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Changing Demography of Social Safety Net Programs

The demographic characteristics of America are changing as the nation's old, predominantly white population is replaced by children of racially and ethnically diverse backgrounds. In fact, many demographers predict a majority-minority society by 2043. This shift, considered by some to be a "third demographic transition" (Lichter 2013), will have consequences throughout the nation's social safety net programs as low-income children from diverse backgrounds, who are more likely to be from diverse backgrounds (Jiang et al., 2017), transition into adulthood. As a consequence, we expect that individuals and families receiving social services will have increasingly diverse backgrounds, including mixed immigration status and limited English-language proficiency. The ability of the safety net to adapt will determine how well these groups are able to successfully transition into stable, self-sufficient households.

At the same time, the mechanics of the administration of social safety net programs are being transformed, with technology and performance management incorporated increasingly into administrative systems. Modernization, along with substantive modifications to program components and delivery, has effected considerable change in how clients experience the safety net, the structure of work performed by front-line staff, and the benefits and costs related to program operation in the states (Heflin et al. 2013).

Yet there is little rigorous analysis of the changing landscape. Often, research and policy decisions about the safety net assume either that future caseloads will look demographically similar to those of the past 20 years or that transaction costs, barriers, and organizational capacity will remain constant. Correspondingly, during the Great Recession, states undertook, in their social services programs, many cost-savings measures that were not formally assessed or evaluated. Although there was increased emphasis on use of evidence-based information in decision-making, much remains unknown about how to ensure the most efficient and effective use of public funds (Brown and Derr 2015).

If the knowledge gap is to be addressed, it will be important to look specifically at the demographic changes to date in social program participation. In this brief, we use data from

the 1988–2015 Annual Social and Economic Supplement to the Current Population Survey (CPS) for Aid to Families with Dependent Children (AFDC)/Temporary Assistance for Needy Families (TANF), the Food Stamp/Supplemental Nutrition Assistance Program (SNAP), and Supplemental Security Income (SSI). These programs have in recent years undergone considerable changes with respect to eligibility criteria for non-U.S. citizens, particularly by way of welfare reform legislation in 1996: The Personal Responsibility and Work Opportunity Reconciliation Act generally barred legal permanent residents (LPRs) who were resident as of enactment of the law (August 22, 1996) from SNAP and SSI eligibility and allowed eligibility for TANF at state option. New LPRs (those who entered after enactment of the law) were also not eligible for SNAP and SSI benefits, with exceptions for refugees and asylees. Individuals with military service or a substantial work history—generally 10 or more years, documented by Social Security or other employment records—were eligible for the full range of programs (Wasem 2014). Nonimmigrants, such as aliens on temporary visas, and unauthorized aliens were barred from almost all federal programs (Wasem 2014). For each program, we document how characteristics of the caseload have changed with respect to demographic characteristics (household size, marital status, race/ethnicity, immigration status, metropolitan residency), education, employment, and poverty status.

Program Description

All three programs examined in this report are cash or near-cash assistance programs for children, families, and individuals in the United States with limited or no income to meet basic needs such as food, utilities, clothing, and shelter. All three programs target low-income U.S. citizens.

Supplemental Security Income (SSI) is a federal cash assistance program for the elderly (65 or older) and blind and disabled adults and children. U.S. citizens are eligible; non-citizens in a qualified alien category, including refugees and asylees, are eligible seven years after arrival in the United States.

Aid to Families with Dependent Children (AFDC) was a federal cash assistance program in effect from 1935 to 1996; the **Temporary Assistance for Needy Families (TANF)** program replaced AFDC as part of the 1996 welfare reform legislation. TANF targets mainly low-income families with a dependent child; however, the TANF block grant allows considerable state variation in eligibility criteria as well as in benefit amounts. Despite the state variation, most states admit only families in deep poverty: in 2015, most states required that to be eligible, a single mother with two children must earn less than \$837 a month—half of poverty-level income for that year (Cohen et al. 2016).

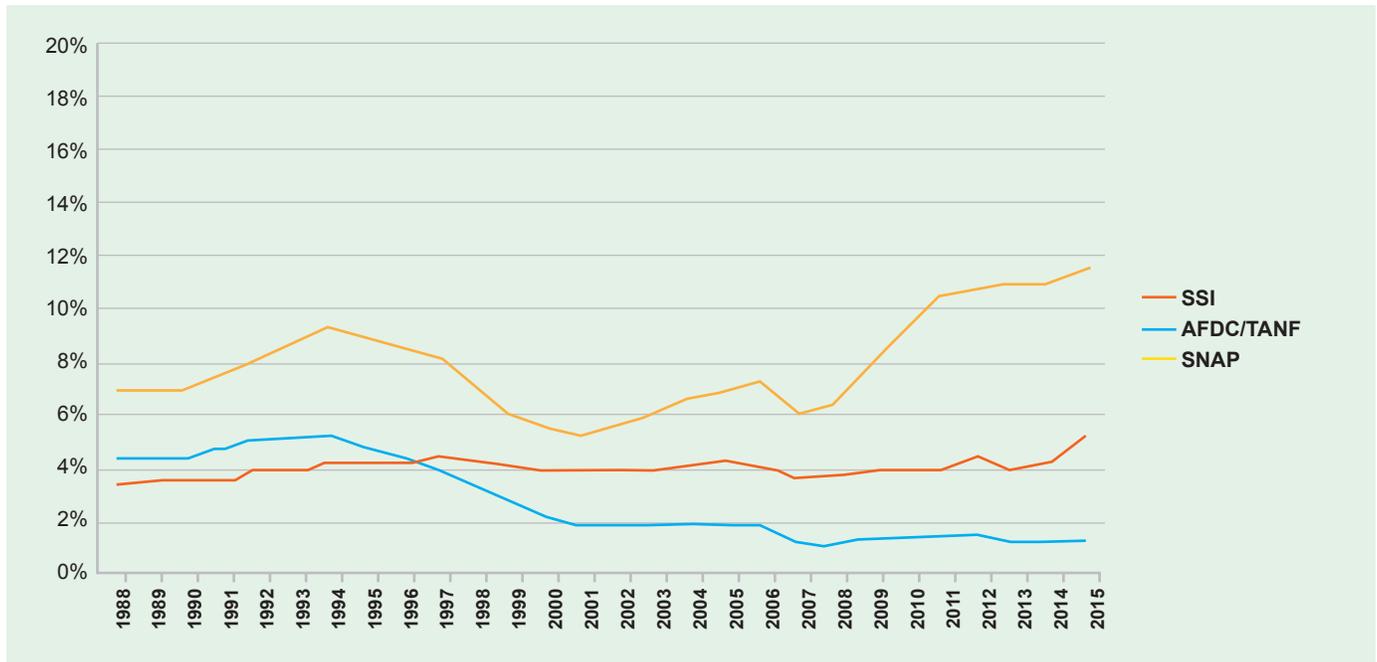
The federal **Supplemental Nutrition Assistance Program (SNAP)**, formerly the Food Stamps program, provides nutrition assistance to people in households with income less than 130 percent of the federal poverty level (FPL). In addition to U.S. citizens, refugees and asylees, disabled LPRs, elderly LPRs/legal residents as of August 22, 1996, and LPRs who have been legal residents for five years or more or who are children (under 18) are eligible for food stamps/SNAP.

PROGRAM PARTICIPATION

Less than 12 percent of the total U.S. population participated in SNAP, SSI, or TANF between 1988 and 2015. The SNAP participation rate was about 7 percent in 1988, fell to just under 6 percent by 2001, and then dramatically increased in recent

years to 11.5 percent by 2015. TANF participation had been 4 to 5 percent in the late 1980s until after the 1996 welfare reform, when it steadily dropped by half to 2 percent or less in recent years. SSI participation has been the most consistent over time: around 4 percent with a recent, slight increase in the last two years to about 5 percent in 2015.

Figure 1. Percentage of U.S. population in social programs: 1988–2015



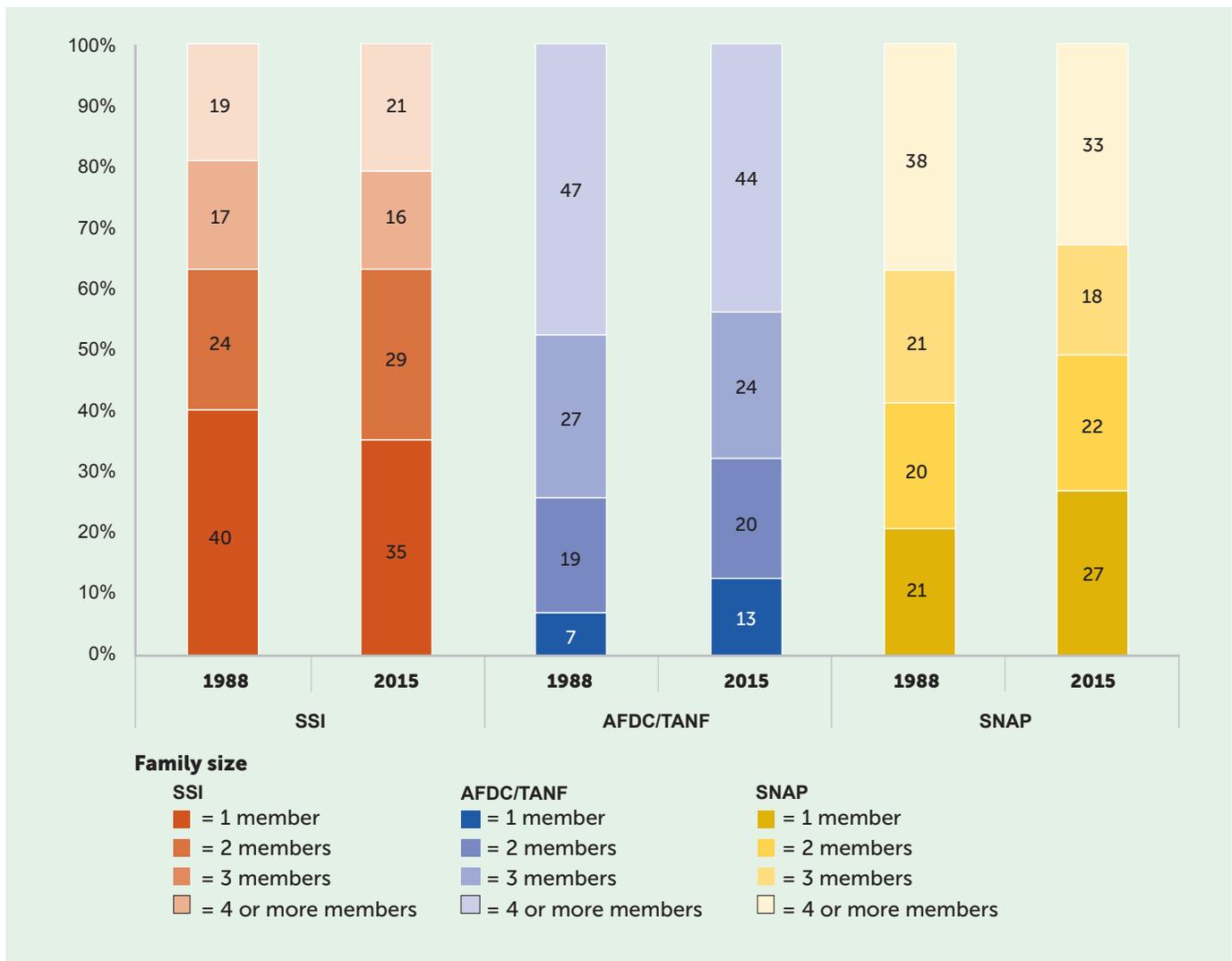
Data source: CPS.

HOUSEHOLD SIZE

Households participating in SNAP tend consistently to be smaller than those in the overall U.S. population. The SNAP-participant household size tended to decrease during recessionary periods after 1996 when, because of local labor market conditions, people considered able-bodied without dependents were exempt from time limits on benefit receipt put in place by the 1996 welfare reform legislation. The average TANF household tends to be larger than the average household among both the general population and those participating in other social programs

since most TANF households include an adult and at least one child—though child-only (one member¹) cases have grown since 1996. Large households (those with four or more household members) are over-represented in the TANF caseload; however, the share has declined from 1988 to 2015. SSI households tend to be much smaller than both TANF and SNAP households and somewhat smaller than those in the general population. Single-person households make up only about a quarter of all households in the general population but 35 percent of the SSI caseload in 2015—a decrease of about 5 percentage points from 1988.

Figure 2. Family size by program participation: 1988 and 2015



Data source: CPS.
Percentages may not add up to 100 due to rounding.

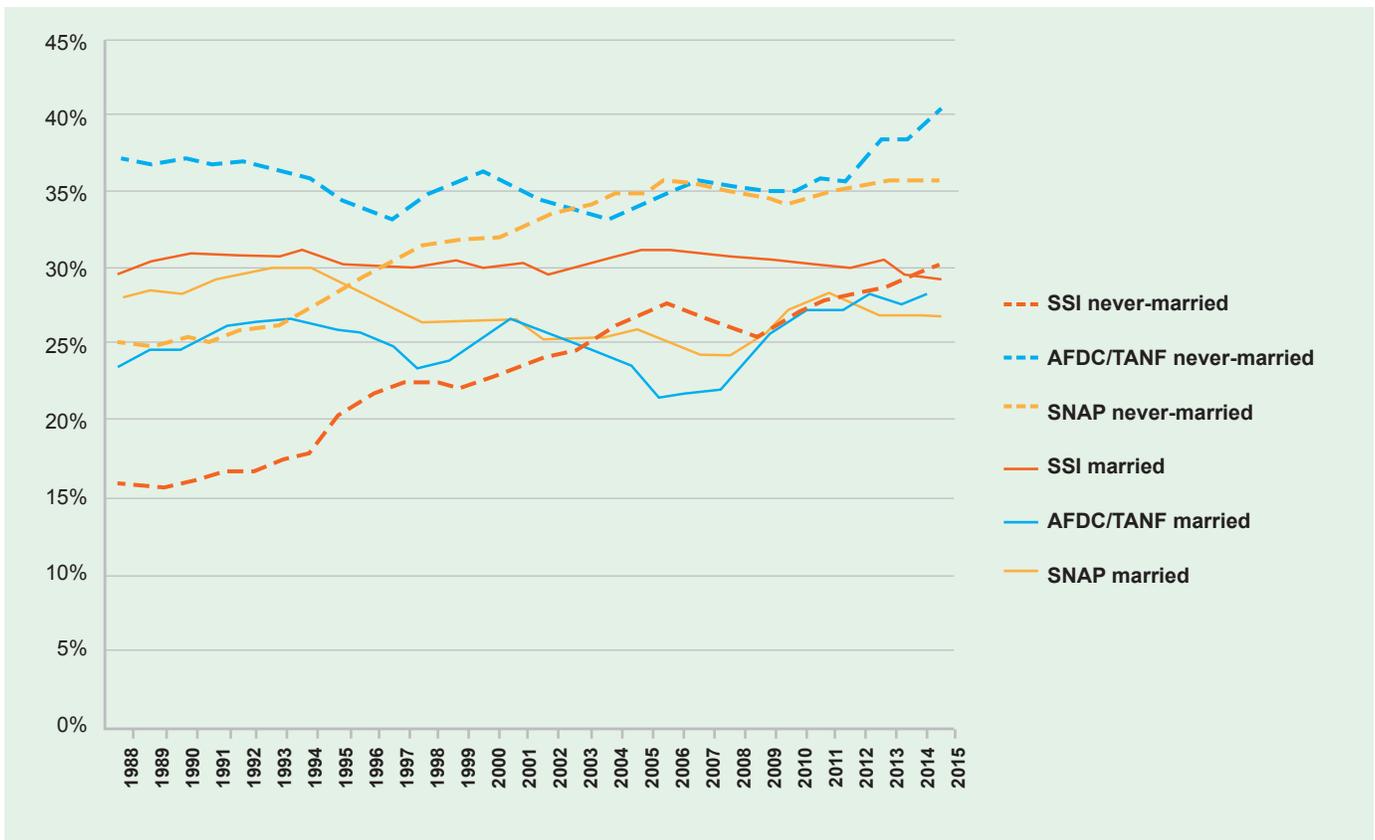
¹ These households can include more than 1 child and can be mixed-status immigrant households.

MARITAL STATUS

As marriage declined and the number of never-married households increased in the general U.S. population, the overall share of such households increased in all three programs. SNAP and TANF both shifted from supporting predominantly divorced, widowed, and separated households (in 1988, 47 percent of the SNAP and over 60 percent of the AFDC caseload) to supporting never-married households (over one-third of each SNAP and TANF caseload). However, the overall share of married households has not declined; in particular, married households

experienced an increase of 5 percentage points in their proportions of the TANF caseload from 1988 to 2015. While SSI is not historically considered a program for divorced, widowed, and separated households as was AFDC, just over half of all households on SSI were in this category in 1988—though there was a sharp decrease (to 42 percent) by 2015. Most of the difference was absorbed by never-married households, which increased from 16 percent in 1988 to 30 percent in 2016. In these three programs, marital dissolution is less important for program participation today than it was in 1988.

Figure 3. Percentage of married and never-married by program participation: 1988–2015



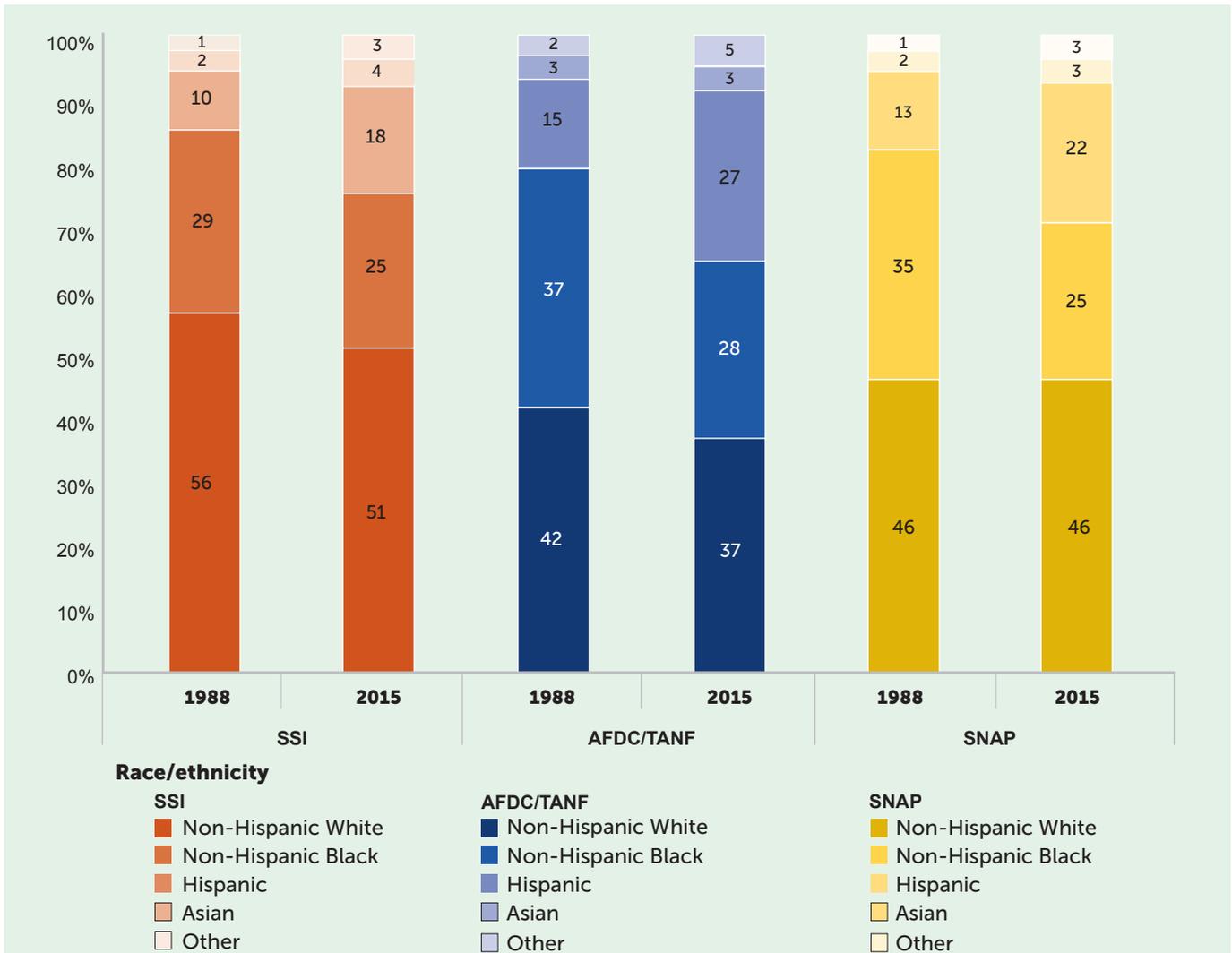
Data source: CPS.

RACE/ETHNICITY

From 1988 to 2015, the non-Hispanic white proportion of the general population declined by 11 percentage points, from 78 to 67 percent, and the Hispanic population doubled, from 6.5 to 13 percent. The percentage of Asians in the general population grew rapidly as well, also doubling during this period. Larger changes in the racial composition of the general population are mirrored in the SSI population but not in the SNAP and TANF populations. The non-Hispanic white proportion of the SNAP caseload fell by only 5 percentage points, and the non-Hispanic white proportion of the TANF caseload declined, but inconsistently—decreasing from 1988 to 2000, increasing until 2005, and trending downward again until 2015. On the other hand, despite the rapid growth of Hispanic share in the general population between 1988 and 2015, the increase in the Hispanic proportion of the SNAP caseload was a modest 9 percentage points (from 13 to 22 percent), and the Hispanic proportion of the TANF caseload increased overall by

12 percentage points (from 15 to 27 percent). Further, while the non-Hispanic black proportion of the general population remained between 11 and 13 percent over time, the non-Hispanic black proportion of the SNAP and TANF caseloads actually fell during the same period (in the TANF caseload, by about 9 percentage points). The Asian population had very low levels of participation in all three programs. Those with a racial identity not elsewhere classified increased in TANF participation over the period. On the other hand, the non-Hispanic white proportion of the SSI caseload declined from 56 percent in 1988 to 51 percent in 2015. The non-Hispanic black proportion of the SSI caseload declined through the 1990s before increasing slightly until 2003 and steadily declining again to 25 percent by 2015. The Hispanic proportion of the SSI caseload grew slightly slower than that for other programs, with an 8-percentage-point increase (from 10 to 18 percent) during the same period. In summary, the SSI caseload reflects larger changes in racial composition more than do SNAP and TANF populations.

Figure 4. Race/ethnicity of participants by program participation: 1988–2015



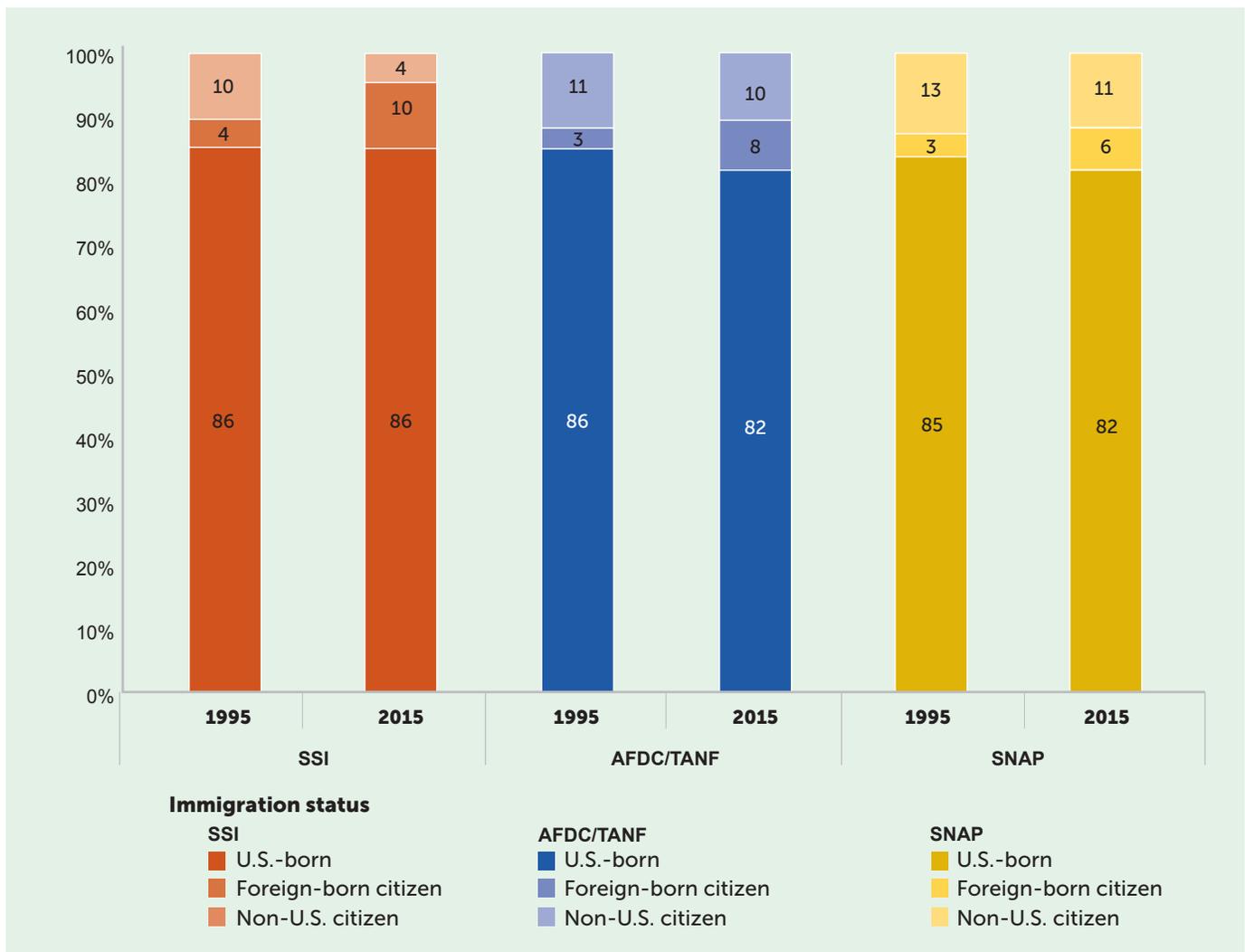
Data source: CPS.
Percentages may not add up to 100 due to rounding.

IMMIGRATION AND CITIZENSHIP

CPS data on immigration are available from 1995 onward. The U.S.-born proportion of the general population decreased from 1995 until 2008, and the U.S.-born proportion of the SNAP caseload increased from 1995 to 2008 and then decreased from 2009 until 2015. The proportions of the U.S. population and of the SNAP population that were naturalized citizens both doubled from 1995 to 2008. While the non-citizen, foreign-born proportion of the general population stayed nearly consistent from 1995 to 2015, the proportion in the SNAP caseload decreased from 1995 to 2008 before increasing from 2009 to 2015 as a result of considerable changes in eligibility criteria for non-U.S. citizens (see Program Description above). The proportion of the SSI population that was U.S.-born was consistent between 1995 and 2015. The proportion

of the SSI population that was naturalized citizens doubled over the time period, and the proportion that was non-citizen, foreign-born decreased from 10 to 4 percentage points. The U.S.-born proportion of the TANF caseload decreased from 1995 until 2000; from there, the proportion rose until 2007, when it once again began to decrease. The naturalized-citizen proportion of the TANF caseload increased until 2000, decreased slightly for nearly a decade, and then rose from 2010 to 2015. The non-citizen, foreign-born proportion of the TANF caseload remained roughly consistent from 1995 to 2000 before falling to a low in 2009 and rising steadily since. For the most part, there has been little change in the non-native population receiving SSI, SNAP, or TANF, and the proportion that does receive benefits is more likely now than ever to be naturalized citizens.

Figure 5. Immigration status by program participation: 1995 vs 2015



Data source: CPS.

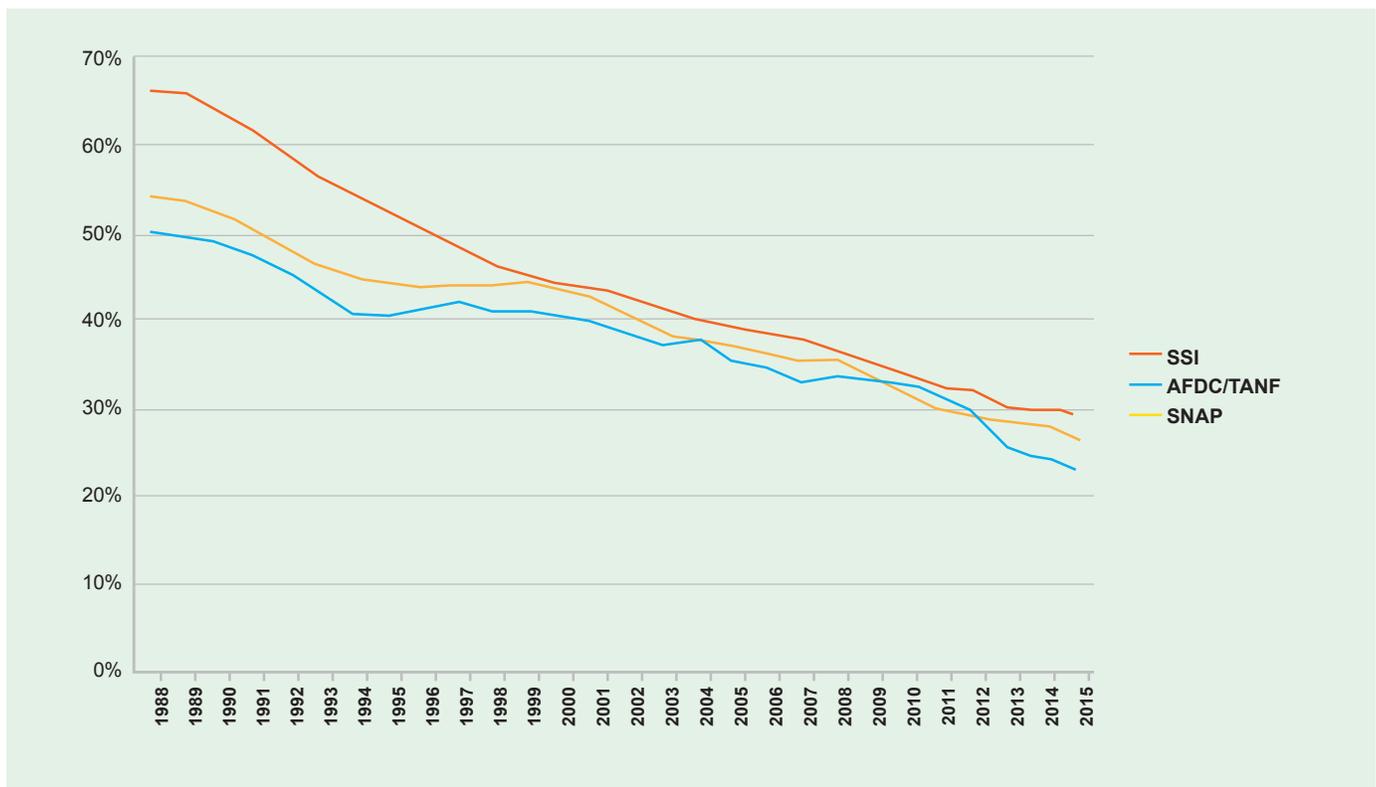
Percentages may not add up to 100 due to rounding.

EDUCATION LEVEL

Levels of education have increased steadily in the general U.S. population: the proportions with some college education and with a college degree or higher saw strong increases (from 39 percent in 1988 to 61 percent in 2015), and the share of those without a high school degree was reduced more than half, from 25 percent in 1988 to 11 percent in 2015. Historically, caseloads of all three programs had much lower education levels: the majority of program participants did not have a high school diploma or GED (e.g., in 1989, 66 percent among SSI, 54 percent among SNAP, and 50 percent among TANF recipients). However, the shares of those without a high school degree steadily declined from 1988 to 2015: by 2015, the proportion fell to just over one-fourth of the

SNAP caseload, nearly half to one-fourth of the TANF caseload, and under one-third of SSI caseload. The proportion of the SNAP caseload with some college education increased, as did, perhaps surprisingly, the proportion with a college degree or higher. The proportion with a high school degree remained around one-third of the TANF and SNAP caseloads; there was a steady increase in the SSI caseload, from 23 percent in 1988 to 36 percent in 2015. College graduates in these three programs were rare in 1988 (2 percent) but much more common in 2015 (8 percent on SNAP, 9 percent on TANF, and 10 percent on SSI). Given the large decline in high school dropouts among program participants in the three programs, education and training programs may require a different approach to be successful in today's labor market.

Figure 6. Percentage of high school dropouts by program participation: 1988–2015



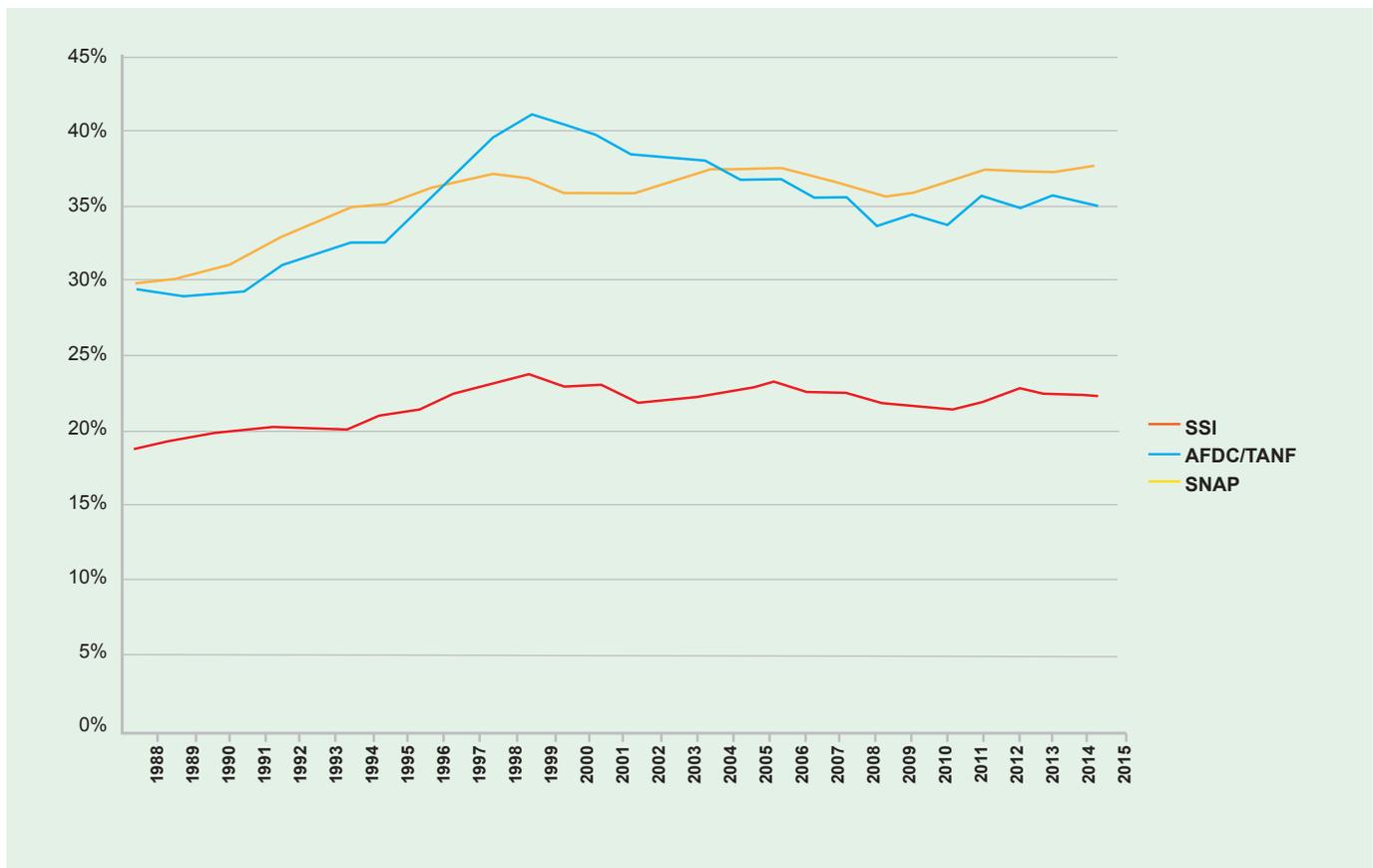
Data source: CPS.

EMPLOYMENT STATUS

Over the entire period, two-thirds of the U.S. population was considered employed; about one-third was not in the labor force (and a smaller proportion was unemployed). As expected, the unemployed are over-represented in the SNAP caseload: In 1988, 60 percent of the SNAP caseload was not in the labor force; however, the percentage fell to 53 percent by 2015. Accordingly, the proportion of the SNAP caseload who were employed rose over the time period, from 30 percent in 1988 to 37.2 percent in 2015. In 1988, only 29.4 percent of TANF households had an employed household head. The proportion employed increased

over the 1988–2015 period, which reduced the proportion of the TANF caseload not in the labor force; many credit the 1996 welfare reform with connecting women on TANF to the labor force. While federal SSI eligibility rules allow employment among recipients, the amount of work is strictly limited, and as a consequence most SSI recipients are not in the labor force. Unemployment was relatively rare among SSI recipients, though it was more common during recessionary periods. Finally, as expected, during periods of especially robust economic growth, employment grew among the caseloads. The working poor are increasingly making ends meet through program participation in SNAP, TANF, and, to a lesser extent, SSI.

Figure 7. Percentage of employed by program participation: 1988-2015



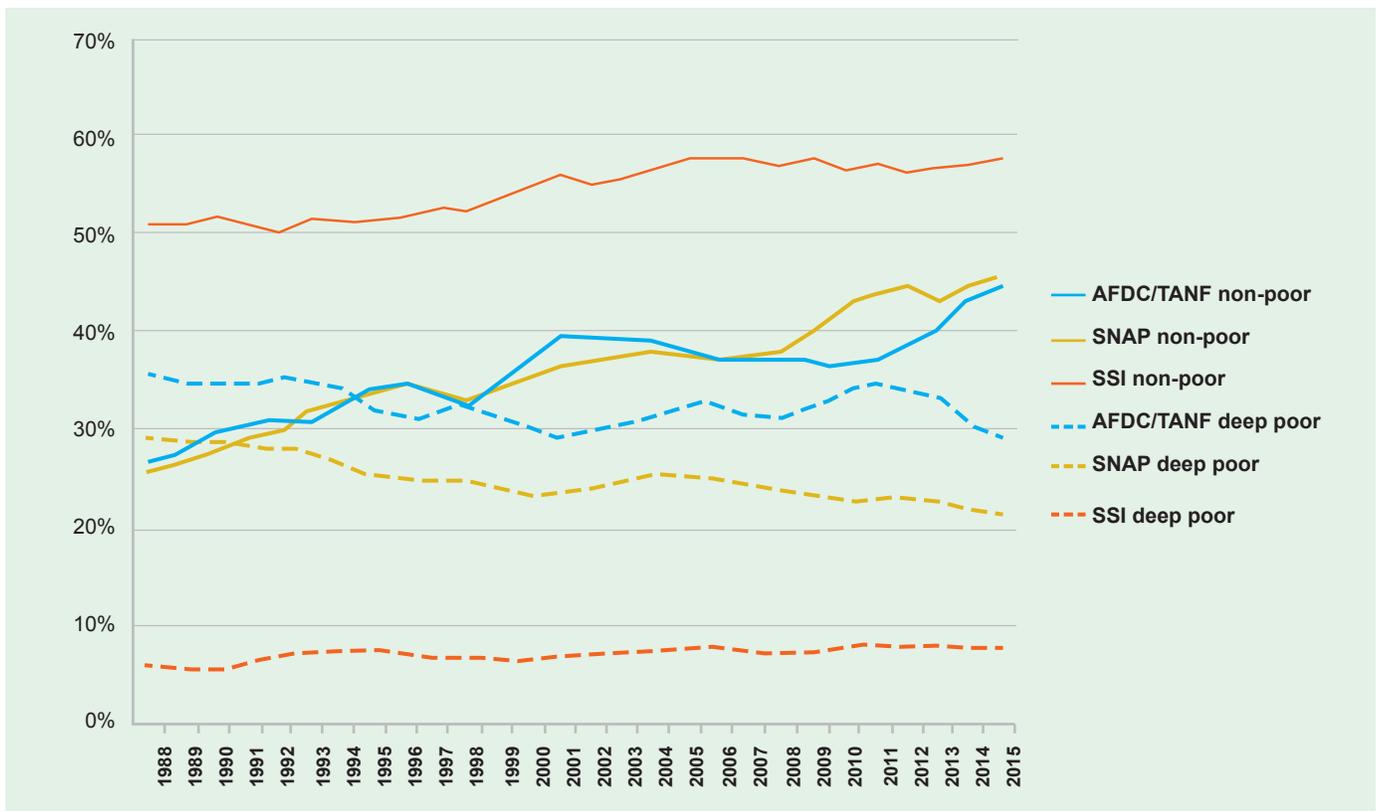
Data source: CPS.

POVERTY STATUS

Among the U.S. population, the proportion of those in poverty did not change dramatically over the 1988–2015 period, though the proportion in deep poverty (households with incomes below half the FPL) grew. Within the SNAP caseload, change was in the opposite direction, with more non-poor households (those with high incomes relative to the FPL) participating in SNAP. In fact, the proportion of the SNAP caseload in deep poverty fell from 1988 to 2015 (29 to 21 percent), and the proportion of the non-poor SNAP recipients increased from 26 to 45 percent. Within the TANF caseload, change was also in the opposite

direction as compared to change in the general population, with more households with high incomes relative to the FPL participating in TANF. As with SNAP, the proportion of the TANF caseload in deep poverty fell from 1988 to 2015 (36 to 30 percent), and the proportion with incomes above the FPL increased considerably (27 to 45 percent). Finally, among the SSI caseload, change was also in the opposite direction as compared to change in the general population, with more households with high incomes relative to the FPL participating in SSI (51 to 57 percent). Thus, it appears that SSI, SNAP, and TANF participation is higher among those with incomes above the FPL than it is with those in extreme poverty (income less than half the FPL).

Figure 8. Percentage of people in deep poverty and above the federal poverty level (non-poor) by program participation: 1988–2015



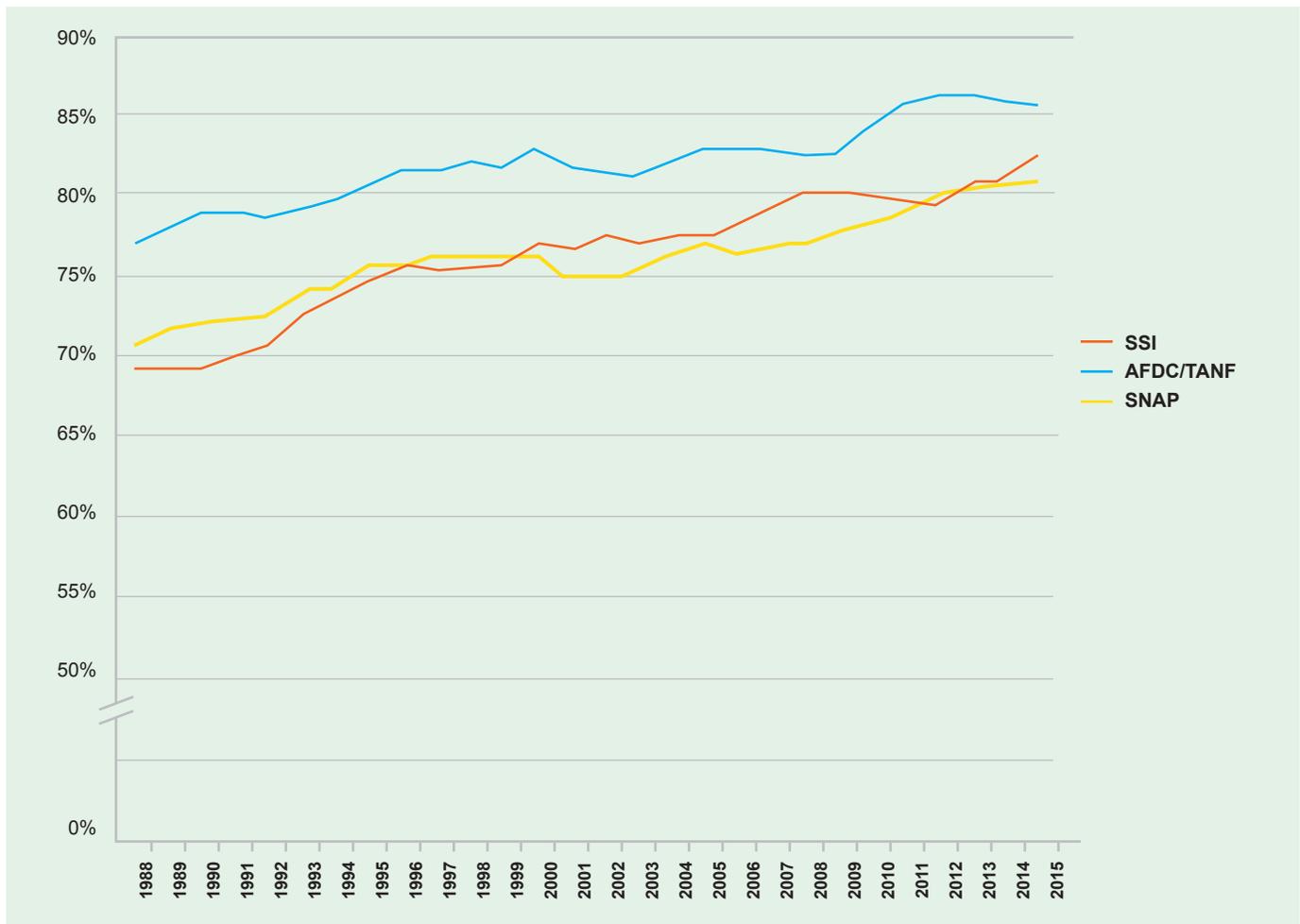
Data source: CPS.

METROPOLITAN STATUS

The proportion of the general population that resided in metropolitan areas increased from 74 percent in 1988 to 80 percent in 2015, with the proportion in non-metropolitan areas decreasing in balance. In contrast, the SNAP caseload drew disproportionately from households residing in non-metropolitan areas, with 29 percent non-metropolitan to 71 percent metropolitan in 1988 and 19 percent non-metropolitan to 81 percent metropolitan in 2015. The proportion of the TANF caseload that resided in metropolitan

areas remained relatively consistent during the same period. However, there was fluctuation in the middle years as the metropolitan composition increased during recessionary periods. The proportion of the SSI caseload that resided in metropolitan areas grew over the time period, from 69 to 82 percent. This change mirrored more closely the change in the general population than the pattern observed for TANF or SNAP. Thus, program participation across the three programs is more common in metropolitan areas in 2015 than it was in 1988.

Figure 9. Percentage of households living in metropolitan areas by program participation: 1988–2015



Data source: CPS.

Summary of findings

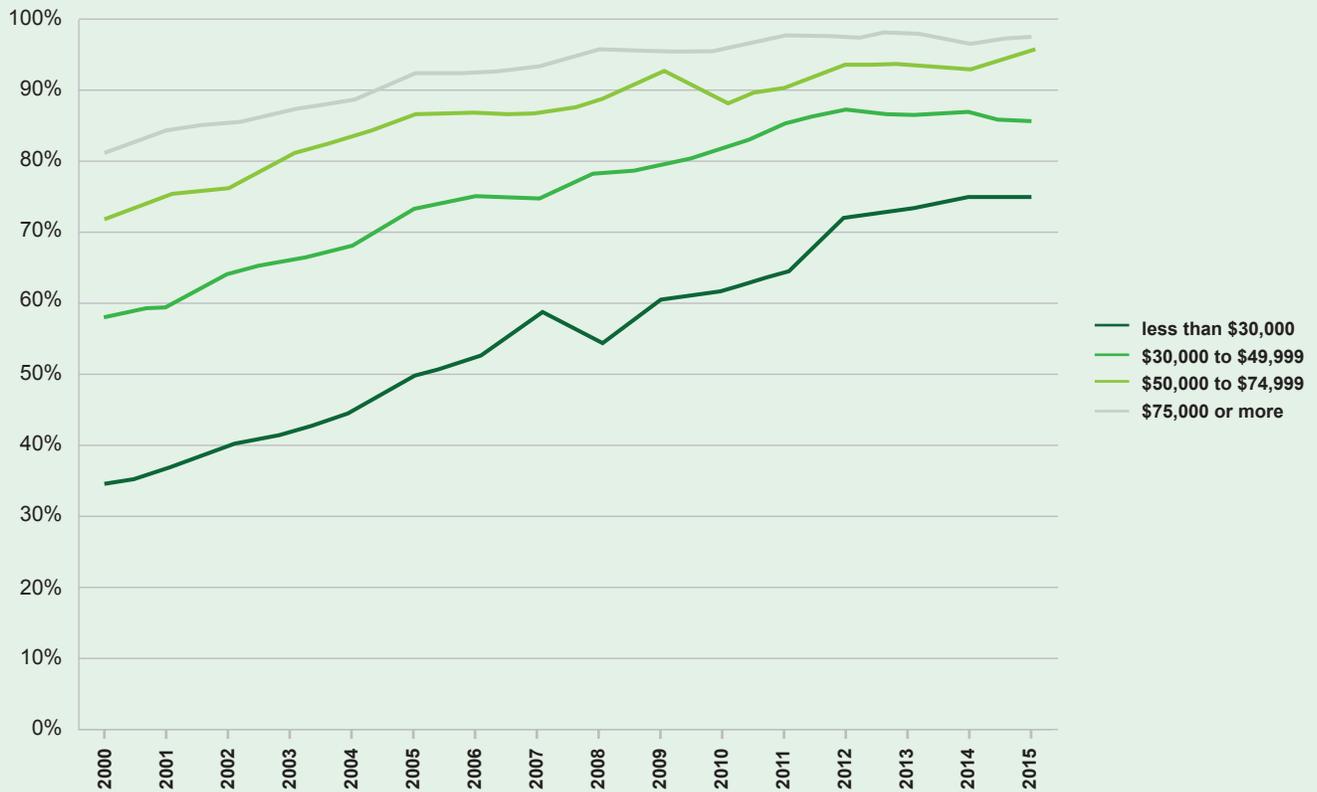
- **Participation in cash assistance declined steadily, and SNAP became one of the critical safety net programs during tough economic times.** With the declining availability of TANF funding since 1996, very few people—merely 2 percent of the U.S. population in 2015—participated in cash assistance/TANF, while 14 percent of households were living in poverty. SSI participation was stable at 3 to 4 percent of the U.S. population. SNAP participation increased, particularly during the Great Recession.
- **The racial/ethnic composition of safety net program participants is changing.** Participation in safety net programs declined overall among African-American households; the participation rate among Hispanic households increased, but at a slower rate than that of Hispanic households' increasing share of the U.S. general population. Further, the share of non-U.S.-born citizens participating in safety net programs increased.
- **The shares of college graduates and non-poor in safety net programs are increasing.** The share of non-poor (households with income above 100 percent of the FPL) in safety net programs steadily increased, and the share of extreme poor (50 percent of FPL) decreased. In 2015, the majority of those in safety net programs had at least a high school diploma or GED; the share of participating college graduates steadily increased.

POLICY IMPLICATIONS AND WHAT STATE/LOCAL GOVERNMENTS CAN DO

- **Track changing demographic characteristics of clients using state/local administrative data.** This report relies upon self-reported program participation data from the CPS, and evidence suggests that households under-report their program participation (Celhay et al. 2015). As a consequence, state/local-level program participation administrative data will be a more reliable source for policymakers to track changing client characteristics.
- **Provide culturally and linguistically appropriate services that reflect the needs of diverse clients.** With the increasing number of non-U.S.-born citizens and families and individuals from diverse racial/ethnic backgrounds, it is important for social services agencies to provide culturally and linguistically appropriate services (CLAS) that are respectful of and responsive to the needs of diverse clients. CLAS have been more widely promoted and practiced in health care services since the Office of Minority Health, under the U.S. Department of Health and Human Services, developed National CLAS Standards (Office of Minority Health 2016). Cultural and linguistic competence includes the ability of service providers and social services organizations to provide services that reflect the cultural and linguistic needs of all clients. As selected state/local social services agencies also conduct comprehensive health/mental health assessments and attempt to integrate health/mental health services in TANF programs (Derr et al. 2001), the adaptation of such standards in providing social services will be helpful in addressing client needs and ultimately achieving successful program outcomes (e.g., work engagement or participation dynamics).
- **While providing online services for safety net programs is helpful for those with access to the Internet, traditional services (telephone or in-person) are still needed for those with limited Internet access.** The demographic composition of the caseloads is changing, and program delivery is changing, too. One of the largest changes is the move to computer and Internet-based application systems, most prominently for SNAP. Modernization began in the early 2000s and then accelerated with the implementation of the Affordable Care Act and the availability of technology-enhancement funds in the American Reinvestment and Recovery Act. In 2015, although 84 percent of all households used the Internet, a level unchanged since 2012, there was still a digital divide by income level (see the Figure 10). Despite a rapid increase in Internet access among low-income families (Center for Budget and Policy Priorities 2016), their access is often limited or intermittent for lack of financial resources (Edin and Shaefer 2015). Many states provide online services for TANF, SNAP, SSI, and other safety net programs, such as eligibility information, online application, recertification, and case updates. In some states, these services are offered only online; in other states, online services are offered in addition to services at brick-and-mortar centers. Since those who need help the most may not be able to access online services, it is important to continue providing traditional face-to-face services as well.

Change over time in internet usage

Figure 10. Percentage of households with internet access by income level: 2000–2015



Data source: Perrin, A., and M. Duggan. Americans' Internet Access: 2000–2015. Washington, DC: Pew Research Center, 2015. Available at <http://www.pewinternet.org/2015/06/26/americans-internet-access-2000-2015/>. Accessed April 17, 2017.

- Although 97 percent of households with incomes over \$75,000 used the Internet in 2015, only 74 percent with incomes below \$30,000 and 85 percent with incomes between \$30,000 and \$50,000 did so.

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