Teenage Childbearing and Welfare Reform:
Lessons from a Decade of
Demonstration and Evaluation Research

Summarized from a Statement for the
Committee on Ways and Means, Subcommittee on Human Resources, U.S. House of
Representatives, Hearing on Early Childbearing

Rebecca Maynard

In this paper, I share some important facts and findings from recent research on the causes and consequences of teenage childbearing, particularly for teen parents on welfare. I examine what we know about the effectiveness of various programs and policies aimed at delaying early childbearing and improving outcomes for those who do bear children. I conclude by drawing lessons for welfare reform.

The Causes and Consequences of Teenage Childbearing

The odds that a teenager will engage in unprotected sex, become pregnant, and give birth increase in the face of multiple risk factors. These risk factors include coming from a single-parent family, living in poverty and/or a high-poverty neighborhood, low commitment to school, poor academic achievement, and having parents with limited education. For example, White teens living in single-parent households are twice as likely to become teenage parents as those in two-parent families; Black teens living in single-parent families are one and a half times more likely to become teenage parents (Zill & Nord, 1994).

The rise in teenage pregnancy and childbearing results from recent increases in sexual activity and fewer abortions. In 1991, there were 62 births per 1,000 teenage girls, compared with only 50 births per 1,000 in 1986—a 24% increase (Moore, 1994).

Most teenagers do not intend to become pregnant. Over 80% of teenage pregnancies are unintended, and almost 70% of births to teenagers result from unplanned pregnancies (Moore, 1994). A typical explanation is, “It simply happened.” For example, among first-time teenage parents on welfare, over one-fourth had never used any form of birth control prior to having their first child; more than 2 years after giving birth, half reported not using any contraception during their last intercourse (Gleason, Rangarajan, & Schochet, 1994).

These young mothers develop strong commitments to their child, however, and want to do what is best for them. For example, one first-time welfare recipient in the Teenage Parent Demonstration Project said:
I like being a mom. I love my son, nothing could change that... I don’t care about nothing else but him, how he is.

Yet these young mothers face major challenges in fulfilling their goals for their children.

Teenage childbearing often results in a life of poverty for young mothers and their children. Five years after giving birth, 43% of teen mothers are living in poverty (Congressional Budget Office, 1990). Poverty rates are especially high among those living on their own (81%) and those not employed (62%); yet poverty rates are still relatively high among those employed (27%) and those living with a spouse (28%) or adult relative (34%).

Early childbearing lessens the likelihood that young women will complete their schooling, thereby weakening employment prospects. Just over half of all teenage mothers complete their high school education. Those who do finish high school have especially low basic skills (Nord, Moore, Morrison, Brown, & Myers, 1992; Rangarajan, Kisker, & Maynard, 1992; Strain & Kisker, 1989); when combined with parenting responsibilities, these young mothers have limited employment opportunities (Berlin & Sum, 1988; Cohen, Golonka, Maynard, Ooms, & Owens, 1994; Hoffman, Foster, & Furstenberg, 1993; Moore, Myers, Morrison, Nord, Brown, & Edmonston, 1993; Rangaragan, Myers, Maynard, & Bebout, 1994).

Nearly half of young mothers, and 77% of those who were unmarried when they gave birth, end up on welfare after becoming a parent. Moreover, the periods of welfare dependence are substantial. Over 60% of initial welfare spells last 2 or more years and 40% last at least 4 years (Gleason et al., 1994). In addition, most teenage parents experience multiple spells of dependence, which average 8 to 10 years in total (Ellwood, 1988; Maxfield & Rucci, 1986; U.S. House Ways and Means Committee, 1993).

These high poverty rates are accompanied by numerous other life stresses, some caused by poverty and some contributing to its continuation. Teenage parents are concentrated in poor, often racially segregated, communities characterized by inferior housing, high crime, poor schools, and limited health services. Studies suggest that 10% to 50% of those who give birth before age 18 have been sexually abused, and 10% or more have been physically abused (Boyer & Fine, 1992; Moore, 1994; Roper & Weeks, 1993). This underscores the importance of flexibility within the welfare system to allow alternative living arrangements for some teenage parents.

**Teenage Parents on Welfare**

Teenage parents consume a large share of all welfare dollars. Teenage childbearing is estimated to cost over $34 billion a year for the major income social support programs alone (Advocates for Youth, 1994). Indeed, nearly half of all welfare recipients are current or former teenage parents.
Teenage childbearing contributes to the intergenerational transfer of poverty. Teenage parents provide lower quality home environments for their children as measured by such factors as the number of children’s books in the home and reading to children. Moreover, these same factors are strongly related to the odds that children will become teenage parents (Nord et al., 1992; Zill & Nord, 1994); nearly two-thirds of first-time teenage parents on welfare have mothers who also gave birth during their teen years (Maynard, 1993).

Support from family members and other adults is limited for many teenage parents on welfare. Currently, only about half of the young mothers remain at home with other adults (usually a parent). Less than 5% live with the father of their child, only about 30% receive any child support from the noncustodial fathers, and less than 20% receive child support on a regular basis. Some choose to live independently; others do so to escape abusive or otherwise inhospitable home settings.

Employment is the surest means of escape from welfare and poverty. Nearly half of teenagers who leave welfare do so as a result of employment, while only 12% leave as a result of marriage or cohabitation. Over 40% leave for various other reasons, such as administrative closings and geographic mobility. Whether welfare recipients leave welfare due to marriage or employment, nearly 30% will return to welfare within 6 months and two-thirds within 3 years (Gleason et al., 1994). For those welfare recipients who leave welfare for reasons of residential mobility or administrative actions, more than half return to welfare within 6 months and 90% within 3 years.

Having additional children is a major barrier to self-sufficiency for most teenage parents on welfare. Most teenage parents do not want additional children. After the first child, most teens on welfare (83%) do use contraception—most often an effective method like the pill or an IUD (75%) (Maynard & Rangarajan, 1994). Yet they fail miserably in postponing future childbearing. About one-fourth become pregnant again within a year after the birth of their first child, and about half become pregnant again within 2 years. Moreover, most of these pregnancies (75%) are carried to term.

Even though teen parents are using “effective” contraceptive methods, they are not using them “effectively” as indicated by the comments of teen parents involved in family planning programs:

I didn’t plan it, and then again I kind of knew it was going to happen because I wasn’t like really taking the pills like I was supposed to. I couldn’t remember every day to take the pill. And, I still don’t.

I really don’t want to take time off for no more children right now. . . But, I’m allergic to birth control pills.

My boyfriend thinks it [the pill] has something in there killing him.
Marriage is not a serious goal for many teenage parents on welfare. Young mothers cite a number of reasons for their lack of interest in or hope for marriage, including the unreliability of men, their own desires for independence, and the frailty of marriage in their communities.

*It don’t seem like no marriage is gonna work. I don’t want to go through that. Two months later, then he gets seeing somebody else. Then he ain’t got no money or assets for you to collect.*

*When you’re single, it’s better. They treat you so much better when you’re not married, you know. . . . When you’re single, it’s honey this and honey that. When you’re married—do this, do that.*

*I want to be on my own, because you can never depend on a man. . . . Plus, if I go home with money, he and me is going to be arguing. So, it is best to be independent, because you never know that you and that man is going to be together forever.*

**A Field Test of a Reformed Welfare System for Teenage Parents**

In the late 1980s, the U.S. Department of Health and Human Services launched a large-scale test of a mandatory JOBS-type program for first-time teenage parents on welfare, commonly known as the Teenage Parent Welfare Demonstration. The cornerstone of the program was case management to guide and support young mothers into active participation in jobs, job training, or education. By design, the program was modest in cost and operated through state welfare departments.

The program operated on the south side of Chicago and in Camden and Newark, New Jersey. Over a 2½ year period, 6,000 teens had their first child and were already receiving or started to receive welfare. Half of the mothers received regular welfare services, and half were randomly selected to participate in a new program requiring participation in programs geared toward self-sufficiency. The experimental group also received a fairly rich bundle of support services to encourage their compliance requirements; for those who did not comply, welfare grants were reduced by about $160 a month.

Several impacts have emerged from the multifaceted evaluation of the demonstration over a 4-year period:

- Overall program participation rates were very high. About 90% of the eligible young mothers participated in the JOBS-type programs. Yet, this participation rate was achieved only with persistent outreach and follow-up. Over two-thirds of the participants received one or more sanction warnings, and one-third had their grants reduced for noncompliance.
The demonstration had statistically significant, but modest, effects in promoting school enrollment, job training, and employment. It also reduced welfare dependence. Those in the JOBS program were in school, job training, or employed 28% more of the time than those subject to regular AFDC policies. The largest gains were in school enrollment—a 13 percentage point increase from 29% to 42%. Gains in employment and job training rates were in the 4 to 5 percentage point range.

The reformed system led to small increases in earnings and reductions in welfare. The size of the average earnings gains ($20 a month, or 20%) was the same as the size of the average reduction in welfare benefits ($20 a month, or 8%), leaving the mothers no better off financially.

Only those who found jobs experienced significant reductions in poverty. Only about 25% of those who were employed 2 years after enrollment were poor, as compared with over 95% of those who were unemployed. Too few (less than 10%) got married or established stable relationships with male partners to contribute significantly to poverty reduction.

The reformed welfare programs did not succeed in increasing support from noncustodial fathers. Two sites increased paternity establishment by about 10 percentage points, but these increases did not translate into increased child support payments. Awards averaged about $120 to $140 a month; payments averaged less than $50 a month. In large part, the failing in this area was due to low cooperation by local child support enforcement agencies that were skeptical of the pay-off.

The reforms also failed to reduce the incidence of repeat pregnancies and births. These programs offered family planning workshops as well as family planning counseling and support from trained case managers. Yet over half of the young mothers were pregnant within 2 years after enrolling in the study and two-thirds were pregnant again within 30 months after enrollment.

Other Demonstrations and Programs for Teenage Parents

Over the past 10 years, many demonstrations and programs have tried to encourage teenagers to delay sexual activity and/or childbearing, and have tried to support teenage parents to improve their basic skills and employment prospects. These initiatives have provided few answers as to what types of programs work best.

The most promising pregnancy prevention programs provide clear messages on values. They also offer specific strategies and skills for resisting peer pressure to
engage in sex and for using contraceptives effectively after becoming sexually active. Several promising models warrant further study, including the Teen Services Program in Atlanta (Howard, 1985). This school-based program uses a peer or teacher-led program to encourage teens to practice refusal skills to resist peer pressure to become sexually active, as well as to encourage protected sex for those who are sexually active. Another promising model is the Children’s Aid Society Teen Pregnancy Primary Prevention Program in New York. This program, designed by Dr. Michael Carrera from Hunter College, offers reproductive health education and counseling as part of a more comprehensive program to address the needs of teens from disadvantaged backgrounds.

The research on programs to reduce the negative consequences of teenage parenting also provides little guidance for developing effective interventions. While none of the following six programs changed these young mothers’ life courses dramatically, each is noteworthy because it provides important lessons for welfare reform.

- **Job Start** was a 13-site demonstration of education, vocational training, and support services for disadvantaged, young school dropouts. The demonstration serviced about 100 youth between the ages of 17 and 21 between the years 1985 and 1988; about one-fourth were teenage parents. The experimental group was more likely to complete the GED (Cave, Bos, Doolittle, & Toussaint, 1993); the program failed to increase earnings, however, and repeat pregnancies actually increased by 13%.

- **New Chance** was a national demonstration of small-scale, intensive, and comprehensive services for teenage parents on welfare who had dropped out of school. Between 1989 and 1992, the program provided education, training, and extensive social support services for up to 18 months to 1,400 volunteers. The program increased GED completion among the experimental group, but had negative impacts on employment, earnings, and repeat pregnancies and abortions (Quint, Polit, Bos, & Cave, 1994).

- **Project Redirection** was a four-site demonstration of comprehensive services for teenage parents age 17 or younger. Between 1980 and 1981, a total of 300 volunteers received education, training, mentoring, job placement, child care, family planning, and parent training. Compared to sites not involved in the program, the program led to modest increases in earnings, no impact on educational attainment, and a 20% increase in birth rates (Polit & White, 1988).

- **Ohio Learnfare** is a state welfare program designed to keep teenage parent welfare recipients in school through financial incentives and penalties. Extensive case management and support services are available in some sites, but not all. Early results suggest that the program increases the odds that youth will remain in or return to school (Bloom, Fellerath, Long, & Wood, 1993). Results for earnings or repeat pregnancy rates are not yet available.
The Teenage Parent Health Care Program provided up to 18 months of intensive case management by trained medical social workers for about 200 mothers under age 17 and their infants. The program was not directed at education or employment. While there were no impacts on school enrollment, it did reduce by 57% the incidence of repeat pregnancies (O’Sullivan & Jacobson, 1992).

The Elmira Nurse Home Visiting Program was a demonstration of home visiting by nurses to socially disadvantaged women bearing their first child. Of the 400 women served, about half were teenagers. The program reduced verified cases of child abuse by 75%, significantly reduced the rates of repeat pregnancies, and showed hints of increasing employment rates for teenage mothers (Olds, Henderson, Tatelbaum, & Chamberlin, 1988).

All of these programs for teenage parents faced major challenges in getting young mothers to participate and remain in the programs. Programs were able to reach significant portions of the target population only when participation was linked to financial sanctions.

The impact of these programs on human capital development and employment has been modest at best. Programs were successful in encouraging participants to complete GEDs. GED attainment, however, has not led to increased earnings or economic well-being (Cohen et al., 1994).

None of the employment or welfare-focused programs succeeded in helping young mothers control their fertility. Only the two small-scale demonstrations of medically-focused interventions with home visiting or extensive medical social work services show promise in family planning. These programs, however, did not generally succeed in addressing the economic needs of these young mothers and their children.

Lessons for Welfare Reform

The most effective programs for teenage parents share two common characteristics: clarity of purpose and seriousness in their implementation. The one demonstration that succeeded in promoting increased education, job training, and earnings across multiple sites is the Teenage Parent Welfare Demonstration (Maynard, 1993). This project shared three features with the small number of programs showing signs of success: (a) reciprocal obligations between participants and the program, (b) a clear employment focus (although employment was not necessarily a short-run goal), and (c) consequences for failing to meet program performance standards.
Mandatory, full-coverage JOBS-type programs like the Teenage Parent Welfare Demonstration can change key aspects of the welfare culture. All recipients in the Teenage Parent Welfare Demonstration were expected to work toward self-sufficiency by addressing personal barriers, by improving basic and job-specific skills, and/or by gaining work experience. Equally important, the welfare system was obligated to work with the young mothers to address barriers to their pursuit of this goal. Failure on either part resulted in the young mother suffering a significant financial penalty.

Program staff were also held accountable for monitoring the activities and needs of the young mothers and for requesting a grant reduction for those who did not fulfill their obligations in the agreed-upon plan. Programs were not allowed to exempt young mothers from their obligations. Instead, they were challenged to find creative solutions to engage those who were reluctant or who faced greater barriers.

Indeed, we found little difference in outcomes for those who were more reluctant or less reluctant to participate. Moreover, case managers encountered very few clients who truly could not make progress if encouraged and supported. Sometimes case managers had to go to extraordinary lengths to identify the source of a problem and find a solution. For example, one of the Teenage Parent Welfare Demonstration case managers encountered a situation in which she could not understand why a young mother repeatedly failed to show up for program classes. The case manager took the initiative to visit the participant’s home and found that the participant and her partner had to sleep in shifts at night so that one of them could guard their baby’s crib against rats at all times. The case manager helped the couple find better housing, and the young mother began attending program classes.

It is feasible to operate large-scale, universal, full-coverage programs. The Teenage Parent Welfare Demonstration and Ohio’s Learnfare programs illustrate the feasibility of establishing efficient programs to serve a large number of new clients and of managing caseloads in excess of 1,000—scales that would meet or exceed those of most welfare offices.

A key factor in serving these large numbers with few exemptions is providing flexibility; young mothers are required to engage in approved activity, but given latitude in the selection and sequence of activities. This program also promoted cooperation among the young mothers and encouraged them to take responsibility for their actions.

Full-service programs like the Teenage Parent Welfare Demonstration are modest in cost. Including child care costs, the Teenage Parent Welfare Demonstration cost an average of $166 per month. The modest cost is due to both the relatively large scale of the program and the use of technology and management to help case managers handle 50 to 60 clients effectively. Indeed, Ohio’s Learnfare program was equally effective when operated at modest cost and when the basic program was augmented by substantial support services.
Financial sanctions can play a supportive role in welfare programs. Financial sanctions need not hurt young mothers or children and will not do so if the sanctions are used as a case management tool. In the Teenage Parent Welfare Demonstrations, sanctions resulted in young mothers receiving more services and support than they otherwise would. Although a third of the young mothers had their grants reduced for one or more months for noncompliance, staff reached out before and after sanctions to coax, cajole, and pressure them into accepting whatever help was needed to get them back into compliance.

Half of those who received a sanction warning did comply with their service plan or left welfare shortly after their warning. Of those whose grants were reduced, only one-third (about 10% of the entire caseload) experienced a long-term grant reduction. Those who did not have their grant reinstated generally had alternative means of support.

To me, I really didn’t need it, you know. I needed it, but I didn’t need it, you understand. It wasn’t like, “Oh, my God, if I don’t get this check.” It was like, “You can keep the check and everything else that comes with it.” Cause you know, I was never down out struggling.

The clear message from both the young mothers and the case managers is that the financial penalties are fair and effective in changing the culture of welfare from both sides. Clients viewed the demonstration welfare system as supportive, albeit serious and demanding; case managers viewed it as highly motivating for them in their roles as service providers and also for clients who need to assume responsibility for themselves and their children.

The first time they sent me a letter, I looked at it and threw it away. The second time, I looked at it and threw it away again. And then they cut my check and I said, “Uh, oh, I’d better go.”

The quality of existing education and job training services seriously hinders the success of aggressive job-focused programs for teen parents. The public high schools and alternative high schools were insensitive to the needs of young mothers and had many of the problems common to large urban schools. Few job training programs were available to those with low basic skills, and Job Training Partnership Act (JTPA) programs were not effective with youth (Bloom et al., 1993; Cave et al., 1993). Over time, the programs succeeded in working with some of the local providers to tailor their services to the needs of teenage parents.

Child care and transportation services are critical to changing the culture of welfare. Both are real barriers to successful participation in out-of-home activities.
for welfare recipients. Many young mothers opt for free or low-cost care by relatives. As children get older, however, the supply of relative care decreases and the need for more formal, paid arrangements increases.

**Implications for Policy**

Eight conclusions can be drawn from a decade of research on teenage pregnancy and parenting that should influence the shape of the next generation of welfare reform:

1. The rates of teenage pregnancy and births are increasing, resulting in a growing number of mothers and their children living in poverty and depending on welfare.

2. Teenage parents and former teenage parents represent the majority of welfare recipients and consume the majority of welfare benefits. In large part, this is because of their long periods of dependency. Early intervention is critical to changing the culture of poverty and moving these young mothers toward self-sufficiency as quickly as possible.

3. Employment is the only route out of poverty for the vast majority of teenage parents on welfare.

4. Traditional ways of delivering family planning services, which emphasize education and counseling, do not work. Teenage parents on welfare do not want more children, at least in the short run, but most will have them.

5. It is possible to change the culture of welfare among teenage parents and welfare caseworkers through programs that mandate participation and extensive support services.

6. Mandatory programs need not be harmful to children. Holding case managers accountable for addressing client needs will lead to increased levels of support for teen parents and their children. Moreover, teen parents generally view the mandates as fair, when accompanied by extensive support.

7. Traditional approaches to second-chance education and job training are marginally effective. It is critical to find ways of keeping more teenagers and teenage parents on the traditional school-to-work transition, while simultaneously strengthening second-chance options.

8. Child care and transportation are essential for promoting education and employment and are less costly than generally assumed.
References


Rebecca Maynard, Ph.D. is a Trustee Professor of Education at the University of Pennsylvania. She is a Senior Fellow at Mathematica Policy Research, Inc, where she served as senior vice president and director of Princeton research. She designs and evaluates education, employment and welfare policies and programs. Dr. Maynard’s research interests include minority educational attainment, educational research and policy, and adolescent childbearing.