The Well-Being of Families First Children: Evidence from FALS Wave 3



A Report to the Tennessee Department of Human Services

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Introduction

This report presents a variety of statistical information about children in welfare households in Tennessee, with particular emphasis on child well-being. Our analysis is based exclusively on data from Wave 3 of the *Family Assistance Longitudinal Study* (FALS). This wave of the survey contains information on families who were current or former recipients of cash assistance at the time of the survey. Wave 3 of the survey was conducted from October 2002 through January 2003 and includes information for 5,686 children in 2,490 households.¹

This data source presents a new and particularly interesting opportunity to consider the welfare of Families First children. In the first two waves of the survey, each adult respondent was asked to consider all of his or her children collectively; however, in the third wave, individual-level information, including a number of measures of child well-being, is available for the oldest and youngest child under the age of 18 in each household. This means

that individual-level information is available for a total of 4,111 children, or about 72 percent of the children in surveyed households. This allows us to gain a more accurate picture of the well-being of welfare children in Tennessee than was previously possible.

We present a number of summary statistics relating to welfare children's well-being, followed by more detailed statistical comparisons of a variety of outcome measures across various types of households. Where relevant, results are compared to those obtained in our earlier report (Welfare Children in Tennessee: Who Are They and How Are They Doing? by Barbour, Bruce, and Thacker, 2003) which was based on data from FALS Wave 1. When making these comparisons, however, it is important to remember that because of the collective nature of the earlier data, direct comparison is not always possible or appropriate.

¹ For more information, see Gonzales (2003)

1. Demographic Characteristics of Welfare Children

The possibility exists that our sub-sample of oldest and youngest children is not representative of the population of children in Tennessee's welfare households. With this in mind, we begin by comparing the age and relationship distributions as of Wave 3 for children in this sample with similar information for all children in surveyed households. Tables 1.1 and 1.2 present this information for all children in surveyed households. Table 1.1 shows that 97.75 percent of children in surveyed households were the son or daughter of the respondent, compared to 95.59 per-

cent in the first wave of the survey. It should be noted that this percentage is likely higher than in the general Families First population since child-only cases were excluded from the survey sample. Not surprisingly, the age distribution of children in Wave 3 of the survey was slightly older than that in the first wave (Table 1.2). Also, the percentage of children one year old or younger decreased from the first wave of the survey, from just over 15 percent in Wave 1 to 9.62 percent in Wave 3.

Table 1.1: Child's Relationship to Respondent

Relationship	Number	%
Son/Daughter	5,558	97.75
Step-child	37	0.65
Grandchild	58	1.02
Brother/Sister	9	0.16
Other	24	0.42
Total	5,686	100.00

Table 1.2: Distribution of Children by Age

Age	Number	%
Less than 1	219	3.85
1	328	5.77
2	515	9.06
3	428	7.53
4	428	7.53
5	400	7.03
6	370	6.51
7	346	6.09
8	340	5.98
9	341	6.00
10	333	5.86
11	296	5.21
12	296	5.21
13	281	4.94
14	225	3.96
15	195	3.43
16	190	3.34
17	155	2.73
Total	5,686	100.00

Tables 1.3 and 1.4 provide similar details for the sample of oldest and youngest children only, for whom more detailed information is provided in the Wave 3 data. The percentage of oldest and youngest children who were the son or daughter of the respondent is about the same as that for all children, and the age distribution for the two groups is similar. Unsurprisingly, the smaller sample of

oldest and youngest children has a slightly larger percentage of children at the extremes of age. For example, 6.07 percent of all children were 16 or 17, compared to 7.93 percent of oldest and youngest children. This comparison indicates that the group of oldest and youngest children is reasonably representative of all Families First children.

Table 1.3: Child's Relationship to Caretaker (Oldest and Youngest Only)

	Number	%
Son/Daughter	4,030	98.03
Stepchild	20	0.49
Grandchild	39	0.95
Brother/Sister	8	0.19
Other Relative	14	0.34
Total	4,111	100.00

Table 1.4: Children by Age (Oldest and Youngest Only)

Age	Number	%
Less than 1	213	5.18
1	286	6.96
2	404	9.83
3	305	7.42
4	310	7.54
5	281	6.84
6	233	5.67
7	222	5.40
8	215	5.23
9	213	5.18
10	221	5.38
11	193	4.69
12	195	4.74
13	190	4.62
14	152	3.70
15	152	3.70
16	171	4.16
17	155	3.77
Total	4,111	100.00

2. Overall Well-Being of Welfare Children in Tennessee

This section presents an overview of the well-being of oldest and youngest children in our data. Table 2.1 shows that just under 35 percent of children were described by respondents as being in excellent health. This result is somewhat disappointing given that over 40 percent of children were described as in excellent health in the first wave of the survey. Of course, this may not reflect a decrease in health as much as the change in the survey. Still, the children in Wave 3 were reported to be in good health, with nearly two thirds of children were reported to be in either excellent or very good health and only about 10 percent in poor or fair health.

However, parental health ratings are subjective and relative. Table 2.2 evaluates the extent of this subjectivity by comparing the parental health ratings of children with physical limitations to those of children without physical limitations. It is interesting to note that 12.42 percent of children with a physical limitation were still described as being in excellent health.

Tables 2.3 and 2.4 describe the health-related limitations faced by welfare children. About 15 percent of children have a physical condition that limits their physical activities (Table 2.3). Table 2.4 shows that just over

Table 2.1: Child's Health Rating

	Number	%
Poor	52	1.27
Fair	362	8.81
Good	1125	27.38
Very Good	1149	27.96
Excellent	1421	34.58
Total	4,109	100.00

Table 2.2: Child's Health Rating by Physical Limitation

	Physical Limitation		No Physical	Limitation
	Number	%	Number	%
Poor	40	6.71	10	0.29
Fair	172	28.86	186	5.34
Good	208	34.90	906	26.00
Very Good	102	17.11	1,042	29.90
Excellent	74	12.42	1,341	38.48
Total	596	100.00	3,485	100.00

20 percent of school age children have either a learning or mental condition that limits their ability to do school work.

Tables 2.5 and 2.6 present information regarding welfare children's use of health care providers. Because doctor and dentist visits should vary by age, the children are divided into two age groups. Table 2.5 shows the number of doctor visits by each child in the last six months. As shown in Table 2.5, nearly 90 percent of young children

had been to the doctor in the last six months, most of them multiple times, as would be expected. Of the older children, over 82 percent had been to the doctor in the last six months, but over 27 percent had been three or more times, an indication of possible health problems. Furthermore almost 30 percent of older children had not been to the dentist in the past six months (Table 2.6). This discrepancy between doctor and dentist visits is somewhat surprising given that both doctor and dentist visits are cov-

Table 2.3: Physical Limitation

Table 2.4: Learning or Me	ntal Limitation
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	Number	%		Number	%
Yes	596	14.6	Yes	459	20.56
No	3,486	85.4	No	1,773	79.44
Total	4,082	100.00	Total	2,232	100.00

Table 2.5: Doctor visits by child, last six months

	Age 4 o	Age 4 or younger		or older
	Number	%	Number	%
0	151	10.13	445	17.43
1	354	23.76	816	31.96
2	361	24.23	592	23.19
3 or more	624	41.87	700	27.42

Table 2.6: Dentist visits by child, last six months

	Age 4 or	Age 4 or younger		or older
	Number	%	Number	%
0	1,084	71.69	755	29.29
1	320	21.16	999	38.75
2	82	5.42	515	19.98
3 or more	26	1.72	309	11.99

ered by Medicaid. However, Table 2.7 shows that this discrepancy is present among those children who are covered by health insurance, 90% of whom are covered by Medicaid/TennCare, as well as among uninsured children.

As shown in Table 2.8, over 95 percent of Families First children under 5 years old were up-to-date on their shots. This is particularly good news given that the statewide immunization rate in 1999 was 79.5 percent (Hovey

& Hovey 2001). Another measure of children's health, the number of school days missed due to illness, is presented in Table 2.9. Most children seem to be doing well by this measure; nearly 50 percent of children have missed no days or only one day of school due to illness in the last six months, and over 64 percent have missed two or fewer days. However, a substantial number of children (over 23 percent) have missed four or more days.

Table 2.7: Health care provider visits by insurance status

_	Insured		Not Insu	red
	Number	%	Number	%
Doctor Visit, Last 6 Months				
0	229	15.18	23	29.49
1	427	28.30	16	20.51
2	338	22.40	17	21.79
3 or more	515	34.13	22	28.21
Dentist Visits, Last 6 Months				
0	679	44.67	46	58.97
1	500	32.89	25	32.05
2	226	14.87	6	7.69
3 or more	115	7.57	1	1.28

Table 2.8: Is the child up to date on his/her shots? (children under 5 years old)

	Number	%
Yes	1,442	95.31
No	71	4.69
Total	1,513	100.00

Table 2.9: Sick days, past six months

	Number	%	
0	773	34.74	
1	312	14.02	
2	356	16.00	
3	268	12.04	
4 or more	516	23.19	
Total	2,225	100.00	

Tables 2.10 through 2.14 present various measures of welfare children's academic status. Nearly one-third of school-age welfare children have been held back a grade in school (Table 2.10), and just over 10 percent had been expelled or suspended in the last six months (Table 2.11). The latter statistic is only slightly higher than the statewide suspension/expulsion rate of 9.84 in the 2001 school year (Kids Count 2002). Table 2.12 shows that many welfare children are doing well academically – close to 50 percent are getting either straight As or mostly As and Bs

Table 2.10: Has the child ever been held back?

	Number	%
Yes	731	32.47
No	1,520	67.53
Total	2,251	100.00

Table 2.11: Has the child been suspended/expelled in the last six months?

	Number	%
Yes	240	10.66
No	2,012	89.34
Total	2,252	100.00

Table 2.12: Grades on last report card

	Number	%	
Straight As	260	11.80	
Mostly As and Bs	825	37.45	
Mostly Bs and Cs	629	28.55	
Mostly Cs and Ds	281	12.76	
Mostly Ds and Fs	126	5.72	
No Letter Grades	82	3.72	
Total	2,203	100.00	

as reported by survey respondents. Over 75 percent got mostly As, Bs, or Cs. Finally, as shown in Tables 2.13 and 2.14, over 85 percent of welfare children over the age of 15 are expected to graduate from high school, and over 62 percent are expected to attend college. While expected graduation does not necessarily translate into actual graduation, Families First children seem to be doing well compared to Tennessee's statewide graduation rate of 60 percent (Greene and Forster 2003).

Table 2.13: Expected to graduate from high school (children 15 or older)

	Number	%
Yes	408	85.36
No	47	9.83
Already Graduated	2	0.42
Don't Know	21	4.39
Total	478	100.00

Table 2.14: Expected to attend college (children 15 or older)

	Number	%
Yes	298	62.34
No	102	21.34
Don't Know	78	16.32
Total	478	100.00

Information on welfare children's participation in extracurricular activities is presented in Tables 2.15 through 2.18. Respondents were asked whether children 5 or older had participated in organized sports, lessons, or clubs in the last six months. Just over 72 percent of children had participated in at least one of these activities (Table 2.15). Nearly one-third of children had participated in organized sports. Lessons were the most popular activity, with almost 55 percent of children participating. Additionally, just over 30 percent of children had participated in some kind of extracurricular club.

To summarize, the tables in this section indicate that children in current and former welfare families are doing reasonably well by most counts. Well-being is quite good as measured by a variety of health and academic indicators. With this set of benchmark data in hand, it remains to be seen whether significant variation in child well-being exists across various household types. We turn to a more detailed analysis in the following section.

Table 2.15: Participate in sports, lessons, or clubs

Number %

- Italiibei		70
Yes	1,864	72.02
No	724	27.98
Total	2,588	100.00

Table 2.17: Take lessons, last 6 months

	Number	%
Yes	1,403	54.68
No	1,163	45.32
Total	2,566	100.00

Table 2.16: Participate in sports, last 6 months

Table 2.18: Participate in clubs, last 6 months

	Number	%		Number	%
Yes	860	33.26	Yes	789	30.50
No	1,726	66.74	No	1,798	69.50
Total	2,586	100.00	Total	2,587	100.00

3. Comparisons of Child Well-Being by Various Household Types

The tables in this section explore the relationships between child well-being and a number of important household characteristics. We begin by comparing children in households that were receiving Families First cash assistance at the time of the survey (regardless of whether they had left the program in the past) with those who received assistance at one point but were not receiving cash assistance at the time of the survey. We then consider the potential relationships between child well-being and such things as time limits, employment, and work requirements. We also investigate the importance of voluntary versus involuntary program exit among the sample of leavers. Finally, we consider time on the program, family income, and child age as potential correlates with our various measures of child well-being. In the discussion that follows, we highlight only those differences that were found to be statistically significant using standard statistical tests.

Are Children of Welfare Leavers Worse Off?

Some critics of the welfare reform measures argued that benefit-reducing policies such as time limits might cut benefits for those families who most need assistance, thereby unnecessarily harming the children in those families. To investigate this, we first compare outcomes across current and former Families First recipients. Table 3.1 shows that children whose families were no longer receiving cash assistance at the time of the survey were doing roughly as well as children whose families were receiving cash assistance. Children not on cash assistance were held back, expelled, and suspended slightly less often, and participated in extracurricular activities more often than children who were on cash assistance. They were also less likely to have a mental or learning limitation. On the other hand, children on cash assistance were in slightly better health overall.

In sum, we do not find evidence that children in leaver households are uniformly worse off than children whose families have remained on the program. Of course, the analysis in Table 3.1 considers all leavers together and does not disentangle the relative importance of time limits versus other reasons for leaving the program.

Are Children Who Met Time Limits Worse Off?

Children whose families stopped receiving cash assistance because of 18-month time limits are compared to children whose families stopped receiving assistance for another reason in Table 3.2. Only 40 children were in families that reached time limits. Because of this small sample size, it is difficult to draw any strong conclusions from these comparisons. However, the data suggest that by nearly all measures, children whose families reached time limits were doing approximately as well as children whose families stopped receiving cash assistance for other reasons

Are Children with Working Caretakers Worse Off?

A prominent concern surrounding the implementation of work requirements was that forcing mothers—often single mothers—into the workforce would necessarily reduce the amount of time spent with their children. Table 3.3 presents child well-being measures by their caretaker's employment status and Table 3.3a repeats the same analysis using only children age 11 or older. It should be noted that because caretakers of children with physical or mental limitations are less likely to be employed, so any differences between the two groups of children should not be interpreted as caused by the caretaker's employment status. Perhaps unsurprisingly, children whose caretaker was employed were doing as well as or better than other children by every measure. This held true for the older children as well as for all children combined. Some of the largest differences between the two groups were in the number of sick days and the likelihood of attending college. Over 39 percent of children with employed caretakers had taken no sick days in the last six months, compared to 32 percent of other children. Of course, this could reveal the unfortunate possibility that employed parents are more likely to send their sick children to school.

While less than 59 percent of children over 15 whose caretakers were not employed were expected to attend college, over 69 percent of children with employed caretakers were expected to attend. Children with employed care-

takers were also quite a bit more likely to participate in extracurricular activities, which might be serving as a form of child care for some families. Also, while less than 30 percent of children with employed caretakers had been held back, over 34 percent of other children had been. However, by some measures, the two groups of children were doing about the same. For example, children in each group were about equally likely to have been to the doctor in the last six months.

Are Children Harmed by Their Caretaker's Work Requirement?

Table 3.4 moves beyond employment to explore the potential effects of the caretaker's work requirement status on children's well-being. Interestingly, children whose caretakers were required to participate in work-related activities were doing better by nearly every measure than children whose caretakers were exempt from work requirements. The difference between the two groups was particularly distinct in terms of children's health ratings. Since caretakers of sick children can be exempted from work requirements, this is expected. The only measure by which children with exempt caretakers were doing better than other children was suspensions and expulsions. In the last six months, nearly 13 percent of children whose caretakers were not exempt had been expelled or suspended but only about 9 percent of other children had been expelled or suspended.

Are Children of Involuntary Leavers Worse Off?

One way of evaluating the new stricter rules for receiving cash assistance is to compare families who chose to leave cash assistance (voluntary leavers) with those whose case was closed by Families First (involuntary leavers). Reasons that an individual may close his or her case include getting a job or a pay raise, moving in with friends or family, or simply not wanting to be on welfare. On the other hand, Families First may close a case for a number of reasons, including increased income, noncompliance with the work plan, or time limits.

Table 3.5 compares children whose families stopped cash assistance themselves to those whose cash assistance was stopped by Families First (no families in this comparison were on cash assistance). Involuntary leavers are divided into two groups: those stopped because of an increase in family income and those stopped for some other reason. Children in families that voluntarily stopped cash assistance were generally doing the best overall, though not by every measure. In terms of health, children whose families' cash assistance was stopped because of income increases did about as well as children whose families stopped assistance themselves.

As measured by the education variables, children whose families voluntarily stopped assistance were doing somewhat better than other children. Children whose cash assistance was stopped by Families First for a non-incomerelated reason were doing worse than other children by many measures. Particularly concerning are these children's low frequency of visits to doctors and dentists and their lower expected graduation rate.

Are Long-Term Families First Children Worse Off?

Table 3.6 explores the relationship between cumulative duration of cash assistance and child well-being. By almost all measures, children who had been on cash assis-

tance for less than three years since 1996 were doing better than children who have been on cash assistance longer. Children who had been on cash assistance less than three years were more likely to have been to the doctor in the last six months, had better grades, and had been held back, suspended, and expelled less often. One interesting exception to this is that children who had been on welfare longer were more likely to have had a dentist visit in the last six months. For example, while less than 50 percent of children who had been on cash assistance less than 3 years had not been to the dentist in the last six months, just over 60 percent of children who had been on assistance longer had been to the dentist.

Does More Family Income Lead to Better Child Welfare?

Table 3.7 presents variables by the family's total monthly household income. This figure includes all money from jobs, child support, Families First cash benefits, and all other sources of income, but does not include food stamps. About 45 percent of children were in families whose total income was less than \$500 a month. Interestingly, by many health-related variables, children whose families had incomes under \$500 a month were doing as well as children with higher family incomes. In fact, for reported health, the difference between the two groups was significant at the 10 percent level, with more children with

family incomes under \$500 a month reported in good, very good, or excellent health. However, children with lower incomes did not visit the doctor or dentist as often as other children, and they were also less likely to participate in extracurricular activities than other children.

Are Older Children Better Off?

Table 3.8 shows well-being measures by the child's age group. Interestingly, statistical tests show that all of the characteristics in this Table are significantly different by age group. In general, older children were doing worse in school than younger children. Fewer older children got straight As or As and Bs, and 43 percent of older children had been held back, compared to just under 24 percent of younger children. Furthermore, while just over five percent of younger children had been expelled or suspended in the last six months, more than 17 percent of older children had been expelled or suspended.

Children's reported health decreased as their age increased, with 40 percent of children ages four or younger and almost 26 percent of children ages 11 or older reported in excellent health. Despite the fact that older children were reported to be in worse health, children in the younger age groups were more likely to have been to a doctor than the older children. On the other hand, older children were more likely to have participated in sports, lessons, or clubs.

Table 3.1: Child Well-Being by Cash Assistance Status

	Receiving Cash Assistance		Not Receiving Cash Assistance	
	Number	%	Number	%
Child's Health Rating**		4.04	00	4.04
Poor	30	1.21	22	1.34
Fair	214	8.66	148	9.04
Good	713	28.84	412	25.17
Very Good	650	26.29	499	30.48
Excellent	865	34.99	556	33.96
Dentist Visits by Children				
0	1,096	44.55	743	45.58
1	785	31.91	534	32.76
2	361	14.67	236	14.48
3 or more	218	8.86	117	7.18
Doctor visits by Children				
0	335	13.82	261	16.12
1	717	29.58	453	27.98
2	592	24.42	361	22.3
3 or more	780	32.18	544	33.6
Up to date on Shots?				
Yes	858	95.12	584	95.58
No	44	4.88	27	4.42
Sick Days				
0	457	34.26	316	35.47
1	182	13.64	130	14.59
2	205	15.37	151	16.95
3	162	12.14	106	11.90
4 or more	328	24.59	188	21.10
Grades on last report card				
Straight A's	154	11.54	106	12.20
Mostly A's and B's	488	36.58	337	38.78
Mostly B's and C's	373	27.96	256	29.46
Mostly C's and D's	183	13.72	98	11.28
Mostly D's and F's	86	6.45	40	4.60
No letter grades	50	3.75	32	3.68
Ever been held back?**				
Yes	461	34.05	270	30.10
No	893	65.95	627	69.90
•		20.00	 -	55.56

Table 3.1: Child Well-Being by Cash Assistance Status, continued

	Receiving Cash Assistance		Not Receiving Cash Assistance	
	Number	%	Number	%
Been suspended/expelled?**				
Yes	161	11.89	79	8.80
No	1,193	88.11	819	91.20
Expected to graduate from high school				
Yes	256	85.91	152	84.44
No	24	8.05	23	12.78
Already Graduated	1	0.34	1	0.56
Don't Know	17	5.70	4	2.22
Expected to attend college				
Yes	183	61.41	115	63.89
No	64	21.48	38	21.11
Don't Know	51	17.11	27	15.00
Mental Limitation**				
Yes	297	22.15	162	18.18
No	1,044	77.85	729	81.82
Physical Limitation				
Yes	366	14.93	230	14.10
No	2,085	85.07	1,401	85.90
Participate in Sports*				
Yes	498	31.86	362	35.39
No	1,065	68.14	661	64.61
Taken Lessons				
Yes	828	53.42	575	56.59
No	722	46.58	441	43.41
Participate in Clubs**				
Yes	452	28.88	337	32.97
No	1,113	71.12	685	67.03

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.2: Selected Child Well-Being Measures by Families' Time Limit Experience (families not on cash assistance)

	Did Not Reach Time Limit		Reached Time L	imit
	Number	%	Number	%
Old Halle Handle Barton				
Child's Health Rating Poor	15	1.26	0	0.00
Fair	103	8.65	3	7.50
Good	333	27.96	10	25.00
Very Good	347	29.14	11	27.50
Excellent	393	33.00	16	40.00
Dentist visits by Child	000	00.00	10	40.00
0	550	46.41	17	42.50
1	376	31.73	16	40.00
2	174	14.68	4	10.00
3 or more	85	7.17	3	7.50
	00	7.17	9	7.50
Doctor visits by Child** 0	196	16.60	6	15.00
1	346	29.30	16	40.00
2	254	29.50	4	10.00
3 or more	385	32.60	14	35.00
	303	32.00	T-1	33.00
Sick days	237	36.69	12	52.17
0	23 <i>1</i> 85	13.16	4	17.39
1		14.09	1	4.35
2 3	91 88	13.62	3	13.04
4 or more	145	22.45	3	13.04
	143	22.40	3	13.04
Ever Held Back?	400	00.45	40	44.07
Yes	192	29.45	10	41.67
No	460	70.55	14	58.33
Been Suspended/Expelled?				
Yes	72	11.01	2	8.33
No	582	88.99	22	91.67
Physical Limitation				
Yes	170	14.33	5	12.50
No	1,016	85.67	35	87.50
Activities				
Sports	260	34.85	12	42.86
Lessons	402	54.10	19	67.86
Clubs**	237	31.73	18	64.29

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.3: Child Well-Being by Caretaker's Employment Status

	Employed		Not Employed	
	Number	%	Number	%
Child's Health Rating**				
Poor	21	1.27	31	1.26
Fair	145	8.77	217	8.85
Good	409	24.73	714	29.11
Very Good	507	30.65	642	26.17
Excellent	572	34.58	849	34.61
Dentist visits by child*				
0	722	43.92	1,115	45.62
1	549	33.39	770	31.51
2	258	15.69	339	13.87
3 or more	115	7.00	220	9.00
Doctor visits by child				
0	236	14.42	359	14.93
1	474	28.96	695	28.91
2	394	24.07	559	23.25
3 or more	533	32.56	791	32.90
Up to date on shots?*				
Yes	605	96.49	837	94.58
No	22	3.51	48	5.42
Sick days**				
0	349	39.21	423	31.71
1	138	15.51	174	13.04
2	142	15.96	214	16.04
3	106	11.91	162	12.14
4 or more	155	17.42	361	27.06
Grades on last report card*				
Straight A's	108	12.29	152	11.49
Mostly A's and B's	340	38.68	484	36.58
Mostly B's and C's	260	29.58	369	27.89
Mostly C's and D's	95	10.81	186	14.06
Mostly D's and F's	39	4.44	87	6.58
No Letter Grades	37	4.21	45	3.40

Table 3.3: Child Well-Being by Caretaker's Employment Status, continued

	Employed		Not Employee	d
	Number	%	Number	%
Been Held Back?**				
Yes	263	29.42	468	34.51
No	631	70.58	888	65.49
Been Expelled/Suspended?				
Yes	90	10.03	150	11.08
No	807	89.97	1,204	88.92
Expected to Graduate High School				
Yes	152	86.86	256	84.49
No	14	8.00	33	10.89
Already Graduated	1	0.57	1	0.33
Don't Know	8	4.57	13	4.29
Expected to attend college**				
Yes	121	69.14	177	58.42
No	28	16.00	74	24.42
Don't Know	26	14.86	52	17.16
Mental Limitation**				
Yes	146	16.37	313	23.38
No	746	83.63	1,026	76.62
Physical Limitation**				
Yes	209	12.68	387	15.91
No	1,439	87.32	2,045	84.09
Participate in Sports**				
Yes	367	35.87	493	31.56
No	656	64.13	1,069	68.44
Take Lessons**				
Yes	583	57.33	820	52.97
No	434	42.67	728	47.03
Participate in Clubs**				
Yes	348	33.98	440	28.17
No	676	66.02	1,122	71.83

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.3a: Child Well-Being by Caretaker's Employment Status, Age 11 or Older

	Employed		Not Employed	
	Number	%	Number	%
				_
Child's Health Rating**				
Poor	8	1.70	8	1.09
Fair	49	10.40	91	12.35
Good	137	29.09	269	36.50
Very Good	133	28.24	189	25.64
Excellent	144	30.57	180	24.42
Dentist visits by child				
0	139	29.76	226	30.87
1	173	37.04	271	37.02
2	100	21.41	124	16.94
3 or more	55	11.79	111	15.17
Doctor visits by child				
0	89	19.18	131	18.17
1	168	36.21	219	30.37
2	96	20.69	162	22.47
3 or more	111	23.92	209	28.99
Sick days**				
0	172	37.15	212	29.49
1	55	11.88	89	12.38
2	80	17.28	114	15.86
3	58	12.53	88	12.24
4 or more	98	21.17	216	30.04
Grades on last report card*				
Straight A's	30	6.54	45	6.30
Mostly A's and B's	175	38.13	249	34.87
Mostly B's and C's	162	35.29	224	31.37
Mostly C's and D's	61	13.29	128	17.93
Mostly D's and F's	27	5.88	64	8.96
No Letter Grades	4	0.87	4	0.56

Table 3.3a: Child Well-Being by Caretaker's Employment Status, Age 11 or Older, continued

	Employed		Not Employed	
	Number	%	Number	%
Been Held Back?**				
Yes	181	38.59	330	45.02
No No	288	36.59 61.41	403	54.98
	200	01.41	403	54.96
Been Expelled/Suspended?				
Yes	70	14.89	118	16.08
No	400	85.11	616	83.92
Mental Limitation**				
Yes	86	18.38	198	27.46
No	382	81.62	523	72.54
Physical Limitation**				
Yes	68	14.47	154	21.12
No	402	85.53	575	78.88
Participate in Sports				
Yes	190	40.51	268	36.51
No	279	59.49	466	63.49
Take Lessons*				
Yes	293	62.88	417	57.76
No	173	37.12	305	42.24
Participate in Clubs**				
Yes	180	38.30	220	29.97
No	290	61.70	514	70.03

Sample sizes differ by category and are available upon request.

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively.

Table 3.4: Child Well-Being by Caretaker's Work Requirement Status

	Required		Exempt	
	Number	%	Number	%
Childle Heelth Detines*				
Child's Health Rating** Poor	18	0.94	12	2.13
Fair	159	8.33	55	9.77
Good	527	27.61	186	33.04
Very Good	491	25.72	159	28.24
Excellent	714	37.40	151	26.82
Child's Dentist Visits**				
0	822	43.24	274	49.02
1	635	33.40	150	26.83
2	286	15.04	75	13.42
3 or more	158	8.31	60	10.73
Child's Doctor Visits**				
0	254	13.56	81	14.7
1	569	30.38	148	26.86
2	463	24.72	129	23.41
3 or more	587	31.34	193	35.03
Up-to-date on shots				
Yes	712	95.44	146	93.59
No	34	4.56	10	6.41
Sick Days*				
0	340	35.02	117	32.23
1	137	14.11	45	12.4
2	158	16.27	47	12.95
3	116	11.95	46	12.67
4 or more	220	22.66	108	29.75
Grades on last report card				
Straight A's	111	11.41	43	11.91
Mostly A's and B's	352	36.18	136	37.67
Mostly B's and C's	278	28.57	95	26.32
Mostly C's and D's	133	13.67	50	13.85
Mostly D's and F's	62	6.37	24	6.65
No letter grades	37	3.80	13	3.6

Table 3.4: Child Well-Being by Caretaker's Work Requirement Status, continued

	Required		Exempt	
	Number	%	Number	%
Ever been held back?**	047	20.00	444	20.00
Yes No	317 667	32.22 67.78	144 226	38.92 61.08
	007	07.70	220	01.00
Been Expelled/Suspended?*	40=	40.00	0.4	0.40
Yes	127	12.92	34	9.16
No	856	87.08	337	90.84
Expected to Graduate High School				
Yes	175	87.06	81	83.51
No	14	6.97	10	10.31
Already Graduated	1	0.50	0	0
Don't Know	11	5.47	6	6.19
Expected to attend college				
Yes	131	65.17	52	53.61
No	39	19.40	25	25.77
Don't Know	31	15.42	20	20.62
Mental Limitation**				
Yes	179	18.42	118	31.98
No	793	81.58	251	68.02
Physical Limitation**				
Yes	255	13.46	111	19.93
No	1,639	86.54	446	80.07
Participate in Sports*				
Yes	384	33.19	114	28.08
No	773	66.81	292	71.92
Take Lessons*				
Yes	630	54.83	198	49.38
No	519	45.17	203	50.62
Participate in Clubs*	010	10.11	200	00.02
Yes	349	30.11	103	25.37
No	810	69.89	303	74.63
INO	010	03.03	303	74.03

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.5: Child Well-Being by Who Closed the Case

	Self (Voluntary)		Families First - Income		Families First - Other	
	Number	%	Number	%	Number	%
Child's Health Rating*	4.5	4.00		4.07	_	
Poor	15	1.33	8	1.07	7	1.45
Fair	96	8.50	69	9.24	37	7.64
Good	258	22.83	205	27.44	138	28.51
Very Good	334	29.56	231	30.92	127	26.24
Excellent	427	37.79	234	31.33	175	36.16
Dentist Visits						
0	511	45.34	316	42.59	251	51.97
1	366	32.48	249	33.56	143	29.61
2	162	14.37	126	16.98	52	10.77
3 or more	88	7.81	51	6.87	37	7.66
Doctor Visits**						
0	149	13.42	115	15.54	87	18.09
1	283	25.50	223	30.14	139	28.90
2	291	26.22	151	20.41	107	22.25
3 or more	387	34.86	251	33.92	148	30.77
Up to Date on Shots						
Yes	434	96.23	252	95.45	181	93.78
No	17	3.77	12	4.55	12	6.22
Sick Days						
0	204	35.48	161	37.97	88	35.92
1	85	14.78	60	14.15	29	11.84
2	107	18.61	57	13.44	35	14.29
3	61	10.61	59	13.92	32	13.06
4 or more	118	20.52	87	20.52	61	24.90
Grades on Last Report Card*						
Straight A's	81	14.44	47	11.22	19	7.92
Mostly A's and B's	216	38.50	160	38.19	94	39.17
Mostly B's and C's	166	29.59	127	30.31	64	26.67
Mostly C's and D's	51	9.09	53	12.65	31	12.92
Mostly D's and F's	23	4.10	19	4.53	19	7.92
No Letter Grades	24	4.28	13	3.10	13	5.42

Table 3.5: Child Well-Being by Who Closed the Case, continued

	Self (Voluntary)		Families First - Income		Families First - Other	
	Number	%	Number	%	Number	%
Ever Held Back						
Yes	180	31.09	112	26.42	90	35.71
No	399	68.91	312	73.58	162	64.29
Been Suspended/Expelled?*						
Yes	45	7.79	44	10.33	30	11.90
No	533	92.21	382	89.67	222	88.10
Expected to Graduate from High School						
Yes	103	91.15	78	86.67	40	78.43
No	8	7.08	8	8.89	8	15.69
Already Graduated	0	0.00	1	1.11	0	0.00
Don't Know	2	1.77	3	3.33	3	5.88
Expected to attend college*						
Yes	80	70.80	58	64.44	30	58.82
No	23	20.35	12	13.33	14	27.45
Don't Know	10	8.85	20	22.22	7	13.73
Mental Limitation						
Yes	96	16.70	77	18.12	50	20.16
No	479	83.30	348	81.88	198	79.84
Physical Limitation						
Yes	155	13.83	99	13.31	76	15.77
No	966	86.17	645	86.69	406	84.23
Participate in Sports						
Yes	249	36.94	184	38.02	88	30.34
No	425	63.06	300	61.98	202	69.66
Take Lessons						
Yes	382	56.85	261	54.26	160	55.17
No	290	43.15	220	45.74	130	44.83
Participate in Clubs						
Yes	232	34.37	147	30.37	108	37.11
No	443	65.63	337	69.63	183	62.89

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.6: Child Well-Being by Duration of Cash Assistance

	At least 3 years since 1996		Less than 3 years since 1996	
	Number	%	Number	%
Child's Heath Rating				
Poor	24	1.41	27	1.18
Fair	148	8.71	205	8.97
Good	482	28.35	616	26.95
Very Good	482	28.35	614	26.86
Excellent	564	33.18	824	36.05
Child's Dentist visits**				
0	652	38.51	1,131	49.67
1	563	33.25	709	31.14
2	314	18.55	269	11.81
3 or more	164	9.69	168	7.38
Child's Doctor Visits**				
0	273	16.28	302	13.46
1	544	32.44	590	26.30
2	375	22.36	548	24.43
3 or more	485	28.92	803	35.80
Up to date on shots				
Yes	447	94.11	960	95.81
No	28	5.89	42	4.19
Sick days				
0	362	33.80	386	35.77
1	136	12.70	165	15.29
2	181	16.90	163	15.11
3	134	12.51	125	11.58
4 or more	258	24.09	240	22.24
Grades on last report card**				
Straight A's	112	10.52	137	12.88
Mostly A's and B's	379	35.59	419	39.38
Mostly B's and C's	323	30.33	289	27.16
Mostly C's and D's	145	13.62	125	11.75
Mostly D's and F's	72	6.76	51	4.79
No letter grades	34	3.19	43	4.04

Table 3.6: Child Well-Being by Duration of Cash Assistance, continued

	At least 3 years since 1996		Less than 3 years since 1996	
	Number %		Number	%
Ever been held back**				
Yes	392	36.16	312	28.62
No	692	63.84	778	71.38
Been suspended/expelled?**				
Yes	142	13.05	94	8.65
No	946	86.95	993	91.35
Expected to graduate from high school				
Yes	202	84.52	194	87.00
No	25	10.46	20	8.97
Already Graduated	1	0.42	1	0.45
Don't Know	11	4.60	8	3.59
Expected to attend college				
Yes	143	59.83	144	64.57
No	53	22.18	45	20.18
Don't Know	43	17.99	34	15.25
Mental Limitation				
Yes	229	21.26	211	19.57
No	848	78.74	867	80.43
Physical Limitation				
Yes	254	15.07	321	14.12
No	1,431	84.93	1,953	85.88
Participate in Sports				
Yes	396	32.41	432	33.83
No	826	67.59	845	66.17
Take Lessons				
Yes	675	55.79	677	53.27
No	535	44.21	594	46.73
Participate in Clubs				
Yes	366	29.90	405	31.74
No	858	70.10	871	68.26

Notes.

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.7: Child Well-Being by Total Household Income

	Less than \$500/month		More than \$500/month	
	Number	%	Number	%
Child's Health Rating*				
Poor	20	1.08	32	1.44
Fair	150	8.13	207	9.30
Good	497	26.95	615	27.62
Very Good	500	27.11	643	28.87
Excellent	677	36.71	730	32.78
Dentist Visits*				
0	858	46.71	962	43.41
1	562	30.59	748	33.75
2	252	13.72	342	15.43
3 or more	165	8.98	164	7.40
Doctor Visits*				
0	291	16.14	299	13.57
1	503	27.90	659	29.91
2	428	23.74	515	23.38
3 or more	581	32.22	730	33.14
Up to Date on Shots				
Yes	710	95.05	717	95.47
No	37	4.95	34	4.53
Sick Days				
0	318	34.64	448	34.78
1	117	12.75	195	15.14
2	161	17.54	191	14.83
3	108	11.76	156	12.11
4 or more	214	23.31	298	23.14
Grades on last report card				
Straight A's	99	10.87	158	12.41
Mostly A's and B's	335	36.77	485	38.10
Mostly B's and C's	262	28.76	362	28.44
Mostly C's and D's	125	13.72	153	12.02
Mostly D's and F's	59	6.48	66	5.18
No Letter Grades	31	3.40	49	3.85

Table 3.7: Child Well-Being by Total Household Income, continued

	Less than \$500/month		More than \$500/month	
	Number	%	Number	%
		_		
Ever Held Back				
Yes	316	33.87	408	31.43
No	617	66.13	890	68.57
Been Expelled/Suspended?				
Yes	100	10.74	138	10.61
No	831	89.26	1,163	89.39
Expected to Graduate from High School				
Yes	157	83.96	248	87.02
No	21	11.23	23	8.07
Already Graduated	0	0.00	2	0.70
Don't Know	9	4.81	12	4.21
Expected to attend college				
Yes	111	59.36	184	64.56
No	46	24.60	53	18.60
Don't Know	30	16.04	48	16.84
Mental Limitation*				
Yes	172	18.78	284	21.91
No	744	81.22	1,012	78.09
Physical Limitation				
Yes	253	13.86	337	15.19
No	1,572	86.14	1,882	84.81
Participate in Sports				
Yes	352	32.26	499	33.90
No	739	67.74	973	66.10
Take Lessons				
Yes	576	53.19	817	55.96
No	507	46.81	643	44.04
Participate in Clubs**				
Yes	310	28.39	471	32.00
No	782	71.61	1,001	68.00

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

Table 3.8: Child Well-Being by Child's Age

	Age 4 or younger		Age 5 to age 11		Age 11 or older	
	Number	%	Number	%	Number	%
Child's Health Rating**						
Poor	24	1.58	16	1.01	12	1.18
Fair	115	7.58	124	7.86	123	12.12
Good	350	23.07	416	26.38	359	35.37
Very Good	418	27.55	473	29.99	258	25.42
Excellent	610	40.21	548	34.75	263	25.91
Dentist Visits**						
0	1,084	71.69	451	28.71	304	30.19
1	320	21.16	628	39.97	371	36.84
2	82	5.42	331	21.07	184	18.27
3 or more	26	1.72	161	10.25	148	14.70
Doctor Visits**						
0	151	10.13	264	16.94	181	18.19
1	354	23.76	484	31.07	332	33.37
2	361	24.23	380	24.39	212	21.31
3 or more	624	41.87	430	27.60	270	27.14
Sick Days**						
0			447	36.25	326	32.86
1			200	16.22	112	11.29
2			199	16.14	157	15.83
3			153	12.41	115	11.59
4 or more			234	18.98	282	28.43
Grades on last report card**						
Straight A's			199	16.32	61	6.20
Mostly A's and B's			469	38.47	356	36.18
Mostly B's and C's			306	25.10	323	32.83
Mostly C's and D's			120	9.84	161	16.36
Mostly D's and F's			50	4.10	76	7.72
No Letter Grades			75	6.15	7	0.71

Table 3.8: Child Well-Being by Child's Age, continued

	Age 4 or younger		Age 5 to age 11		Age 11 or older	
	Number	%	Number	%	Number	%
Ever Held Back**						
Yes			295	23.77	436	43.17
No			946	76.23	574	56.83
Been Expelled/Suspended?**						
Yes			66	5.32	174	17.21
No			1,175	94.68	837	82.79
Mental Limitation**						
Yes			219	17.78	240	24.00
No			1,013	82.22	760	76.00
Physical Limitation**						
Yes	186	12.34	224	14.28	186	18.49
No	1,321	87.66	1,345	85.72	820	81.51
Participate in Sports**						
Yes			482	30.60	378	37.39
No			1,093	69.40	633	62.61
Take Lessons**						
Yes			807	51.43	596	59.78
No			762	48.57	401	40.22
Participate in Clubs**						
Yes			458	29.08	331	32.71
No			1,117	70.92	681	67.29

^{**} and * denote differences that are statistically significant at the 5 percent and 10 percent levels, respectively. Sample sizes differ by category and are available upon request.

4. Conclusion

Overall, the evidence from Wave 3 of the FALS suggests that children on welfare have experienced few strong adverse effects from the reduction in welfare benefits of welfare reform. Children whose families were no longer receiving cash assistance at the time of the survey were doing roughly as well as children whose families were not receiving cash assistance. While sample sizes were very small, children whose families had reached a time limit were doing approximately as well as children whose families stopped receiving cash assistance for other reasons.

Children whose caretaker was employed were doing as well as or better than other children by every measure, and children whose caretakers were required to participate in work-related activities were doing better by nearly every measure than children whose caretakers were exempt from work requirements. Children in families that voluntarily stopped cash assistance were doing the best overall, though not by every measure. By almost all measures, children who had been on cash assistance for less than three years since 1996 were doing better than children who have been on cash assistance longer. Interestingly, by many health-related measures, children whose families had incomes under \$500 a month were doing as well as children with higher family incomes.

None of these results point to a particular area of Families First policy that could be changed to enhance child well-being. That said, the statistical analysis in this report is simple and preliminary in nature. Additional research is warranted to more explicitly determine the various determinants of child well-being in a multivariate context. Nonetheless, the prevailing theme from this report is that the well-being of children in current and former Families First households is reasonably good.

References

- Barbour, Karie, Donald Bruce, and Angela Thacker. 2003. *Welfare Children in Tennessee: Who Are They and How Are They Doing?* Knoxville: University of Tennessee Center for Business and Economic Research. (Full report available at http://cber.bus.utk.edu/welfare.htm.)
- Gonzales, Stephanie. 2003. "Methodology of Round III Longitudinal Survey." Knoxville: University of Tennessee Social Work Office of Research and Public Service.
- Greene, Jay P., and Greg Forster. 2003. "Public High School Graduation and College Readiness Rates in the United States." Education Working Paper No. 3, Manhattan Institute for Policy Research. (Full report available at http://www.manhattan-institute.org/ewp_03.pdf.)
- Hovey, Kendra A. and Harold A. Hovey. CQ's State Fact Finder 2001. Washington, DC: CQ Press, 2001.
- *Kids Count: The State of the Child in Tennessee.* 2002. Nashville: Tennessee Commission on Children and Youth. (Full report available at http://www.state.tn.us/tccy/kc02.pdf.)

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