



# **HOW STATES AND COUNTIES HAVE RESPONDED TO THE FAMILY POLICY GOALS OF WELFARE REFORM**

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## Abstract

This report describes how 18 states and 26 counties within those states responded to the family policy provisions of the 1996 welfare law. The report also offers explanations for why state and local efforts to move clients from welfare to work were greater than efforts to promote marriage and prevent nonmarital births; why abstinence-based efforts to achieve lower rates of teen pregnancy overshadowed state and local efforts to achieve the other family policy goals of PRWORA; and why states and localities responded in limited and diverse ways to the family formation goals of the 1996 welfare reform law.

There are several reasons why state implementation was limited and diverse, including: 1) the heavy workload for the work requirements, time limits, and need to deal with child care and related work-facilitation needs; 2) the lack of requirements and incentives for family policy goals; 3) the lack of a consensus on how to carry out these purposes; 4) a lack of technology to accomplish these goals; 5) a lack of collaborative agents with the necessary “hard wiring” to carry out the family policy goals; and 6) the emotional and conflicted political setting for this part of the 1996 welfare reform agenda.

Several factors explain why teen pregnancy prevention received more attention — and more federal earmarked funds — than the other family policy goals of welfare reform: 1) goals were clearly stated; 2) incentives were built into the Personal Responsibility Act of 1996; 3) money was set aside for abstinence from sex until marriage programs; 4) language was inserted into the law that restricted the use of Section 510 Title V money to programs that did not mention family planning as a method of avoiding pregnancy; and 5) states had little flexibility when it came to using those federal funds. In contrast to the family formation policies of promoting marriage, encouraging responsible fatherhood, reducing nonmarital births, and strengthening two-parent families, the content of abstinence-only education programs was centrally directed and strictly controlled by Washington. The welfare reform law specified that an abstinence-only education or motivational program qualified for funding only if it met strict criteria.

Lessons drawn from a comparative analysis of data across 18 states includes:

- ❖ *Devolution represents a barrier to widespread family policy implementation.*
- ❖ *Efforts by the Bush Administration to encourage state activity, especially in the area of marriage promotion and family strengthening, are beginning to pay off.*
- ❖ *Active and sustained leadership by state and local actors is an important — perhaps essential — factor in the successful adoption and implementation of marriage promotion and family strengthening policies.*
- ❖ *State and local administrators want to know more about what does and does not work in promoting healthy marriages, strengthening families, discouraging nonmarital births, and preventing teen pregnancies before investing in new programs.*

## Introduction

The 1996 legislation authorizing welfare reform — the Personal Responsibility and Work Opportunity Reconciliation Act — strongly emphasizes the problem of poverty as the result of teen and out-of-wedlock pregnancy and single-parent families and cites numerous statistics to support this view.<sup>1</sup> The act maintains that the negative consequences of an out-of-wedlock birth on the mother, the child, the family, and society are well documented, and the statute’s preamble ends with the following declaration:

Therefore, in light of this demonstration of the crisis in our Nation, it is the sense of the Congress that prevention of out-of-wedlock pregnancy and reduction in out-of-wedlock birth are very important Government interests.

To address these interests, the legislation establishes four goals related to family functioning and pregnancy prevention:

1. Provide assistance to needy families so children may be cared for in their own homes or in the homes of relatives;
2. End the dependence of needy parents on government benefits by promoting job preparation, work, and marriage;
3. Prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies;
4. Encourage the formation and maintenance of two-parent families.<sup>2</sup>

The architects of the 1996 welfare reform proposed that state and local human services officials achieve these goals by promoting marriage and discouraging pregnancy and child bearing among single mothers, encouraging noncustodial parents to be more involved with their children, and offering incentives to two-parent families on welfare to stay together. To discourage pregnancy and births among adolescents, the law also required single teen mothers receiving welfare benefits to live in an adult-supervised setting and complete their high school education. Furthermore, the Personal Responsibility Act provided \$250 million in grant money over five years to reduce teen pregnancy rates through educational programs that stressed abstinence until marriage.

However, the implementation strategy for the two main sets of goals in the 1996 act (work goals and family policy goals) differs considerably. Whereas federal policymakers mandated work requirements and time limits for welfare recipients and imposed compulsory maintenance of effort (MOE) spending in this area,<sup>3</sup> these same lawmakers allowed state flexibility in the areas of marriage, two-parent families, and out-of-wedlock births. The law provided an annual financial “bonus” for states that reduced their illegitimacy rates without raising their abortion rates, but states were not required to devote TANF block grant funds in specific ways to fulfilling this purpose.

## ***Methodology***

To understand how states and localities have responded to the family policy provisions in the 1996 Personal Responsibility Act, and to explain variations in policies and program implementation on the part of states and counties, we studied 18 states and 26 counties within those states. We conducted this study using the field network approach, which collects data through structured field-reporting guides used by a network of field researchers who are experts in the policy area being studied.<sup>4</sup>

We developed a series of questions incorporated into a common report form that a network of 35 Rockefeller Institute field researchers used to collect data during the fall and winter of 2001. In addition, the authors interviewed key state officials in many of the 18 states in the sample, including advisers to governors on family policy and four state legislature leaders from both political parties.<sup>5</sup> The advantage of this state and local analysis using multiple data sources is that it captures state and local perspectives concerning events, processes and actors from informed sources. The field network approach can identify policy variations among states and localities and enables researchers to observe the character and extent of policy implementation.

## ***Organization of the Report***

The family policy goals of the 1996 law are divided into two broad categories in this report. The first category is “*family formation*” and includes programs to promote marriage, encourage responsible parenthood, reduce nonmarital births, and strengthen families. The second category is “*teen pregnancy prevention*,” which, in the context of welfare reform, is the use of federal funds to educate teens about the benefits of abstaining from sex until marriage.

There are several reasons for treating teen pregnancy prevention programs and programs to prevent nonmarital births separately. The first is that the target population for these two types of programs is different. Teen pregnancy prevention programs target teens who are mostly in school and not necessarily TANF clients; means tests are generally not applied when teens enroll in an abstinence-only education program. The second reason is that while the law highlights abstinence as the primary method of teen pregnancy prevention, what religious and social conservative members of Congress pressed for in the law was not a ban on sexual activity for unmarried TANF clients, but a policy to encourage pregnancy and childbearing within the context of marriage and a two-parent family. Programs to reduce the number of children born out of wedlock, such as family planning services provided by health departments and Planned Parenthood clinics, pre-date TANF and are directed at the general population, in terms of age and income.

This report also ranks sample states by level of implementation efforts, that is, the extent to which states actually implemented their family formation programs as defined whether states appropriated funds, expended substantial funds,<sup>6</sup> contracted with service providers, enrolled clients, and assessed the programs.

The report is divided into three parts: 1) central themes and summary of major findings; 2) field data; and 3) lessons learned. Part 1 briefly presents the main findings and Part 2 presents data from the field network. It groups the state and county responses to the family policy goals into four cate-

gories: 1) hortatory responses; 2) institutional responses; 3) educational responses; and 4) income-based incentives.<sup>7</sup> It assesses the degree to which the 1996 act encouraged new initiatives and deals with level of implementation efforts in the areas of family formation and teen pregnancy prevention. It also explains why, although to a lesser degree in the case of teen pregnancy prevention, implementation has been not only diverse but also limited.

Part 3 of the report draws on our comparative analysis to feature four lessons that can be applied when policymakers make decisions about family policy design and implementation in the future and specifies the conditions that favor successful state and local program implementation.

## **Part 1. Central Themes and Summary of Major Findings**

**T**hree central themes capture the major findings of this report:

- ❖ ***Work trumps family formation and pregnancy prevention.*** State and local efforts to promote marriage and reduce nonmarital births among the TANF-eligible population pale in comparison to their much stronger and much more consistent responses to the work-related goals of the Personal Responsibility Act of 1996. In all 18 sample states the implementation of the nonwork related goals has been limited when compared to efforts to increase work participation rates.
- ❖ ***In general, the teen pregnancy prevention goal received more attention than the other family formation goals of the 1996 national welfare reform act.*** Although there is a variation in the amount of direct service that states offer, between fiscal years 1998 and 2002 all 18 states in the sample responded to the teen pregnancy prevention goals of the welfare reform law mainly by applying for and using federal grants-in-aid earmarked for abstinence-only education programs for teenagers. States also used other available federal aid to lower teen pregnancy rates by providing traditional family planning services. State and local efforts to promote marriage, encourage responsible fatherhood, reduce nonmarital births among the 20-and-over adult TANF enrollees, and maintain and strengthen two-parent families were not as strong or consistent as the teen pregnancy prevention goals.
- ❖ ***States and localities responded in limited and diverse ways to the family formation and teen pregnancy goals of PRWORA.*** Responses to the family formation goals were limited and diverse for several reasons including: 1) the heavy workload for the work requirements, time limits, and need to deal with child care and related work-facilitation needs; 2) the lack of strong requirements and incentives for the family policy goals; 3) the lack of a consensus on what to do to carry out these purposes; 4) the lack of technology about how to accomplish these goals; 5) the need for agents as collaborators who have the necessary “hard wiring” to carry out these family policy goals; and 6) very importantly, the emotional and conflicted political setting for this part of the 1996 welfare reform agenda.

Within these limits, teen pregnancy prevention has been given more attention — and more federal earmarked funds — than the other family policy goals of welfare reform for these reasons: 1) goals were clearly stated; 2) incentives were built into the Personal Responsibility Act of 1996;

3) money was set aside for abstinence from sex until marriage programs; and 4) language was inserted into the law that restricted the use of Section 510 Title V money to programs that did not mention family planning as a method of avoiding pregnancy; and 5) states had little flexibility when it came to using those federal funds. In contrast to the family formation policies of promoting marriage, encouraging responsible fatherhood, reducing nonmarital births, and strengthen two-parent families, the content of abstinence-only education programs was centrally directed and strictly controlled by Washington. The welfare reform law specified that an abstinence-only education or motivational program qualified for funding only if it met strict criteria. Advocates of family formation goals did not press to include similarly strong provisions in the 1996 Personal Responsibility Act with separate funding for family formation.

Our research and other studies show that a number of states have recently been stepping up their efforts in the family formation policy domain, prompted in part by the George W. Bush administration.<sup>8</sup> During his first year on the job, Wade Horn, the Assistant Secretary at the Administration for Children and Families (ACF), organized regional conferences throughout the country to highlight the importance of successfully implementing the marriage and family strengthening goals of the new welfare. ACF also made an effort to activate regional officials to highlight these goals.

The most extensive state- or county-run family formation programs were concentrated in one-third of the sample states (Arizona, New Jersey, Ohio, Oklahoma, Tennessee, and Utah). With few exceptions, the programs in even these active states were at an early stage in the period of field observations for this study. Programs tended to vary locally, with some counties in a state pursuing a variety of approaches and other counties doing little.

Several barriers impeded implementation of the family policy provisions of welfare reform. First, because of the sensitive nature of marriage, sexuality, and childbearing, many government employees were uncomfortable attempting to influence personal behavior and provide services in this “zone of privacy.” Officials responsible for implementing marriage-strengthening programs and reducing out-of-wedlock births — especially workers on the front lines — devoted most of their efforts to moving welfare recipients into the workforce. Second, the fact that state and local policymakers knew little about what works and what doesn’t work in these two policy areas hampered implementation. Related to these two barriers is the fact that in some cases state and local political leaders and officials viewed efforts to influence family formation and out-of-wedlock childbearing as a political “hot potato.”

The lack of specification in regard to these family policy goals and the means to achieve them offered a fertile field for flexibility. The field data show that the devolution to states inherent in the block grant created opportunities for innovation, although at the same time has produced difficulties in identifying and characterizing state and local activities underway and generally learning from state and county experience.

## Part 2. Field Data

### *Patterns of Responses and Implementation Efforts*

The description of state and county responses to the family formation and teen pregnancy prevention goals of PRWORA is organized along two dimensions, 1) patterns of responses and 2) implementation efforts. As stated above, this report treats the two areas of family formation and the pregnancy prevention goals separately. For each of these areas, two questions guided data analysis:

1. What patterns of responses to the family formation and teen pregnancy prevention goals of the Personal Responsibility Act exist? Are these responses varied within or across the states and to what degree did the 1996 Act encourage new policy initiatives?
2. To what extent have states implemented family-formation and teen pregnancy-prevention programs? Have they: 1) appropriated and spent substantial amounts of money; 2) contracted with service providers; 4) enrolled clients; and 5) assessed program outputs and outcomes?

To answer these questions, information concerning state and county family formation and teen pregnancy prevention policies and programs was gathered using the Field Network Evaluation Methodology. A network of field researchers used a common report form to collect data about programs, implementation arrangements and processes, and the political and economic environment to develop an inventory of policies and activities for the sample states. This was achieved by interviewing program administrators and managers, by direct observations in the field, and by analyzing documentary research.

### *Patterns of Responses: Family Formation*

States in this study adopted a variety of responses using TANF or MOE funds to promote and support marriage and two-parent families, encourage responsible fatherhood, and reduce the incidence of out-of-wedlock births. These responses were grouped into four categories, each designed to change attitudes and/or behavior of target group members, including single mothers in the TANF program, noncustodial fathers, and cohabitating couples. The categories are: (1) hortatory responses; (2) institutional responses; (3) educational responses; and (4) income based responses. The categories do not include either state policy to make divorce more difficult or state tax policies, which can create marriage penalties or bonuses, because they were not policy and program responses to the 1996 act and they apply to the population of the state as a whole.

### *Hortatory Responses*

Hortatory responses were used by states to affect beliefs and values. In the case of family formation, this involves the use of speeches or addresses by governors or other leaders, official proclamations, and public awareness campaigns to draw attention to the need to reduce the number of out-of-wedlock births by preventing pregnancies or promote responsible fatherhood. As Table 1 shows, governors in five states (Kansas, Mississippi, Missouri, Oklahoma, and Utah) used their Inaugural or

State of the State Addresses to promote the family policy agenda. Arizona and Colorado launched public awareness campaigns.

**Table 1. Hortatory Approaches to Achieve Family Formation Goals by State<sup>1</sup>**

Arizona	<i>Fatherhood Can be Child's Play</i> public awareness campaign; Statewide pregnancy prevention media campaign
Colorado	Governor's Political Support for a 2002 Marriage Strengthening Conference; <i>Be a Fan of Your Kid</i> public awareness program
Florida	Statewide pregnancy prevention media campaign
Kansas	Governor's 2001 State of the State Address; statewide pregnancy prevention media campaign
Mississippi	Governor's 2001 State of the State Address; statewide pregnancy prevention media campaign
Missouri	Governor's 2001 State of the State Address
New Jersey	Statewide pregnancy prevention media campaign
New York	OCSE media campaign with the New York Giants
Ohio	Statewide pregnancy prevention media campaign
Oklahoma	Governor's Inaugural and State of the State Addresses; Statewide pregnancy prevention media campaign
Oregon	Statewide pregnancy prevention media campaign
Tennessee	Statewide pregnancy prevention media campaign
Texas	Governor's Right Choices Youth Conference
Utah	Governor's and First Lady's Marriage and Engaged Couples Education Initiative in conjunction with the Governor's Initiative on Families Today
Washington	Statewide pregnancy prevention media campaign and toll free information hotline sponsored by MAA/DSHS, DOH and OSPI
West Virginia	Statewide pregnancy prevention media campaign
Wisconsin	Statewide pregnancy prevention media campaign
<p><sup>1</sup> We would like to thank Catherine Lawrence for her suggestions about a model how to present the data — a model that we have followed in this and the following tables.</p>	

Political leaders often used dramatic language to promote the family policy goals in their states. Republican Governor Frank Keating of Oklahoma used his inaugural and State of the State addresses to propose the Oklahoma Marriage Initiative, a prescription related to the state's economic problems that emphasized family formation and family well-being. Arguing that

out-of-wedlock childbearing is “immoral,” and that “there is something wrong with a good people in a good society when it is easier to get a marriage license than it is to get a hunting license,” he established a goal of reducing the state’s divorce and out-of-wedlock birth rates by one-third by 2010.<sup>9</sup> Until early 2002 Colorado did little to promote marriage and reduce out-of-wedlock and teen childbearing. Since then, Republican Governor Bill Owens has taken a strong and active role in promoting the Bush administration’s marriage-promotion agenda

### *Institutional Responses*

Institutional responses included building coalitions and using advisory groups or task forces for the purpose of coordinating policies and programs aimed at promoting marriage, strengthening families, or preventing nonmarital births. These types of institutional responses are designed to increase the capacity of government to identify problems, gather information, and allocate resources to enable individuals, groups, or agencies to make decisions or carry out activities. Both states and counties used this approach as a result of top-down policy decisions by legislatures and the executive as well as bottom-up efforts in communities.

Coalitions of stakeholders, formal commissions, task forces, and advisory groups have the potential to avoid or manage political conflict, develop and leverage resources, identify or create policy innovations, and practice oversight. These activities are particularly important for family formation because familial relationships tend to be seen as private, and government activity to address family formation is new. Coalition building can foster understanding and compromise around sensitive issues. However, making coalitions work is often difficult.

Thirteen of the sample states adopted state-level coalition building or advisory groups to address the marriage promotion and family strengthening goals of the 1996 act (see Table 2). Two of the most widely publicized cases were “The Governor’s Commission on Marriage and Engaged Couples Education” in Utah and “The Marriage and Communication Skills Commission” in Arizona.

In 1998, Utah governor Mike Leavitt created the Governor’s Commission on Marriage and Engaged Couples Education, which is part of the Governor’s Initiative on Families Today (GIFT).<sup>10</sup> It is an outgrowth of welfare reform but operated independently of the state’s TANF program. The commission’s charge is to “focus attention on strengthening marriages in Utah” and to gather information and study the best marriage-strengthening practices in the country. The goal is to “foster a climate that nurtures and enhances healthy, positive, caring, family interaction.” Through this effort, the state purchased educational tapes on marriage-related issues that were distributed at county clerks’ offices to couples applying for marriage licenses. The commission also promoted marriage by supporting the state’s “fragile families” pilot program, providing vouchers for counseling and mediation services as well as marriage-related workshops and conferences, and coordinating with home visitation programs that provide training to members of faith-based organizations as well as agricultural extension services and continuing education staff. The commission sponsored frequent statewide and regional conferences on marriage and family well being. The commission also sought to build a broad coalition of stakeholders from various sectors.

**Table 2. Capacity-Building Approaches to Achieve Family Formation Goals by State**

Arizona	Marriage and Communication Skills Commission; Child Support Coordinating Council
Colorado	Steering Committee for Statewide Family Strengthening Initiative
Florida	Commission on Responsible Fatherhood
Mississippi	Mississippi Responsible Fatherhood Summit; Domestic Violence Task Force
Missouri	Governor’s Summit on Responsible Fatherhood
New Jersey	School Based Youth Services Task Force; N.J. Council on Pregnancy Prevention
Ohio	Ohio Family and Children First Cabinet Council
Oklahoma	Oklahoma Marriage Initiative
Oregon	Coalition building and commission on pregnancy prevention
Tennessee	Out-of-Wedlock Birth Task Force
Texas	Family Planning Advisory Committee
Utah	Governor’s Commission on Marriage and Engaged Couples Education; FACT Local Interagency Outreach Services
West Virginia	Coalition building and commission on pregnancy prevention

In collaboration with the Department of Workforce Services, which administers the state’s TANF program, and the Utah State University Agricultural Extension, a website was created to provide information about marriage and family life.<sup>11</sup> An impressive array of papers, reports, and articles by experts were made available on a range of topics related to marriage and family life.

In 1999, under the leadership of Republican State Representative Mark Anderson, the Arizona legislature created a Marriage and Communication Skills Commission comprised of two state senators, two state representatives that included Anderson, a representative of the governor’s office, a specialist in family law, a specialist in family counseling, and a media representative. The Commission relied on community-based organizations offering marriage and communication skills courses to promote the value of marriage and encourage couples to get and stay married.

The Commission ran into trouble in May of 2001, when budget cuts, changing priorities, and questions about the efficacy of its programs caused Republican Governor Jane Hull to veto funding for the commission. Hull also terminated a related family-promotion initiative, the Young Fathers Program, citing low enrollment and questions about whether the program was an effective use of TANF funds.

Other states formed commissions to help pave the way for family formation programs. Five states formed coalitions to address the crisis of rising out-of-wedlock birth rates. These coalitions include representatives of government agencies, community-based, nonprofit advocacy groups, faith-based groups, human service professionals, and leaders in business and law.

Tennessee, for example, used a task force of state agencies as a strategy to work towards the goal of reducing out-of-wedlock births for recipient mothers of all ages where \$300,000 in TANF funds was allocated in grants to counties to form coalitions of local agencies and churches. Counties with the highest number of out-of-wedlock births were targeted. The state task force made some 40 awards that supported mostly promotional activities including billboards, surveys, speakers' groups, and informational material. The target group was 18-24-year-olds who, in Tennessee, had the highest out-of-wedlock birth rates.

In sum, the primary purposes of institutional responses to build capacity are to inform and influence behavior through the dissemination of videos, conferences, web-based resources, and coalition-building. It is not possible to know whether the message about the importance of healthy marriage and family itself is getting through. By relying heavily or exclusively on this approach, the states bypassed the "hardwiring" of their message that might have stronger and more demonstrable effects in assuring that the goals sought are being successfully achieved.

### *Educational Responses*

Educational responses include classroom teaching, media campaigns, and mentoring programs. In the case of family formation, the aim of educational responses to the 1996 act is to teach various skill sets to couples, single adults engaged to be married, and teen parents. Table 3 shows that media campaigns were a common educational response to the goal of reducing nonmarital births: Two-thirds of the states chose such approaches. Six states in the sample — Arizona, Florida, Michigan, Oklahoma, Oregon, and Utah — implemented a relationship skills education program. Two states — Oklahoma and Utah — developed training programs for frontline workers and community leaders. These states also launched media campaigns to promote marriage and two-parent families.

Among state educational responses, the most advanced program in the country is Oklahoma's Marriage Initiative.<sup>12</sup> The Oklahoma Marriage Initiative (OMI) retained two nationally known experts, Les and Leslie Parrott, as scholars-in-residence at Oklahoma State University to teach and disseminate information about marriage. The Parrotts developed a Relationships 101 course at OSU and offered seminars on college campuses across the state. They wrote a weekly column distributed through the Oklahoma Press Association. The Oklahoma Marriage Initiative also published a book on relationship skills, which was distributed across the state to marriage license applicants.<sup>13</sup>

In addition, Oklahoma is the only state to use Prevention and Relationship Enhancement Program (PREP), an educational program used by the U.S. military to strengthen marriage.<sup>14</sup> Scott Stanley and Howard Markman, psychologists at the University of Denver, developed PREP based on research identifying risk factors that can lead to divorce as well as factors that strengthen marital relationships. PREP staff members train individuals to be instructors for a one-day or multiple workshops for married couples and couples planning to be married.

**Table 3. Educational Approaches to Achieve Family Formation Goals by State<sup>1</sup>**

Arizona	Marriage and relationship skills training course to couples about to get married or already married; marriage manual
Florida	All high school seniors required to take a course on marriage and family
Michigan	Encouraging Family Formation (EFF) Pilot Program in five counties
Ohio	<i>Every Child Succeeds</i> program
Oklahoma	Relationship skills education, training programs for frontline workers and community leaders
Oregon	<i>Steps to Success</i> program to prevent second pregnancies; <i>Strengthening Families</i> pilot programs to teach relationship skills
Utah	Marriage Conference; Relationship skills education and training programs for community leaders; pilot projects for low-income families, newlyweds, second marriages, and cohabiting couples
1. With the exception of Colorado, all states in this study use TANF/MOE funds for family planning, which is part of the family formation policy domain. Seven states (Florida, New York, Oklahoma, Tennessee, Texas, Washington and West Virginia) target both teens and adults with their pregnancy prevention messages. The other ten states target only teens.	

Oklahoma is using TANF funds to train government workers, representatives from churches, and other individuals from the private sector to become PREP instructors. As of June 30, 2002, the state had trained 350 instructors in 57 of 77 counties. More than one-third of the instructors are government employees.<sup>15</sup> One-quarter represent religious communities, including pastors, priests, rabbis, and lay members. The remaining instructors are staff of community-based agencies, members of the military and Native American tribes, and mental health professionals. All individuals who receive the training pay \$375 and commit to offering six free workshops per year to Oklahoma citizens, and may charge a fee for additional workshops. Government employees must offer the workshops on their own time.

Convening workshops requires a significant commitment on the part of trainers, as they must recruit participants, arrange for the use of a facility, and facilitate six sessions. This appears to be a particular concern for public employees and mental health professionals in private practice, and has become a barrier to recruiting instructors. As of the writing of this report, administrators of the Oklahoma Marriage Initiative were exploring ways to overcome this barrier by identifying potential PREP instructors who can rely on their employers — including salaries, facilities, and support for OMI goals — to sustain their efforts. These requirements suggest that faith-based organizations may be best suited to convene PREP workshops.

A few Oklahoma Department of Human Services staff members have taken the PREP instructor training not to become workshop leaders but to understand the program since TANF caseworkers refer clients to the workshops. Staff members from the state's other two TANF partners, the Department of Health and Oklahoma State University's Extension Service, are more involved in

providing PREP workshops, as these agencies have historically focused on working with families and providing educational services.

As of June 30, 2002, 6,053 Oklahomans had participated in 137 PREP workshops; of those, 1,638 completed the six-week, 12-hour workshop. DHS administrators estimate that 20-25 percent of the enrollees are TANF clients,<sup>16</sup> although PREP instructors do not ask workshop participants whether they receive government assistance. Nonetheless, according to an administrator,

We are targeting low-income. In many of the classes that are developed, many of them are for just TANF clients because we have a program here called Special Projects where we've contracted with our career development centers, our junior college, where we've got TANF clients who specifically go into programs that are geared and tailored for their needs.

Stanley and Markman, as well as other social scientists, have evaluated the effectiveness of the PREP curriculum and published the results in peer-reviewed journals.<sup>17</sup> Most of these studies show significant differences between couples who have received PREP instruction and those who have received no premarital/marital education or who have participated in other marital training programs. According to this research, PREP couples communicate more positively, and these effects continue for at least five years. Participants also experience less negative interaction and are less likely to divorce up to five years after their training.<sup>18</sup> However, two studies found no differences between PREP-trained couples and control groups.<sup>19</sup>

As Stanley points out, these studies suffer from threats to internal validity that are very difficult to overcome.<sup>20</sup> None of the studies relied on true random assignment of couples to PREP and control groups, so selection effects are likely to influence differences measured across groups.<sup>21</sup> The programs studied also had differential attrition, with greater dropout rates among control group members possibly biasing the control group toward better outcomes. The former undermines the validity of the findings of positive effect, while the latter undermines findings of no effect.<sup>22</sup>

Michigan implemented a pilot program similar in purposes to PREP called Encouraging Family Formation (EFF). Like PREP, it offers training in relationship skills. The aim of the EFF program is to elevate the role of fathers in the life of a family when a child is born. Research shows that unmarried mothers and fathers are most likely to experience a close relationship during the "magic moment" after a birth. Another goal is to prevent nonmarital births where there is already a child out of wedlock. Like PREP, the program consists of six weekly two-hour workshops. In the fall of 2001, the state awarded up to \$250,000 in TANF money to each of five counties to implement the program. The state TANF agency defined general categories of required content but has allowed counties to design the curriculum so the program varies across the sites. According to Michigan Republican State Representative Doug Hart, the five counties served 1,004 single mothers, 207 couples, and 82 noncustodial fathers as of September 2002.

According to field research in Michigan, implementation of the EFF program has not gone smoothly, even in Genesee County where the Michigan Family Independence Agency director was personally involved. The EFF program there is mandatory for welfare recipients with children 7-12 weeks of age. The county provides daycare and transportation and offers incentives such as free car

seats and K-Mart gift certificates, with the amount of the latter rising with regular attendance and participation by both parents. However, caseworkers do not apply sanctions if clients do not attend, and the county reports low attendance.<sup>23</sup>

Educational responses by the states are not limited to classroom settings but also entail mentoring programs. Mentoring differs from programs like PREP and EFF in that there is no set curriculum or classroom instruction. As Table 4 shows, 14 of the 18 states in this research project adopted programs that mentor members of one or more of the groups identified in the Personal Responsibility Act at targeted for change in attitudes or behavior. Twelve of these 14 states — Arizona, Colorado, Florida, Michigan, Mississippi, New Jersey, Ohio, Oregon, Tennessee, Texas, West Virginia, and Wisconsin — had mentoring programs that targeted noncustodial fathers or fathers in fragile families. Seven states have or have had programs that are directed to low-income families.

**Table 4. Mentoring Approaches to Achieve Family Formation Goals by State**

Arizona	Young Fathers Networking and Work Group; Statewide <i>Family Builders</i> Program
Colorado	Colorado Fatherhood Connection; <i>Partners for Fragile Families</i> Initiative; Parent Opportunity Project
Florida	Parenting and child support payment for noncustodial fathers; second birth prevention program
Michigan	<i>Strong Families Safe Children</i> program
Mississippi	Family First Program
New Jersey	Operation Fatherhood
Ohio	Wellness block grants; <i>Help Me Grow</i> program; Parenting for noncustodial fathers; second birth prevention program
Oklahoma	TANF funds for family planning counseling/referral
Oregon	TANF funds for family planning counseling/referral; second birth prevention program
Tennessee	Responsible Fatherhood pilot program; <i>Parents' Fair Share</i> program for noncustodial fathers; second birth prevention program
Texas	Texas <i>Fragile Families Initiative</i>
Washington	Family Planning Services for TANF clients including counseling/referral; First Steps program; Take Charge demonstration program
West Virginia	TANF funds for family planning counseling/referral; second birth prevention program
Wisconsin	<i>Supporting Today's Parents</i> program; <i>The Children First</i> program

Field data on mentoring indicate that programs for noncustodial fathers have two main purposes. The first is to provide guidance to noncustodial fathers about how to improve relationship and parenting skills so that they will become more involved with and take more responsibility for their children. Half the states in the sample have mentoring programs to do that. The second purpose is to encourage noncustodial fathers to support their children financially by finding a job and making child support payments. Eight of the 18 sample states have such mentoring programs. Some state mentoring programs, including those in Arizona and Ohio for example, focus on improving the noncustodial parent's connection with his or her child. The majority of states with mentoring programs for noncustodial fathers stress both relationship and parenting skills as well as child support payment and work. A program typical of this kind of dual purpose is Tennessee's Parents' Fair Share program.

Tennessee's Families First legislation required the state to develop a Responsible Fatherhood pilot. The state contracted with Charles Ballard, Inc., an organization that works with noncustodial parents to help them assume financial and emotional support for their children. The pilot program operates through the Juvenile Court system in Memphis. The Parents' Fair Share initiative measures success by participation in child support and dollar increases in child support as well as the amount and quality of the father's involvement in a child's upbringing.

### *Income-based Incentives*

Income-based incentives were found in all the sample states. These financial rewards and penalties encourage marriage and preserve two-parent families or discourage births out of wedlock. Incentives include a \$100 cash bonus to married couples on TANF who live together (West Virginia), income disregards for a spouse who marries a person on TANF (Tennessee, New Jersey, and Oklahoma), and changes in policies to end financial penalties for two-parent families on TANF (Missouri). Most states have removed restrictions on benefits for two-parent as opposed to single-parent families, using income alone rather than family composition to determine benefits. Some states have increased earnings disregards for all TANF families, allowing them to keep more of their income from work without losing access to cash assistance and supplemental services that benefit two-parent families because they are likely to earn more if both parents are working.

At the time of our field research, many states were struggling with the federal requirement that 90 percent of two-parent families on the TANF rolls be in the workforce. The threat of sanctions for not attaining the 90 percent work participation requirement caused 13 of the states to set up a separate state-funded system for two-parent families, including Texas. According to the Texas field researchers,

The SFYs 2002-2003 state TANF plan originally indicated that the eligibility criteria are 'substantively identical' to the TANF except that the federal time limits do not apply and the first family vehicle is exempt up to \$15000 (compared to \$4650 in the regular TANF program). The feds subsequently denied the no time limits feature. While on the one hand this could as originally framed be seen as a family formation effort to support two-parent households outside of time-limited TANF, it is more so a response in Texas, like at least a dozen other states, to avoid possible federal sanctions for not meeting the 90 percent two-parent participation rate. Nevertheless, it did result in a family friendly feature. Under TANF rules, both parents were required to work 35 hours per week. Under the new state

**Table 5. Income-based Approaches to Achieve Family Formation Goals by State<sup>1</sup>**

Arizona	2-parent Employment Program cash assistance; TANF/MOE funds for vouchers for couples who cannot afford the fee so they can attend a marriage and communications skills course; family cap
Colorado	2-parent TANF 2/3 earnings disregards
Florida	2-parent TANF earnings disregards; TANF/MOE spending
Kansas	2-parent TANF eligibility or earnings disregards
Michigan	2-parent TANF \$200 earnings disregards, TANF/MOE spending on work-related activities of noncustodial parent and vouchers for car purchase and repair
Mississippi	TANF/MOE spending; family cap
Missouri	Cash bonus or higher benefits for married, ending financial penalties for two-parent families, two-parent TANF eligibility or earnings disregards, TANF/MOE spending
New Jersey	WFNJ Step Parent Provision; Cash bonus or higher benefits for married, ending financial penalties for two-parent families, two-parent TANF eligibility or earnings disregards, TANF/MOE spending; family cap
New York	2-parent TANF eligibility or earnings disregards
Ohio	2-parent TANF eligibility or earnings disregards, TANF/MOE spending
Oklahoma	Cash bonus or higher benefits for married, ending financial penalties for two-parent families, TANF/MOE spending
Oregon	Free condoms to prevent unwanted pregnancy
Tennessee	Bonus, in the form of a disregard for child support payments in arrears when parents marry; bonus, in the form of deferred payment of child support, if parents cohabit; family cap; program that allows families to access Family First benefits by not making them ineligible due to marriage
Texas	Only one parent required to work; earnings disregards
Utah	2-parent TANF eligibility or earnings disregards, TANF/MOE spending for vouchers for marriage counseling and scholarships to attend a marriage conference
Washington	TANF/MOE spending; family cap
West Virginia	Ending financial penalties for two-parent families, two-parent TANF eligibility or earnings disregards; Marriage incentive bonus in the form of \$100 in cash assistance for TANF recipients who marry
Wisconsin	Two-parent TANF eligibility; TANF/MOE spending
<p>1 Catherine Lawrence includes as an incentive the provision in ten states to allow stepparent families to retain 100 percent of the stepparent's earnings through either mandatory or optional exclusion of the stepparent from the assistant unit. See Catherine Lawrence, "Bearing Children, Forming Families: An Analysis of State Responses to the New Welfare Agenda," Table 3.5.</p>	

legislation, only one parent is required to work; liberals and conservatives agreed that this was the correct policy.

***Relationship to the 1996 Act — Encouraging Family Formation Initiatives***

Figure 1 divides the 18 sample states according to the number of program initiatives in the family policy domain to serve people eligible for TANF funded activities. We classify the states in three groups, high, moderate, and low, based on their number of initiatives.<sup>24</sup>

Arizona, New Jersey, Ohio, Oklahoma, Tennessee, and Utah had the most initiatives in responding to the family policy provisions of the 1996 statute. These six states adopted eight or more initiatives to strengthen marriage and two-parent families and prevent pregnancies. Colorado, Florida, Missis-

<b>Figure 1. Levels of Policy Initiatives in the Family Formation Policy Domain</b>		
<b><i>High</i></b> <b><i>8 to 10 initiatives</i></b>	<b><i>Moderate</i></b> <b><i>6 to 7 initiatives</i></b>	<b><i>Low</i></b> <b><i>less than 6 initiatives</i></b>
Arizona Florida New Jersey Ohio Oklahoma Tennessee Utah	Colorado Mississippi Missouri Oregon Washington West Virginia	Kansas Michigan New York Texas Wisconsin

issippi, Missouri, Oregon, Washington, and West Virginia are in the middle of the range; they are moderately high on our program innovativeness scale. Kansas, Michigan, New York, Texas, and Wisconsin are not particularly innovative, but they have devoted at least some attention to programs in the family formation policy area.

***Level of Implementation Effort: Family Formation***

Using the five indicators of implementation effort listed above (whether states appropriated funds, expended substantial funds, contracted with service providers, enrolled clients, and assessed the programs), we found that five of the 18 sample states — Arizona, Michigan, Oklahoma, Utah, and Tennessee — are well on their way in implementing family-formation programs. New Jersey, New York, Florida, West Virginia, Texas, Wisconsin, and Ohio rank in a middle group: all appropriated funds for marriage and responsible fatherhood initiatives, but only four of the seven (West Virginia, Texas, Ohio, and Wisconsin) spend significant amounts. The remaining states, which include Colorado, Kansas, Mississippi, Missouri, Oregon, and Washington, have not made much progress in implementing family-formation programs, at least in terms of the five criteria used to rank states here.

Even the high implementer states in our ranking above confront numerous barriers. According to one Oklahoma official, welfare clients attending the PREP classes often need incentives such as free childcare and transportation to attend, especially when a crisis is not imminent. Furthermore,

field data indicate that social stigma can also undermine interest in a program. A mother may think she is a bad parent if she attends a parenting class, or that she is in a bad marriage if she participates in a course on relationship skills.

Arizona's experiences illustrate additional barriers to implementation. The Arizona legislature created a Marriage and Communications Skills Commission and allocated \$1.65 million of TANF funds for programs to form and maintain two-parent families and promote marriage. The state used a competitive bid process to contract with nonprofit service providers, most of which are faith-based organizations, including Lutheran Social Services, Jewish Family and Children Services, Franklin Covey, the National Association for Marriage Enhancement with a Christian Focus, and Pairs, a national curriculum and education organization.

One Arizona legislator noted that implementation has been rocky, and that only 500 people have taken the courses, with some dropping out and others repeating the course. This state legislator reported that most people are unaware the program even exists and suggests one way to solve this problem is to provide incentives to contractors to market the program and themselves.

Oklahoma is the only state to initiate a coordinated statewide marriage-promotion effort. In March of 2000 Governor Keating set aside \$10 million (10 percent of the state's TANF surplus), to fund the Oklahoma Marriage Initiative (OMI). The resulting components of OMI are relatively comprehensive and include an internationally recognized relationship skills curriculum (PREP), a multifaceted public education effort, a focus on training frontline workers, and the active support of communities of faith. However, state officials and other leaders stressed that despite three years of sustained attention, the initiative is still in its early stages. The PREP curriculum has been used to train only a fraction of administrative and frontline workers and served only a few of its residents.

Public Strategies, a small Oklahoma public relations firm, won the contract to implement the OMI program. Margaret Butcher, director of the state TANF agency, said she did not have the staff to launch this new initiative, and the agency also "realized that this would be a delicate situation for some people within our state."

Indeed, as the OMI agenda developed in Oklahoma, it became clear that a primary barrier to implementation was suspicion and resistance on the part of local TANF and other program administrators and frontline workers. To address this obstacle, OMI organizers developed a three-tiered education and training process. The first tier was to provide information about OMI and research on marriage and family formation to agency and community leaders in the hope that they would recognize the appropriateness of marriage as a focus of public policy. According to an Oklahoma informant, one meeting for this group, held in September 2001, attracted 145 people from 40 counties.

Tier two involved educating frontline workers about OMI's goals, research on the importance of marriage, and the content and goals of the PREP curriculum. These sessions also included a presentation by the Oklahoma Coalition Against Domestic Violence and Sexual Assault. This group, along with many program administrators and frontline workers, was initially uncomfortable with OMI's goals because they feared that preserving marriage might become more important than ensuring women's safety. Once OMI's addressed these concerns about domestic violence in its educational efforts, the group supported the initiative.

Some 483 people representing 65 counties participated in five tier-two training sessions between August 2001 and June 30, 2002. Attendance initially was voluntary; later, the director of the Oklahoma Department of Health Services decided to make participation mandatory for at least one person from each county-level TANF agency.<sup>25</sup> Our interviews indicate that these training sessions were effective in convincing attendees that OMI's goals and the PREP curriculum may help the populations with whom they work.

Once a critical mass of PREP instructors, administrators, and frontline workers in a county had been trained, a DHS program administrator organized meetings to build support to recruiting residents for the relationship skills education program. At the time of the field research, county-level implementation was at an early stage — only a small number of counties had convened OMI-related leadership teams. As in Michigan and Arizona, the program was having trouble convincing clients to attend PREP classes. One local program manager recalled that conveners were “lucky if five people came to a parenting class,” observing that low-income women often do not have the luxury of leisure time.

I'm a middle-income married parent of two children and my time is just booked. I mean, I am just really busy and I can only imagine what it must be like to have low resources and no spousal support or minimal spousal support and be able to get myself to a group-related type of a service, especially when you have to save your time and energy and resources to meet the crises that you have. And I think it's just really kind of hard sometimes to convince people of more the preventive value of some education services.<sup>26</sup>

Like other states, Oklahoma was reluctant at an early stage to conduct an outside assessment of its program. Current attention to a program assessment is characterized by Christine Johnson, a family sociologist at Oklahoma State University,

There's a plan to assess — and I'm going to use that term very loosely ... to assess the state-wide service delivery system. For example, we've discussed from day one that we need to keep track of how many people are trained in each of the counties to deliver this workshop. We want to know how many people are attending workshops. We want to know how many people start workshops and then don't finish. We want to know who's finishing workshops and how many people — that type of thing.<sup>27</sup>

Although the evaluator, Public Strategies, collected data on how many people were trained at the county level, the program does not routinely gather information on participation rates.

### ***Why the Diverse, Varied, and Generally Limited Responses to the Family Formation Goals of Welfare Reform?***

A core question addressed in this report is the variation among states in implementing family formation programs; why were state and local responses limited, highly diverse, and uneven, especially when compared to state and local responses to the work goals of the Personal Responsibility Act of 1996? We found seven contributing factors to state variation, described below with examples from the field data.

## 1. *States and Counties Emphasized the Work-Related Provisions of PRWORA*

Spurred by penalties if they did not reach mandated work participation rates, states deliberately chose to devote more attention to work-related goals and relatively less attention to family formation goals. Nationally, states spent only 3.7 percent of TANF dollars on family formation and pregnancy prevention in FY 2002.<sup>28</sup>

In Wisconsin, performance contracts between the state and counties did not incorporate the family formation goals of welfare reform. Contracts concentrated instead on the number of participants who found jobs and continued to hold them after 30 and 180 days, as well as welfare recidivism rates, moving-out-of-poverty indicators, and service to the broader working poor population.

Ohio held counties responsible for cutting caseloads and requiring a percentage of the TANF population to work. Even in Arizona the state field researchers reported that, “Although state officials and department administrators recognize the family-formation goals, these goals are not currently the first priority in Arizona.” In Missouri, meeting the family-formation goals was a far less important objective than providing health care to the state’s uninsured children and helping adults transition from welfare to work. The Missouri Division of Social Services’ efforts to establish paternity under the Parents’ Fair Share program were directed not so much at family formation but at requiring fathers to provide economic support to their children.

Messages from state administrators regarding priorities under the Personal Responsibility Act — and thus the missions of local offices — have changed little since 1996. In West Virginia, given an opportunity to revisit state legislation to ensure that it conformed to the 1996 welfare reform law, the state legislature toughened work requirements and limited work exemptions but did not reinforce its family-values message. In Colorado, the governor’s office, the state legislature, and the Office of Self-Sufficiency all maintained a work focus until the political climate changed in January 2002. According to the ColoradoWorks director, the state had “a lot of catching up to do” in strengthening families and promoting marriage. However, the director maintained that the state was fulfilling its leadership role when it “passes rules and regulations, sends agency letters, and provides training and technical assistance.” In New Jersey, local officials maintained that the state did not push family formation programs or offer incentives that would make them attractive, and only a few counties have shown interest in pursuing such programs.

Indeed, states’ emphasis on work reflected the priorities of DHHS-ACF, the federal agency responsible for promoting the family formation and teen pregnancy prevention agenda. In its *FY 2003 Performance Plan*, ACF lays out how it intends to fulfill its primary strategic goal — to “increase economic independence and productivity for families”—and all strategies relate to work. In its plan, ACF also cited establishing paternity and boosting parental responsibility through state child support enforcement programs. The plan, however, did not stress promoting marriage, strengthening two-parent families, reducing out-of-wedlock births, and preventing teen pregnancy as the keys to stronger families.<sup>29</sup>

Like their state counterparts, county administrators reported that work trumps the formation and maintenance of two-parent families. In New York State, administrators in Albany County told field researchers they did not feel pressured by state government to promote marital and reproduc-

tive goals. Field data note that “with minimal state-level commitment, at best, to family formation goals, it is not surprising that these goals have very low salience in Albany County.” An administrator of Catholic Family Center in Monroe County, New York, an agency that operates welfare-to-work programs with \$400,000 in TANF funds from the New York Department of Labor, noted that family-formation goals and values have never appeared in any state contract.

The consensus among program operators in many states was that one of the most effective ways to strengthen families was to help TANF clients find good jobs. According to Ohio field data, “The best thing to promote stable families is to provide training and jobs. We have enough other priorities that we feel that if we can address the individual barriers to work and provide assistance programs that help people become stable, working individuals that the family issues will come along as well.” The Wisconsin field associates observed,

W-2 case managers say that they have more than enough to do just meeting the basic living needs (assuring an income stream, adequate housing, and food) and trying to move participants into the labor force, and they do not have time to promote marriage among their clients. They do point out (“hopefully in a diplomatic way,” one local W-2 manager said) that finding adequate housing, food, and income will be even more difficult if program participants have another child.

In Kansas, welfare officials and legislative leaders informed our research associate that Kansas opted to focus on the work aspect of TANF because it was instrumental in achieving the family formation goals. Officials viewed marital and reproductive goals as “simply not that important. Instead state and local administrators alike emphasize support services such as childcare to keep families together.”

## *2. Implementers and Legislators Did Not Want to Use Scarce Public Resources to Promote Marriage and Reduce Nonmarital Births Until They Know What Worked*

Implementers and legislators were reluctant to move ahead aggressively on the family policy agenda until more is known about effective interventions for attaining these goals. Research shows that supportive state and county administrators can be a key to the successful implementation of any governmental program. Their knowledge and interests, their attitudes toward the goals and the means of achieving them, their beliefs, and their priorities influence program implementation. However, compared with policymakers in the nation’s capitol, many of those responsible for implementing the marriage-promotion and family-strengthening agenda at the state and local levels were ambivalent about such goals and skeptical about the ability of state and local government agencies to achieve them.

The coalition that lobbied hard for inserting the marriage-promotion provision and two-parent and out-of-wedlock provisions in PRWORA included socially conservative Washington insiders such as Robert Rector, Pat Robertson, Ralph Reed, and Gary Bauer, all of whom had easy access to and influence on Republican leaders in Congress.<sup>30</sup> When it came to the family policy goals of welfare reform, the architects of these provisions did not include state welfare reform leaders such as Governors Tommy Thompson of Wisconsin and John Engler of Michigan. Nor did they include the National Governors Association, the National Conference of Mayors, the American Public Human

Services Association, or other intergovernmental organizations.<sup>31</sup> Liberals on social policy issues did not actively oppose the inclusion of the family policy goals in the 1996 laws apparently for two reasons. One, they saw this set of requirements as less important than other provisions they cared about, and as necessary to hold a coalition together for legislation. Two, the broad language of these provisions appeared to allay concerns of several policy advocates about the intrusiveness of the family-policy requirements.<sup>32</sup>

Some conservatives have been uncomfortable with the pregnancy-prevention goals of PRWORA because of their association with sexuality education. Many liberals, meanwhile, have opposed or have been lukewarm about abstinence-only programs and regard efforts to promote marriage as coercive and intrusive. Many administrators, frontline workers, and state and local officials, viewed people's decisions concerning who and when to marry, and when and with whom to bear a child, as within a "zone of privacy" that should remain far from the reaches of government.

The Ohio field researchers, for example, reported that Hamilton County officials lacked confidence in the goal of promoting marriage, and that some appeared downright hostile to the idea of government telling a client what to do concerning marriage. As one county administrator put it,

Our customers make decisions based on circumstances. We have poor Appalachian women with a history of abuse. Any man in Washington who thinks he can force people in this situation to become a family is way out of line. There is an assumption in DC that poor people do not make rational decisions, but this is not true. If the federal government wants to make family-friendly decisions, they need to teach people to make good choices and increase self-esteem. Forced family programs do not make a family; jobs and personal options will lead people to make good family decisions.

In Denver, county administrators were ambivalent about the family policy goals of PRWORA and questioned the wisdom of using a government agency to promote marriage and programs directed to TANF clients to reduce nonmarital births. Administrators believed that the Denver Department of Human Service (DHS) should not be the lead agency on family formation, but it should partner with schools and faith-based organizations. According to the DHS director:

We can assist in this area of marriage and reproduction but we should do it through organizations that are much better equipped to do this kind of thing. This is not a role for government but for our partners. Our role is to remove barriers so people can get married or if they are together as a two-parent family they have a better chance of making it. In the old days, when we had the 'man-in-the-house rule,' marriage was not an option if you wanted welfare. It is inappropriate for government to say, 'You must get married in order to receive benefits.'

Many county administrators believed that the emphasis should be on independence and self-sufficiency and not on dependence on government to tell clients what to do and how to do it. According to one middle manager, "I do not think there is a role of government in the area of family formation and pregnancy prevention."

Like state and county administrators, frontline workers in state and county offices are critical to the success of the new welfare regime, and they, too, are uncomfortable promoting TANF's fam-

ily-formation and pregnancy-prevention goals. Several Colorado case managers held that the decision to get married or to stay married is the TANF clients' business. According to one:

The governor tried to pass a law that would reward marriage and would require divorcing couples to go through a certain number of hours of marriage counseling before they could get a divorce, but we do not see ourselves as being in the business of promoting marriage.

A worker on the front lines in Denver County similarly maintained, "the agency has no business interfering with people's lives. The job of county government is to provide a support system."

Workers in both Michigan and Colorado human services agencies said they thought that telling clients to get married "was illegal." Many staff members reported that working with clients is stressful enough without having to advise them about marriage. Caseworkers in Denver County, Colorado also reported that clients often see advice about marriage as infringing on their rights. Frontline workers with limited time and energy also feel torn between promoting the family formation agenda and helping clients find jobs, childcare, education, housing, and transportation.

Frontline workers seemed to be more positive about encouraging noncustodial fathers to become more involved with their children than encouraging single mothers on welfare to get married. In Coconino County, Arizona, for example, caseworkers invited both parents to attend childbirth education classes, and they started a "daddy boot camp" program that provides mentors for new fathers. New Jersey's Operation Fatherhood Program also encouraged fathers to actively participate in their children's lives, engaging them in "improvement activities" on both the employment and personal levels. In Michigan, pilot programs also focused on finding a positive role for the father.

Legislators and governors' aides are important actors in implementing family policies, the former because they have the power to enact laws and allocate resources, and both the former and latter because as policy entrepreneurs their level of knowledge, their opinions, and their preferences matter. Like state and county administrators, the state legislators and governors' aides interviewed for this study also had differing views and limited knowledge about how best to achieve the family formation and pregnancy prevention goals of PRWORA. To assess state policy makers' opinions about the best strategies to fulfill the marriage-promotion and family strengthening goals of PRWORA, we asked state senators and state representatives who served on relevant state legislative committees and advisers to governors on social policy the following two questions: 1) In your opinion, what do you think is the best state strategy for encouraging marriage and preserving existing two-parent families? and 2) In your opinion, what do you think is the best state strategy for preventing and reducing out-of-wedlock births among the adult TANF population?

### *Attitudes Toward Policies to Promote Marriage*

We received a full range of responses to the first question, with no consensus about what strategy would work best in the state. The most common response (29 percent) was either premarital or marriage counseling, depending upon the situation. Typical was this response from a Michigan legislator:

Offering resources to people ... it could be in the form of ... providing vouchers basically for families on public assistance. And actually I would advocate this for anybody on public

assistance....To me that would be very empowering and it would also respect the dignity of people. You're not telling them what to do; you're saying, 'Look, here are vouchers to strengthen, enhance your marriage ...you can use these vouchers for counseling.'

Four lawmakers (12 percent) thought more support services would help, and another four (12 percent) thought the best solution was economic stability, especially finding single mothers on TANF jobs that paid a living wage. According to one state lawmaker from Wisconsin:

To maintain a marriage relationship requires a fairly secure economic base and that step that you take to assure a secure family economic base will do the most towards preserving a family ... or even creating a family. I think that the spouse or the parents of a child have to be attractive marriage partners.

Three people (9 percent) thought government had no business promoting marriage, and another three (9 percent) preferred to partner with faith-based organizations. One of those, an Oregon legislator, wondered where the money would come from to pay for counselors given state budget cuts and considered the possibility, in case this happens, of turning to faith-based groups for assistance. Another three policymakers thought the state should provide financial incentives — either penalties or rewards — to encourage people to marry or stay married.

### *Attitudes Toward Policies to Reduce Out-of-Wedlock Births*

When we asked lawmakers and governors' aides what would work in their states to bring down out-of-wedlock birth rates among the 20-and-over TANF population, many struggled with the question, and some were even at a loss for words. Despite the uncertainty, interviewees most frequently cited education as the best policy response (29 percent). One state senator put it this way:

I think again straightforward education, AIDS education, general education in terms of having the child equates to poverty, you know, the kind of education that says wait until you can afford this child.

One of the most common responses was an open acknowledgment that our society has accepted out-of-wedlock birth and attached no stigma to it. Four people argued that the solution to the problem of nonmarital births lay only in a cultural change. A governor's aide had the most to say about the need for a cultural shift:

... In some respects this is the long process of systemic change ... in terms of we live in a society that doesn't find this, I'm going to say abhorrent — that probably is a little bit strong. But what I mean it's pretty acceptable. It's acceptable at all levels. Not just are you a teen but are you 20, are you 30, are you 40. I don't think society finds that unacceptable ... I do know at this point we certainly have an entire generation of people that are coming up on 20 and 30 who haven't had that message as strongly in their life as prior generations.

Other responses included providing family-planning services (12 percent), finding TANF clients a job (9 percent), providing penalties or rewards for having additional children out-of-wedlock (12 percent), encouraging clients to marry (6 percent), and expecting clients — not the state — to

take personal responsibility for their decisions. One policymaker said the government had no business interjecting itself into this kind of decision, and three people did not have an answer.

Overall, state legislators and governors' aides have very different views about how to reach the family-formation and teen-pregnancy prevention goals of the 1996 law. The political sensitivity of these issues requires that state policymakers build broad coalitions if they are to achieve these goals, but because of the diversity of views state legislators may find it difficult to reach consensus.

Some state legislators are well informed and have thought through alternative policies carefully, but others are uninformed or ill-informed.<sup>33</sup> This is reflected in the relatively high number of state senators and representatives who either did not answer the questions or claimed not to know enough about the issues to respond to them.

### *3. Few New Institutional Arrangements Accompanied State and County Programs to Achieve Family-Formation Goals*

Few states and counties in the study have created mechanisms to routinely refer TANF clients or applicants to information or services on family formation. This contrasts markedly with welfare-to-work programs. In the aftermath of the 1996 welfare reform legislation, the 1998 Workforce Investment Act (WIA) set the stage for changes in institutional arrangements underpinning the work emphasis of the new welfare. WIA required states to create a one-stop, customer-based, locally driven system of employment and training services offered by several agencies.

In contrast, we found few examples of such institutional “hardwiring” in the case of family-formation policies. Arizona provided one example, where frontline workers in county social services agencies were required to tell all TANF applicants that Arizona enforced a family cap policy and then explain what the policy meant. Eligibility workers handed out a list of available local services to TANF applicants, but they did not make any referral calls and did not specifically refer people to the agencies contracted to provide the marital and pregnancy-related services. Referrals to the organizations offering family formation services came from other parts of the state welfare reform system (DES's JOBS Administration, for example) or government or community-based agencies offering social services. Critics suggested that referrals even from JOBS were rare. This model was true except in areas of Maricopa County, and Mohave County, where the pilot AZ Works program administers TANF under a contract to DES. AZ Works used a flat grant approach as opposed to the family cap. Our research associates in the state commented that, “In general, advocates of family formation goals do not see either of these approaches as promoting the welfare of families.”

The clearest case of hardwiring — co-locating family-formation and pregnancy-prevention services with other welfare services — occurred in connection with efforts to prevent unwanted pregnancies and out-of-wedlock births in Washington. In 1999, state WorkFirst officials mandated that case managers provide family-planning information and referrals to nurse practitioners working onsite or nearby. These clinicians offered information and dispensed birth control under contract with the Department of Social and Health Services through Planned Parenthood and other community-based groups. Seven TANF offices now house full-scale clinics, and the department is trying to increase the number of certified providers. The department asked providers to tailor family-planning methods to clients' values and situations.

Our Washington field researchers reported that in order to facilitate these referrals, the state developed a Web-based tool to guide WorkFirst managers through a series of client intake questions that helped them determine how best to provide information and referrals. Case managers had to indicate on-screen that they addressed family-planning issues with clients before they could move on. However, while all TANF clients received information and referrals on family planning and screening for domestic violence, TANF services and benefits did not hinge on their participation in such services. And while local offices received financial awards for meeting overall WorkFirst goals, these goals did not include provision of family-planning services or reductions in birth rates among WorkFirst women.

Florida's approach to referring welfare clients to marriage-promotion and pregnancy-prevention programs is more common. According to the Florida field associate, a caseworker "might refer an applicant for TANF benefits to one of the projects or programs, but this would be an individual act, not a policy."

In Arizona, Rep. Mark Anderson lamented the fact that the state did not institutionalize referrals for family planning or other family policy-related services. In a phone interview, he pointed out that, "we finally got to a point where the department has educated their people that these programs are out there but there hasn't been a system set up for case managers to say to clients, 'Besides going to look for a job, you also need to go to this program.'"

Counties occasionally took the initiative in hardwiring marriage-strengthening and nonmarital birth prevention services. In Franklin County, Ohio, for example, community centers provided all TANF-related services to clients, and caseworkers were cross-trained to provide both work-related and family planning-related services. In Shelby County, Tennessee, one Families First site shared space with a Health Department office, while another was next door to a church health center. Both health centers provided family-planning assistance and health care.

#### *4. Some States Deliberately Transferred Decision Making on Family Formation and Pregnancy Prevention to Counties. The Local Political and Cultural Climate Thus Acted as a Powerful Influence on Such Programs*

In the case of Ohio, for example, statutes assigned formal authority over program design and implementation to counties. According to *Reinvesting in Ohio's Communities*, a report by the state's Department of Job and Family Services, since the 1996 welfare reform law went into effect "Ohio's 88 counties have been given greater flexibility than ever before in designing and implementing a service delivery system that addresses the emergent needs of the people they serve."<sup>34</sup>

Ohio does not have a statewide program to promote marriage, reduce out-of-wedlock births, or encourage the formation and maintenance of two-parent families. However, the state's Department of Human Services developed a standard service delivery model under the state's Prevention, Retention, & Contingency (PRC) Program, designed to address the problems that accompany single parent and broken families and teenage and nonmarital pregnancies. Each of the state's 88 counties was required to establish a PRC program, but it could either adopt the standard model or design its own.

Structurally decentralized states, which in addition to Ohio include Colorado, New York, and New Jersey, are unlikely to adopt a uniform cross-county approach to family-formation efforts: institutional arrangements may look one way in the urban core and another way in suburban or rural areas. Compared with states like Oklahoma, Arizona, and neighboring Utah, for example, Colorado has been slow to adopt the national marriage-promotion and family-strengthening agenda. As one of the most decentralized states in the nation, Colorado gives counties considerable discretion, and despite the recent emphasis on marriage promotion and family strengthening by the state human services agency and the governor, few counties have taken the initiative. According to the director of Colorado's Department of Self-Sufficiency, the message the agency has traditionally sent to the state's 63 counties is "that they should develop programs for themselves — that we are giving them permission to innovate and to solve problems." According to another highly placed human services official in Colorado, "Counties take the local culture into consideration by trying to get a sense of what is politically and socially feasible."

Family policy programs vary across units of government in centralized as well as decentralized states. Washington is a case in point. Compared with other states, Washington's welfare programs are fairly centralized, and the state has aimed to standardize its programs, particularly those aimed at preventing out-of wedlock births. The state is divided into six regions, which are then subdivided, usually by ZIP code, into 65 community services offices (CSOs). Regions are asked to develop plans each year, and the central office approves these plans. The state set goals for the regions, while CSOs were responsible for implementing programs designed to reach the goals. Because case managers were uncomfortable addressing family planning issues with TANF clients, the Department of Social and Health Services provided clearer guidelines, a script for case workers, and videos for clients, and has sponsored general educational events that include food and light-hearted presentations.

However, CSOs vary significantly in how they deliver services. For example, the researchers for Washington reported that when case managers in southwestern Washington's rural Kelso County found it difficult to draw clients to family-planning events, they opted for more private individual visits. At the time the field data were collected, family planning workers visited some 30 clients per week, in addition to holding periodic health fairs. WorkFirst training sessions included family-planning workshops, and TANF clients received brochures on family-planning services when applying for DSHS services. Nevertheless, according to our field researchers, "the county welfare office was fairly circumspect in promoting family-planning services."

In contrast, Seattle's Ballard and West Seattle CSOs have tried to make the subject of family planning an integral part of the agency's culture. Staff members have posted family-planning posters, brochures, and pamphlets prominently throughout the offices, placed containers of free condoms on counters and case managers' desks and in restrooms and waiting areas, and regularly played videos on family planning in the lobby.

### *5. Elected Officials Considered Family Formation and Nonmarital Birth Prevention Policies Political "Hot Potatoes"*

In Utah, a centralized state considered a leader in promoting marriage, our field researcher for the state noted that family-formation programs were considered politically sensitive:

There appear to be few signals sent concerning these [family-formation] policies. The Department of Workforce Services concentrates its efforts on employment and self-sufficiency plans. The abstinence/family support programs ... are provided by nonstate agencies and nongovernmental organizations and DWS officials see family-formation issues as too politically sensitive to be part of TANF programs and a diversion from promoting work, but they do recognize the importance of preventing out-of-wedlock pregnancies in reducing dependence on TANF.

In Oklahoma, OMI administrators told us that their success stems partly from centralized control over missions and messages by a small group of senior policymakers, including the governor, the secretary of Health and Human Services, the TANF administrator, and the head of the Department of Health Child Guidance Program. OMI administrators believed that keeping most policymaking within this group enabled them to rely on expertise and social science research rather than ideological and political criteria. They contrasted this approach with states that chose to devolve policymaking to coalitions or commissions, which have often either dissolved owing to conflict or failed to produce policy recommendations. However, even in Oklahoma, leaders found the need to form coalitions among TANF, Department of Health, and Extension Service administrators at the state and later county level a necessary prerequisite for recognizing common goals and developing joint strategies.

Denver's experience shows how risk-averse county politicians can pass the buck when sexuality, marriage, and childbearing become too hot to handle.<sup>35</sup> The Denver Department of Human Services (DHS) spent no TANF funds on either marriage promotion or pregnancy prevention. Instead, the welfare reform board, the city council, and former Democratic Mayor, Wellington Webb, determined the most pressing needs for low-income families and children. DHS officials told us that the board considered making pregnancy prevention and family formation county priorities but decided the goals were too politically controversial. Furthermore, no interest group was pressuring either the DHS director or the board to put pregnancy prevention and marriage at the top of the policy agenda. Instead, strong advocacy convinced city policymakers on the welfare reform board to select childcare as the number-one priority, followed by rental assistance, transportation, and support service such as dental care.

*6. Groups Who Advocate for Women and the Poor Opposed Family Policy Initiatives If They Diverted Funds from Essential Services and Threatened the Health and Safety of Women and Their Children.*

During debates over welfare reform, advocates for the poor and women raised a number of objections about the moralistic tone of the 1996 act, and were openly skeptical of its marriage provision. These same groups are pressuring the Bush administration to think carefully about new initiatives in this sensitive area. For example, a representative of the Pennsylvania Coalition Against Domestic Violence recommended that the Bush administration "ensure that any policies and programs designed to 'strengthen families' do not compromise the safety of any family member, make it more difficult for an individual to leave a violent relationship, or encourage or preserve unhealthy or unsafe marriages or relationships."<sup>36</sup>

In Wisconsin, domestic violence prevention groups pushed Milwaukee and Dane Counties to make it a practice to screen all TANF applicants for abuse, and expressed concern that some women might interpret a strong marriage promotion message as a signal to stay in or return to an abusive relationship. In Denver, domestic violence prevention advocates opposed the use of financial rewards to encourage marriage, fearing that bad marriages would harm both women and children, and that the marriage initiative would divert essential services.

Frontline workers in Washington, who routinely screen for domestic violence, indicated that its incidence among TANF clients is high. This situation presents both a challenge and an opportunity for national policymakers and marriage-promotion advocates to explicitly address domestic violence while encouraging healthy marriages and families.

### *7. Economic Hard Times and Political Uncertainty Affected Program Implementation Adversely*

Economic barriers may have played a role in limited responses to the family formation goals. A frequent response in our survey of policymakers was that the most important problem facing states was the state fiscal crisis. Similarly, data gathered by a related project at the Rockefeller Institute of Government showed that states were reducing human services spending.<sup>37</sup> In addition, states were preoccupied with terrorism threats and homeland security. Program operators were also affected by political uncertainty about the reauthorization of TANF and were concerned with potential new messages from Washington regarding family formation and state flexibility over policy and spending in this area.

### *Implementing Teen Pregnancy Prevention Programs*

As noted earlier in Part 1 of this report, the effort directed at implementing policies designed to reduce teen pregnancy rates — especially abstinence until marriage policies and programs — and the number of new programs and initiatives spurred by the 1996 Act have been uniformly elevated when compared to efforts to achieve the family formation goals of welfare reform.<sup>38</sup>

The Act mandated that the Department of Health and Human Services (DH&HS) establish a National Strategy to Prevent Teen Pregnancy and set a goal that at least 25 percent of communities in the U.S. have teen pregnancy programs in operation.<sup>39</sup> The 1996 law also created the Abstinence Education Grant Program for which Congress authorized \$50 million each fiscal year from 1998 through 2002. All the sample states received funding; however, one state not in the sample — California — decided to return FY 1998 and FY 1999 funding and did not participate after that.

Many teen pregnancy prevention programs existed before TANF and state and local human services, health, and education agencies continued to use these programs to provide family planning services to low-income families after 1996. All states offer family planning services such as Titles V and X<sup>40</sup> (of the Public Health Service Act) and Title XX (of the Social Security Act) that pre-date TANF. The Maternal and Child Health Bureau of the Health Resources and Service Administration (HRSA) runs the Special Projects of Regional and National Significance program, which also funds state and local pregnancy prevention programs. Teens are included among the clients of these federally funded family planning programs. Other programs that predate PRWORA

also fund teen pregnancy programs: DHHS's Office of Population Affairs has been administering the Adolescent Family Life Program since 1981 and is funded with Title XX of the Public Health Service Act money;<sup>41</sup> and the Centers for Disease Control and Prevention (CDC) funds community coalition demonstration programs to prevent teen pregnancy.

### *Patterns of Responses: Teen Pregnancy Prevention*

State responses to teen pregnancy prevention goals were grouped into four categories: *hortatory*, *institutional*, *educational*, and *income-based incentives*. In the case of teen pregnancy prevention, the target group was teenagers and the approaches the states and localities adopted were designed to either set a standard of sexual behavior or change the sexual behavior of teens.

#### *Hortatory Responses*

Hortatory responses in this policy area were extremely rare. Oregon's governor, with his Teen Pregnancy Prevention Action Agenda, was one of the few in the sample to elevate the goal of lowering teen pregnancy rates to the top of his agenda.

#### *Institutional Responses*

Institutional responses took the form of coalition building, task forces, and advisory groups. These responses represent another way in which supporters of the family policy agenda mobilized support for teen pregnancy prevention initiatives (see Table 6). The modal type of response, which we observed in 8 states, was to form a Teen Pregnancy Prevention Task Force, Coalition, or Partnership. Two other states, Texas and Wisconsin, formed advisory committees.

In Oregon, capacity-building efforts to combat teen pregnancy provoked heated controversy among state legislators. Conservative rural members objected to giving teens access to contraceptives, while more liberal urban members argued that abstinence education was insufficient. The state reached a compromise by establishing the Reduce Adolescent Pregnancy Project (RAPP). RAPP was conceived as a community-based effort to advocate for services, information, and leadership committed to the prevention of teenage pregnancy.

Oregon's approach presents a case of second-order devolution, in which the state pushes down responsibility for program design and implementation to local governments. The state set broad goals, encouraged the formation of coalitions, and provided small sums of money to further local agendas.<sup>42</sup> A coalition of knowledgeable local citizens then identified existing components and gaps in a comprehensive pregnancy prevention program and advocated for new services. Each coalition received a "Bee Involved" kit that included a video for use in presentations and training on the importance of preventing teen pregnancy, as well as information on organizing a coalition and winning media coverage. Although the Oregon Department of Health Services attempted to track the activities of the coalitions and give advice and support, at the time the field data were collected even DHS officials were unsure about what had happened to the local coalitions.

In 2000, Oregon DHS awarded \$20,000 in TANF funds to 31 of 36 counties applying for grants to support teen theater, hosting community education forums, and funding a community skateboard

**Table 6. Hortatory Approaches to Achieve Teen Pregnancy Prevention Goals by State**

Arizona	Statewide Sexual Abstinence Media Campaign; Teen Pregnancy Prevention Program
Colorado	State media campaign; public awareness campaigns
Florida	Teen Pregnancy Prevention Community Initiative; teen website on the subject of abstinence; media campaign directed at teens; statutory rape public education campaign
Kansas	Kansas Department of Health Teenage Pregnancy Prevention program
Mississippi	<i>Heat of the Moment</i> public awareness campaigns; <i>Baby Think it Over</i> ad campaign
New Jersey	<i>Breaking the Cycle</i> media campaign
Oklahoma	State media campaign, local media events, public awareness campaigns
Oregon	Governor’s Teen Pregnancy Prevention Action Agenda
Tennessee	Abstinence only education media events and public awareness campaigns
Texas	<i>Teen Smart</i> media campaign, local media events, public awareness campaigns
Utah	<i>Growing Up Comes First; Wait for Sex?</i>
Washington	<i>Teen Aware</i> local media events/public awareness campaigns
West Virginia	Adolescent Pregnancy Prevention Initiative
Wisconsin	State media campaign, local media events, public awareness campaigns

ramp. Some coalitions invested in TV and movie ads and billboards. Twelve counties brought in speakers for public events, ten hired RAPP coordinators, seven expanded contraceptive services to teens, and four hosted teen fairs. Umatilla County’s coalition arranged a Boys Summit, held in May 2001, which 400 boys attended, with an almost equal number of adult sponsors.<sup>43</sup> Washington County provided training for school counselors, mental health and court professionals, and church youth club leaders who work with Latino boys. Multnomah County’s RAPP coalition used its funds to hire a half-time worker to study teen pregnancy prevention programs, summarize best practices for community groups, and develop a community profile of at-risk teens. The coalition also surveyed community services for teens with the hope of creating a “Yellow Pages” for teens.

RAPP coalitions generally experienced two problems: instability and a lack of broad community representation. They had a boom and bust pattern depending largely on the leadership. Because coalitions are composed of volunteers, concerted planning and follow-through is difficult. One coalition that was unable to organize leadership and staffing returned its funding, and several coalitions had to scale back their original plans.

Recruiting community members for a volunteer project with little funding proved difficult, as did coordinating a variety of organizations dealing with teens. Jackson County's RAPP coalition stands out because the county achieved more of its goals than other coalitions; the coalition's members were a DHS worker, a Health Department official, a teen advocate, and a representative from Planned Parenthood. Umatilla County represents a slightly different range of members with representatives from the local human services and health departments, Head Start, public schools, law enforcement, mental health professionals, faith leaders and teens.

In other states, however, plans for task forces on preventing teen pregnancy stalled. In Missouri, for example, the state TANF plan highlighted teaching abstinence and reducing teen pregnancy rates. A state-level task force was established with the goals of developing a program and implementation process for reducing nonmarital births, especially among adolescents. However, the task force worked only until the end of 1997, when it submitted its only report, and then disbanded.

In New York, political bargaining led to a stalemate that undermined plans for establishing a task force, which the governor announced in September 1997. Although all members signed on to a May 2001 report, the task force was polarized. Some coalition members like the Catholic Conference of New York State were convinced that abstinence only was the best remedy whereas others, for example, Planned Parenthood and Family Planning Associates, supported a policy of contraception or safe sex.

The experiences in Missouri and New York exemplify a frequent issue: program designers and implementers are often divided as to the approach that works best to reduce teen pregnancy — abstinence until marriage education programs or family planning services, or a combination of both, the so-called “abstinence-plus” approach.

Program evaluation research results do not solve the questions as to approach. Douglas Kirby, for the National Campaign to Prevent Teen Pregnancy (NCPTP), concluded that sexual abstinence plus family planning is the most effective program to reduce teen pregnancy.<sup>44</sup> He finds no strong conclusive evidence that abstinence-only programs delay the initiation of sex or reduce its frequency. However, Robert Rector of the Heritage Foundation challenged the conclusions of the Kirby report, citing evidence from ten studies that show abstinence-education programs reduce teen's early sexual activity.<sup>45</sup> Yet the Campaign's Effective Program and Research (EPR) Task Force reviewed the same ten studies using five standards of research design<sup>46</sup> and concluded that none of the studies provided “strong” evidence that the abstinence-only program had an impact on teen sexual behavior. Six of the programs — Virginity Pledge Program, Not Me, Not Now, Teen Aid, Sex Respect, Values and Choices, and Postponing Sexual Involvement — provided “some” evidence and the other studies of the remaining five programs offered little or no evidence that the program worked.

The NCPTP assessment made the important point that the quality of research on this topic varied considerably and the studies included in the Rector meta-analysis were “not representative” of the body of research literature that has evaluated abstinence-only program effectiveness. Kirby, the author of the report, concluded that,

There do not currently exist any abstinence-only programs with strong evidence that they either delay sex or reduce teen pregnancy. However, this does not mean that abstinence-only programs are not effective, nor does it mean that they are effective.... There is simply too little evidence to know whether abstinence-only programs delay the initiation of sex.<sup>47</sup>

### *Educational Responses*

Educational responses are at the heart of state and local responses to the teen pregnancy prevention provisions of the Personal Responsibility Act of 1996. Such approaches include abstinence-until-marriage curriculum aimed at teens and offered by 49 states (all but California). In 1996, the Maternal and Child Health (MCH) Block Grant was expanded to fund abstinence-only education. The legislation requires the U.S. Department of Health and Human Services to provide each state with funds to “provide abstinence education, and at the option of the State, where appropriate, mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are most likely to bear children out-of-wedlock.”<sup>48</sup> Table 7 shows the central tendencies of states and identifies some specific educational programs aimed at teens, usually in the public schools, mostly for 12 to 17 year olds.

Two illustrative teen pregnancy prevention programs from Florida — the WAGES<sup>49</sup> Teen Pregnancy Prevention Projects and the state Abstinence Only Education Program — illustrate how most states apply educational approaches. The WAGES program, which is funded with TANF dollars, offers teenagers family life and sexuality education, tutoring, job and career activities and medical and mental health services. According to the field researcher for Florida, these educational programs emphasize strategies designed to create awareness about the economic and health consequences of teen pregnancy, promote parental involvement, and provide positive messages about preventing and delaying sexual involvement. At the time of this field research five projects were funded under this program.

The Florida Abstinence Only Education Program uses TANF money, and is also supported with Title V grant funds and county health department trust funds. Methods include strategies to increase the number of parents, males, and community partners in participating in abstinence education and abstinence promoting activities. As of late 2001, 30 public and private organizations were funded to provide abstinence-related classes. Program length varies with funding source. An interactive adolescent teen web site has been developed and is maintained by the program. Faculty members in Florida State University School of Social Work are evaluating the program.

One type of educational program targets “at risk” youth or youth in distressed neighborhoods and teaches them the consequences of risky behavior, including having unprotected sex, as in the case of Florida’s Comprehensive School Health Services Program. The program, which predates TANF but was tied to it, authorized the Department of Children and Families and the Department of Education to establish expanded school health services in schools with high numbers of medically underserved children and students who at risk of getting pregnant. Schools apply to the Department of Health for the funds to provide a range of pregnancy prevention programs as well as other child-health activities. As of the time of the field research Florida had projects in 47 of 67 counties. The most common model was one in which each school was staffed with a health support aide and

**Table 7. Capacity Building Approaches to Achieve  
Teen Pregnancy Prevention Goals by State**

Arizona	Arizona Teen Pregnancy Prevention Task Force
Florida	Florida Abstinence Education Coalition
Michigan	Michigan Abstinence Partnership
Mississippi	<i>Just Wait</i> Abstinence Unit; Abstinence Only Task Force
Missouri	Task Force to Prevent Teen Pregnancies
New Jersey	<i>Breaking the Cycle</i> Task Force; WFNJ Inter-Departmental Adolescent Pregnancy Working Group; New Jersey Council on Adolescent Pregnancy
New York	The Governor’s Task Force on Out of Wedlock Pregnancies
Oregon	RAPP coalitions
Texas	Family Planning Advisory Committee
Wisconsin	Adolescent Pregnancy Prevention Committee; Adolescent Pregnancy Prevention Services Board

an RN supervisor who took on a variety of activities related to the reduction of pregnancy. These included the development and use of videos and other educational materials stressing the consequences of inappropriate high risk sexual behaviors, attempts to ensure that teenagers who did become pregnant had healthy pregnancies, efforts to encourage parenting students to return to school after delivery, and programs to reduce the number of repeat pregnancies.

Another educational response to the challenge of rising teen pregnancy rates is peer or adult mentoring for teens. This program was virtually universal across all the sample states as a response to the challenge presented by high teen pregnancy rates. According to a Department of Health and Human Services report, only Mississippi, Missouri, and Oklahoma did not, as of 2000, have some sort of peer mentoring for teens about sexuality. And Missouri, Oregon, and West Virginia were the only states in our sample of 18 that do not have a program of adult supervised mentoring and counseling (see Table 8).<sup>50</sup>

### *Income-based Incentives*

Income-based incentives are uncommon in the teen pregnancy prevention policy domain. Michigan, however, offers fiscal incentives not to individuals but to school districts. For at least a 10 percent improvement in community teen pregnancy rates, school districts could receive \$300,000; for at least a 20 percent improvement, the amount increased to \$400,000; for at least 30 percent it went to \$500,000. But the incentives for pregnancy rate reduction were lowered and additional incentives provided for exemplary program performance were instituted.

## ***Relationship to the 1996 Act — Encouraging Teen Pregnancy Prevention Initiatives***

Using the data from Table 8, we divide the sample states according to the number of program initiatives in the teen pregnancy prevention domain. Based on the number of new policy initiatives in this area, we classify the states in three groups, high, moderate, and low.<sup>51</sup>

Arizona, New Jersey, Ohio, Oklahoma, Tennessee, and Utah had the most initiatives in responding to the family policy provisions of the 1996 statute. These six states adopted eight or more initiatives to strengthen marriage and two-parent families and prevent pregnancies. Colorado,

**Table 8. Educational Approaches to Achieve Teen Pregnancy Prevention Goals by State<sup>1</sup>**

Arizona	TANF-funded abstinence-only education
Florida	<i>The WAGES</i> Teen Pregnancy Prevention Projects; State Family Planning Program; <i>Managing Pressure before Marriage</i> curricula
Michigan	Michigan Teen Outreach Program; School-based Sex Education
Mississippi	<i>Sex Can Wait</i> curricula through Jackson State University; <i>Teens in Control</i>
Ohio	Adoption Option; <i>Postponing Sexual Involvement and Managing Pressure Before Marriage</i> educational series
Oklahoma	TANF-funded abstinence-only education
Oregon	<i>Students Today Aren't Ready for Sex</i> (STARS) curriculum; <i>Managing Pressures Before Marriage</i> program; <i>Stop and Think</i> program; Youth Solutions Abstinence Education program
Tennessee	<i>Breaking the Cycle</i> program; The Teen Parenting program
West Virginia	<i>Right from the Start</i> program
Wisconsin	<i>Brighter Future</i> Initiative
1. All 18 states accept Section 510 funds to administer educational programs to teach abstinence until marriage.	

Florida, Mississippi, Missouri, Oregon, Washington, and West Virginia are in the middle of the range; they are moderately high on our policy initiatives scale. Kansas, Michigan, New York, Texas, and Wisconsin are not particularly innovative, but they have devoted at least some attention to programs in the teen pregnancy prevention policy area.

### ***Level of Implementation Effort: Teen Pregnancy Prevention***

Several states stand out in terms of the level of effort they have expended to implement statewide programs to bring down teen pregnancy rates. Many of these efforts pre-date TANF. These high-effort states are New Jersey, Ohio, Oregon, Texas, Washington, and West Virginia. What the state

of Oklahoma is to the marriage initiative the state of Washington is to teen pregnancy prevention. Table 9 shows the number of clients that abstinence programs reach. Penetration rates vary widely, and overall the percentages are small. Oregon has reached the highest percentage of its under-18 population — 3.7 percent — with these programs, while Ohio is reaching 3 percent, Michigan 1.9 percent, and Texas 1.5 percent.

### ***Why the Variation in Responses to the Teen Pregnancy Prevention Goals of Welfare Reform?***

Why did abstinence-only education strategies dominate state and local efforts to achieve the teen pregnancy prevention goals of PRWORA? Why were state and local responses so robust, especially when compared to state and local responses to the 1996 national goals of promoting marriage and strengthening two-parent families? We offer five reasons: 1) goals were clearly stated; 2) incentives were built into the Personal Responsibility Act of 1996; 3) money was set aside for abstinence from sex until marriage programs; 4) language was inserted into the law that restricted the use of Section 510 Title V money to programs that did not mention family planning as a method of avoiding pregnancy; and 5) states had little flexibility when it came to using those federal funds.

In contrast to the family formation policies of promoting marriage, reducing nonmarital births, and strengthening two-parent families, the content of abstinence-only education programs was centrally directed by Washington. The welfare reform law specified that an abstinence-only education or motivational program qualified for funding only if it met strict criteria.

There are reasons for concern about sustained program implementation, however. For example, state legislators and governors' aides in some of the sample states were perplexed when we asked the question, "In your opinion, what do you think is the best state strategy for reducing teen pregnancy rates?" Of the 36 legislators and governor's aides who responded to this question, 36 percent thought abstinence-only education would work best, 8 percent thought family planning alone would work best, and 48 percent were convinced that abstinence plus family-planning services would be the best strategy. This response of one Arizona state senator illustrates the struggle that many state policymakers have with the question of what works, as well as the political sensitivity of the issue:

I have tried to walk a fine line. My personal belief is that abstinence-only is a better way to go but I don't know, in fact I doubt there are statistics to prove that it's any more effective than the other options . . . whether it be the abstinence-plus, if you want to call it that, or the family planning. But because I'm personally pro-life, I personally believe in those philosophies, it's much easier for me to be 100% supportive of the abstinence-only.

But politically speaking, I recognize that there are equally as many, if not more people, who believe there's some dollars that should go to family-planning programs and so it's a tight-rope for me to follow politically but I think that we have to be, in my opinion, we have to be understanding that they're going to want to be at the table and have those programs in place. And I would expect if I was on their side I would fight for that just like I fight for mine. So I respect those who are promoting those issues because I know they too want to make a difference.

**Table 9. Abstinence-until-marriage Section 510-funded Activities, FY 2000**

	<i>AZ</i>	<i>CO</i>	<i>FL</i>	<i>KS</i>	<i>MI</i>	<i>MS</i>	<i>MO</i>	<i>NJ</i>	<i>NY</i>	<i>OH</i>	<i>OK</i>	<i>OR</i>	<i>TN</i>	<i>TX</i>	<i>UT</i>	<i>WA</i>	<i>WV</i>	<i>WI</i>	
<b>STATE ACTIVITIES:</b>																			
state media campaign	X	X	X	X	X				X		X		X	X		X	X	X	
community-based projects	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
program monitoring, evaluation, or technical assistance	X	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X
advisory council/steering committee	X	X	X		X			X			X	X					X	X	X
toll-free hotline	X												X				X		
<b>STATE CONTRACTS:</b>																			
contracts with community-based orgs.	X	X	X	X		X	X	X	X	X	X		X	X	X		X	X	X
contracts with local coalitions/groups					X		X		X	X	X			X			X		
contracts with local health depts.	X	X	X	X			X		X	X		X		X	X		X	X	X
contracts with faith-based orgs.	X		X	X		X	X	X	X				X	X			X	X	X
contracts with universities	X	X	X			X		X						X			X	X	X
contracts with educ. boards/schools				X		X	X		X	X	X	X	X	X	X		X	X	X
contracts with youth-serving orgs.	X	X	X	X		X		X	X	X				X	X		X	X	X
contracts with health care orgs.	X		X					X	X				X	X					X
contracts with nonprofit orgs.	X	X				X	X	X	X	X			X						
contracts with media/research firms	X	X		X	X														

**Table 9. Abstinence-until-marriage Section 510-funded Activities, FY 2000 (Continued)**

	AZ	CO	FL	KS	MI	MS	MO	NJ	NY	OH	OK	OR	TN	TX	UT	WA	WV	WI
LOCAL ACTIVITIES:																		
public awareness campaigns	X	X		X	X			X	X	X	X		X	X	X	X	X	X
local media events	X		X	X	X				X	X	X	X	X	X	X	X	X	X
peer mentoring and education	X	X	X	X	X			X	X	X	X	X	X	X	X	X	X	X
before/after school programs	X	X	X	X	X	X		X	X	X			X	X	X	X	X	X
adult supervised mentoring and counseling	X	X	X	X	X	X		X	X	X	X		X	X	X	X		X
curriculum development and implementation, character ed.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
community coalitions/advisory groups	X	X		X	X			X	X	X	X	X		X	X	X	X	X
parent education groups	X	X	X	X	X		X	X	X	X	X			X	X	X		X
pilot projects	X																	X
recreational activities	X	X			X			X	X	X			X	X	X	X	X	X
school-based programs	X	X		X	X		X	X	X	X	X	X	X	X	X	X	X	X
TANF-funded abstinence education	X		X		X						X	X						X

Source: U.S. Department of Health and Human Services Health Resources and Services. 2000 Annual Summary for The Abstinence Education Provision of the 1996 Welfare Reform Law P.L. 104-193. July 2002.

***Summary: Patterns of Responses Across Issue Areas***

Interestingly, states with multiple new marriage initiatives are not necessarily those with the highest levels of program implementation for teen pregnancy prevention. Oklahoma illustrates the point: teen pregnancy has received additional attention and funding under PRWORA, and more schools and communities have adopted abstinence-education programs. But consistent with Oklahoma’s conservative and religious culture, promoting strong marriages, rather than preventing pregnancy, has been the state’s focus. And programs to discourage teen pregnancy and provide reproductive health services that predate welfare reform remain largely unaffected by national priorities and the state’s marriage initiative.

Washington and Oregon, on the other hand, are just the opposite, that is, very aggressive in terms of implementing pregnancy prevention programs and reaching a high percentage of teens while lagging behind many other states in terms of marriage promotion. Tennessee and West Virginia show the same pattern: they are innovators in the area of pregnancy prevention but have paid much less attention to family formation.

**Table 10. Clients Served by Abstinence-Until-Marriage Programs, Unduplicated Counts in Thousands, FY 1999**

	<i>AZ</i>	<i>CO</i>	<i>FL</i>	<i>KS</i>	<i>MI</i>	<i>MS</i>	<i>MO</i>	<i>NJ</i>	<i>NY</i>
Direct services, count	7.5	9.5	11.8	1.7	50.3	22.5	10.8	7.8	5.4
As a percent of under-age-18 population	.5%	.9%	.3%	.2%	1.9%	2.9%	.8%	.4%	.1%
	<i>OH</i>	<i>OK</i>	<i>OR</i>	<i>TN</i>	<i>TX</i>	<i>UT</i>	<i>WA</i>	<i>WV</i>	<i>WI</i>
Direct services, count	87.9	0.8	31.6	32.8	88.6	16.0	12.8	.	11.6
As a percent of under-age-18 population	3%	.0%	3.7%	2.4%	1.5%	2.2%	.8%	.	.8%

Source: U.S. Department of Health and Human Services Health Resources and Services. *2000 Annual Summary for The Abstinence Education Provision of the 1996 Welfare Reform Law P.L. 104-193*. July 2002.

### Part 3. Lessons Learned

A major goal of social science research is to inform policymakers about how policies are carried out or implemented and to what effect.<sup>52</sup> The focus of this report has been to describe how and explain why states and localities have responded in the ways they did to the family formation and teen pregnancy prevention goals of the 1996 Personal Responsibility Act. In this section we highlight four lessons drawn from our analysis of the field data:

1. First- and second-order devolution operated as barriers for the family formation goals of TANF.
2. The efforts of the Bush administration, especially the Administration for Children and Families, to promote the family formation and teen pregnancy prevention agenda since 2001 is beginning to pay off.
3. Effective entrepreneurial leadership at both the state and local levels of government is a necessary but not sufficient condition for successful program implementation.
4. Policymakers and program managers want to know more about what does and does not work.

#### *1. Devolution Represents a Barrier to Successful Family Formation Program Implementation*

The transformation of cash assistance from a categorical grant to block grant that devolved decisionmaking authority to states and localities in many ways made it difficult to successfully implement the family formation goals of the Personal Responsibility Act. Following passage of the 1996 act, advocates for and implementers of the family formation goals encountered the “federalism trap,” which is described by Kent Weaver as “the inability to increase state flexibility without sacrificing national standards valued by some policymakers, or to increase national standards without raising opposition and demands for compensation from some states.”<sup>53</sup>

The consensus that was built around the work-related goals of welfare reform allowed lawmakers to be specific and directive about program content. In the areas of employment and training, national policymakers chose federal mandates — work requirements, time limits, and compulsory MOE spending, for example — over state flexibility. But because there was conflict in Washington over the family formation goals, these same lawmakers were specific about goals but vague about the means to achieve them. For family formation, they chose state flexibility over mandated national standards. However, this study supports the view that the issues of human sexuality and marital intimacy that underlie the family policy goals are too culturally and political sensitive for heavy mandates from Washington to be imposed.

## *2. Efforts By the Bush Administration to Encourage State Activity, Especially in the Area of Marriage Promotion and Family Strengthening, Are Beginning to Pay Off*

Since January 2000, there has been increased awareness of and interest in the family-policy goals of the 1996 welfare reform act as a consequence of the heightened priority assigned to these goals by officials of the Bush administration. The state of Colorado, which has been stepping up state efforts to achieve the family strengthening and marriage promotion goals of welfare reform, provides an illustrative example.<sup>54</sup>

Initially, Colorado delayed adopting and implementing the national marriage promotion and family-strengthening agenda. Besides Governor Owens' 2000 Executive Order that required all state agencies to conduct what amounts to a family impact statement when considering adopting new policies or redesigning existing policies,<sup>55</sup> the successful enactment of SB 1164, which allowed counties to use TANF dollars to provide services such as job readiness and health care — but no cash assistance — to noncustodial parents, and another state law that allowed a 2/3 income disregard for two-parent families,<sup>56</sup> Colorado did little prior to January of 2002 to pursue statewide policies to promote marriage, form and maintain two-parent families, and reduce out-of-wedlock birthrates among TANF clients. And although Colorado is one of the most decentralized states in the nation, where counties have considerable discretion, few Colorado counties took an active interest in putting family policy goals front and center.

Governor Bill Owens, Marva Livingston Hammons, the Director of the Colorado Department of Human Services (CDHS), and the management team at the CDHS's Office of Self-Sufficiency, with the assistance and encouragement of the Administration for Children and Family's Region VIII office in Denver, provided the institutional and political support, as well as limited resources, to launch a new state initiative in this area. Beginning in February of 2002, a coalition of stakeholders of more than thirty state, community, and faith-based agencies began meeting regularly to plan a marriage-strengthening conference in Denver, which was held on September 18-19, 2002.

Frustrated by the lack of progress in mobilizing a state agenda to promote marriage and strengthen families, especially in the TANF population, representatives from the governor's office and from the Region VIII office of the DHHS' Administration for Children and Families met with seven members of the state human services agency management team. The idea for a jointly sponsored, strengthening-family conference in Denver was fleshed out in this first meeting. As the minutes of this first meeting indicate, the major goal of the conference was to "provide attendees with information about how and who to contact in their local community regarding post conference follow-up discussions and ... encourage these follow-up contacts."<sup>57</sup> The group settled on a mid-September 2002 date for the conference. Every effort was made to broaden the coalition to include more faith-based organizations. Eventually, leaders of Protestant, Catholic, Jewish, and Islamic umbrella organizations actively participated in the planning and strategy meetings.<sup>58</sup> The conference, according to its organizers, was a smashing success.

The week following the conference, Frances Owens, Colorado's First Lady, sent out a letter to all attendees announcing that the governor proclaimed the week of October 13-17 2002 as Celebration of Family Week.<sup>59</sup> Since then, the steering committee met on several occasions to discuss pro-

posed research and technical assistance to take the conference to the next level, that is, the counties. The Colorado TANF program earmarked some of the \$25 million “illegitimacy bonus” it was awarded in 2002 to fund studies to design and administer a scan of existing organizations that are involved in programs that promote marriage and strengthen families, conduct needs assessment studies of all Colorado counties, and provide technical assistance.

### *3. Active and Sustained Leadership By State and Local Actors Is an Important — Perhaps Essential — Factor in the Successful Adoption and Implementation of Marriage Promotion and Family Strengthening Policies*

While not sufficient for success, executive leadership is a necessary condition in implementing government programs.<sup>60</sup> Governors can play a key role in promoting the family formation and teen pregnancy prevention agenda and one indicator of this is the content of their state of the state addresses. Despite efforts by national advocates to elevate the salience of family formation and pregnancy prevention, only five of 18 governors — in Oklahoma, Missouri, Utah, Mississippi, and Kansas — mentioned family policy issues in their 2001 State of the State addresses. In 2002, only the governor of Kansas did so.

Many governors and state legislators were either unaware or uninterested in the national agenda to promote marriage and reduce teen pregnancy and out-of-wedlock birth rates. According to our network of field researchers, in New York, Texas, West Virginia, and Wisconsin, these issues seemed not to be on the governor’s radar screen, nor did key interest groups focus on them.

Second-order devolution, both structural and political, magnifies the importance of effective leadership at the county level. In several counties in our study, local politicians partnered with the social services agency and community-based organizations to form coalitions that mobilized the family formation and teen pregnancy prevention agenda.<sup>61</sup>

### *4. State and Local Administrators Want to Know More About What Does and Does Not Work In Promoting Healthy Marriages, Strengthening Families, Discouraging Nonmarital Births, and Preventing Teen Pregnancies Before Investing in New Programs*

Many lawmakers, governors’ aides, and program operators express frustration in considering family-formation and pregnancy-prevention programs. This exchange in a phone interview with a state senator illustrates the point:

*Which is the best state strategy for reducing teen pregnancy rates — abstinence-only education programs?*

Senator: We’ve tried that.

*Family-planning services and education concerning contraception?*

Senator: We’ve tried that.

*A combination of abstinence-only education plus family planning?*

Senator: We've tried that.

*And media campaigns such as public-service ads?*

Senator: And we've tried that. Nothing seems to work. We recently passed some guidelines for our public schools on the areas of teaching in that subject and of teaching the parenting, you know, through our health classes and so on. And the approach was that we'd teach abstinence. Well, I think we've been teaching abstinence since the beginning of time and it really hasn't been terribly successful. And yet we seem to not be willing to recognize that that is not a satisfactory approach. Yet we're afraid, particularly in this state because of our dominant religion of which I'm a member, of teaching the other alternatives on an equal basis because of the fact that it may be interpreted to be a suggestion as an alternative — you know what I'm saying? And the problem with that is that most of those things, at least in the State of Utah, should be taught in the homes. Yet you can't, you certainly cannot legislate that homes are going to be, that families are going to be required to teach this to their children. It's just ... it's a situation that there is just not a solution to.

In another telephone interview, one state representative lamented the fact that he had to rely on

... some of the social service agencies as well as some of the advocacy groups to provide me with some data on what is effective. That's the biggest problem, I've found. ... there's really no data... to show that any of these programs work at all. And I'd be loathe to spend any money on any of them until I'm convinced they actually are effective.

### ***Institutional Challenges of Integrating Family-Policy Goals: Implications for the Future***

In a meeting at HHS-ACF in June 2003, emphasis was placed on the institutional challenge of integrating family-policy goals into “the new welfare.” There are two general lessons from the Rockefeller Institute's implementation research that are useful in interpreting the findings about the take-up of the family formation goals of the 1996 act. The first is that the success of the work goal involved not just different actions, but different *actors*. Increasing work participation was not a matter of changing the behavior of caseworkers so much as it was a function of *introducing new agents* (such as workforce agencies and offices) to transmit and actualize the serious and strong work focus of the 1996 law.

The second lesson involves “second-order devolution,” referring to the fact that many states relied on local human service systems to establish new goals for welfare reform that fit local values and conditions. Second-order devolution allows different communities to encompass local beliefs in ways that fit the political, organizational, and administrative terrain. This point is particularly important in policy areas as sensitive and hard-to-define as promoting healthy marriages and preventing teen and out-of-wedlock pregnancies.

In this context, we believe that what is particularly needed now is not more research on problems and conditions in this field, but rather *institutional experimentation*. on *how* state and local governments can be influenced to act in this policy area. Consistent with administration policy, our sense is that what should be done is to provide “Healthy Family Grants” to states under which they

select and support local initiatives tied to the goals, politics, and conditions of particular regions and communities.

Funds for “institutional experimentation” should be provided on a flexible basis with clear and specific requirements about feedback. States should be required to conduct implementation evaluations: Was a particular plan or set of activities carried out in the way that was intended? What types of organizations (public, faith-based, secular, private) participated? In what ways? How and by what oversight processes were “Healthy Marriage Grants” administered? How did contractors track service provision and oversight and relate to public agencies? How many people were affected? What are the characteristics of the affected population? What performance measures explain or appear to explain their success or failure? Protocols of specific questions should be built into these grants with reports required to be submitted to the state, filed with HHS-ACF and made public. Emphasis should be placed on understanding the character, role, and effectiveness of different types of service providers, both direct and indirect (that is using vouchers).

There is no “one-size-fits-all” approach for the family formation and pregnancy prevention goals of welfare reform. Thus, a key question is how much leeway should be allowed to states in selecting goals and sites for institutional experimentation. The hardest part of infusing goals of this kind into the work of government bureaucracies and their agents is figuring out how to shape what is done while at the same time recognizing that in sensitive areas like family policy there are bound to be subtle ways in which local values affect what can be achieved.

At its roots, the 1996 Personal Responsibility Act is about behavior modification. It seeks to modify two kinds of behavior, the labor participation, family and reproductive behavior of individual poor family heads and the bureaucratic behavior of the agencies that administer programs to aid nondisabled, working-aged, poor family heads with children. What is especially needed now to make progress on family formation and pregnancy prevention goals is institutional knowledge about the types of agents (public, nonprofit, faith-based) that can be integrated into human service systems to change both types of behavior. The best way for governmental leaders to have influence in advancing values about the ways in which welfare bureaucracies and their agents can curb the formation of dysfunctional families, a longstanding challenge and dilemma for welfare policy in the U.S., is to learn in systematic ways and in depth about who can deliver services effectively.

## Notes

- 1 *Personal Responsibility and Work Opportunity Reconciliation Act of 1996*, H.R. 3734, Section 101.
- 2 In *Working Toward Independence*, its most recent plan for reauthorizing PRWORA, the Bush administration posited the goal as “two-parent *married* families” (emphasis added). This is due, in part, to the recent argument by James Q. Wilson that “Children are as likely to be poor living with cohabiting parents as are those living with a single mom.” See James Q. Wilson, *The Marriage Problem: How Culture Has Weakened Families* (New York: HarperCollins, 2002), p. 7. This assessment also supports the argument of Wade Horn, the World Health Organization, and others that children are better off in married rather than cohabiting two-parent families. See Wade F. Horn, “Wedding Bell Blues: Marriage and Welfare Reform,” *Brookings Review* 19 (3) (Summer 2001): 39–42. For evidence of the effects on children of single-parent families, see Sara McLanahan and Gary Sandefur, *Growing Up with a Single Parent: What Hurts, What Helps* (Cambridge: Harvard University Press, 1994).
- 3 Thomas Gais and R. Kent Weaver, “State Policy Choices Under Welfare Reform,” *Brookings Policy Brief* no. 21, April 2002. The authors point out that even these mandates included some flexibility, especially if states were willing to use their own funds.
- 4 For a description of this approach, see Richard P. Nathan, “The Methodology for Field Network Evaluation Studies,” in *Studying Implementation: Methodological and Administrative Issues*, Walter Williams, ed., Chatham House Publishers, Inc., Chatham, New Jersey, 1982. See also Irene Lurie, “Field Network Studies,” in *Implementation Analysis: An Evaluation Approach Whose Time Has Come*, Thomas Corbett and Mary Clare Lennon, eds. Washington, DC: Urban Institute Press, 2003.
- 5 Our network of field researchers gave us the names of leading Republicans and Democrats in each chamber of the state legislature sitting on committees with jurisdiction over welfare and family policy, and we contacted them for interviews. We conducted 38 of 90 possible interviews between October 2001 and August 2002, yielding a response rate of 42 percent. Each telephone interview lasted 20-40 minutes.
- 6 Whether or not expenditures are substantial is a subjective judgment of the network of field researchers for the 18 states. This judgment is based mainly on interviews with program operatives.
- 7 Researchers have developed many typologies for categorizing the means, or instruments, or tools used to achieve policy ends. For one typology similar to that proposed here. See Anne Larson Schneider and Helen Ingram, *Policy Design for Democracy*, Lawrence: University of Kansas Press, 1997, pp. 93-95
- 8 According to the Administration for Children and Families, “Though the direct activities to date addressing family formation goals in TANF have been very small, States are beginning to explore intensive programs and policies that hold promise for helping families and couples build skills that can contribute significantly to forming strong [and] healthy marriages,” Department of Health and Human Services, *2001 TANF Annual Report to Congress*, p. VII-1. See also Karen N. Gardiner, Michael E. Fishman, Plamen Nikolov, and Stephanie Laud, *State Policies to Promote Marriage: Preliminary Report*, Lewin Group, March 2002; and Mary Parke and Theodora Ooms, “More Than a Dating Service? State Activities Designed to Strengthen and Promote Marriage,” Center for Law and Social Policy, Policy Brief #2, October 2002, pp. 1-8. The Lewin Group and CLASP studies document state statutes and regulations as well as programs, while we focus on publicly funded operational programs.
- 9 Governor Keating’s inaugural address, January 11, 1999. See [www.governor.state.ok.us/inaugtext.htm](http://www.governor.state.ok.us/inaugtext.htm). Keating noted that the state had one of the highest divorce rates in the nation.
- 10 GIFT was created by legislation in 1994. It is chaired by the governor and his wife. Web Site: [www.utahgift.org](http://www.utahgift.org).
- 11 Web Site <http://UtahMarriage.org>.

- 12 Of the 18 sample states, Oklahoma is distinctive because of the extraordinary efforts the state has made to promote marriage and strengthen two-parent families.
- 13 For details concerning developments in Oklahoma, see Deborah A. Orth, "Responses to the Family Formation and Pregnancy Prevention Goals of PRWORA: Oklahoma Emphasizes Marriage," unpublished manuscript, September 2002.
- 14 For more about PREP, see [www.prepinc.com/main/about\\_us.asp](http://www.prepinc.com/main/about_us.asp). A Christian PREP curriculum is also available, and the PREP curriculum is being adapted for specific populations such as Spanish speakers.
- 15 Data are from *Oklahoma SDS Profile by County* as of June 2002, provided by Public Sector Strategies, and Peggy Butcher, TANF program administrator, phone interview, August 12, 2002. Some 13 percent of those trained to be PREP instructors are from Youth and Families Services, 11 percent are from the Extension Service, 11 percent are from the Department of Health, and 4 percent are from the Department of Human Services.
- 16 Oklahoma reported some 14,000 TANF recipients in August 2002. About half of those clients were adult "required registrants." The rest are child-only cases. If 25 percent of PREP workshop participants are TANF clients, then about 400 of the 7,000 adult TANF clients have enrolled, or about six percent. Data concerning TANF caseloads are from Margaret Butcher, Oklahoma TANF program administrator, phone interview, August 15, 2002.
- 17 When researchers evaluate the effectiveness of their own programs, especially programs like PREP that are purchased by end-users, it invariably raises a red flag; but the fact that the National Institute of Mental Health funded some of the evaluation studies of the PREP program adds confidence to the results of research.
- 18 K. Hahlweg, H. J. Markman, F. Thurmaier, J. Engl, and V. Eckert, "Prevention of Marital Distress: Results of a German Prospective Longitudinal Study," *Journal of Family Psychology* 12 (1998): 543–56; H. J. Markman, F. Floyd, S. M. Stanley, and R. Storaasli, "The Prevention of Marital Distress: A Longitudinal Investigation," *Journal of Consulting and Clinical Psychology* 56 (1988): 210–17; H. J. Markman, M. J. Renick, F. Floyd, S. Stanley, and M. Clements, "Preventing Marital Distress Through Communication and Conflict Management Training: A Four and Five Year Follow-up," *Journal of Consulting and Clinical Psychology* 61 (1993) 70–77; M. J. Renick, S. Blumberg, and H. J. Markman, "The Prevention and Relationship Enhancement Program (PREP): An Empirically Based Preventive Intervention Program for Couples," *Family Relations* 41 (1992): 141–4; Scott M. Stanley, "Making a Case for Premarital Education," *Family Relations* 50 (2001): 272–80.
- 19 D. W. Trathen, *A Comparison of the Effectiveness of Two Christian Pre-marital Counseling Programs (Skills and Information-Based) Utilized by Evangelical Protestant Churches*, University of Denver, *Dissertation Abstracts International*, 56/06-A, 2277, 1995; B. Van Widenfelt, C. Hosman, C. Schaap, and C. van der Staak, "The Prevention of Relationship Distress for Couples at Risk: A Controlled Evaluation with Nine-Month and Two-Year Follow-ups," *Family Relations* 45 (1996): 56–165.
- 20 Scott M. Stanley, "Making a Case for Premarital Education." *Family Relations* 50 (2001): 272-280.
- 21 For a discussion of selection effects in research evaluating relationship skills education, see S. M. Stanley and H. J. Markman, "Acting on What We Know: The Hope of Prevention, in T. Ooms, ed., *Strategies to Strengthen Marriage: What We Know, What We Need to Know* (Washington, DC: Family Impact Seminar, 1998), pp. 37–54.
- 22 These methodological problems are inherent in any research design where true random assignment is impractical or unethical, and where researchers measure outcomes after long periods of time. Still, the evidence that PREP produces positive effects that last over a number of years, while not conclusive, suggests that the curriculum has considerable promise.

- 23 Note that these requirements and incentives apply in Genesee, but not necessarily in other Michigan, counties.
- 24 The classification of a state as high, moderate, or low is based on a summation of TANF initiatives related to family formation, as presented in Tables 1 through 5. Figure 1 shows the variety and number of initiatives by state.
- 25 Oklahoma's TANF program is state-administered. County TANF agencies are state offices, staffed by state employees.
- 26 Interview with Debra Armstrong, August 20 2002.
- 27 Interview with Christine Johnson, August 21, 2002.
- 28 Section 510 and related spending in FY 2002 are from the Center for Law and Social Policy, *Reauthorization Issues Brief: Abstinence Education*, January 2002. TANF/MOE spending on family formation and pregnancy prevention is from Administration for Children and Families Office of Financial Services, Table A: Combined Federal Funds Spent in FY 2000 Through the 4th Quarter, and Table B: State Maintenance of Effort Expenditures in the TANF Program in FY 2000. Web Site: <http://www.acf.dhhs/programs/ofs/data/q400/TableApg1.htm> and [TableB.htm](http://www.acf.dhhs/programs/ofs/data/q400/TableB.htm).
- 29 Department of Health and Human Services, Administration for Children and Families, FY2003 Annual Performance Plan, Revised Final FY 2002 Performance Plan, and FY 2001 Annual Performance Report for the Government Performance and Results Act of 1993, Washington, DC, 2002, p. 1.
- 30 See Weaver, *Ending Welfare as We Know It*, 2000, pp 207-217.
- 31 This is not to say that interest groups were excluded from the policy process. On the contrary, as Pamela Wilson's 2002 book on welfare policy making shows, groups representing the interests of low-income families were actively engaged in the welfare policy making process, both in Washington and in the states. See Pamela Winston, *Welfare Policymaking in the States: The Devil in Devolution* (Washington, D.C.: Georgetown University Press, 2002).
- 32 This insight is based on Larry Mead's comments on a paper the co-authors presented at a roundtable chaired by the authors at the 2002 annual meeting of the American Political Science Association in Boston.
- 33 The same was not true for governors' aides who were better informed about policy and program details.
- 34 Ohio Job and Family Services, *Reinvesting in Ohio's Communities: A Summary of Prevention, Retention & Contingency (PRC) Programs*, Executive Summary III, April 2001, p. 1.
- 35 Malcolm L. Goggin, "Implementing Family Policy in Denver County: A Political Hot Potato," paper presented at the annual meeting of the Western Political Science Association, Long Beach, CA, March 22-24, 2002.
- 36 Anne Menard, e-mail to the Web-based TANF Reauthorization Forum, November 30, 2001.
- 37 Web Site: <http://www.rockinst.org>.
- 38 We consider abstinence until marriage education programs, especially those started in 1996 and thereafter, to be new initiatives.
- 39 One of the spin-offs of the campaign was the creation of the nonprofit National Campaign to Prevent Teen Pregnancy in 1997.
- 40 The Department of Health and Human Services also administers Title X of the Public Health Act family planning program. This program serves 4.5 million persons annually, with approximately 900,000 of these clients under the age of 20. In FY 2000, according to ACF's *Annual Report to Congress*, \$102 million was spent by states on pregnancy prevention.

- 41 Since 1997, Congress has required states to use portions of these funds to support prevention projects. In FY 1999, \$9.1 million was used to support 72 projects.
- 42 State of Oregon, *Oregon TANF Plan of 1996*. Web Site: [www.hr.state.or.us/](http://www.hr.state.or.us/). For a detailed case study of what happened in Oregon since 1996 see Melissa Buis Michaux, “Decentralizing Controversy: Oregon’s Teen Pregnancy Prevention Efforts,” Paper presented at the Annual Meeting of the Western Political Science Association, Long Beach, CA, March 22-24, 2002.
- 43 See the state Web site for more information: Web Site: [www.hr.state.or.us/tpp/tppmonth/boysummit.html](http://www.hr.state.or.us/tpp/tppmonth/boysummit.html).
- 44 Douglas Kirby, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*, (Washington, D.C.: The National Campaign to Prevent Teen Pregnancy, 2001).
- 45 Robert Rector, *The Effectiveness of Abstinence Education Programs in Reducing Sexual Activity Among Youth* (Washington, D.C.: The Heritage Foundation, 2002).
- 46 The board settled on five criteria: 1) appropriate or valid experimental or quasi-experimental design; 2) post-intervention data collection for at least six months after intervention; 3) a sample size of at least 100; 4) measurement of actual behavior, as opposed to intentions or attitudes; 5) proper statistical analysis and tests.
- 47 Douglas Kirby, *Do Abstinence-only Programs Delay the Initiation of Sex among Young People and Reduce Teen Pregnancy?* (Washington, D.C.: The National Campaign to Reduce Teen Pregnancy, 2002), p. 8.
- 48 Personal Responsibility and Work Opportunity Act of 1996, H.R. 3734, <http://thomas.loc.gov/cgi-bin/query/D?c104:1:./temp/~c104aDgWH1:e791565>.
- 49 WAGES is the name of the TANF program in Florida.
- 50 U.S. Department of Health and Human Services, Health Resources and Services, *2000 Annual Summary for the Abstinence Education Provision of the 1996 Welfare Reform Law, P.L. 104-193* (Washington, D.C.: U.S. Department of Health and Human Services, July 2002).
- 51 Each state is assigned to a group as a result of summing the number of innovations that are reported in Tables 1 through 5. Examples of the activities are enumerated in the tables and described in detail in the text accompanying the tables.
- 52 Ron Haskins and Rebecca M. Blank, “Welfare Reform: An Agenda for Reauthorization,” In Ron Haskins and Rebecca M. Blank, eds., *The New World of Welfare* (Washington, D.C. Brookings, 2001).
- 53 Ron Haskins and Rebecca M. Blank, “Welfare Reform: An Agenda for Reauthorization,” In Ron Haskins and Rebecca M. Blank, eds., *The New World of Welfare* (Washington, D.C. Brookings, 2001).
- 54 R. Kent Weaver, *Ending Welfare As We Know It*, 2002, pp. 362-3.
- 55 The following case study of “ramping up” is based on the co-authors’ direct observations of steering committee meetings and attendance at the Colorado Marriage Strengthening Conference in Denver.
- 56 The purpose of the order is to “ensure that government action does not interfere with the formation and maintenance of healthy, nurturing families but instead strengthens and supports families.” Governor Bill Owens, *Executive Order D 001 00, 2000*, p. 1.
- 57 Another bill to pay single mothers on welfare to get married — called the “Dr. Laura” bill because the plan was to have Dr. Laura testify at hearings — failed to pass the state legislature when it was laid over for 32 days.
- 58 Minutes from February 5, 2002 meeting, p. 2.

- 59 “Colorado Strengthening Families Conference” Brochure, August 2002.
- 60 Frances Owens, Letter, September 25, 2002. Web Site: <http://www.Colorado.gov/weekofthefamily>
- 61 On the important role of executive leadership see Robert D. Behn, *Leadership Counts: Lessons for Public Managers from the Massachusetts Welfare, Training, and Employment Program* (Cambridge, MA: Harvard University Press, 1991). For evidence that entrepreneurial leadership contributes to the successful implementation of public policy, see Eugene Bardach, *The Implementation Game: What Happens after a Bill Becomes a Law* (Cambridge, MA: MIT Press, 1977), and Malcolm L. Goggin, *Policy Design and the Politics of Implementation: The Case of Child Health Care in the American States* (Knoxville, TN: University of Tennessee Press, 1987).