.	GO TO NEXT CHILD OR 18.	GO TO NEXT CHILD OR 18.
I6.		HASN'T STARTED SCHOOL YET. (GO TO NEXT CHILD, OR 123)	HASN'T STARTED SCHOOL YET. (GO TO NEXT CHILD, OR 18)	HASN'T STARTED SCHOOL YET. (GO TO NEXT CHILD, OR 18)
17.	In what month and year did (CHILD) last attend school?	_ / 9 MONTH YEAR DON'T KNOW	_ / 19 MONTH YEAR DON'T KNOW	_ / 19 MONTH YEAR DON'T KNOW

(Editor's note: This guide may be expanded to include more than three children where applicable)



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18	Since starting	YES1		
NHES	kindergarten, (has your child/have any of your children) repeated any grades?	NO2 _ GO TO II1		
19.	Which child or children			-
	repeated any grades?		Record Name	Record Name
	RECORD NAME OF CHILD.		III	_
	PROBE: Any others?			
110.	FOR EACH CHILD RECORDED IN 19: During which grades did this occur?		GRADE K 1 2 3 4 5 6 7 8 9 10 11 12	GRADE K 1 2 3 4 5 6 7 8 9 10 11 12
	CIRCLE GRADE(S)			
NHES	Since (RA DATE), has your child/have any of your children) ever been suspended or expelled from school? (This includes both in-school and out-of-school suspensions.)	YES		
112.	Which child or children have been suspended or expelled? RECORD NAME.		Record Name	Record Name
	VERIFY IF ONE CHILD.		— —	
	PROBE: Anyone else?		·	
113.	FOR EACH CHILD RECORDED IN 112: Was [NAME] suspended or expelled or both?		SUSPENDED .1 EXPELLED .2 BOTH .3 DON'T KNOW .8	SUSPENDED .1 EXPELLED .2 BOTH .3 DON'T KNOW .8
114.	During which grade(s) did this occur? CIRCLE GRADE(S)		GRADE K 1 2 3 4 5 6 7 8 9 10 11 12	GRADE K 1 2 3 4 5 6 7 8 9 10 11 12
115.	INTERVIEWER: ARE ANY OF SM/RESPONDENTS CHILDREN AGE 16 OR OLDER?	YES		-
116.	Since (RA DATE), (has your	YES1		
JOBS 5	child/have any of your children) ever dropped out of school?	NO 2 _ GO TO 119		
117.	Which child or children dropped out of school? RECORD NAME.		Record Name	Record Name
	VERIFY IF ONE CHILD.		· <u>—</u> ·	· <u>—</u> ·
	PROBE: Anyone else?			
118.	FOR EACH CHILD RECORDED IN 117: Did [NAME] return to school after dropping out?		YES .1 NO .2 DON'T KNOW .8 REFUSED .7	YES



NEW HOPE	Since (RA DATE), (has your child/have any of your children) ever received special education because of a physical, emotional, behavioral, or other problem that limited the kind or amount of school work they can do?	YES 1 _ GO TO 119a NO 2 _ GO TO 120	IT 9a. Which child was that? RECORD NAME IF SM/RESPONDENT HAS MORE THAN ONE CHILD, PROBE: Who else?
SSP36	(Is your child/Are any of your children) on a sports team either in or out of school?	YES 1 _ GO TO I20a NO 2 _ GO TO I21	I20a. Which child is that? RECORD NAME IF SM/RESPONDENT HAS MORE THAN ONE CHILD, PROBE: Who else?
SSP36	(Does your child/Do any of your children) take lessons after school or on weekends in subjects like music, dance, language, or computers?	YES 1 _ GO TO I21a NO 2 _ GO TO I22	I21a. Which child is that? RECORD NAME IF SM/RESPONDENT HAS MORE THAN ONE CHILD, PROBE: Who else?
122.	(Does your child/Do any of your children) participate in any clubs or organizations after school, or on weekends, such as school newspaper, glee club, scouts, a religious group, or Girls or Boys club?	YES 1 _ GO TO 122a NO 2 _ GO TO 123	I22a. Which child is that? RECORD NAME IF SM/RESPONDENT HAS MORE THAN ONE CHILD, PROBE: Who else?

 $\textbf{INTERVIEWER INSTRUCTION:} \ \textbf{IF NO FOCAL CHILD, GO TO I} \textbf{28}.$



	YES		_			
[24.	Now please think of (FOCAL CHILD). For E and tell me if you think it is not true, s say (FOCAL CHILD)			our child. Wo		
		Not True	Sometimes True	Often True		
	a. cares about doing well in school?	1	2	3		
	b. only works on schoolwork when forced to?	1	2	3		
	c. does just enough schoolwork to get by?	1	2	3		
	d. always does homework?	1	2	3		
	e. is disobedient at school	1	2	3		
	f. has trouble getting along with teachers	1	2	3		
	1 or 2 days					
I26.	How many days of school did (FOCAL CF in session?	HILD) miss durir	ng the past four v	veeks that		
	None					
	More than 10 days					

NSAF

 None,
 1

 1 time, or
 2

 2 or more times?
 3



128.	INTERVIEWER: DOES SM/RESPONDENT HAVE CHILDREN BETWEEN 10 AND 17 YEARS OF AGE?	YES1 NO2 _ GO TO J1		
MFIP	Since (RA DATE), (has your child/have any of your children) ever been in trouble with the police?	YES1 NO2 _ GO TO J1		
130. NLSY 1997	Since (RA DATE), (has your child/have any of your children) ever been arrested by the police or taken into custody for an illegal or delinquent offense? Please do not include arrests for minor traffic violations.	YES		
131.	Who has been arrested or taken into custody for an illegal or delinquent offense? RECORD NAME.		Record Name	Record Name
	VERIFY IF ONE CHILD.		III	l <u></u> ll
	PROBE: Anyone else?			
132.	How old was (CHILD IN 131) when (he/she) was arrested or taken into custody? PROBE: The first time since (RA DATE).		III RECORD AGE	III RECORD AGE
I33.	Since (RA DATE), was (he/she) ever found to be delinquent or guilty of any offense?		YES	YES

J. HEALTH AND HEALTH CARE ACCESS

Jì.	Since (RA DATE), (has your child/have any of your children had an accident, injury, or poisoning requiring a visit to a hospital emergency room or	YES			
J2.	clinic? Which child was that?				
	RECORD NAME		Record Name	Record Name	Record Name
	PROBE: Any others?			III	111
ē i	WRITE IN NAME(S) OF CHILD/CHILDREN ACROSS GRID.		,		
J3.	INTERVIEWER: ARE ANY CHILDREN BETWEEN 12 AND	YES 1			
	17 YEARS OF AGE?	NO (GO TO J7) 2			
J4.	Since (RA DATE), (has your child/have any of your children)	YES 1			
	had or fathered a baby?	NO (GO TO J7) 2			
		DK (GO TO J7) 8			
J5.	Which child was that?				
	RECORD NAME.		Record Name	Record Name	Record Name
	PROBE: Anyone else?		REFUSED 7	REFUSED7	REFUSED 7
	WRITE IN NAME(S) OF CHILD/CHILDREN ACROSS GRID. FOR EACH CHILD, ASK J6.				
J6.	How old was (CHILD IN J5)	III AGE	III AGE	III AGE	III AGE
	when (his/her) baby was born?	REFUSED	REFUSED	REFUSED	REFUSED

 $\textbf{INTERVIEWER INSTRUCTION:} \ \textbf{IF NO FOCAL CHILD, GO TO SECTION } \textbf{K}.$



99

ย 7.	My next questions are about (FOCAL CHILD's) health and fami that (FOCAL CHILD's) health in general is	ly health	care. Would	you say
	excellent, very good, good, fair, or	2		
	poor?	5		
J8.	About how long has it been since (FOCAL CHILD) last saw a me professional for a check-up, shots, or other routine care?	edical doc	tor or other	health
	Less than one year, At least one year, but less			
	Than two years,			
	Three years or more, or Never seen a doctor for	4		
	Routine care?	5		
J9.	How long has it been since (FOCAL CHILD) last saw a dentist or	dental h	ygienist for d	lental care
JOBS 5	Less than one year			
	Than two years			
	Than three years Three years or more Never seen a dentist, dental Hygienist for routine care	4		
J10.	Is (FOCAL CHILD) currently covered by	0		
JOBS 2	CIR	CLE ALI	L THAT APP NO	LY
	 a. Medicaid or enrolled in an HMO paid for by Medicaid? b. Health insurance other than Medicaid such as private insurance, an employer-paid plan, or a private HMO? 	1	2	
		1	2	
J11.	Is there a particular clinic, health center, doctor's office, or other is usually taken for routine care, such as getting check-ups or sho	place whots?	ere (FOCAL	CHILD)
	YES	1 2		
J12.	Is there a particular clinic, health center, doctor's office, or other is usually taken if (he/she) is sick, not including accidents?	place who	ere (FOCAL	CHILD)
	YESNO	1		
J13.	Is this particular place a hospital emergency room or some other	place?		٠
	HOSPITAL EMERGENCY ROOMOTHER PLACE	2		

K. DEPRESSION SCALE - SELF-ADMINISTERED SECTION I

K1. 20-Item CES-D Because some of the next questions in this survey can be considered sensitive, we would like you to read the questions yourself and record your own answers using this booklet. HAND SM/RESPONDENT SELF-ADMINISTERED BOOKLET. Are you comfortable reading the questions yourself?

SM/RESPONDENT COMFORTABLE	
WITH SAQ1	CONTINUE
INTERVIEWER READ	GO TO K2

There are five sections in this booklet. I will instruct you when to begin each section and when you have completed a section, let me know. We will review the instructions for each section before you begin and, if at any time you have any questions, please ask. Do you have any questions before we start?

K2.	IS THIS INTERVIEWER ADMINISTERED?
	YES

INTRO 1: Please open your booklet to Section I.

The following questions are asked to find out how you have felt about yourself and your life during the past week. There are no right or wrong answers.

Please circle the number that best describes how often you felt or behaved this way for each statement during the past week. The numbers have the following meanings:

- 1 means rarely or none of the time, that is, less than one day this past week
- 2 means some or a little of the time, that is, one to two days this past week
- 3 means occasionally or a moderate amount of time, that is, three to four days and
- 4 means most or all of the time, that is, five to seven days

INTERVIEWER: INSTRUCT SM/RESPONDENT TO BEGIN SECTION I. GO TO L1.

INTRO 2: The following questions are asked to find out how you have felt about yourself and your life during the past week. There are no right or wrong answers. Using Card F, please tell me which answer best describes how often you felt or behaved this way for each statement during the past week. You can just give me the number (1,2,3, or 4) if you like.

During the past week	Rarely (Less than 1 Day)	Some (1-2 Days)	Occasionally (3-4 Days)	Most (5-7 Days)
a. I was bothered by things that usually don't bother me	1	2	3	4
b. I did not feel like eating; my appetite was poor	1	2	3	4
c. I felt that I could not shake off the blues even with help				
from my family or friends	1	2	3	. 4
d. I felt that I was just as good as other people	1	2	3	4
e. I had trouble keeping my mind on what I was doing	1	2	3	4
f. I felt depressed	1	2	3	4
g. I felt that everything I did was an effort	1	2	3	4
h. I felt hopeful about the future	1	2	3	4
i. I thought my life had been a failure	1	2	3	4
i. I felt fearful	1	2	3	4
k. My sleep was restless	1	2	3	4
I. I was happy	1	2	3	4
m. I talked less than usual	1	2	3	4
n. I felt lonely	1	2	3	4
o. People were unfriendly	1	2	3	4
p. I enjoyed life	1	2	3	4
g. I had crying spells	1	2	3	4
r. I felt sad	1	2	3	4
s. I felt that people disliked me	1	2	3	4
t. I could not get "going"	1	2	3	4

END OF SELF-ADMINISTERED SECTION I.



L. DOMESTIC VIOLENCE - SELF-ADMINISTERED SECTION II

L1.	INTERVIEWER: IS SM/RESPONDENT USING SAQ BOOKLET?
	YES

INTRO 1: Now please turn to Section II in the booklet. For this set of questions it is important to follow the arrows. If you answer "YES" to any question in the first column, you must answer L3 and L4 in the last two columns. DEMONSTRATE USING BOOKLET.

Also, please note that you must circle either "YES" or "NO" for each category in L3.

All of the questions in this section are asking about the time since (RA DATE) so when you see the words "RA DATE," please think of that date.

INTERVIEWER: RECORD RA DATE IN SAQ SECTION II.

If you have any questions regarding this section, please ask at any time.

INTERVIEWER: INSTRUCT SM/RESPONDENT TO BEGIN SECTION II. GO TO M1

INTRO 2: This series of questions can be considered sensitive. Before we begin, I want to remind you that all your answers are confidential. Also, each of the questions in this section are asking about the time since (RA DATE).

	l2.	L3.	L4.
Sin	ce (RA DATE), did anyone ever	When this happened, was the person or peop who did these things your (READ a-j)	le How long ago did the most recent event happen?
a.	Yell at you all the time, put you down on purpose, or call you names in order to make you feel bad about yourself as a person? YES 1 _ ASK L3 NO 2 _ GO TO L2b	CIRCLE ONE CODE FOR EACH YES N a. Husband/wife?	A month ago 3 Six months ago 4 A year ago 5 Two years ago 6 More than 2 years ago 7
ь.	Try to control your every move? YES 1 _ ASK L3 NO 2 _ GO TO L2c	CIRCLE ONE CODE FOR EACH YES Note a. Husband/wife? 1 2 b. Ex-husband/ex-wife? 1 2 c. Boyfriend/girlfriend? 1 2 d. Ex-boyfriend/ex-girlfriend? 1 2 e. Female/male partner (current or past)? 1 2 f. Parent or stepparent? 1 2 g. Other family member? 1 2 h. Someone at your job? 1 2 i. A stranger? 1 2 j. Someone else? 1 2	A month ago



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L2. Since (RA DATE), did anyone ever		L3.		L4.
		When this happened, was the person or p who did these things your (READ a-j)	How long ago did the most recent event happen?	
c.	Threaten you with physical harm?	CIRCLE ONE CODE FOR EACH		Within past 7 days
	, , ,	YES	NO	A week ago
	YES 1 _ ASK L3	a. Husband/wife?1	2	A month ago
	123	b. Ex-husband/ex-wife? 1	2	Six months ago
	NO 2 20 TO 10 I	c. Boyfriend/girlfriend? 1	2	A year ago
	NO2 _ GO TO L2d	d. Ex-boyfriend/ex-girlfriend? 1	2	Two years ago
		e. Female/male partner		More than 2 years ago
		(current or past)?1	2	
		f. Parent or stepparent?1	2	
		g. Other family member? 1	2	
		h. Someone at your job? 1	2	
		i. A stranger?1	2	
		j. Someone else? 1	2	
	-	1. Composite cise.		
d.	Force you into sexual activities?	CIRCLE ONE CODE FOR EACH		Within past 7 days
	·	YES	NO	A week ago
	YES 1 _ ASK L3	a. Husband/wife?1	2	A month ago
	720::::::::::::::::::::::::::::::::::::	b. Ex-husband/ex-wife? 1	2	Six months ago
	NO 2 CO TO 12-	c. Boyfriend/girlfriend? 1	2	A year ago
	NO2 _ GO TO L2e	d. Ex-boyfriend/ex-girlfriend? 1	2	Two years ago
		e. Female/male partner		More than 2 years ago
		(current or past)?1	2	, ,
		f. Parent or stepparent?1	2	
		g. Other family member? 1	2	
		h. Someone at your job? 1	2	
		i. A stranger?1	2	
		j. Someone else? 1	2	
		1. Someone cise?		
e.	Hit slap, kick, or otherwise physically	CIRCLE ONE CODE FOR EACH		Within past 7 days 1
	harm you?	. YES	NO	A week ago
		a. Husband/wife?1	2	A month ago
	YES 1 _ ASK L3	b. Ex-husband/ex-wife? 1	2	Six months ago
		c. Boyfriend/girlfriend? 1	2	A year ago
	NO 2 CO TO NEVT	d. Ex-boyfriend/ex-girlfriend? 1	2	Two years ago
	NO2 _ GO TO NEXT	e. Female/male partner		More than 2 years ago
	PAGE, M1	(current or past)?1	2	
		f. Parent or stepparent?1	2	
		g. Other family member? 1	2	
		h. Someone at your job? 1	2	
		i. A stranger?	2	
		j. Someone else? 1	2	

END OF SELF-ADMINISTERED SECTION II.



M. BARRIERS TO EMPLOYMENT - SELF-ADMINISTERED SECTION III

M1.	INTERVIEWER: IS SM/RESPONDENT USING SAQ BOOKLET?
	YES

INTRO 1: Please turn to Section III.

Again, please think about the time since (RA DATE) when answering these questions.

INTERVIEWER: RECORD RA DATE IN SECTION III OF SELF-ADMINISTERED BOOKLET.

For this set of questions it is important to follow the arrows. If you answer "YES" to any of the questions, you must answer question "a". DEMONSTRATE USING BOOKLET. Also, please note that you must circle "YES" or "NO" for every answer choice in each question "a".

INTERVIEWER: INSTRUCT SM/RESPONDENT TO BEGIN SECTION III. GO TO N1

INTRO 2: Some women and men find that some of the people who are important to them don't want them to work. Some have said people such as their spouses or partners, friends, or other family members did things that made it difficult to find or keep a job. Here is a list of those things. I'd like to know what was true for you since (RA DATE).

M2.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone tried to discourage you from finding a job or going to work? YES	M2a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2
M3.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone made you feel guilty about working? YES	M3a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend?	NO 2 2 2 2 2 2 2 2
M4.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone refused to help you, or went back on promises to help you, with child care, transportation, or housework? YES	M4a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2
M5.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone made it difficult for you to attend or complete programs or classes that would help you get a good job? YES	M5a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2



M6.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone harassed you with telephone calls at your job? YES	M6a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend?	NO 2 2 2 2 2 2 2 2
M7.	Since (RA DATE), has it ever been difficult for you to find or keep a job because someone has shown up at your job and harassed or bothered you? YES	M7a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2 2
M8.	Since (RA DATE), has anyone ever caused you to lose or quit your job> YES	M8a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2 2 2
M9.	Since (RA DATE), has anyone ever prevented you from finding a job or going to work? YES	M9a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2 2 2
	D. Think about the people whose opinions you listen to most. Since {RA DATE}, did you ever have disagreements with anyone about whether or not you worked? YES	M10a. Who made it difficult? Was it (READ a-f) CIRCLE ONE CODE FOR EACH YES a. Your current or former spouse, boyfriend or girlfriend? 1 b. Your friend(s)? 1 c. Your parent or stepparent? 1 d. Your children? 1 e. Other family member? 1 f. Someone else? 1	NO 2 2 2 2 2 2 2 2 2
	YES 1 NO 2		

END OF SELF-ADMINISTERED SECTION III INTERVIEWER INSTRUCTION: IF NO FOCAL CHILD, GO TO SECTION P.



N. SOCIAL COMPETENCE SUBSCALE - SELF-ADMINISTERED SECTION IV

N1.	INTERVIEWER: IS SM/RESPONDENT USING SAQ BOOKLET?
JOBS 2	YES

INTRO 1: Please turn to Section IV.

Different children have different personalities and different good qualities. Please read the statements below and circle a number to show how much each statement describes (FOCAL CHILD). Circle a number between "0" and "10," where "0" means "not at all like my child" and "10" means "totally like my child." You may use any number between 0 and 10 to show how much like your child each description is.

INTERVIEWER: INSTRUCT SM/RESPONDENT TO BEGIN SECTION IV. GO TO O1

INTRO 2: Different children have different personalities and different good qualities. Using a scale of "0 to 10" when "0" means "not at all like your child" and "10" means "totally like your child," please tell me how well each statement describes (FOCAL CHILD). You may use any number between 0 and 10 to show how much like your child each description is.

		Not at a	ot at all like my child							Totally like my child		
Му	child:	0	1	2	3	4	5	6	7	8	, 9	10
a.	Is warm, loving	0	1	2	3	4	5	6	7	- 8	9	10
b.	Gets along well with											
	other children	0	1	2	3	4	5	6	7	8	9	10
c.	.ls admired and well-liked											
	by other children	0	1	2	3	4	5	6	7	8	9	10
d.	Shows concern for other											
	people's feelings	0	. 1	2	3	4	5	6	7	8	9	10
e.	Is helpful and cooperative	0	1	2	3	4	5	6	7	8	9	10
f.	Is considerate and thoughtful											
	of other children	0	1	2	3	4	5	6	7	8	9	10
g.	Tends to give, lend, and share	0	1	2	3	4	5	6	7	8	9	10

END OF SELF-ADMINISTERED SECTION IV



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O. BEHAVIOR PROBLEMS INDEX - SELF-ADMINISTERED SECTION V

O1.	INTERVIEWER: IS SM/RESPONDENT USING SAQ BOOKLET?
	YES

INTRO 1: Please turn to Section V.

Here are some statements that describe behavior problems many children have. Please read each item and thinking of the past 3 months, circle "1" if the behavior has been not true, "02" if the behavior has been sometimes true, or "3" if the behavior has been often true for (FOCAL CHILD).

INTERVIEWER: INSTRUCT SM/RESPONDENT TO BEGIN SECTION V. GO TO P1

INTRO 2: Here are some statements that describe behavior problems many children have. For each statement, please look at Card E and thinking of the past 3 months, tell me if each behavior is not true, sometimes true, or often true for (FOCAL CHILD). For example, [READ ITEM a]. Has this been not true, sometimes true, or often true of your child during the past three months? You can use the numbers 1, 2, or 3 for your answer if you like. REPEAT TIME REFERENCE AS NEEDED.

		-		
a.	Has sudden changes in mood or feelings	1	2	3
Ь.	Feels or complains that no one loves (him/her)	1	2	3
c.	Is rather high strung, tense, or nervous	1	2	3
d.	Cheats or tells lies	1	2	3
e.	Is too fearful or anxious	1	2	3
f.	Argues too much	1	2	3
g.	Has difficulty concentrating or cannot pay attention for long	1	2	3
ĥ.	Is easily confused or seems to be in a fog	1	2	3
i.	Bullies, or is cruel or mean to others	1	2	3
j.	Is disobedient at home	1	2	3
k.	Does not seem to feel sorry after (he/she) misbehaves	1	2	3
I.	Has trouble getting along with other children	1	2	3
m.	Is impulsive, or acts without thinking	1	2	3
n.	Feels worthless or inferior	1	2	3
Ο.	Is not liked by other children	1	2	3
p.	Has a lot of difficulty getting (his/her) mind off certain thoughts or has obsessions	1	2	3
	Is restless or overly active, cannot sit still	1	2	3
r.	Is stubborn, sullen, or irritable	1	2	3
s.	Has a very strong temper and loses it easily	1	2	3
t.	Is unhappy, sad or depressed	1	2	3
U.	Is withdrawn or does not get involved with others	1	2	3
V.	Breaks things on purpose, deliberately destroys own or others' things	1	2	3
w.	Clings to adults	1	2	3
	Cries too much	1	2	3
y.	Demands a lot of attention	1	2	3
z.	Is too dependent on others	1	2	3

END OF SELF-ADMINISTERED SECTION V



Appendix A: Excerpts from the Florida Survey A-45

P. MATERIAL HARDSHIP SCALE

P1. Now I have some questions about how things are going for you these days.

MFIP

Please tell me how much do you agree or disagree with each of the following statements.

		Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	DON'T KNOW	REFUSED
a.	My financial situation is better than						
	it's been in a long time. Do you						
	(READ RESPONSE CATEGORIES)	1	2	3	4	8	7
Ь.	I worry about having enough money						
	in the future. (Do you)	1	2	3	4	8	7
c.	These days I can generally afford to						
	buy the things we need. (Do you)	1	2	3	4	8	7
d.	There never seems to be enough money						
	to buy something or go somewhere						
	just for fun. (Do you)	1	2	3	4	8	7

INTERVIEWER INSTRUCTION: IF NO FOCAL CHILD, GO TO SECTION R.

Q. PARENTING

Q1. The next few questions are about what it's like to raise (FOCAL CHILD). Looking at Card G, please tell me how much during the past month have you . . .

_		All of the Time	Most of the Time	Some of the Time	None of the Time
a.	felt being a parent is harder than you thought it would be?	1	2	3	4
b.	felt there are things your child does that really bother you a lot?	1	2	3	4
c.	felt you are giving up more of your life to meet your child's				
	needs than you ever expected?	1	2	3	4
d.	felt trapped by your responsibilities as a parent?	1	2	3	4
e.	felt angry with your child?	1	2	3	4
f.	felt your child is much harder to care for than most?	1	2	3	4

Please look at Card H.

Q2. How often is (FOCAL CHILD) expected to do each of the following?

NLSY	_	Almost Never	Less Than 1/2 the Time	1/2 the Time	More than 1/2 the Time	Almost Always
a.	Make (his/her) own bed?	1	2	3	4	5
Ь.	Clean (his/her) own room?	1	2	3	4	5
c.	Clean up after spills?	1	2	3	4	5
d.	Bathe (himself/herself)?	1	2	3	4	5
e.	Pick up after (himself/herself)?	1	2	3	4	5



Q3. NC42 Sometimes kids mind pretty well and sometimes they don't. Sometimes they do things that make you feel good and sometimes they don't. Thinking of (FOCAL CHILD), how many times in the past week have you...

INTERVIEWER: IF SM/RESPONDENT SAYS "EVERYDAY" OR "ALL THE TIME", PROBE FOR SPECIFIC NUMBER OF TIMES. IF SM/RESPONDENT CANNOT PROVIDE SPECIFIC NUMBER OF TIMES, CIRCLE CODE "97" OR "99" AS NEEDED.

		TIMES	EVERY DAY	ALL THE TIME
a.	gotten really angry or lost your temper with (him/her)?		97	99
b.	had to scold, yell at, or threaten (him/her)?	l <u></u> ll	97	99
c.	had to spank (him/her)?	III	97	99
d.	grounded (him/her)?	lll	97	99
e.	taken away TV or other privileges?	111	97	99
f.	sent (FOCAL CHILD) to (his/her) room?	lll	97	99
g.	taken away (his/her) allowance?	l <u></u> ll	97	99
h.	shown (FOCAL CHILD) physical affection (kiss, hug, stroke hair, etc.)?	l <u></u> ll	97	99
i.	praised (FOCAL CHILD) for doing something worthwhile?	l <u>l_</u> l	97	99
j.	told another adult something positive about (FOCAL CHILD)?	111	97	99

Q4.

Sometimes children get so angry at their parents that they say things like "I hate you" or swear in a temper tantrum. For each of the following, please tell me if you would take this type of action if that happened.

		CIRCLE "YES" OR "NO" FOR EACH		
		YES	МО	
a .	Grounding/not letting (him/her) go out	1	2	
Ь.	Spanking	1	2	
c.	Talk with child	1	2	
d.	Give (him/her) a household chore	1	2	
e.	Ignore it	1	2	
f.	Send to (his/her) room for more than 1 hour	1	2	
g.	Take away (his/her) allowance	1	2	
h.	Take away TV or other privileges	1	2	
i.	Anything else? (SPECIFY)	1	2	

Q5. Please look at Card I. Different children need different amounts of supervision. How often do you . . .

	How often do you						
NICHD		Almost	Some-		Almost		Not
		Never	times	Often	Always	Always	Applicable
a.	know who (FOCAL CHILD) is with when (he/she)						
	is away from home (and not in school)? Is it almost						
	never, sometimes, often, almost always, or always?	1	2	3	4	5	7
Ь.	know when to expect (FOCAL CHILD) home when						
	(he/she) is away from home (and not in school)?	1	2	3	4	5	7
c.	know where (FOCAL CHILD) is when (he/she)						
	is away from home (and not in school)?	1	2	3	4	5	7
d.	know if (he/she) arrived back home when (he/she)						
	was supposed to?	1	2	3	4	5	7
e.	know which TV programs (he/she) watches?	1	2	3	4	5	7
f.	know what (FOCAL CHILD's) homework assignments are?	1	2	3	4	5	7
g.	know whether (FOCAL CHILD) has finished any homework?	1	2	3	4	5	7



R. CONTACT INFORMATION

Those are the survey	all of the questions I have to ask you toda . I would like to confirm your address and	y. Thank you for phone number.	meeting with me to comp	lete
	ADDRESS ON FACE SHEET OR ADDRE NT) your current address?	SS RESPONDE	NT IS LOCATED AT IF	
	YESNO		.1 .2	
IF NO: Ple RESPOND	ease give me your correct address. READ I DENT SPELL THE WORDS WHEN NECH	BACK THE ADD ESSARY.	RESS INFORMATION TO	0
STREET_				
CITY	S	TATE	ZIP	
PHONE _				
Lastly, I ar RECEIPT	m going to give you \$25 to compensate you FOR MONEY PAID.)	ofor your time. (HAVE RESPONDENT SIG	GN
		TOTAL TIME:_	initials:	



S. **INTERVIEWER RATINGS**

HOME

INTERVIEWER INSTRUCTION: IF NO FOCAL CHILD IN HOUSEHOLD, GO TO S1F.

S1. Did you observe (FOCAL CHILD) and (SM/RESPONDENT) together at any time?

NLSY	YES
	NO

		YES	NO	NOT OBSERVED
Α.	(SM/RESPONDENT) Encouraged child to contribute		_	<u> </u>
	To the conversation	1	2	-4
В.	(SM/RESPONDENT) Answered child's questions or			
	Requests verbally	1	2	-4
C.	(SM/RESPONDENT) Conversed with child excluding			
	scolding or suspicious comments	1	2	-4
D.	(SM/RESPONDENT) Introduced interviewer to child by name	1	2	-4
Ε.	(SM/RESPONDENT)'s voice conveyed positive feeling about this child	1	2	-4
F.	Interior of the home is dark or perceptually monotonous	1	2	-4
G.	All visible rooms of the house/apartment are reasonably clean	1	2	-4
Н.	All visible rooms of the house/apartment are uncluttered			
	or minimally cluttered	1	2	-4
1.	Building has potentially dangerous structural or			
	Health hazards within a school-aged child's range			
	(e.G., Falling plaster, peeling paint, rodents, glass,			
	Poisons and cleaning materials, flames and heat,			
	Frayed electrical wires)	1	2	-4
	Trayed electrical witesy		~	,

NEIGHBORHOOD

S2. Within one or two blocks of SM/RESPONDENT's home, were there any of the following things?

JOBS 5

		YES	NO
a.	Teenagers hanging out on the street?	1	2
Ь.	Vacant lots?	1	2
c.	Litter and garbage on the street or sidewalk?	1	2
d.	Abandoned or boarded up houses or buildings?	1	2
e.	Vandalism such as broken windows or graffiti?	1	2
f.	Foliage/landscaping (trees, grass, plantings)?	1	2

INTERVIEWER INSTRUCTION: REVIEW THE SECTIONS OF THE SAQ THAT WERE SELF- ADMINISTERED BEFORE GOING ON TO THE NEXT SECTION

S3. What portion of (SAQ SECTION) did you administer?

		ALL	SOME	NONE
<u> </u>	Section K - Depression Scale	1	2	3
b.	Section L - Domestic Violence	1	2	3
c.	Secion M - Barriers to Employment	1	2	3
ď.	Section N - Social Competence Subscale	1	2	3
e.	Section O - Behavior Problems Index	1	2	3



Federal Data Sources

able 1 provides a list of federal data resources for those who wish to conduct an evaluation of their welfare reform programs, but who do not have the resources to collect data. These data resources can complement collection efforts at the state or local level. Table 2 sorts the data available from the surveys described in Table 1 by the domains used in the Common Core of Constructs. For example, using the National Health Interview Survey (NHIS) one can calculate the "percent of children who are often unhappy, sad, or depressed," or one can use the Uniform Crime Reports to determine juvenile arrest rates. While there is no "demographics" domain in the common core, these data could be very useful for studies of state-level child outcomes. Domains which do not appear in Table 2 (e.g., absent parent involvement, stability and turbulence) are not represented in the data available from these federal data sources.

The information in these tables comes directly from: A Guide to State and Local-Level Indicators of Child Well-Being Available Through the Federal Statistical System, by Brett Brown, Ph.D. and Christopher Botsko, M.A., April 1996. More detailed information about these and other surveys can be found in that guide, available from Child Trends.



Table 1: List of Federal Data Resources

SURVEY	DESCRIPTION	PERIODICITY	GEOGRAPHIC COVERAGE	CONTACT INFORMATION
Current Population Surveys (CPS)	Large, nationally representative survey administered by the Bureau of the Census.	Administered monthly with special supplements every year in March and October, and every other year in April.	By combining several years of data, estimates can be produced for most states and the largest metropolitan areas.	Census Data User Services Bureau of the Census Washington, D.C. 20233-8500 (301) 457-4100
Decennial Census	Designed to provide a complete count of the population of the United States.	Every ten years. The next census will be in the year 2000.	Detailed population data for all parts of the United States and its possessions.	Census Data User Services (see above)
National Assessment of Educational Progress (NAEP)	Designed to monitor the knowledge, skills and performance of the nation's young people.	Biennially.	National data and state data for 44 states.	National Data Resource Center Elementary and Secondary Education Statistics Division National Center for Education Statistics 555 New Jersey Avenue, NW Washington, D.C. 20208-5651 (703) 845-3151
Common Core of Data (CCD)	Provides basic information and descriptive statistics on public elementary and secondary schools and schooling.	Annual.	For many measures, data are available for the 50 states, D.C., American Samoa, Guam, Northern Marianas, Puerto Rico, the U.S. Virgin Islands, all school districts, and individual schools.	National Data Resource Center (see above)
Schools and Staffing Survey (SASS)	Designed to provide information on the nation's elementary and secondary teaching force, aspects of teacher supply and demand, teacher workplace conditions, characteristics of school administrators, and school policies and practices.	1987-88 1990-91 1993-94 1998-99	All 50 states and the District of Columbia.	National Data Resource Center (see above)
Vital Statistics System .	Collects data on birth, death, fetal death, marriage, and divorce.	Data collected monthly from most states, but most data is reported annually.	All 50 states and the District of Columbia.	Division of Vital Statistics National Center for Health Statistics Centers for Disease Control and Prevention 6525 Belcrest Road, Room 840 Hyattsville, Maryland, 20782 (301) 436-8500
Youth Risk Behavior Surveillance System (YRBSS)	Designed to monitor six categories of health risk behaviors among adolescents in grades 9 through 12: behaviors contributing to intentional and unintentional injuries; tobacco use; alcohol and other drug use; sexual behavior; dietary behaviors, and physical activity.	Every two years.	National representation and representation from 39 states, 16 cities, and 4 U.S. possessions.	Centers for Disease Control and Prevention 4770 Buford Highway Mail Stop K33 Atlanta, Georgia 30341-3724

SURVEY	DESCRIPTION	PERIODICITY	GEOGRAPHIC COVERAGE	CONTACT INFORMATION
Behavioral Risk Factor Surveillance System (BRFSS)	Annual telephone survey of adults ages 18 and older that measures and tracks modifiable risk factors for chronic diseases and other leading causes of death.	Annual, but some measures only available every other year.	All 50 states, the District of Columbia, Guam, Puerto Rico, and the U.S. Virgin Islands.	Behavioral Surveillance Branch National Center for Chronic Disease Prevention and Health Promotion Centers for Disease Control and Prevention U.S. Department of Health and Human Services Mail Stop K-30 4770 Buford Highway, NE Atlanta, GA 30341-3724 (770) 488-5292
National Immunization Survey (NIS)	A continuous survey designed to provide quarterly estimates on levels of immunizations among children ages 19-35 months.	Ongoing.	All 50 states and the District of Columbia, and 27 urban areas.	National Immunization Program Centers for Disease Control and Prevention Public Health Service U.S. Department of Health and Human Services 12 Corporate Square/5th Floor Atlanta, Georgia 30329 (404) 639-8392
National Health Interview Survey (NHIS)	Monitors the health status, health care utilization, and health-related behaviors of the U.S. population.	Annual.	Before 1995 the survey was not designed to yield representative state-level estimates. By the year 2000 state-specific estimates based on three-year averages should be available.	Illness and Disability Statistics Branch Division of Health Interview Statistics National Center for Health Statistics (301) 436-7089 Survey Planning and Development Branch Division of Health Interview Statistics National Center for Health Statistics (301) 436-7093
Sexually Transmitted Diseases Surveillance System (STD)	Detailed demographic and clinical data on cases of congenital syphilis, gonorrhed and other STDs.	Annual.	All 50 states, the District of Columbia, and 63 cities with a population of 200,000 or more.	Information Technology and Services Office National Center for HIV, STD, and TB Prevention Centers for Disease Control and Prevention 1600 Clifton Road Mail Stop E-06 Atlanta, GA 30333



SURVEY	DESCRIPTION	PERIODICITY	GEOGRAPHIC COVERAGE	CONTACT INFORMATION
Pregnancy Risk Assessment Monitoring System (PRAMS)	Ongoing, population-based surveillance system that obtains self-reported behavioral information from new mothers.	Monthly.	IN, ME, MI, OK, WV, and Washington, D.C. began collecting data in 1988. AK began collecting data in 1990. AL, CA, FL, GA, IN, NY, SC, and WA began collecting data in 1993.	Centers for Disease Control National Center for Chronic Disease Prevention and Health Promotion Division of Reproductive Health Program Services and Development Branch Mail Stop K-22 1600 Clifton Road, NE Atlanta, GA 30333 (770) 488-5227
Uniform Crime Reports (UCR)	Compiled by the FBI and are considered the definitive count of crimes known to the police.	Annual.	All 50 states and the District of Columbia, Counties, Metropolitan Statistical Areas (MSAs), many municipalities including smaller cities and towns.	UCR Criminal Justice and Information Services Division FBI/GRB Washington, DC 20535 (202) 324-5015

Table 2: Federal Data by Domain

CONSTRUCT	SURVEYS
Demographics (i.e., percent of children who are Hispanic; children as a percentage of the population)	CPS Census
Income	CPS Census
Employment	CPS Census
Psychological Well-being	NHIS
Family Formation	CPS Census Vital Statistics
Use of Health and Human Services	NHIS CPS
Home Environment and Parenting Practices	NAEP UCR
Education	NAEP CPS SASS CCD
Health and Safety	NIS NHIS STD BRFSS YRBSS PRAMS Vital Statistics
Social and Emotional Adjustment	UCR YRBSS



Description of Surveys and Measures From Which Sample Measures Were Drawn

Scales

Behavior Problems Index

The Behavior Problems Index (BPI) is a 28-item rating scale for parent reports of child behavior (age 4-17) developed by Zill and Peterson, based on earlier work by Thomas Achenbach. This index has a demonstrated ability to discriminate between children who have received clinical treatment and those who have not, and taps some of the more common behavior syndromes in young people, namely, antisocial "acting out," distractible-hyperactive behavior, and depressed-withdrawn behavior.

Center for Epidemiological Studies-Depression Scale

This is a widely used measure of depressive symptomatology in the general population,⁸⁵ and has been found to discriminate between clinically depressed patients and others. Scores on this scale can theoretically range from 0 (not at all depressed) to 60 (severely depressed). Scores of 16 or higher are considered to be indicative of a level of depression that places the person at risk of clinical depression; 20 percent of people in community samples score in this range.⁸⁶

Connell School Engagement Scale

James Connell and his colleagues at the Institute for Research and Reform in Education have developed a measure of children's engagement in school that is both reliable and valid.⁸⁷ Similar versions of this measure have been administered to more than 10,000 students, parents, and teachers as part of the Rochester Assessment Package for Schools (RAPS). A parent-report version of this scale is currently included in the National Survey of America's Families.

Emlen Oregon Child Care Research Partnership Quality of Care Subscale

The Oregon Child Care Research Partnership is funded through a series of grants from state, federal, and private sources and conducts research on families using child care in Oregon. Arthur Emlen, Principal Investigator for the Oregon Child Care Research Partnership, has designed a brief scale measuring parents' perceptions of the quality of child care by conducting factor analyses of data collected from 862 parents pertaining to child care for their youngest child.

Home Observation for Measurement of the Environment-Short Form

The Home Observation for Measurement of the Environment-Short Form (HOME-SF) is a modification of the HOME Inventory which examines the quality of a child's home environment. The HOME-SF is appropriate for use in surveys, and consists of some parent-report and some interviewer ratings. The HOME-SF taps both the quality of the cognitive stimulation and emotional support provided by the child's parent. Beginning the comparent of the Environment of

Parent-Child Conflict Tactics Scale

The Parent-Child Conflict Tactics Scale was developed by Murray Straus at the Family Research Laboratory at the University of New Hampshire in 1979. Its purpose is to assess the extent to which a parent employs reasoning, verbal aggression, and physical aggression in disciplining his/her child.

Positive Behaviors Scale-Social Competence Subscale

The Positive Behaviors Scale was developed for the New Chance demonstration study in order to address the need for a positive behavior scale for economically and educationally disadvantaged respondents. The New Chance Demonstration study was a program impact study of 2,088 young welfare mothers who had children as teenagers and dropped out of high school. The New Chance program was comprehensive and voluntary.



Appendix C: Description of Surveys and Measures A-55

The sample is about half African-American non-Hispanic, one quarter Hispanic, and one-quarter white non-Hispanic. Data were collected in 16 sites, distributed among 10 states, at baseline (1991), 18 months later, and 42 months later.

United States Department of Agriculture (USDA) Food Security Scale

The USDA Food Security Scale was designed by researchers at the Food and Consumer Service in order to collect data on food shopping patterns, amount of money spent on food, and participation in food assistance programs. In addition, it allows researchers to measure whether or not a family is getting enough food and how a family copes with insufficient quantities of food. It has been used as a supplement to the Current Population Survey.

Studies

Early Head Start (EHS) National Evaluation Research Project

The EHS research project is a five-year national evaluation study of Early Head Start in 17 sites across the country. The evaluation includes random intervention/control group assignment, as well as site-specific research components developed by local research partners. Assessments of the children and their families (approximately 2500) will be conducted when the children are 14, 24, and 36 months old.

Indiana Survey

The Indiana survey was fielded as part of the evaluation of Indiana's federal waivers. Families in all 92 counties in the state were randomly assigned to either the treatment group which is exposed to the waiver policies, or a control group, which is exposed to pre-reform policies. Indiana is one of the five states participating in the Project on State-Level Child Outcomes operational phase.

Iowa Core Questionnaire

The Iowa core questionnaire is part of the evaluation of Iowa's federal waivers. The Family Investment Program, Iowa's welfare reform waiver demonstration program, was implemented in the fall of 1993 and places an emphasis on client responsibility and employment in order to achieve self-sufficiency. The core questionnaire is being fielded via telephone to 3000 families. Iowa is one of the five states participating in the Project on State-Level Child Outcomes operational phase.

Limited Benefit Plan Survey

The Limited Benefit Plan Survey was a survey of families in Iowa whose cash benefits were terminated following assignment to the Limited Benefit Plan for failure to comply with work-related welfare reform requirements under the Family Investment Program. Families were surveyed during the benefit termination period of the Limited Benefit Plan.

Milwaukee Survey

The Milwaukee Survey was a survey of welfare applicants and former recipients in Milwaukee County, Wisconsin developed by Mathematica Policy Research. This survey was not used for data collection, but will be revised by Mathematica Policy Research to collect data on individuals subject to the Wisconsin Works program.

Minnesota Family Investment Program Questionnaire

The Minnesota Family Investment Program is an outgrowth of the recent changes in national welfare legislation which allowed states to design and implement welfare programs outside the requirements of the AFDC program, and required these states to conduct experimental studies of the results. The measures in this study were pretested in 1997 and fielded until spring 1998. Minnesota is one of the five states participating in the Project on State-Level Child Outcomes operational phase.



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National Evaluation of Welfare-to-Work Strategies (NEWWS) Child Outcome Study

The NEWWS Child Outcomes Study, conducted by Child Trends under contract to MDRC, examines the impacts of the JOBS program on the well-being of children, drawing its sample from three JOBS sites. Families that had applied for or were receiving AFDC were randomly assigned to be in one of two program groups (the human capital development group or the labor force attachment group), or in a control group that was free of the mandate to participate in the JOBS Program yet eligible for all AFDC benefits. The experimental design of the evaluation permits an assessment of program impacts on children in families assigned to each of the experimental streams. Random assignment took place between September 1991 and January 1994, and follow-ups are being conducted two and five years after baseline.

National Household Educational Survey (NHES)

The NHES is an annual survey of between 60,000 and 75,000 households, selected through random digit dialing. The survey began in 1991, with additional surveys conducted in 1993, 1995, and 1996. It was designed to collect information on education-related issues that are best measured by contact with individuals rather than with schools. Topics covered include early childhood programs, child care, adult education, and civic participation.

National Longitudinal Survey of Youth-1997 (NLSY-97)

The NLSY-97, sponsored by the U.S. Department of Labor, examines preparation for labor force entry and work experience among youth. As such, it includes considerable information on education, income, family background, family processes, marriage, fertility and family planning, adolescent problem behaviors, child care, and maternal and child health, and is therefore a rich source of data for researchers interested in a wide range of child and family issues. A new cohort (NLSY-97) of approximately 12,000 youth ages 12 to 17 was fielded in 1997.

National Survey of America's Families (NSAF)

The NSAF, a survey intended to document trends in child and family well-being and explore the effects of recent changes in welfare laws, was in the field in 1997, with a follow-up planned for 1999. Low income families are over sampled, since they are most affected by welfare reform. To reflect the focus of the welfare laws, the NSAF was conducted in 13 states across the United States, allowing conclusions to be drawn both overall and for individual states. The NSAF is sponsored by the Urban Institute and Child Trends.

New Hope

Milwaukee's New Hope Project was a three-year, community-based demonstration serving residents of two inner-city zip codes. Households with incomes below 150 percent of the poverty line and an adult willing to work 30 hours a week or more were eligible. The program was designed to serve families headed by one or two parents, along with childless individuals and couples; it was open to people already working, unemployed, or on welfare. The New Hope demonstration was designed to test the idea that individuals and families can be lifted out of poverty, and will choose work over welfare, if adequate supports are provided to make work pay (e.g., access to child care and medical insurance, community-service jobs under some circumstances, wage supplements if needed). The survey was conducted two years after random assignment to either a treatment or control group. The evaluation sample is 1,357 families, with the 745 families with one or more children aged 3 to 12 participating in the family sub-study. Of these, 55-60% have two focal children (randomly selected if more than 2), and 40-45% have one child. The family study sample consists of about 55% African-Americans, 29% Hispanics, and 16% other (mostly white, with some Native Americans).



NICHD Methods Project

The NICHD Methods Project at Child Trends was a multi-part project to improve the understanding and measurement of parenting during middle childhood. Included in this project was a 1997 pilot study of 300 mother-child dyads, evenly split among African-American, Mexican-American, and white. The sample was also stratified by neighborhood income, age of child (half were 6 to 8 years old, half were 9 to 11 years old), and gender of child. The scales piloted in the Methods Project measured several theoretically distinct aspects of the mother-child relationship.

Panel Study of Income Dynamics

The PSID, begun in 1968, is a longitudinal survey of a representative sample of U.S. men, women, and children and the families in which they reside. Data on employment, income, wealth, housing, food expenditures, transfer income, and marital and fertility behavior are collected annually. Approximately 4,800 households were surveyed in 1968, and newly formed families have been added over time. Also, 2,000 Hispanic households were added in 1990 to balance the lack of immigrant families in the original sample. In 1997, the PSID supplemented the existing longitudinal study with information on parents and their children ages birth to twelve (PSID-CDS). Data are collected from both the parents and the children them-selves. The objective is to provide researchers with a comprehensive, nationally-representative data base of children and their families to study the process of child development as it relates to economic differences in the United States, including the consequences of maternal employment patterns, family structure changes, and poverty on child development. The collection of time-use diaries from the child and teacher are a unique supplement.

Prospects Survey

The Prospects study is being conducted by the Office of Planning, Budget, and Evaluation of the U.S. Department of Education. Begun in 1991, it is an annual survey of three cohorts of children beginning in grades 1, 3, and 7 and continuing for six years. The study is designed to compare the educational achievement of those children with significant participation in Department of Education Chapter 1 programs and comparable children who did not receive Department of Education Chapter 1 services, and examine a range of cognitive, behavioral and affective outcome measures such as achievement, truancy, delinquency, school dropout rates, employment and earnings, and enrollment in postsecondary education.

Survey of Income and Program Participation

The Survey of Income and Program Participation (SIPP) is funded and conducted by the U.S. Bureau of the Census. The first panel of SIPP was started in 1983. A new design was implemented in 1996 and will consist of about 50,000 households. Each panel is followed for 52 months and interviewed once every four months. The SIPP is a primary source of data on the demographic and economic situation of individuals and families in this country.



A-58 Children and Welfare Reform



Glossary of Commonly Used Terms

Child Outcome: An aspect of a child's development or well-being, e.g., health, school performance, or behavior.

Conceptual model: A framework for outlining the various pathways and child outcomes that may be important to examine in a study of welfare reform's effects on children.

Construct: A topic within a domain. For example, engagement in school, school attendance, and school performance are all constructs within the broader domain of educational outcomes.

Control Group: In an impact study, the control group consists of those people who are not subjected to a particular program or policy. (In impact studies, participants are randomly assigned to either a control group or a treatment group.)

Correlation: A statistically significant relationship between two or more variables.

Domain: An overarching term referring to a broad substantive topical area (e.g., educational outcomes).

Family Cap: A policy which does not allow for a family's benefits to be increased when a child is born more than nine months after the family began receiving benefits.

Hypothesis: A suggested solution to a problem, generally stated as a proposition. (A statistical hypothesis must either be accepted as true or rejected as false).

Impact: A measure of the effects of a policy or program

Impact Studies: Studies in which participants are randomly assigned to either an experimental (or treatment) group, or to a control group. If the study is well-designed and implemented, causal implications can be drawn for the population in the study.

Income Disregards: The amount welfare recipients can earn before their benefits are reduced.

Indicator: A measure of a behavior, condition, or status that can be tracked over time, across people, and/or across geographic units.

Inferential Study: A study which attempts to assess causality. Because inferential studies are often concerned with being able to generalize the results beyond the study sample, an often important feature of these studies is selecting an unbiased or representative sample.

Measure: An item or set of items that provide a concrete way to assess a construct.

Mixed Mode Survey: A survey which employs more than one method of data collection. For example, a survey administered by telephone with an in-home follow-up of families who could not be reached by phone.

Pathway: The hypothesized avenue through which welfare reform can affect children.

Population: The group about which a researcher is trying to generalize when research is done on a sample. For example, the population of all welfare recipients in a given state is represented by the sample of welfare recipients in a survey.

Random Assignment: A process in which study participants have an equal chance of being assigned to either a treatment group or a control group.



Appendix D: Glossary A-59

Reliability: The reliability of a measure is determined by whether or not it measures the same thing over time and for different subgroups.

Sample: A representative group from a larger population, used to reach generalizations about that population.

Sanctions: Financial penalties for not following program rules.

Skip Pattern: The way a survey is structured so that questions follow in a logical order. For example, if a respondent does not have any school-aged children, the questionnaire would indicate that questions about school progress should not be asked.

Social Indicator: A measure reflecting the social condition of the population or some portion of the population. It may be a direct measure of well-being (e.g., percent with chronic health conditions), or indirect, measuring some condition of the social context known to affect the well-being of individuals (e.g., family income levels).

Time Limits: The total amount of time a family is eligible to receive welfare benefits.

Treatment Group: In an impact study, the treatment group consists of those people randomly assigned to be subjected to a particular program or policy.

Validity: The validity of a measure is determined by whether or not the measure assesses the concepts it was intended to assess.

Variable: A characteristic of some unit of observation, such as a person, a family, a classroom, or a city.



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EFF-089 (9/97)

