

Why Policies Meant to Discourage Poor Women from Having Children are Ineffective and Punitive

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Over two decades have gone by since Congress enacted the 1996 Personal Responsibility and Work Opportunity Reconciliation Act intended to reform the United States welfare system. With tenets that endure to this day, this act imposed lifetime limits and stringent work requirements on recipients of Temporary Assistance to Needy Families (TANF). In some states, controversial family-cap provisions also sought to discourage poor women from childbearing by refusing to give additional cash assistance for a newborn child – a dramatic departure from historical criteria in U.S. welfare programs. But after early debates, the ensuing decades have seen very little discussion of the ineffectiveness and injustice of such provisions.

We conducted key-informant interviews with officials from all 24 states with family caps in their welfare programs, to learn more about the policy's status and implementation and about opinions regarding its effectiveness, advantages, and disadvantages. The results from our interviews suggest that this provision of welfare reform has been more symbolic and punitive than substantive. We have empirical findings about how states have informed clients of this provision, as well as about their limited efforts to support pregnancy prevention and collect data to enable relevant policy evaluations. We have also learned that, despite little proof of effectiveness, states have gone to considerable lengths to extend the "reach" of family caps in their welfare programs.

Little Evidence that Family Caps Work

Twenty-four states implemented a family-cap policy in the early years of post-1996 welfare reform. Few states bothered to evaluate these policies, but findings from almost all large-scale analyses assessing the impact of these family caps indicate they have had no effect on child bearing – that is, there was no demonstrable decline in births among women receiving welfare. The first family-cap evaluations were conducted in New Jersey and Arkansas, two states that implemented a family-cap policy in the early 1990s, prior to the 1996 legislation. The evaluations found no difference in births among those subject and not subject to the family-cap; but a significant increase in abortions was reported in New Jersey. Several other studies were carried out using data from the early 1990s through the mid-2000s to compare fertility-related behaviors among women in states with and without the family-cap policy. Most failed to find that these caps had the desired effect of discouraging births among aid recipients.

State Welfare Agency Officials Reveal On-the-Ground Realities

In our interviews, we collected information regarding experiences with and evaluations of family caps, in order to better understand implementation across the states. Most welfare administrators told us that the administrative burdens and negative economic impacts on poor families outweighed any potential benefits. Some states implemented related policies that further undermined family wellbeing or refused to adopt policies that would extend Medicaid coverage of family planning services. Family caps seemed to be maintained as a punitive social policy. Different states implemented and evaluated caps in various ways, and officials offered varying opinions as to their efficacy and purpose.

• Just three quarters of the states with caps reported that case workers told recipients about this policy. Eighteen provided written information (and 13 also offered verbal explanations). As one example, South Carolina said that family-cap information was not "routinely provided [to clients] as part of initial screening."

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- Most of the surveyed officials did not believe the policy reduced births to low-income mothers, but some said that the cap addressed public worries about people on welfare. In fact, a North Dakota official described the family cap as a "feel good policy [that] makes the State Legislature and general population feel that at least some attempt is being made to alter... participants' reproductive behaviors."
- An Alaska official candidly opined that the cap hinders "families from adequately providing for their child because [they] lack the funds that are needed."
- In the seven states whose officials indicated that evaluations had been conducted, respondents had little knowledge about what became of those findings. Notably, none of the 24 states had plans for future evaluation of the effectiveness of family caps.

Overdue Course Corrections

What should be done with a policy of dubious effectiveness still in force after two decades? We propose a series of steps to reconcile stated goals and actual implementation at the state level.

- States should discontinue the objectionable practices of garnishing child support payments made to "capped" children and applying the family cap to teen mothers who were previously in their mothers' capped household. Such steps hurt members of already impoverished families and in need of support.
- Welfare officials in states that do not have a Medicaid family planning waiver should advocate for it, given that the services it funds align with the goals of the family cap and help all poor women in the state better control their fertility.
- If states really want fewer births among recipients of TANF, they should better inform their clients of the policy and track whether women receiving cash assistance get access to contraception and other reproductive services, as well as have babies that do well by standard measures of infant wellbeing.

Unless the U.S. Congress decides to eliminate the state option to impose family caps, only states can make changes. Both national and state policymakers should take account of research on the ineffectiveness and adverse impact of these caps and either eliminate them or find ways to improve implementation. It makes no sense to simply continue the mistakes of the past.

Read more in Diana Romero and Madina Agénor, "Twenty Years post U.S. Welfare Reform and State Family Caps aka Child Exclusion: An Overdue Assessment." *Journal of Poverty and Social Justice* (online-first article, March 2018).

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