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Public and Private Sources of Assistance for Low-Income Households

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This study examined the types and combinations of public and private assistance received by three types of low-income households, including those with children, without children, and elderly without children. Using data from the 1996 and 2001 panels of the Survey of Income and Program Participation (SIPP), the results indicate that a large percentage of low-income households rely on public assistance, and receipt of private assistance is much less common. Approximately 7% of the sample use both types of assistance. The findings highlight differences in combinations of public and private assistance used by different household types. We also found some significant differences in the factors that determine receipt of public and private assistance. Practice and policy implications are discussed.

Keywords: *pubic assistance; private assistance; combination of assistance; poverty; TANF*

Approximately 37 million people (12.6% of the United States population) live in poverty, an income level that the federal government estimates cannot provide the basic necessities of living (U. S. Census Bureau, 2006). Poverty rates among various population groups are not constant, but reflect social policy

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decisions and racial/ethnic, gender, and citizenship status divisions that exist within this country. For example, the elderly experience a relatively low rate of poverty (10.1%), compared to children (17.1%). Only 8.3% of non-Hispanic white children are poor, while 24.9% of Black and 21.8% of Hispanic children live in poverty. Approximately 29% of single female heads of households are poor, more than two times the poverty rate of single male heads of households, and more than five times the poverty rate of married couples. The percentage of non-citizens who live in poverty (20.4%) is almost double that of citizens.

When income from earnings, assets, other transactions in the market place, and social insurance programs does not meet the needs of low-income individuals and families, they rely on assistance from other public and private sources (Danziger, Corcoran, Danziger, & Heflin, 2000; Edin & Lein, 1996; Hollar, 2003; Teitler, Reichman, & Nepomnyaschy, 2004). Public sources include means-tested government benefits such as welfare, food stamps, subsidized housing, and Medicaid. Charitable and non-profit organizations, such as churches, food emergency providers, and other community groups, and social networks are the two main sources of private assistance. Private sources provide a variety of assistance, including cash, clothing, food, and child care.

As the literature review that follows demonstrates, recent social policy changes have weakened the safety net for low-income individuals and families. The federal government's reduced commitment to low-income households highlights the importance of the current study, which identifies the types and combinations of public and private assistance that low-income households rely on to meet their basic needs.

Public Sources of Assistance

Since the 1970s, several major changes reflecting the conservative Reagan era, George Bush Sr.'s "thousand points of light," Bill Clinton's "welfare reform," and most recently George W. Bush's "faith-based and community initiatives" have been made in federal social policy that affect the poor and vulnerable (Brooks, 2004; Marwell, 2004). The changes include cutting federal government funding for public benefits, increasing reliance on volunteer and private activity,

shifting federal funds to the private sector (referred to as “privatization”), and shifting administrative decisions related to program participation, such as eligibility and benefit levels, from the federal government to lower levels of government (referred to as “devolution”).

According to Hacker (2004), these post-1970s changes have not collapsed this country’s welfare state, but they have eroded social protection for vulnerable households in at least three main ways. First, privatization and devolution have altered, sometimes radically, the administration of previously stable social policies. Second, social programs now cover fewer of the economic risks faced by many households as a result of recent changes in employment (e.g., increases in low-wage, part-time, and unstable employment) and family structure, including high rates of marital disruption and single-parent households. Finally, significant changes in welfare policy have occurred, with the most extensive changes occurring as a result of the passage of the 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA).

PRWORA replaced the Aid to Families with Dependent Children (AFDC) program with Temporary Assistance to Needy Families (TANF). Instead of providing an entitlement to cash benefits for poor families with children, TANF provides temporary, employment-based cash assistance. States have increased discretion in designing and implementing their TANF programs, resulting in variability in eligibility requirements, benefits, and services. PRWORA also reduced other program benefits for low-income households. Examples of these include restrictions on food stamp eligibility for able-bodied adults without dependents who fail to meet work requirements, more stringent rules to qualify for Supplemental Security Income (SSI) for individuals with disabilities, and further decreases in immigrants’ eligibility for many federal program benefits (for an extensive review of these changes, see Greenberg et al., 2002).

The TANF program has resulted in dramatic declines in welfare caseloads and is related to increased employment, earnings, and economic well-being for low-income families (Cancian, Haveman, Meyer, & Wolfe, 2002; Danziger et al., 2000). Despite these positive outcomes, other families exiting

or declining to receive TANF benefits are poor, are worse off financially than under the previous AFDC program, secure short-term, low paying employment providing few or no benefits, and continue to receive some type of means-tested benefits (Cancian, Meyer, & Wu, 2005; Ozawa & Yoon, 2005). Receiving assistance from means-tested benefit programs is common among all low-income households (Mosley & Tiehen, 2004; Teitler et al., 2004).

With recent changes in government benefit programs, private sources of assistance, including charitable and other non-profit organizations and social networks, become increasingly important to the economic well-being of low-income households.

Private Sources of Assistance

Charitable/non-profit organizations. Since the 1980s, private, nonprofit social agencies and other community-based organizations have relied heavily on financial support from the federal government. Instead of providing direct material or income assistance to low-income households, these organizations primarily provide a range of supportive assistance such as child care, employment training, and community development activities, some of which can contribute to the economic well-being of low-income households (Lynn, 2002; Marwell, 2004). Other local non-profit and charitable groups have responded to the unmet needs of low-income households by providing clothing and limited cash assistance and by establishing shelters and food assistance programs (Daponte, 2000; Edwin, 1991).

Food emergency program use among low-income households is common, with approximately one-third of these households using a food pantry or soup kitchen within a year (Ahluwalia, Dodds, & Baligh, 1998; Daponte, 2000). Both current and former welfare recipients frequently access assistance, including shelter, food, and clothing, from churches, community groups, and private, nonprofit organizations (Danziger et al., 2000; Edin & Lein, 1996; Hollar, 2003). Assistance from private sources can be particularly critical to unemployed mothers, as Danziger et al. found that approximately 50% of them receive assistance from private community sources. For unauthorized

immigrants, who are ineligible to receive public benefits, assistance from private sources can be especially important (Moretti & Perloff, 2000).

Assistance from private community sources is important to low-income households. However, when low-income individuals and families cannot meet their basic needs through earnings and/or public benefits, they tend to seek assistance from community-based agencies only after assistance is not available from their social networks (Ahluwalia et al., 1998).

Social Networks. Social networks, referring to the personal connections individuals have with others, such as extended family, friends, co-workers, neighbors, and acquaintances, can provide a variety of assistance to low-income households (Ahluwalia et al., 1998). Scholars have defined types of social support received from social networks in various ways (e.g., Henly, Danziger, & Offer, 2005; Thoits, 1995). Common categories of social support include emotional (communicating reassurance, caring, and concern), informational (giving advice, opinions, and information), and instrumental (providing transportation, child care, and other economically-related assistance). This review focuses on instrumental assistance.

A recent study of former and current welfare recipients and a review of similar literature (Henly et al., 2005) suggest that receipt of cash assistance from low-income individuals' social networks is uncommon; and when such financial assistance is received, it is small compared to income from welfare benefits or monthly earnings. Researchers, however, acknowledge that social networks are an important safety net for low-income households (Danziger et al., 2000; Edin & Lein, 1996; Hollar, 2003; Litt, Gaddis, Fletcher, & Winter, 2000). In addition to providing small amounts of cash, social networks provide food, housing, clothing, childcare, and transportation, support employment, and prevent hardships such as homelessness (Harknett, 2006; Henly et al., 2005; Passero, Zax, & Zozus, 1991).

Compared to more economically advantaged households, low-income households have the greatest needs and experience the highest number of chronic life and adverse financial events, yet they have the smallest and most economically disadvantaged social networks (Auslander & Litwin, 1988;

McLeod & Kessler, 1990). These life problems and network characteristics frequently result in the inability of low-income households to obtain the needed assistance from their social support networks, despite the culturally strong value placed on social support among many vulnerable groups (Jayakody, 1998; Mickelson & Kubzansky, 2003).

Combining Sources of Assistance

Historically, economically disadvantaged households have combined income from available earnings with multiple types of public and private assistance, a practice which Zippay (2002) refers to as "income packaging." In his own research, Zippay found that displaced steel workers combined earnings and public and private assistance in different ways over time, but they all drew on multiple sources of external assistance during the years immediately following the job losses. The sources included social insurance programs, means-tested benefits, and social networks. Other researchers have examined combinations of public and private assistance accessed by low-income single mothers, food pantry users, the homeless, and the elderly.

One of the four main themes of Litt et al.'s (2000) qualitative study of 7 former TANF recipients was their reliance on both public (e.g., food stamps, school meals, and Medicaid) and private (e.g., food pantries and family) sources of assistance. A study on a larger sample of current or former welfare recipients confirmed the importance of using both public and private assistance and also suggests that using particular types of assistance depends on the mother's work history (Danziger et al., 2000). For example, receiving TANF and food stamp benefits declined as work involvement increased during an approximately two-year period (74.6% and 82.1% of mothers not working, and 40% and 68% of mothers working in all months received TANF and food stamp benefits respectively). Receiving food, shelter, or clothing from charitable groups also was tied to mothers' work, ranging from 47.8% of unemployed women to 20.7% of women working in all months. However, receiving assistance from social networks was approximately 13%, regardless of whether the mothers worked in none or all of the months prior to the survey. Edin and Lein (1996)

reported similar findings on the relation between work and using public and private sources of assistance in their sample of low-income, single mothers.

Hollar (2003) found that the overwhelming majority (82%) of former TANF recipients received assistance from either a public or private source, but only 9% of the mothers received assistance from church or other community groups. The importance of public and private assistance after welfare reform also was confirmed in a sample of new, unwed mothers in 20 large cities (Teitler et al., 2004). Receiving assistance from public programs and social networks, including families, friends, and the child's father, was almost universal (94% and 96% respectively). The majority of the mothers relied on a combination of public and private support.

Several studies surveying different types of low-income households have examined the relation between food pantry use and food stamps. Daponte (2000) found that approximately one-half of low-income households were using food stamps at the time of her 1993 survey, compared to one-third that had used a food pantry within the previous 30 days; only one-quarter of the households receiving food pantry assistance also used food stamps. Bartfeld (2003) found approximately the same percentage of single mothers who accessed food pantries were currently receiving food stamps. She concluded that the mothers used food pantries as an alternative, not as a supplement, to food stamps. A more recent study confirmed that the use of food pantries was low compared to the use of food stamps, as was the simultaneous use of both programs (Mosley & Tiehen, 2004). However, over a three-year period approximately 69% of food pantry users also received food stamps, and one-third of food stamp recipients also visited a food pantry, suggesting that low-income households access the two programs when they are needed.

In a sample of low-income individuals seeking or receiving assistance from private, non-profit agencies, approximately 82% had used at least one public or private assistance program within the previous 12 months (Ahluwalia et al., 1998). Participation in public assistance programs was as high as 72% for AFDC, with approximately one-third of the participants having used a food pantry/soup kitchen. The homeless

also rely on assistance from both public and private sources, as over one-half of the homeless in a Los Angeles study received a government benefit from a means-tested (e.g., AFDC, food stamps, and general relief) or social insurance (e.g., unemployment compensation) program. Approximately 33% recently had received cash assistance (average of \$80) from family or friends, and social networks also provided housing and meals (Schoeni & Koegel, 1998).

Research on public and private sources of assistance for low-income elderly individuals is rare, but one national study (Krause & Shaw, 2002) found that 10.5% of elderly individuals received a means-tested benefit (e.g., SSI and food stamps), with women being much more likely to receive such assistance (27% were men; 73% were women). Older men, but not women, who used public assistance reported receiving less social support from family and friends, were less satisfied with the assistance they received, and experienced more negative interactions compared to older men not receiving such assistance.

As the previous review indicates, low-income households use different patterns and types of public and private assistance, and this use likely varies over time, depending on availability and need. The review also indicates that public sources of support tend to predominate, both before and after welfare reform.

The Current Study

We used data from the Survey of Income and Program Participation (SIPP) to examine the use of public and private assistance among low-income households. As the previous review indicates, past studies have examined these sources of support in specific populations such as current and former welfare recipients, food emergency program users, and the homeless. The current study analyzes three mutually exclusive groups of low-income individuals and families, including households with children (containing both elderly and non-elderly members), non-elderly households without children, and elderly households without children. We chose to examine these three types of low-income households for two main reasons. First, no or few studies have used national data

to determine the public and private assistance received by these three types of households. Second, particular public assistance benefits are available only to families with children (e.g., school meals and TANF), and the elderly are eligible for some social program benefits (e.g., Medicaid) based on their age. Compared to previous research, we also examine a broader range of public and two types of private sources of support, including nonprofit or charitable organizations and social networks.

We examined the following research questions: First, what types of public and private assistance do low-income households use and does the use of public and private assistance vary by household type? Second, what factors are associated with the receipt of any public and any private assistance? Third, do low-income households combine public and private assistance, and do the patterns vary by type of household?

Method

Data and Sample

In this analysis, we used data from the 1996 and 2001 panels of the SIPP, a longitudinal survey on nationally representative samples of noninstitutionalized U. S. households. The SIPP is conducted every four months within an approximately three- to four-year period for each panel. Interviews for the 1996 panel were conducted between January 1996 through February 2000, and the 2001 panel followed another group of respondents from February 2001 to January 2004. At each interview, a core questionnaire and various "topical modules" were administered. The core questionnaire contains information on labor force, income, assets, family composition, and program participation. The topical modules include information on a variety of subjects such as education, employment, earnings, immigration, child care, and welfare reform. Data for this analysis were taken from interviews conducted between August and November 1998 (1996 panel) and between June and September 2003 (2001 panel) when the wave 8 welfare reform data were collected. This allowed us to analyze the use of public and private assistance the year PROWA was implemented and six years later. The core questionnaire provided

information on the public assistance variables and most of the sample characteristics, and the topical modules on welfare reform and adult well-being were used to construct the private assistance variables.

Respondents who were at least 18 years old and whose family income at the month of the interview was less than 185% of the federal poverty line were included in the study. We included respondents with income less than 185% of poverty, because this is the upper limit of eligibility for receiving some means-tested benefits such as the Special Supplemental Program for Women, Infants, and Children (WIC) and school meals. We also restricted our analysis to respondents in each panel who had valid data on our independent and dependent variables, resulting in a sample of 23,168 respondents (12,311 in the 1996 panel; 10,857 in the 2001 panel).

Measures

Dependent variables. In our analysis, we defined two main dependent variables: the receipt of public and private assistance during the four months prior to the interview. We also examined combinations of these types of assistance. Our public assistance variable included three forms of cash benefits, including AFDC or TANF, general assistance, and SSI. In addition, we included receipt of non-cash benefits from the food stamp, school meals, Medicaid, and WIC programs, and child care, energy, and public housing assistance. The variable, receipt of public assistance, was coded 1 if the respondents reported receiving any cash or non-cash benefits; and coded 0, if they received no benefits.

We measured receipt of assistance from two private sources, including non-profit or charitable organizations and social networks (family, relatives, friends, and employers). The two private sources assisted with (1) transportation (e.g., gas vouchers, bus or subway tokens or passes, rides to medical appointments); (2) child care payments; (3) food (e.g., money, vouchers, or certificates to buy food; food or meals from a shelter, soup kitchen, or charity); (4) clothing; (5) housing expenses; and (6) short-term cash. We also used responses to questions related to whether the two sources of private support provided assistance for evictions, telephone line disconnections, gas,

oil, or electric bills, rent or mortgage, or seeing a dentist and a doctor. Because the percentage of the sample receiving either of the two types of private assistance was low (less than 5%), we combined the two categories in our multivariate analysis. Receipt of private assistance was coded 1, if respondents reported receipt of any private assistance, and 0 otherwise.

Independent variables. In our multivariate analyses, we examined multiple factors that previous research suggests influences receipt of private or public assistance among low-income households (e.g., Biggerstaff, Morris, & Nichols-Casebolt, 2002; Daponte, 2000; Martin, Cook, Rogers, & Joseph, 2003). The covariates included age, gender, marital status, education, race/ethnicity, citizenship status, number of respondent's children in the household less than age 18, assets (home and car ownership), region of country, living in a metropolitan area, history of welfare receipt, employment status, work disability, and level of poverty. Finally, we controlled for the year of the SIPP panel. Table 1 presents the variable descriptions and weighted frequency distributions of the characteristics by the three types of households: with children, non-elderly without children, and elderly without children. Although variations on the characteristics exist among the three types of households, none of the results are unexpected.

Data Analysis

Weighted frequency distributions were used to examine the use of public and private assistance, combinations of the two types of assistance, and whether the use of public and private assistance varied by household type. We used multivariate logistic regression to identify the factors associated with the receipt of any public and any private assistance. Multivariate logistic regression estimates the effects of each independent variable on the log odds of the relative likelihood of receiving any of the two types of assistance while controlling for the effects of the other independent variables (Allison, 1999).

Table 1. Characteristics of Low-Income Individuals by Household Type (Weighted Descriptive Statistics)

Characteristics	All sample (N=23,168)	Elderly and Non- elderly with Children (N=10,031)	Non- elderly without Children (N=7,670)	Elderly without Children (N=5,467)
<i>Age</i>				
18-24	14.1%	19.1%	17.0%	0.0%
25-34	19.0%	32.9%	14.0%	0.0%
35-44	19.7%	31.2%	17.9%	0.0%
45-64	24.0%	14.4%	51.1%	0.0%
65 and older	23.2%	2.4%	0.0%	100.0%
<i>Gender</i>				
Male	40.5%	39.0%	48.2%	31.1%
Female	59.5%	61.0%	51.8%	68.9%
<i>Marital Status</i>				
Married	43.4%	58.3%	28.8%	37.5%
Widowed	12.9%	2.3%	5.5%	45.0%
Divorced/separated	17.2%	14.7%	23.8%	11.8%
Never Married	26.5%	24.7%	41.9%	5.7%
<i>Education</i>				
< High School	33.7%	32.3%	27.4%	46.2%
High School	34.0%	34.5%	34.3%	32.7%
> High School	32.3%	33.2%	38.3%	21.1%
<i>Race/Ethnicity</i>				
White	62.1%	49.9%	67.0%	78.0%
Black	16.6%	18.8%	16.9%	11.8%
Hispanic	16.1%	24.7%	11.4%	6.9%
Other	5.2%	6.6%	4.7%	3.3%
<i>Citizenship Status</i>				
Citizen	89.1%	82.1%	92.5%	97.2%
Non-citizen	10.9%	17.9%	7.5%	2.8%
<i>Children < 18 years old</i>				
0	57.1%	0.0%	100.0%	100.0%
1	13.8%	32.2%	0.0%	0.0%
2	14.6%	33.9%	0.0%	0.0%
> 2	14.5%	33.8%	0.0%	0.0%
<i>Owned a home</i>	55.0%	49.6%	52.1%	69.9%
<i>Owned a car</i>	63.7%	65.4%	64.8%	58.9%
<i>Region of Country</i>				
Midwest	20.9%	18.8%	22.6%	22.4%
South	40.6%	40.9%	40.2%	40.6%
Northeast	17.6%	16.0%	17.6%	20.8%
West	20.9%	24.3%	19.6%	16.2%
<i>Metropolitan Status</i>				
Metropolitan statistical area	53.0%	53.3%	52.2%	53.7%
Non-metropolitan	47.0%	46.7%	47.8%	46.3%
<i>Welfare History (ever received)</i>				
	4.7%	9.7%	1.5%	0.0%

(table continues next page)

Table 1. Characteristics of Low-Income Individuals by Household Type (Weighted Descriptive Statistics) [continued from previous page]

Characteristics	All sample (N=23,168)	Elderly and Non- elderly with Children (N=10,031)	Non- elderly without Children (N=7,670)	Elderly without Children (N=5,467)
<i>Employment status</i>				
Full-time (35+ hours per week)	26.9%	39.6%	27.5%	1.1%
Part-time	18.0%	21.8%	22.1%	4.3%
Retired	21.7%	2.3%	8.7%	79.7%
Unemployed	33.4%	36.3%	41.7%	14.9%
Work Disability	17.0%	11.7%	30.4%	6.2%
<i>Level of Poverty</i>				
< 50%	16.3%	17.3%	22.7%	4.2%
50-99%	25.2%	25.0%	25.4%	25.0%
100-149%	32.9%	33.0%	27.4%	41.4%
150-184 %	25.6%	24.7%	24.5%	29.4%
<i>Panel status</i>				
1996	51.3%	53.1%	48.1%	52.8%
2001	48.7%	46.9%	51.9%	47.2%

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels

Results

Use of Public and Private Assistance

Table 2 shows the use of public and private assistance by household type. Although a low percentage of all households (approximately 12%) received cash benefits, households with children were much more likely to receive non-cash benefits (approximately 70%, compared to 28.6% of non-elderly and 25.9% of elderly without children). Not surprising, in contrast to other household types, households with children were more likely to receive AFDC/TANF (7.0%), food stamps (21.9%), WIC (10.9%), and school meals (58.4%). On the other hand, households without children were approximately twice as likely to receive SSI compared to households with children (5.2%). A smaller percentage of elderly households without children (9.0%) received food stamps, compared to households with children (21.9%) and other households without children (12.0%). Elderly households also were less likely (6.4%) than non-elderly households with and without children to receive any private assistance (11.1% and 9.5% respectively). An even larger difference exists in receiving assistance from social

networks between elderly households without children (1.6%) and other households with (6.0%) and without children (5.0%).

Table 2. Types of Public and Private Assistance (Weighted Descriptive Statistics)

Sources of Assistance	All sample (N=23,168)	Elderly and Non- elderly with Children (N=10,031)	Non- elderly without Children (N=7,670)	Elderly without Children (N=5,467)
<i>Public Assistance—Cash Benefit</i>				
AFDC or TANF	3.2%	7.0%	0.6%	0.1%
General assistance	0.9%	1.4%	0.9%	0.2%
SSI	8.8%	5.2%	11.8%	11.0%
<i>Non-Cash Benefit</i>				
Food Stamps	15.6%	21.9%	12.0%	9.0%
Medicaid	20.1%	21.8%	19.3%	18.3%
Child care assistance	0.6%	1.5%	0.1%	0.0%
WIC	5.0%	10.9%	0.9%	0.0%
Energy assistance	2.9%	3.1%	2.3%	3.3%
Public housing assistance	9.4%	10.2%	8.1%	9.9%
School meals	26.4%	58.4%	3.8%	0.1%
<i>Summary variable</i>				
Any cash benefit	11.9%	11.6%	12.8%	11.1%
Any non-cash benefit	45.9%	70.2%	28.6%	25.9%
Any public benefit	46.0%	70.3%	28.9%	26.1%
<i>Private Assistance^a</i>				
Transportation	0.2%	0.2%	0.2%	0.2%
Child care assistance	0.0%	0.1%	0.0%	0.0%
Food, groceries, meals	0.7%	0.7%	0.8%	0.7%
Clothing	0.5%	0.8%	0.4%	0.1%
Housing	2.8%	2.5%	2.5%	3.8%
Short-term cash	0.2%	0.2%	0.2%	0.1%
For home eviction	0.1%	0.1%	0.2%	0.0%
For telephone disconnection	0.5%	0.6%	0.6%	0.1%
For paying utility bills	3.4%	4.6%	3.5%	1.1%
For paying rent or mortgage	2.8%	3.9%	3.0%	0.6%
For seeing a dentist	0.4%	0.3%	0.6%	0.2%
For seeing a doctor	0.8%	0.7%	1.2%	0.5%
<i>Summary variable</i>				
Any private assistance from social networks	4.7%	6.0%	5.0%	1.6%
Any private assistance from charitable/non-profit organizations	4.8%	5.6%	4.5%	3.8%
Any private assistance	9.5%	11.1%	9.5%	6.4%

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels

^aPrivate assistance includes assistance from social networks and from non-profit or charity organizations.

With the exception of elderly households without children, receipt of private assistance from social networks was more common than assistance from non-profit organizations and charitable groups. Help with housing, paying utility bills, and paying rent or mortgage were the most common types of private assistance (ranging from 2.8% to 3.4%). However, the use of these three types of private assistance varied slightly by household type. In comparison to households with children and others without children (2.5%), elderly households were more likely to receive private housing assistance (3.8%). On the other hand, households with children were more likely to receive private assistance for paying electric bills (4.6%) and rent and mortgage (3.9%) than elderly households without children (about 1%). This pattern also is apparent for non-elderly households without children.

Factors Associated with Receipt of any Public and any Private Assistance

Table 3 presents the findings from the two logistic analyses examining the factors associated with the use of any public and any private assistance for low-income households. Female heads of households, Blacks and Hispanics, and respondents with more children, a welfare history, a work disability, and lower poverty ratios were more likely to receive both public and private assistance. For example, low-income households with one child (odds ratio=7.1), two children (odds ratio=14.8), and three or more children (odds ratio=25.2) were significantly more likely to receive public assistance than were those without children. On the other hand, we found that non-citizens and households owning assets (a home or vehicle) and living in a metropolitan area were less likely to receive any public or private assistance.

However, there are some differences in the factors that determine receipt of public or private assistance. First, elderly households were 2.3 times as likely to receive public assistance as those who were 18-24 years old after controlling for other factors, but no significant difference in the likelihood of receiving private assistance between these two groups was found. Second, the effect of marital status on receiving public and private assistance also varied. Married households (odds ratio=.5) and widowed households (odds ratio=.8) were less

Table 3. Multivariate Logistic Analysis of Receipt of Any Public and Private Assistance

Variables	Model 1: Receipt of Any Public Assistance			Model 2: Receipt of Any Private Assistance		
	Coeff.	S.E.	Odds Ratio	Coeff.	S.E.	Odds Ratio
<i>Age (18-24)</i>						
25-34	0.172 **	0.067	1.188	-0.061	0.084	0.941
35-44	0.342 ***	0.068	1.408	-0.143	0.087	0.867
45-64	0.175 *	0.073	1.191	-0.257 **	0.096	0.774
65 and 65+	0.819 ***	0.093	2.268	-0.119	0.127	0.888
<i>Gender (male)</i>						
Female	0.242 ***	0.037	1.273	0.230 ***	0.054	1.258
<i>Marital Status (never married)</i>						
Married	-0.664 ***	0.056	0.515	-0.131	0.072	0.877
Widowed	-0.244 ***	0.073	0.783	0.235 *	0.099	1.265
Divorced/ separated	0.011	0.061	1.011	0.349 ***	0.072	1.417
<i>Education (less than high school)</i>						
High School	-0.415 ***	0.042	0.66	0.033	0.057	1.033
More than high school	-0.815 ***	0.045	0.443	-0.010	0.062	0.990
<i>Race/Ethnicity (white)</i>						
Black	0.706 ***	0.048	2.025	0.263 ***	0.062	1.300
Hispanic	0.714 ***	0.058	2.041	0.169 *	0.077	1.184
Other	0.618 ***	0.079	1.856	0.119	0.107	1.126
<i>Citizenship Status (citizen)</i>						
Non-citizen	-0.137 *	0.065	0.872	-0.485 ***	0.094	0.616
<i>Number children < 18 years old (none)</i>						
1	1.957 ***	0.056	7.075	0.277 ***	0.073	1.319
2	2.694 ***	0.063	14.785	0.157 *	0.080	1.170
> 2	3.227 ***	0.068	25.204	0.367 ***	0.080	1.443
<i>Home Ownership (no)</i>						
Owned	-0.902 ***	0.036	0.406	-1.089 ***	0.054	0.337
<i>Vehicle Ownership (no)</i>						
Owned	-0.309 ***	0.037	0.734	-0.143 **	0.050	0.867
<i>Region of Country (south)</i>						
Midwest	0.071	0.046	1.074	0.088	0.064	1.092
Northeast	0.160 ***	0.050	1.173	0.125	0.068	1.133
West	0.013	0.049	1.013	0.246 ***	0.067	1.279
<i>Metropolitan Area (non-metropolitan)</i>						
Metropolitan statistical area	-0.322 ***	0.036	0.725	-0.163 ***	0.049	0.849
<i>Welfare History (no history)</i>						
Ever Received	0.662 ***	0.095	1.939	0.255 **	0.089	1.290

(table continued next page)

Table 3. Multivariate Logistic Analysis of Receipt of Any Public and Private Assistance (continued from previous page)

Variables	Model 1: Receipt of Any Public Assistance			Model 2: Receipt of Any Private Assistance		
	Coeff.	S.E.	Odds Ratio	Coeff.	S.E.	Odds Ratio
<i>Employment status (no work)</i>						
Full-time (35+ hours per week)	-0.574 ***	0.052	0.564	-0.116	0.073	0.890
Part-time	-0.319 ***	0.052	0.727	0.193 **	0.067	1.213
Retired	-0.436 ***	0.067	0.646	-0.032	0.100	0.968
<i>Work Disability (no disability)</i>						
Disability	1.487 ***	0.055	4.422	0.800 ***	0.064	2.224
<i>Level of Poverty (150-184%)</i>						
< 50%	0.299 ***	0.058	1.348	0.718 ***	0.081	2.050
50-99%	0.891 ***	0.048	2.438	0.594 ***	0.074	1.811
100-149%	0.315 ***	0.044	1.371	0.282 ***	0.074	1.326
<i>Panel status (1996 panel)</i>						
2001	0.167 ***	0.035	1.181	-0.045	0.048	0.956
<i>Intercept</i>	-0.890 ***	0.088		-2.541 ***	0.124	

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels.

Note: Reference categories are in parenthesis.

* p.<.05 **p.<.01 ***p.<.001

likely to receive public benefits, compared to those who were never married. However, widowed low-income households tended to rely on private assistance. Divorced/separated households were significantly more likely to receive private assistance, but they were no more likely to receive public assistance than were never married households. Third, education was an important predictor of receiving public assistance, but not an important determinant of private assistance. Fourth, living in the northeast increased the likelihood of receiving public assistance compared to residence in the south, but living in the west increased the odds of receiving private assistance (odds ratio=1.3). Fifth, those who were employed or retired were less likely to receive public assistance, but only working part-time was related to receipt of any private assistance with the odds ratio (1.1) indicating an increased risk. Sixth, households in the 2001 SIPP panel were 1.2 times as likely to receive any public benefits, compared to households in the 1996 panel.

Given that the number of families receiving cash assistance significantly dropped after PROWA, we conducted

additional analyses for cash and non-cash benefits. We found that households in the most recent SIPP panel were significantly less likely to receive cash benefits (odds ratio=.8), but more likely to receive non-cash public assistance (odds ratio=1.2), compared to households in the 1996 panel when the PROWA was implemented. We found no difference between panels for receipt of private assistance.

Finally, compared with households with the largest incomes (between 150 and 184% of poverty), households in all other income categories were more likely to receive public assistance. These results were expected. Unexpectedly, the poorest households (< 50% of poverty) had the lowest odds ratio (1.4, compared to 2.4 for 50-99% of poverty). The results for receipt of private assistance (odds ratio=2.1) indicate the relative importance of private assistance to these most impoverished households.

Combining Sources of Assistance

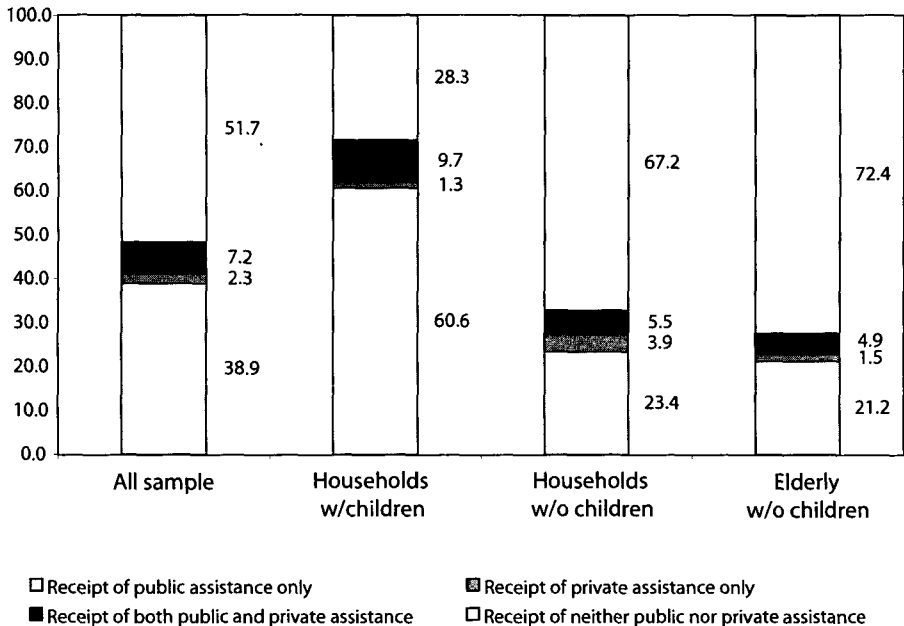
How do low-income households combine private and public assistance? Figure 1 shows the distribution of combinations of private and public assistance among four mutually exclusive categories: neither public nor public assistance, public assistance only, private assistance only, and both public and private assistance. The first bar in Figure 1 (for the entire sample) indicates that during the four-month period nearly two-fifths of low-income households received public assistance only, and more than one-half of the households received neither type of assistance. Approximately 7% of the sample used both types of assistance, and an even smaller percentage (2.3%) of the households used only private assistance. These results indicate that a high percentage of low-income households use only public assistance, and relying exclusively on private assistance is uncommon.

Do combinations of private and public assistance vary by household type? Figure 1 indicates significant differences in the use of combined public and private assistance among different household types. About three-fifths of households with children received public assistance only, compared to approximately one-fifth of both types of households without children. The majority of low-income households without children received neither public nor private assistance (67.2% of

non-elderly households; 72.4% of elderly households), compared with 28.3% of households with children. Less than 2% of households with children and elderly households without children received private assistance only, compared to approximately 4% of non-elderly households without children.

We further examined the relation between public and private assistance. The result of the cross-tabulation indicates that 15.6% of those receiving public assistance also received private support ($\chi^2 [1, N = 23,168] = 908.6, p < .0001$) in the four-month period. This suggests that low-income households that receive public assistance are more likely to receive private assistance. This result was confirmed by a multivariate analysis, indicating that households receiving public assistance were 3.0 times as likely to receive private assistance compared to those not receiving public assistance.

Figure 1. Combined Public and Private Assistance



Discussion

The main purpose of this study was to examine the types and combinations of public and private assistance that three types of low-income households—those with children and

non-elderly and elderly households without children—use to meet their basic needs. We also examined factors associated with receiving public and private assistance.

Public Assistance

Our analysis highlights the importance of public assistance programs for low-income households, a finding that is consistent with previous research (e.g., Danziger et al., 2000; Hollar, 2003; Litt et al., 2000; Teitler et al., 2004). Receiving public assistance, predominately in the form of non-cash benefits, is particularly important for low-income households with children, as approximately 70% of these households receive some type of public benefit during a four-month period. Public assistance also is important for both types of households without children, as more than a quarter of these households receive some type of public benefit.

Despite the importance of public benefits for low-income individuals and families, many households fail to receive assistance from public sources such food stamps, SSI, TANF, government insurance programs, rental assistance, and WIC, even when they appear to qualify (Bitler, Currie, & Scholz, 2003; Daponte, Sanders, & Taylor, 1998; Remler & Glied, 2003; Zedlewski & Rader, 2005). Of course some low-income households might not need particular types of assistance. For example, the elderly receive food stamps at about one-half the rate of younger age groups, which appears to be the result of their decreased need for food assistance (Haider, Jacknowitz, & Schoeni, 2003). The low percentage of elderly households receiving food stamps compared to other households also is evident in our study.

Other reasons for the lack of participation in public benefit programs include strict eligibility criteria and transaction costs, including the number of required visits and completing multiple application forms. Inaccurate or lack of information on benefit availability and eligibility requirements, social stigma, and disqualifications because of program rule violations also can deter participation (Daponte et al., 1998; Remler & Glied, 2003). For immigrants, lack of policy knowledge is further compounded by their language barriers and concerns about their citizenship status (Greenberg et al., 2002).

Our multivariate results indicate that a number of household characteristics are related to the probability of receiving public assistance. The results generally are consistent with results from the few studies that have examined similar factors in multivariate analyses (e.g., Biggerstaff et al., 2002; Daponte, 2000; Hao, 2003; Moretti & Perloff, 2001; Zedlewski & Rader, 2005). The findings for two of the significant coefficients—the relatively low odds ratio for the most economically disadvantaged households and the positive coefficient for the most recent SIPP panel—warrant a brief discussion.

Compared to the most financially advantaged low-income households, the odds ratio for households with income less than 50% of poverty is almost identical to the third category (100-149% of poverty) and close to one-half the odds of households in the mid-poverty category. These findings are consistent with other studies examining food stamp use of people using private food programs, which indicate that individuals with the greatest need are less likely to participate in public food assistance programs (Biggerstaff et al., 2002; Martin et al., 2003). Our results suggest that households with the greatest financial need might be denied public benefits because of a sanction or face other barriers to accessing public programs.

Although we expected that low-income households surveyed in the 2001 SIPP panel, after welfare reform had been implemented for six years, would be less likely to receive public benefits than those in the 1996 panel, the opposite is evident. Additional analysis, however, indicates that households surveyed in the 2001 panel are less likely to receive cash benefits, but more likely to receive non-cash benefits. This suggests that TANF reform is successful in reducing welfare caseloads, but appears to increase the need for other forms of public assistance.

Private Assistance

In contrast to receiving public assistance, a low percentage of all households receive private assistance from non-profit agencies, charitable groups, and social networks (ranging from 6.4% for elderly households without children to 11.1% for households with children). Although this finding is consistent with previous research, some studies have found higher rates

of receiving private assistance among low-income households (e.g., Ahluwalia et al., 1998; Danziger et al., 2000; Teitler et al., 2004). These discrepancies might be the result of examining longer time periods, which indicates that private assistance is received more sporadically than public assistance. Type of sample (e.g., welfare recipients) and including assistance such as child support payments from the child's absent father also might account for these differences.

Other reasons might account for the low level of assistance that low-income households receive from private sources. As discussed previously, most nonprofit social agencies do not provide cash or other instrumental types of assistance, and social networks of low-income households tend to be ill prepared to provide such assistance because they also lack economic resources. In addition, social networks typically involve norms of reciprocity; thus being the recipient of assistance frequently results in incurring a debt to the provider. If members of a recipient's social network are more impoverished or demanding than the recipient, the exchanges could have an overall negative economic impact for the recipient (Harknett, 2006). Because poor elderly individuals have few opportunities to improve their financial situation, indicating the need for long-term assistance and less ability to reciprocate, they might have increased difficulty accessing assistance from their social networks (Krause & Shaw, 2002). This latter hypothesis is supported by our descriptive findings, which suggest that elderly households have more difficulties accessing assistance from their social networks than other types of low-income households. Seeking assistance and relying on others also can extract psychological costs such as feelings of stress and helplessness (Ahluwalia et al., 1998); social networks are not universal, not always geographically close (Schoeni & Koegel, 1998), and frequently provide assistance that is more temporary and unreliable than public benefits (Henly & Lyons, 2000; Litt et al., 2000).

Many of the same characteristics are associated with the probability of receiving any public and any private assistance. Female gender, Blacks and Hispanics, higher numbers of children, welfare history, work disability, and being more economically disadvantaged increase the odds of receiving

both types of assistance. Two of these findings merit a brief discussion. Previous multivariate analyses examining the relation between race/ethnicity and receiving public benefits, such as food stamps, and accessing private assistance have produced mixed results (e.g., Biggerstaff et al., 2002; Daponte, 2000; Zedlewski & Rader, 2005). Other research suggests that Latinos and African Americans are less likely to receive financial support from their social networks, but more likely to receive other types of support such as co-residence and child care (Hogan, Hao, & Parish, 1990; Lee & Aytac, 1998). Comparisons of the odds ratios among the various categories of poverty suggest that private sources of assistance are particularly important for the most economically disadvantaged households (<50% of poverty).

Our results indicate that owning assets, non-citizenship, and residing in a metropolitan area are associated with a lower probability of receiving any private and any public assistance. Asset ownership might be an indication that the household has additional resources on which draw, or the assets might be a barrier (e.g., asset tests for public benefits) to receiving assistance that is needed. The non-citizenship findings are consistent with past research (Hao, 2003; Moretti & Perloff, 2000). Unfortunately, private assistance does not appear to substitute for the decreased eligibility of non-citizens for public benefits since welfare reform.

Although our findings for urban residence are consistent with some research (e.g., Bitler et al., 2003), other scholars have suggested that urban residence might increase, not decrease, receipt of public and private assistance. In urban areas, cultural or psychological factors might increase the acceptability of participation in public programs, and urban areas are more likely than rural areas to have public transportation. Rural areas also have fewer non-profit organizations, and rural agencies, such as those operating food assistance programs, tend to be less structured and cooperate less frequently with larger churches and other agencies (Krueger, Rogers, Ridao-Cano, & Hummer, 2004; Molnar, Duffy, Claxton, & Bailey, 2001).

Unlike the results for receipt of public assistance, age, education, employment status, and the SIPP panel year have little or no relation to receiving private assistance. The latter finding

suggests that private sources of assistance are not used to substitute or supplement reductions in public cash benefits as a result of welfare reform. Finally, compared to never married households, widows are less likely to receive public assistance, but more likely to receive private assistance; divorced/separated individuals also are more likely to receive private assistance. Perhaps widowed and divorced/separated low-income households have assets that disqualify them from public benefits, yet they are able draw on private sources of assistance.

Combined Public and Private Assistance

Our examination of the exclusive use of public, private, and both types of assistance during a four-month period confirms the importance of public versus private assistance for all households, but particularly for households with children (approximately 61% use public assistance only). Although reliance only on private assistance is more important for non-elderly households without children, the exclusive use of private assistance is uncommon. A low percentage of low-income households also access both public and private assistance, with the largest percentage (9.7%) found for households with children. Although other research has reported higher percentages of low-income households receiving both types of assistance (e.g., Bartfeld, 2003; Daponte, 2000; Mosley & Tiehen, 2004; Teitler et al., 2004), these discrepancies might be due to the length of the time period examined, the type of sample, and including different measures of private and public assistance.

We were unable to examine the simultaneous use of both public and private assistance, but our analysis determined that 15.6% of households that receive public assistance also receive private assistance some time during a four-month period. The results are consistent with the conclusions reached by other researchers: low-income households tend to use private sources as an alternative, not as a supplement, to public assistance. However, as Mosely and Tiehen's (2004) study suggests, over time higher percentages of low-income households use both public and private sources of assistance.

Limitations and Practice and Policy Implications

This study has several limitations. We were unable to evaluate the simultaneous use of public and private assistance, and our time period of four months was limited. Although the data were rich in social-demographic characteristics, information was lacking on barriers to seeking the different types of assistance, such as characteristics of social networks and availability of assistance. Despite these limitations, our findings suggest implications for practitioners and social policy.

Because different household types use various types and patterns of assistance, policy makers and social workers need to take into consideration these different needs. Despite these variations, policy makers and practitioners also must be aware of the importance of public assistance programs for all three types of low-income households. Furthermore, the outside assistance on which low-income households currently use are frequently insufficient to protect them from the consequences of their precarious financial situations, which include eviction, homelessness, food shortages or insecurity, and lack of medical care (Ahluwalia et al., 1998; Danziger et al., 2000; Rank & Hirschl, 2005; Schoeni & Koegel, 1998). Welfare reform also provides no guarantee that employment will increase the economic and social well-being of families with children (Danziger et al., 2000; Litt et al., 2000; Teitler et al., 2004). These findings all suggest the need for social policies that increase, not decrease, public benefit levels.

As previously discussed, increasing public awareness of government programs and reducing transaction costs, including developing universal public benefits such as child allowances and national health insurance (Remler & Glied, 2003), should increase access to public sources of assistance. Practitioners can educate their clients on various public programs and engage in outreach work, paying particular attention to the needs of non-citizens and the most economically disadvantaged. Social workers also can assist clients in assessing and accessing social networks. For example, social network mapping can be used to identify and evaluate appropriate sources of support and potential problems and barriers to using social networks. The latter issues include perceptions of seeking assistance, reciprocity, and the social skills needed

for requesting assistance (Tracy & Bell, 1994).

Although private assistance, when available, can enhance the day-to-day survival of low-income individuals and families, such assistance is unlikely to be sufficient to fulfill the instrumental needs of low-income households. Policy makers, unfortunately, believe that increases in public benefits will decrease altruistic behavior among social networks, private agencies, and charitable groups. However, little research evidence supports this belief (Chambré, 1989; Cox & Jakubson, 1995; Rosenzweig & Wolpin, 1994). Instead, our current study, as well as other research, suggests that cuts in government program benefits likely will result only in additional economic hardships, particularly among households with children.

Perhaps one of the best ways to demonstrate that public sources of assistance can be beneficial to their recipients is to examine the effects of public program participation. Some research has been conducted in this area and has produced positive results. For example, pregnant women who participate in WIC have healthier infants (Bitler et al, 2003), and the use of food stamps can protect the health of individuals most likely to use them (Krueger et al., 2004). Future research efforts also might focus on examining the effects of public versus private assistance on other measures of economic and social well-being, such as work, earnings, economic hardship, and satisfaction with home and neighborhoods, among different types of low-income households.

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