

The Contribution of Social Support to the Economic Status and Daily
Coping of Former and Current Welfare Recipients

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March, 2003
(Under Review)

Revised and published *Journal of Marriage and the Family*, 67, 1, February, 2005.

RUNNING HEAD: Social Support, Daily Coping, and Economic Status

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The Contribution of Social Support to the Economic Status and Daily Coping of Former and Current Welfare Recipients¹

ABSTRACT

Whereas social support from family and friends has the potential to serve both coping and social leverage functions (Briggs, 1998), we hypothesize that social supports available to low-income families are best-suited to assist with the former. The availability of social support to a sample of 632 former and current TANF recipients is examined, and the relationship of perceived social support to family hardship and economic well-being is assessed. Respondents report relatively high levels of perceived social support across emotional, instrumental, and informational domains; however, both perceived and received financial assistance is relatively uncommon. Multivariate findings demonstrate that net of demographic, health, and human capital characteristics, perceived social support is unrelated to job quality and earnings, but it reduces the likelihood of living in poverty, and it is negatively associated with three measures of hardship. These findings generally support the contention that social support is important for the everyday survival of low-income families, but is of limited value as a means of economic mobility.

KEY WORDS: social support, welfare, coping, low-income families

The 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) has focused attention on the question of how welfare families have fared in the post-reform climate. A combination of tougher work requirements and time-limited benefits has heightened the pressures on low-income families to support themselves through non-welfare means. The labor market represents the primary non-welfare context for welfare recipients to seek economic support. However, recipients typically find jobs that pay low wages, are often part-time and short-term, and seldom provide health or family benefits (Meyer & Cancian, 1998; Pavetti & Acs, 2001). As a result, welfare recipients and other low-income parents may turn to informal support givers for assistance not available from the labor market or public assistance. In particular, social networks of family, friends, and other associates may be called upon to supplement earnings, to connect recipients to new opportunities, and to provide support that reduces the hardships of everyday life.

This paper examines a) the extent to which former and current Temporary Assistance to Needy Family (TANF) recipients perceive support to be available from their social networks and b) considers the importance of social support for their ability to get by on a daily basis and for their economic status. Drawing from social support and social network literatures, it is hypothesized that for this sample of low-income families, levels of perceived social support will be associated with less extreme coping behaviors and reductions in perceived and actual hardship, but will not be associated with higher earnings, better quality jobs, or household poverty.

CONCEPTUAL RATIONALE

A number of studies both before and after the 1996 welfare reform document that individual characteristics are important determinants of economic and employment outcomes. Human capital investments (e.g., education, work experience, skill mastery) and health and mental health characteristics are important predictors of leaving welfare through employment, and staying off of welfare for longer periods of time; as are demographic characteristics such as family size, child age, and recipient age (Bane & Ellwood, 1994; Campbell, Maniha, & Rolston, 2002; Danziger, Heflin, Corcoran, Oltmans, & Wang, 2002; Danziger, Kalil, & Anderson, 2000; Harris, 1996; Loprest, 2002; Pavetti, 1993,1997; Zedlewski, 1999). In addition, human capital has been associated with higher earning trajectories (Meyer & Cancian, 1998) and participation in better quality jobs (Pavetti & Acs, 2001).

The importance of individual characteristics to family economic well-being is undeniable, however, other factors are also important. Pavetti (1993), for example, demonstrates that while human capital predicts longer-term work exits, approximately one-fourth of welfare recipients with no high school education or GED and no recent work experience do not return to welfare (Pavetti, 1993). Social support from networks of family, friends and neighbors may be an important additional resource that helps explain entry into jobs and exits from welfare. Social support may also be critical for understanding the daily economic survival strategies of low-income families (Edin & Lein, 1997; Henly, 2002; Stack, 1974).

The Functions of Social Support Networks

The study of social support and its association with outcomes as heterogeneous as physical and mental health, parenting behaviors, child well-being, and labor market activity has a long tradition. The diversity in definitions and measurement has been as varied as the construct's presumed effects (Turner & Turner, 1999; Veiel & Baumann, 1992); however, there is a growing consensus that social support is best understood as a multi-dimensional construct (Barrera, 1986; House, Umberson, & Landix, 1988; Sarason, Sarason, & Pierce, 1990; Turner & Turner, 1999; Vaux, 1988) that includes (1) the structural apparatus under which supportive transactions take place (e.g., network analytic studies), (2) the support exchanges themselves (e.g., domains of support – emotional, financial, instrumental, informational), and (3) the subjective appraisal of availability and satisfaction with support.

Furthering our understanding of the multidimensional nature of support, Briggs (1998) makes an important distinction between social support networks that serve a social leverage function versus those that serve a coping function (see Briggs, 1998). Regarding the leverage function, networks of weak ties to higher status individuals are considered best for providing access to information, influence, and resources that can facilitate upward mobility. Research suggests that weakly-linked network members share fewer characteristics with one another than those more closely-connected (Berscheid & Walster, 1969; Granovetter, 1974), and these heterogeneous networks are more likely than homogenous ones to reflect a diverse array of contacts, increasing the likelihood of encountering better job leads, for example (Briggs, 1998; Granovetter, 1974; 1983; Lin, Ensel, & Vaughn, 1981; Putnam, 2000).

Social support networks can also function as “coping capital” (Briggs, 1998), providing a range of supports, including money, inkind assistance, emotional guidance, and information that serve to reduce family hardship and help buffer the stressors of everyday life. Close, dense ties, especially those with kin and fictive kin with whom individuals have long-term relationships, are thought to best serve this coping function because these individuals are presumed to be emotionally and often instrumentally dependent on one another, more motivated to help, more accessible in terms of physical proximity, and more tolerant of less exact and more flexible and abstract repayments of support (see Antonucci & Jackson, 1990; Belle, 1982; Granovetter, 1983; Henly, 2002; Stack, 1974; Wentowski, 1981). Whereas closely-knit networks are likely to be homogenous and therefore less able to open up new opportunities for members, the closeness of network relationships may make such networks easy to mobilize during times of stress. Moreover, the networks of families facing chronic disadvantage may need no mobilization, as their mutual dependence may be a matter of course (e.g., Stack, 1974; Uehara, 1990).

Social Support Networks and Low-Income Families

Although social networks have the potential to help families “move up” and “get by” (Briggs, 1998), not everyone is embedded in networks that serve either (or both) a leverage or a coping function. The social support networks of former and current TANF families may be particularly ill-suited for social leverage purposes (either through direct financial transfers or opening up labor market opportunities) because the networks themselves are likely to consist of family members and friends with similar socioeconomic circumstances and similar labor market disadvantages (Antonucci, 1985;

Cantor, 1979; Fisher, 1982). Large-scale financial transfers across economically-deprived networks are scarce, and when financial gifts are given, the amount received is smaller, as compared to financial transfers across higher income networks (Hogan, et al., 1990; Jayakody, 1998; Roschelle, 1997). Moreover, social support networks connect poor people to jobs, but there is scant evidence that informal referrals result in better jobs than those found using formal methods of job search (see Bridges & Villemez, 1986; Granovetter, 1974,1995; Henly, 2000; Holzer, 1996; Marsden & Hurlbert, 1988; Newman, 1999). Newman (1999) finds that even when the network members of low-income people hold secure and well-paid jobs, these individuals do not always serve as links to better jobs. Higher-status network members may have limited influence in the hiring process or they may be reluctant to respond to requests for assistance from economically needy family members. In addition, employment leads from higher status network members may prove irrelevant to individuals lacking necessary job qualifications. Thus, even when a high degree of informational support is given and even when it comes from higher-status network members, for a number of reasons this support may not facilitate the upward mobility of former and current TANF families.

The social support networks of TANF families may be more suited to assist with coping and daily survival. Whereas low-income families may rarely benefit from large financial transfers and opportunity-enhancing job leads, several studies have documented the importance of inkind assistance, such as food, transportation, and child care, as well as emotional and informational supports, and small financial gifts and loans (Belle, 1982; Edin and Lein, 1997; Henly, 2002; Henly and Lyons, 2000; Hogan, Hao, and Parish, 1990; Stack, 1974). Several authors have argued that the supports exchanged

between members of social networks in low-income communities are critical for their ability to manage work and family demands and for their day-to-day survival (Belle, 1982; Briggs, 1998; Henly, 2002; Hogan, Hao, & Parish, 1990; Parish, Hao, & Hogan, 1991; Martin & Martin, 1985; Stack, 1974).

On the other hand, there has been growing concern over the last several decades that a confluence of socio-economic, geographic, and institutional influences have increased the social and economic isolation of poor families threatening the supportive capacity of social networks in low-income communities (see Barclay-McGlaughin, 2000; Roschelle, 1997; Wilson, 1987). This suggests that an increasing number of economically disadvantaged families may not be embedded in social networks that serve either a coping or social leverage function.

The current study examines the social leverage and coping functions of social support in a sample of former and current TANF recipients. Rather than studying the structural properties of social relationships as a network analytic approach would do, we examine social support itself. We do so for several reasons. First, several studies have investigated the networks of low-income urban families, and although the findings are somewhat mixed, the bulk of the evidence would suggest their networks to be relatively dense, multiplex, homogenous, and financially disadvantaged (Fischer, 1982; Laumann, 1973). Although some studies also examine social supports, most examine either the relationship between structural network properties and supports or else examine linkages between structural properties and outcomes, with less attention to the association between social support per se and outcomes. Second, there is a voluminous literature in the areas of health and mental health that gives credence to a focus explicitly on social support (see

reviews by House, Umberson, and Landis, 1988; Sarason, Sarason, & Pierce, 1990; Thoits, 1995; Turner & Turner, 1999; Veiel and Baumann, 1992). While not negating the important role of structural network properties, the findings from this literature clearly indicate that the content of support exchanges (emotional, instrumental, informational, and financial types of support) and the subjective appraisal of their availability are key aspects of the support process.

Thus, in this study we draw from the social support literature and examine the perceived availability of support across several domains. Perceived support measures have consistently been found to have the strongest relationship to health and mental health outcomes (Sarason, Sarason, & Pierce, 1990; Turner & Turner, 1999); whether this relationship proves to be robust for the economic status and coping and hardship outcomes of interest to this study is unknown. Thus, a third reason for focusing on social support, and in particular perceived social support, is because it presents the opportunity to investigate whether the preponderance of evidence pointing to the importance of perceived social support is generalizable to domains outside of health and mental health.

Study Hypotheses

The above review suggests the following hypotheses about the role of social support for the well-being of former and current TANF families. First, because it is assumed these families are embedded in networks whose members are economically disadvantaged, support in non-financial domains (e.g., emotional, instrumental, and informational support) is expected to be more available than financial support. Second, net of individual characteristics, the perceived availability of social support across domains is expected to be associated with the alleviation of perceived and actual hardship

and a reduced likelihood of participating in extra-network coping activities. On the other hand, the perceived availability of social support is not expected to be associated with significantly higher earnings, job quality, or poverty status.

STUDY DESIGN

The data used to test these hypotheses comes from the Women's Employment Survey, a simple random sample systematically selected with equal probability from an ordered list of eligible women residing in an urban Michigan county in February 1997. To be eligible, women had to be residents of the county, receiving TANF, single mothers with children, US citizens, between the ages of 18-54, and either white or African American. 753 respondents completed Wave 1 of the face-to-face survey in Fall 1997 (a 86.2% response rate), 693 respondents completed Wave 2 of the face-to-face survey in Fall 1998 (92% of Wave 1 respondents) and 632 respondents completed Wave 3 of the face-to-face survey in Fall 1999 (83.9% of original Wave 1 participants). Multiple attempts were made to contact respondents, and one-quarter of the respondents required 6 or more contacts before survey completion. The final sample does not differ in appreciable ways from the population (see Appendix 3, Danziger et al., 1999).

The analysis reported herein comes primarily from the third wave of data, collected in Fall 1999, about 34 months after the original sample was drawn. The Wave 3 survey schedule took approximately 90 minutes to complete. The primary analyses are performed with the Wave 3 data alone because the temporal relationship between support transactions and our outcome variables is hypothesized to be relatively immediate, posing complications for a longitudinal model that would rely on measures of social support observed one or two years prior to the outcomes of interest. The temporal relationship

between social support and the outcomes of interest is considered in greater depth later in the paper, and several alternative model specifications generally support our contention that social support as measured in this sample acts more situationally than preventively.

Measures

The survey covered a broad range of topics. Measures of perceived and received social support, household income, perceived and material hardship, coping activities, demographic, health, and human capital measures are used. Detailed information about item construction and the actual wording of survey items are included in Appendix 1.

Social Support Variables: We take a functional rather than structural approach to the measurement of social support (e.g., House & Kahn, 1985). Rather than measuring structural network properties, our focus is on the social support available to respondents from their networks. The study includes the *Perceived Availability of Support* subscale of the O'Brien, Wortman, Kessler, & Joseph's (1993) *Social Relationship Scale* which asks respondents to report whether they would have someone to go to for assistance in seven different hypothetical situations across four domains of social support (emotional, instrumental, financial, and informational). Scores of 1 on an item indicate the respondent would definitely not have anyone to go to and scores of 5 indicate the respondent would definitely have someone to go to. Perceived social support score is an index from 1 to 5 (the mean across items), with higher scores indicating greater perceived support. In addition, a measure of received financial support indicates whether financial support for living expenses was received from family and friends outside of the household in the prior month, and if so, the amount in dollars that was received. The survey did not gather information on received support in nonfinancial domains.

Perceived and received social support measures tap different dimensions of the support construct (see Dunkel-Schetter & Bennett, 1990; Sarason, Sarason, & Pierce, 1990). Perceived measures provide a subjective assessment of the availability of support from network members and suggest the extent to which support would be accessible during a time of need. However, perceived measures do not gauge the actual use of support and are subject to perceptual inaccuracies (Dunkel-Schetter & Bennett, 1990).

Received measures offer a more objective substantiation of the support that is transacted, although they are still subject to respondent reporting bias (Sarason, Sarason, & Pierce, 1990). Received measures pose their own set of problems because receipt is not only a function of support availability but also of the network members' evaluations of an individual's level of need or hardship. Thus, received measures confound the availability of network resources with an individual's level of need and, therefore, can introduce endogeneity concerns when modeling the effect of support on well-being (Sarason, Sarason, & Pierce, 1990; Thoits, 1982). Indeed, the greater strength of perceived over received measures of social support evidenced across a range of studies (House, 1981; Sarason, Pierce, & Sarason, 1990; Wethington & Kessler, 1986), undoubtedly reflects not only the power of subjective experience but also this endogeneity dilemma. For both these reasons, the current study uses the perceived measure of social support rather than the received measure in all multivariate analyses.

Economic status. We include three measures of economic status to address the social leverage function of social support. The first is *(Ln) respondent monthly earnings*. In order to make the logarithmic transformation, we replace all zero earnings with earnings of \$1. The second is a measure of job quality that categorizes the sample into

three employment levels: *no job*, a *poor quality job*, and a *good quality job*. The job quality definition is identical to that used by Johnson and Corcoran (2002), and is determined by a combination of earnings, hours, and presence of health benefits. If family and friends can connect respondents to jobs, and especially to better jobs, the earnings and job quality measures should be positively related to perceived social support. If social support does not serve a social leverage function, we would expect little relationship between perceived social support and earnings or job quality.

Finally, we examine whether monthly household income falls above or below the official poverty line by calculating a monthly income-to-needs ratio using the 1999 poverty line adjusted for household size and divided by 12. Income includes the pre-tax earnings of everyone in the respondent's household, income from transfer payments, food stamps, monetary contributions from family and friends living either in or outside of the household, and money from any other sources not identified. Because the income calculation includes foodstamps and monetary contributions from non-household family and friends, it is a more generous measure of income than is the official government formula used to calculate household poverty.

Hardship and Coping. Three measures are used to examine the hardship and coping hypothesis. *Perceived economic hardship* includes two items asking respondents to rate how difficult it is for them to get by on their household income (1, not at all to 5, extremely) and to anticipate the likelihood that their family will experience hardships in housing, food, or medical care in the near future (1, not at all to 5, extremely). The perceived hardship score is an average of the two items, ranging from 1 to 5, with higher scores indicating greater perceived hardship. *Actual material hardship* is computed based

on respondents reported hardships across 8 domains (hunger, own medical or dental care, children's medical or dental care, housing upkeep problems, utility and phone cut offs, eviction, and homelessness) (see Danziger et al., 2003). A categorical variable was constructed indicating whether the respondent experienced zero hardships, one hardship, or two or more hardships. *Extra-network coping activities* is an indicator of the respondent's participation in survival activities beyond (and assumed to suggest more desperate in nature than) the supports offered by family and friends. This measure is a dichotomous variable that indicates whether the respondent engaged in at least one of five coping behaviors, including illegal activities, giving blood or plasma for money, selling or trading food stamps, pawning personal possessions, and going to charities for food, shelter, or clothing. If the coping hypothesis is supported, we would expect that higher levels of perceived social support would be related to reduced perceived economic hardship, less actual material hardship, and lower participation in extra-network coping activities.

Demographic, Health, and Human Capital Variables. The multivariate analyses include several individual level control variables that previous research has identified as relevant to both social support availability (e.g., Antonucci, 1985; Longino & Lipman, 1981; Thoits, 1995; Turner & Marino, 1994) and economic outcomes (e.g., Bane & Ellwood, 1994; Danziger, Heflin, & Corcoran, & Oltmans, 2001; Danziger, Kalil, & Anderson, 2000; Meyer & Cancian; Pavetti, 1997; Pavetti & Acs, 2001; Zedlewski, 1999). First, we include age, race, marital/cohabitation status, household extendedness, residence in an urban or nonurban census tract, and presence of young children. Second, we include two dichotomous health measures, the first indicates the presence of at least

one mental health problem, and the second indicates the presence of a health barrier. Mental health conditions assessed included social phobia, major depression, post-traumatic stress disorder, generalized anxiety disorder, drug dependence, and alcohol dependence. Physical health was considered a barrier when a respondent rated her physical health as poor or fair and ranked according to national norms in the lowest age-specific quartile of the multiple item physical functioning scale. Third, we included several items related to education, work, and welfare experience including whether or not the respondent has a high school degree or equivalent, whether a respondent has worked less than 20% of the years between age 18 and the first survey wave, and the proportion of adult years prior to the first interview that the respondent has spent on welfare. In addition, we include a categorical variable that indicates whether the respondent, in Fall 1999, is receiving mostly welfare income with hours of regular employment less than 20 per week ('mostly welfare'), combining welfare with work over 20 hours per week ('welfare and work'), working twenty hours or more per week and not receiving welfare ('work only'), or neither working twenty or more hours per week nor receiving welfare at the time of the interview ('neither welfare nor work').

Sample Descriptives.

Sample descriptives for the control, outcome, and social support variables are summarized below. Because previous efforts to detect non-response bias showed little reason for concern, none of the reported descriptive statistics are weighted (see Appendix 3, Danziger et al., 1999).

Table 1 reports basic demographic, health, and education characteristics of the sample. The sample included 632 women from 18 to 54 years of age. Fifty-six percent

of the sample was African American. In Fall 1999, 37% of the sample was married or cohabiting, almost one-fourth had children 2 or under, and 45% had children 3-5 years of age. Twenty-eight percent lived in an extended household, defined as any household with at least one adult other than the respondent and a partner present. One-fifth of the married/cohabiting group and 35% of the non-married/cohabiting group lived in extended households. The vast majority of respondents (86%) lived in an urban census tract.

Significant numbers of respondents suffered physical health, mental health, and education deficits. Over one-fifth of the respondents met our criteria for having a significant health problem, and one-third met the diagnostic screening criteria for at least one of six mental disorders. More than one-fourth of the sample did not graduate from high school or obtain a high-school equivalency certificate.

Concerning the work and welfare characteristics of the sample (see Table 2), 85% reported working more than 20% of the years between age 18 and Fall 1997. In Fall 1999, 64% were working. The sample has a more significant history of welfare use than is representative of the broader population of welfare recipients – they had received cash assistance for 59% of the years between age 18 and the first survey. This is an artifact of the sampling strategy that drew a random sample of recipients who were on the rolls in a particular month (February, 1997). A point-in-time sample will always over-represent long-term welfare recipients (see Bane & Ellwood, 1994).

At the time of the third survey, just over one-half of the respondents were working 20 hours or more a week and were not receiving cash assistance; 14% were combining work 20 hours or more a week with welfare benefits; 17% were receiving welfare benefits but working less than 20 hours a week or were not employed at all; and

19% was neither working 20 or more hours a week nor receiving welfare benefits. Thus, three years after the sample was originally drawn from the TANF rolls, just under one-third received some TANF benefits and the majority were working in the regular economy.

Table 3 reports the descriptives of the dependent variables -- three measures of economic status and the three measures of hardship and coping. About one-third of the sample was not employed, 41% were classified as having “bad quality jobs” and 26% were classified as holding “good quality jobs”. Employed respondents’ average earnings in the month prior to data collection were \$956; average household income for the total sample was \$1418². Adjusting household income for family size and calculating monthly income-to-needs ratios, we find that 63% of the sample lived in households below the poverty line.

The average perceived economic hardship score was 2.42 (out of 5). The most frequent hardships reported across the eight domains were telephone disconnection (32%), forgoing necessary medical or dental care (25%), and food insufficiency (16%). Overall, about 41% of the sample reported none of the hardships in the last year, 30% one hardship, and 30% two or more hardships.

39% of the sample reported engaging in at least one of the extra-network coping activities. One-third reported receiving food, shelter, or clothing from charity and 10% reported pawning or selling personal possessions. There was very limited involvement in the other coping activities investigated (providing blood or plasma for cash, selling or trading food stamps, or engaging in illegal activities).

Table 4 reports the descriptive statistics for the social support variables. Respondents reported a mean of 4.32 on the 5 point perceived social support scale ($\alpha=.88$). The perceived financial support item was the least subscribed to of all scale items, with a mean score of 3.56 (all other items were 4.4 or above). Moreover, the receipt of financial support was uncommon -- 84% reported receiving no money from friends and family outside the household in the prior month. Of those who did report financial support, about half received less than \$200 and about half reported receiving over \$200. Overall, the mean financial support received for the one-sixth reporting financial support was \$234, significantly lower than the amount respondents reported receiving from either welfare or employment activities.

Table 5 examines the bivariate relationships between perceived and received financial support and the demographic, health, and human capital indicators³. Living in an urban census tract, having less than a high school education, and the presence of both health and mental health problems are all associated with lower perceived social support. Older age, living with a husband or partner, living in an extended household, education at the high school or equivalent level are associated with lower rates of receipt of financial support from family and friends. Meeting the diagnostic screening criteria for a mental health disorder is associated with higher rates of received financial support.

Table 5 also shows that respondents who relied mostly on welfare income reported the lowest level of perceived support (scoring about 4.01 compared to about 4.4 for most of the other groups). And only 14% of these respondents actually received financial support from family and friends, compared to one-fourth of those combining work and welfare and over one-fifth of those with neither work nor welfare income. The

respondents with income from only work also reported receiving lower levels of financial support, perhaps due to their comparably higher incomes.

Multivariate Analyses

It is hypothesized that perceived social support is negatively related to three different measures of hardship and coping (perceived economic hardship, actual material hardship, and extra-network coping activities), but will have limited relationship to three measures of economic status (earnings, job quality and poverty status). A series of multivariate analyses that examine these relationships, net of demographic, health, mental health, and human capital variables, are carried out. In an effort to avoid confounding the measure of support with the level of economic need of the respondent, the perceived social support measure, but not the received financial support measure is included as a predictor variable in each of the regressions.

Table 6 reports the multivariate findings for the economic status outcomes. The demographic, health, mental health, and human capital variables are entered as controls in order to examine the independent contribution of perceived social support for each of the outcomes. The work and welfare categorical variable is not included in the earnings and job quality analyses given its conceptual overlap with these outcome measures. The different levels of measurement of each economic status variable, required us to conduct different analyses for each: an OLS regression for respondent earnings (logged), an ordered probit for job quality (no job, poor quality job, good quality job), and a logistic regression for household poverty status (above poverty, below poverty). The ordered probit for job quality was run under the assumption that the three categories of job quality represented an ordered relationship⁴. First difference scores were calculated that indicate

the change in probability associated with a change from the mean to the maximum for continuous predictor variables holding all other variables at their mean. For example, the ordered probit provides an estimate for the change in probability that a respondent would have no job, would have a bad job, or would have a good job, if this respondent's perceived social support score went from the mean (4.32) to the maximum (5), and all other control variables were held at the mean. For dichotomous predictor variables such as extended household, the ordered probit considers the change in probability associated with a discrete change from 0 (not living in an extended household arrangement) to 1 (living in an extended household arrangement), with all other variables held at their mean⁵.

As reported on Table 6, no appreciable relationship is observed between perceived social support and respondent earnings or perceived social support and job quality. In both cases, the coefficients are positive, however quite small and insignificant. On the other hand, the likelihood of living in a household below the poverty line is associated with the perceived social support measure. That is, controlling for the influence of demographic, health, mental health, and human capital variables, a one unit increase in perceived social support is related to a 29% reduced odds of living in a poor household.

Consistent with past studies, net of other variables, having less than a high school education, limited work experience, children aged two or under in the household, and poor physical and mental health are all characteristics negatively related to earnings. Health status and education are both related to job quality. Specifically, respondents with less than a high school education are 18% more likely than those with at least high school

equivalence to not be working, 6% less likely to have a “bad job”, and 12% less likely to have a “good job”. Respondents with health problems are 23% more likely to not be working compared to those without health problems, 9% less likely to hold a “bad job”, and 14% less likely to hold a “good job”. Being African American, having children three to five years of age, and having less than a high school degree also increase the likelihood of being in a poor household; whereas being married or cohabiting and working (compared to being on welfare) decreases the odds of living in a household below the poverty line. Curiously, neither working nor being on welfare (compared to only being on welfare) also decreases the likelihood of living below the poverty line, net of all other variables.

Overall, the findings reported in Table 6 provide mixed support for the argument that perceived social support is unrelated to economic status. That is, the level of perceived social support is unrelated to individual earnings and job quality, but greater perceived social support decreases the odds of a respondent living in a below-poverty household.

Table 7 reports the findings for the three hardship and coping outcomes. Once again, testing the association between perceived social support and the three outcomes require different multivariate techniques: an OLS regression for perceived economic hardship (1, no hardship to 5, extreme hardship), an ordered probit for actual material hardship (no hardship, one hardship, two or more hardships), and a logistic regression for extra-network coping activities (none, at least one). These analyses all include the demographic, health, mental health, and human capital variables as well as the

categorical work and welfare status variable as controls and the perceived social support index as the conceptual variable of interest.

As reported on Table 7, net of demographic, health, mental health, and human capital, there is a significant negative relationship observed between perceived social support and perceived economic hardship, material hardship, and participation in extra-network coping activities. Specifically, respondents reporting more perceived social support reported significantly less perceived economic hardship. Moreover, a change from average social support to a maximum level of social support is related to a 6% greater chance of experiencing none of the material hardships, a 1% reduced chance of experiencing one of the hardships, and a 5% reduced chance of experiencing two or more hardships. Finally, an increase in one unit of social support decreases the odds by about one-third of participating in at least one of the extra-network coping activities such as visiting food pantries or pawning goods.

Table 7 also indicates that there are several significant associations between the control variables and the coping and hardship outcomes. Respondents participating primarily in work, as compared to those with mostly welfare income, reported significantly less perceived hardship. These same respondents and also respondents combining work and welfare, as compared to those with mostly welfare income, were also less likely to engage in extra-network coping activities. Less than a high school education was related to greater perceived economic hardship and more experience with actual material hardships. Specifically, respondents with less than a high school education compared to those with at least high school equivalence, were 11% less likely to report none of the material hardships and 10% more likely to report two or more

material hardships. Mental health problems and physical health barriers were both associated with increased perceived economic hardship, and the presence of a mental health problem significantly increased the odds of participating in extra-network coping activities and experiencing material hardships. Older respondents and respondents who did not cohabit reported more perceived economic hardship and had an increased probability of engaging in one of the extra-network coping activities. African American respondents were less likely than white respondents to experience material hardships, but no significant relationship was observed between race and the perceived economic hardship or extra-network coping outcomes.

Alternative Specifications

Although the association between social support and the coping and hardship variables is hypothesized as being causal, the multivariate analyses reported in Tables 6 and 7 are cross-sectional, thereby necessitating associational rather than causal interpretations of the results. The decision was made to test the relationship cross-sectionally because we conceptualized social support as operating situationally (a proximate influence) rather than preventively (a lagged influence). Empirical justification for our rationale was sought by specifying three alternative models tested on a pooled dataset including variables from both Wave 1 and Wave 3⁶. The first specification (model 1) reruns the equations reported in Table 7, substituting the Wave 3 Perceived Availability of Support Subscale with an alternative measure of perceived social support available in the Wave 1 dataset. Like the Perceived Availability of Support subscale, this alternative measure is a global measure of the perceived availability of support across multiple domains; however, it differs from the Perceived Availability of Support

Subscale in that it includes five items instead of seven, does not include an item designed to tap informational support, and uses a dichotomous rather than a likert-type response scale. Thus, the first alternative specification (model 1) examines whether there is an observable relationship between perceived social support and the outcomes of interest when the indicator of social support used is measured at Wave 1 (approximately two years prior to the measured outcomes). Importantly, model one is not sufficient for addressing the causal order concern inherent in the original cross-sectional analyses because it does not consider potential causal influences of earlier measures of the dependent variables on the Wave 1 social support variable or on the Wave 3 dependent measures themselves (Menard, 1991). Nonetheless, we do find that Wave 1 social support is positively associated with the three hardship and coping outcomes. However, as Table 8 indicates, the relationship between perceived support and the hardship and coping outcomes is considerably weaker when the Wave 1 measure is used in lieu of the Wave 3 measure in model 1.

The second alternative specification (model 2) is identical to model 1 except that it simultaneously enters the Wave 1 and the Wave 3 measures of perceived support in an effort to examine the relative importance of both temporally distant and proximate measures of support⁷. If the relationship is a proximate one as has been hypothesized, then the Wave 3 social support coefficients should be more sizeable than the Wave 1 social support coefficients. Indeed, the findings for model 2 indicate that the size and significance of the Wave 1 coefficients are reduced when Wave 3 is considered, while the Wave 3 coefficients continue to be relatively stronger and more significant (see Table 8).

Finally, model 3 represents a further effort to explore the situational assumptions of the multivariate analyses. Here, path analyses are conducted to examine the direct and indirect effects of social support at Wave 1 on the hardship and coping outcomes, treating social support at Wave 3 as a mediator. In this model, the Wave 1 hardship and coping measures are included in the model as well (see Figures 1.1, 1.2, and 1.3). If there is evidence that the Wave 3 social support measure mediates the relationship between Wave 1 perceived support and the outcomes, a situational argument would be supported. The results of the path analyses demonstrate that for both perceived hardship and extra-network coping, the Wave 3 social support measure mediates the relationship between support at Wave 1 and the outcomes. The results of the path analysis with the material hardship outcome show a similar pattern of results; however both the direct and the indirect effect of support prove small and insignificant⁸. Thus, the path analyses generally support a situational account of social support. Whereas the alternative model specifications described above do not take us closer to understanding whether or not the hardship and coping variables are themselves influences on social support, these results do provide an empirical justification for our conceptual argument that the relationship between social support and hardship is a situational one⁹.

DISCUSSION

Current and former welfare recipients reported relatively high levels of perceived social support, but only a minority received financial assistance from family and friends. For those receiving financial support, the level was only a fraction of the typical welfare payment or their monthly earnings. Moreover, the most economically needy families are those with the most limited access to social support. Specifically, recipients reporting

primarily welfare income perceived less support to be available and reported receiving money less frequently from family and friends compared to the other groups. This suggests that the social networks of current welfare families are those least prepared to provide support should TANF benefits cease – forecasting a rather pessimistic trajectory for TANF families who ultimately exhaust time limits, unless they are able to increase their earnings substantially.

We find that respondents who report a higher degree of support from network members also report less perceived economic hardship, have a reduced likelihood of reported experiences with actual material hardships such as housing problems, utility shut-off, and hunger, and are less likely to report engaging in extra-network coping activities, such as selling blood or plasma, visiting food pantries, or pawning goods. These findings are consistent with previous research demonstrating the important role of social networks in facilitating everyday coping of poor families (see, for example, Edin & Lein, 1997; Henly, 2002; Hogan, Hao, & Parish, 1990; Newman, 1999; Stack, 1974). Although the magnitude of the association between social support and coping and hardship tends to be smaller than the magnitude of those with human capital indicators, the coefficients are not negligible. For example, a one unit increase in social support is associated with a 33% reduction in the likelihood of participating in one of the extra-network coping activities.

The benefits of higher perceived social support do not extend to respondent earnings or job quality, both of which are unrelated to respondents' levels of perceived social support. On the other hand, there is a relatively large and significant negative relationship between perceived social support and likelihood of living below the poverty line. These

results suggest that social supports available from family and friends may be unsuccessful at improving the personal economic status of individuals via work, but may enable respondents to share the income of other adults with whom they live.

Together, these findings suggest that former and current TANF recipients are embedded in social networks of family and friends that help sustain them on a day-to-day basis, but that this support is not powerful enough to raise their earnings or get them better jobs. Thus, when TANF families reach time limits their social networks may hold little promise as a replacement for welfare income. Likewise, social networks are unlikely to be an adequate substitute for earnings from even a low-wage job. Instead, TANF families are likely to utilize networks to lessen hardship and help cope with the difficulties of living on limited resources.

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Table 1. Demographic, Health and Human Capital Characteristics of the Sample

	<u>Percentage</u>
Age	(N=632)
24 or younger	16.5
25 through 34	48.9
35 or older	34.7
Race	(N=632)
African-American	55.5
White	44.5
Lives with husband /partner	(N=632)
No	63.4
Yes	36.6
Lives in extended household	(N=632)
No	71.8
Yes	28.2
Lives in urban census tract	(N=631)
No	14.4
Yes	85.6
Presence of young children	(N=632)
Any 0-2 years old	24.5
Any 3-5 years old	44.5
Has a health barrier	(N=628)
No	77.7
Yes	22.3
Suffers from mental disorder	(N=625)
No	66.4
Yes	33.6
Education (%)	(N=631)
Less than high school	27.4
Has high school degree, GED or higher degree	72.6

Table 2. Work and Welfare Characteristics of the Sample

Work ^a /welfare status (%) ^a	(N=631)
Work Only	50.6
(Mean monthly earnings in dollars)	(1108)
Work & Welfare	13.6
(Mean monthly earnings in dollars)	<u>(689)</u>
(Mean monthly welfare payment in dollars)	(526)
Mostly Welfare	17.3
(Mean monthly welfare payment in dollars)	(774)
No Work/No Welfare	18.5
(Mean monthly earnings in dollars)	(607)
<u>Work Experience – Worked less than 20% of years since age 18</u>	(N=628)
No	85.0
Yes	15.0
<u>Welfare history – Mean percentage of years since age 18 in which received AFDC/FIP</u>	(N=627)
<u>(SD)</u>	.59 (.257)

^a Only respondents who work at least 20 hours per week.

The mean total monthly income net of taxes and work expenses for each group is (in dollars): works only – 1650; Works and gets welfare – 1289; Gets welfare only – 1067; Does not work nor get welfare – 1209.

Table 3. Descriptives of the Dependent Variables Used in the Analyses

	N	Mean (<i>SD</i>)
Mean earnings in last month (in dollars)	422	956 (582)
Job quality	632	
No job	33.2%	
Bad job	41.1%	
Good job	25.6%	
Poverty status	632	
Below poverty line	63%	
Perceived economic hardship (1= no hardship; 5 = extreme hardship)	627	2.42 (1.08)
Number of actual material hardships	627	
0	40.7%	
1	29.5%	
2 or more	29.8%	
Number of extra-network coping strategies	631	
0	61.2%	
1 or more	38.8%	

Table 4. Social Resource Characteristics of the Sample

Perceived Social Support (1 = No definitely not; 5 = yes definitely)	(N=632)
Mean (SD)	4.32 (.823)
Perceived Social Support by types of support	(N=632)
Instrumental	
Mean (SD)	4.43 (.850)
Emotional	
Mean (SD)	4.42 (.955)
Informational	
Mean (SD)	4.50 (.861)
Financial	
Mean (SD)	3.56 (1.50)
Received financial support from friends and family outside the household (%)	(N=630)
No	84.4
Yes	15.6
<u>Mean amount of financial support received from friends and family (in dollars)^a (SD)</u>	234 (246)
<u>Amount of financial support received from family and friends^a</u>	(N=95)
<u>\$1-\$199</u>	48.4%
<u>\$200 or more</u>	51.6%

^a Includes only respondents who reported having received financial help from friends and family

Table 5. Distribution of Social Resources by Demographic, Health and Human Capital Characteristics

	Perceived Social Support		Received Financial Support from Family and Friends
	N ^a	Mean (<i>SD</i>)	%
Age			
24 or younger	104	4.40 (.77)	24.0**
25 through 34	309 (308)	4.34 (.84)	18.5
35 or older	219 (218)	4.26 (.82)	7.3
Race			
African-American	351 (350)	4.29 (.87)	16.9
White	281 (280)	4.36 (.76)	13.9
Lives with husband/partner			
No	401 (299)	4.28 (.85)	17.8*
Yes	231	4.40 (.77)	11.7
Lives in Extended Household			
No	454 (453)	4.32 (.83)	18.7**
Yes	178 (177)	4.32 (.80)	7.3
Lives in urban census tract			
No	91	4.48 (.61)*	19.8
Yes	540 (538)	4.30 (.85)	14.9
Has health barrier			
No	488 (487)	4.39 (.78)**	14.4
Yes	140	4.10 (.88)	20.0
Suffers from mental disorder			
No	415 (413)	4.44 (.74)**	13.3*
Yes	210	4.12 (.92)	20.5
Education			
Less than high school	173	4.19 (.84)*	23.1**
Has high school, GED or higher degree	458 (456)	4.37 (.81)	12.5
Work/welfare status			
Work Only	319	4.43 (.74)**	11.3**
Work & Welfare	86 (85)	4.30 (.84)	24.7
Mostly Welfare	109 (108)	4.01 (.92)	13.9
No Work/No Welfare	117	4.36 (.86)	21.4

^a N's in parentheses are for the second column when they differ from the first column.

** P < 0.01 * P < 0.05

Table 6. Regression Coefficients and Standard Errors (in Parentheses) Predicting Ln Monthly Earnings, Poverty Status, and Job Quality

	<u>Ln Monthly Earnings</u> Coefficient	<u>Below Poverty Line</u>		<u>Job Quality</u>			
		Coefficient	Odds Ratio	Coefficient	? Prob ^a	? Prob ^b	? Prob ^c
Age 25-34	-.192 (.342)	.469 (.296)	1.60	.011 (.139)	-.004	.001	.003
Age 35 or older	-.353 (.395)	.376 (.344)	1.46	-.049 (.161)	.018	-.003	-.015
African American	-.045 (.258)	.495* (.218)	1.64*	.024 (.105)	-.009	.001	.007
Cohabits	-.474 (.251)	-1.12** (.215)	.33**	.019 (.102)	-.007	.001	.006
Extended household	-.250 (.161)	-.083 (.229)	.92	-.116 (.108)	.042	-.008	-.034
Urban tract	-.353 (.352)	.443 (.287)	1.56	-.020 (.142)	.007	-.001	-.006
# children age 0-2	-.535* (.228)	.381 (.214)	1.46	-.166 (.093)	.173	-.058	-.115
# children age 3-5	-.071 (.184)	.526** (.172)	1.69**	-.007 (.075)	.009	-.001	-.007
Less than high school	-1.04** (.268)	.845** (.253)	2.33**	-.476** (.11)	.183	-.063	-.12
Low work experience	-.808* (.337)	.322 (.316)	1.38	-.28 (.139)	.105	-.028	-.077
Welfare history	.201 (.490)	.216 (.413)	1.24	.014 (.20)	-.002	.000	.002
Work only		-1.83** (.358)	.16**				
Work & Welfare		-.814 (.441)	.44				
No work/no welfare		-.949** (.395)	.39**				
Mental disorder	-.488 ⁺ (.254)	.236 (.222)	1.27	-.186 (.104)	.069	-.016	-.053
Health problem	-1.93** (.292)	-.133 (.265)	.88	-.594** (.122)	.230	-.089	-.141
Perceived Social Support	.112 (.145)	-.347** (.139)	.71	.051 (.059)	-.012	.001	.011
Constant	6.26** (.876)	2.00** (.856)					
Cut 1				-.701 (.122)			
Cut 2				.497 (.059)			
-2 log likelihood		641.478		1237.772			
N	611	610		611			
? ² (df)		166.9(17)**		80.55(14)**			
Adjusted R ²	.145						

** P < 0.01 * P < 0.05

⁺ P = 0.056^a Change in probability of reporting “no job” associated with a discrete change (from 0 to 1) for dummy variables and a change from the mean to the maximum for continuous variables holding other variables at the mean.^b Change in probability for reporting “bad job”.^c Change in probability for reporting “good job”.

Table 7. Regression Coefficients and Standard Errors (in Parentheses) Predicting Perceived Economic Hardship, Actual Material Hardship, and Extra-Network Coping Activities

	Perceived Economic Hardship	Actual Material Hardship			Extra-Network Coping Strategies		
	Coefficient	Coefficient	? Prob ^a	? Prob ^b	? Prob ^c	Coefficient	Odds Ratio
Age 25-34	.227 (.122)	.106 (.143)	-.04	.003	.037	.469 (.289)	1.60
Age 35 or older	.268 ⁺ (.141)	.167 (.165)	-.063	.004	.059	.853** (.328)	2.35**
African American	-.019 (.091)	-.277** (.107)	.109	-.023	-.086	-.394 (.21)	.674
Cohabits	-.288** (.09)	-.009 (.105)	.003	-.000	-.003	-.462* (.211)	.63*
Extended household	.039 (.093)	-.011 (.11)	.004	-.000	-.004	-.224 (.212)	.80
Urban tract	-.139 (.124)	.06 (.148)	-.023	.002	.021	-.157 (.285)	.86
# children age 0-2	-.029 (.082)	-.006 (.096)	.006	-.001	-.006	-.157 (.285)	1.04
# children age 3-5	.0158 (.065)	-.038 (.077)	.052	-.009	-.043	.206 (.148)	1.23
Less than high school	.308** (.097)	.287** (.113)	-.106	.002	.104	.268 (.216)	1.31
Work Only	-.303** (.122)	.069 (.144)	-.027	.003	.024	-1.17** (.274)	.31**
Work & Welfare	-.217 (.148)	-.087 (.174)	.034	-.005	-.029	-.819** (.329)	.44**
No Work/No Welfare	.136 (.139)	.133 (.164)	-.051	.004	.047	-.558 (.31)	.57
Low work experience	-.135 (.119)	.041 (.139)	-.016	.002	.014	.237 (.268)	1.27
Welfare history	.191 (.172)	.375 (.204)	-.058	.004	.054	.68 (.397)	1.97
Mental disorder	.366** (.09)	.267** (.106)	-.099	.002	.097	.712** (.199)	2.04**
Health problem	.276** (.106)	.208 (.125)	-.078	.004	.074	.147 (.236)	1.16
Perceived Social Support	-.20** (.051)	-.223** (.061)	.058	-.010	-.048	-.397** (.116)	.67**
Constant	3.097** (.323)					1.166 (.731)	
Cut 1		-.742 (.382)					
Cut 2		.064 (.382)					
-2 log likelihood		1249.296				702.458	
N	605	606				609	
? ² (df)		65.58(17)**				110.71(17)**	
Adjusted R ²	.176						

** P < 0.01 * P < 0.05

⁺ P = 0.057^a Change in probability of reporting “no hardship” associated with a discrete change (from 0 to 1) for dummy variables and a change from the mean to the maximum for continuous variables holding other variables at the mean.^b Change in probability for reporting “one hardship”.^c Change in probability for reporting “two or more hardships”.

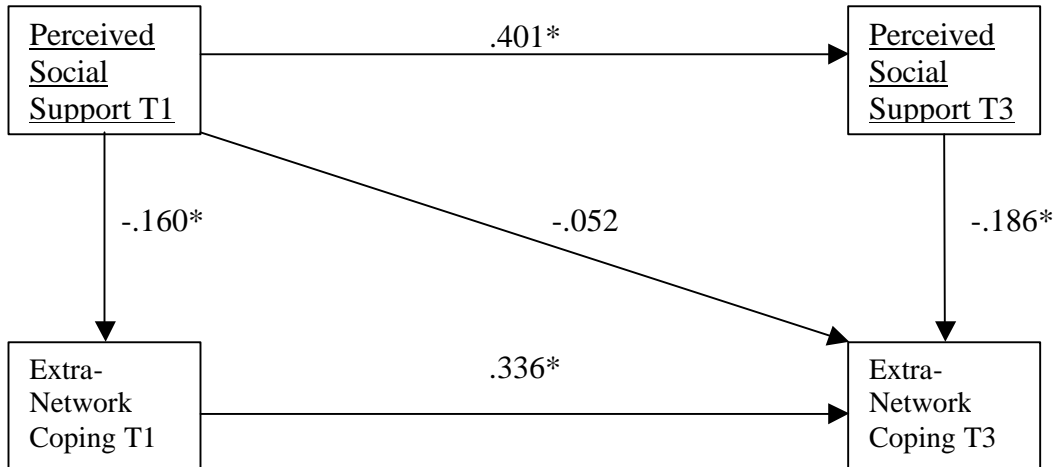
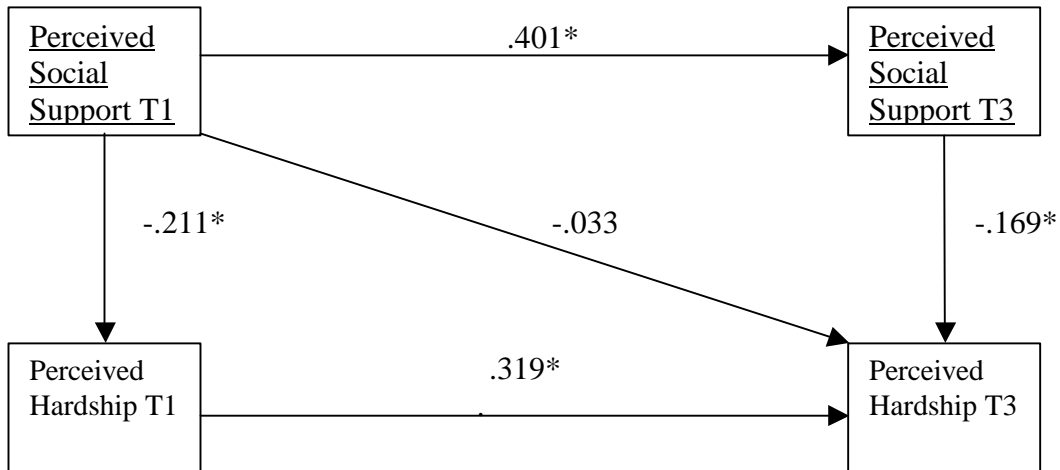
Table 8. Alternative Specifications – Models 1 and 2^a.

	<u>Perceived Economic Hardship</u>	<u>Actual Material Hardship</u>	<u>Extra-network coping activities</u>	<i>Odds Ratio</i>
<u>Perceived Social Support (PSS)</u>				
BASE REGRESSION				
Time 3 PSS	-.200** (.05)	-.222** (.061)	-.397* (.12)	.67
MODEL 1				
Time 1 PSS	-.118 ** (.04)	-.163** (.043)	-.215** (.08)	.81
MODEL 2				
Time 1 PSS	-.075* (.04)	-.123** (.046)	-.129 (.09)	.88
Time 3 PSS	-.159** (.06)	-.161** (.065)	-.324** (.124)	.72

**P < 0.01 *P < 0.05

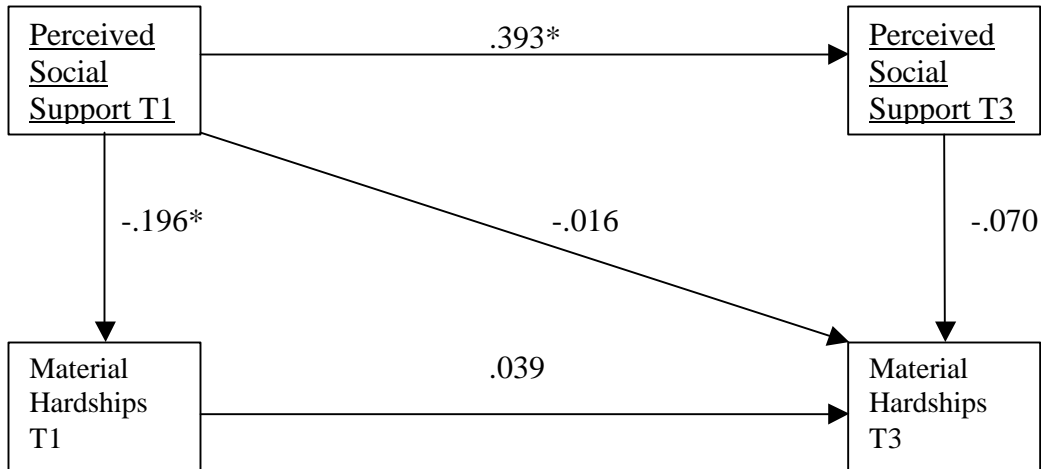
^aAge, race, cohabitation, urban tract, number of children, education, work/welfare status, work experience, welfare history, mental disorder, health, were included as control variables

Figures 1.1 and 1.2. Path Analyses Examining Direct and Indirect Influence of Perceived Social Support at Time 1 on Perceived Hardship and Extra-Network Coping Outcomes



Note: Standardized path coefficients are reported. All paths but the direct effect of perceived social support on perceived hardship/extra-network coping are significant at $p < .01$.

Figures 1.3. Path Analysis Examining Direct and Indirect Influence of Perceived Social Support at Time 1 on Material Hardship



Note: Standardized path coefficients are reported.

¹ The Women's Employment Study data that are used in this paper were supported, in part, by grants from the National Institute of Mental Health (R24-MH51363), the Charles Stewart Mott Foundation, the Joyce Foundation and the John D. and Catherine T. MacArthur Foundation. This paper was completed while Sandra K. Danziger was a Visiting Scholar at the Russell Sage Foundation. The authors would like to thank Sheldon Danziger, Harold Pollak, Michael Sosin, John Brehm, Yoonsun Choi, Judith Levine, Lawrence Lynn for many helpful comments and suggestions.

² Respondents who reported working and not collecting welfare had an average household income of \$1650 (earnings of \$1108), respondents who combined welfare with employment had an average household income of \$1289 (earnings of \$689; benefits of \$526), and those on welfare but not employed had an average household income of \$1067 (benefits of \$774). The group that relied neither on welfare nor employment had an average household income of \$1209, slightly more than the welfare only group.

³ In order to examine the relationship between perceived and received support, we ran a multivariate model that considered the association of perceived social support to received financial support (the likelihood of receiving money from family and friends measured as no money, up to \$199, or \$200 or more), controlling for the demographic and human capital variables of interest. The ordered probit results demonstrate no significant relationship between perceived social support and received financial support, and the reduced likelihood of receiving financial support for older respondents, married/cohabiting respondents, respondents in extended households, and welfare recipients (reported above as bivariate relationships) continues to be significant in this multivariate model.

⁴ We treat the job quality attributes as ordered, with the state of not having a job to be worse than holding a “bad job”, and the state of “bad job” worse than holding a “good job”. Because one could plausibly argue that “no job” may not be a lower quality state than “bad job”, we also ran a multinomial logit that does not assume an ordered relationship between the three levels of job quality. The results are unchanged. No significant effect of social support was found when comparing “bad job” and “good job” to “no job” (the omitted category in the multinomial logit regression).

⁵ In order to interpret the results of the ordered probit analysis, we do not compare one state to a reference group, such as in logistic or multinomial logit regression, but rather estimate the probability of being in each state. For more details see Long, 1997.

⁶ Wave 2 data does not include a perceived support measure; thus we are restricted to examining Wave 1 and Wave 3 measures of perceived social support.

⁷ As is addressed further in the manuscript's discussion section, because the measures of perceived social support at the two time periods are different, it is not possible to reliably calculate the change scores necessary to better test for causal associations.

⁸ The path analyses treat the hardship and coping variables as continuous because of the requirements of the EQS software used for the path analysis.

⁹ One way to address concerns about causal direction and selection effects would be to pursue an analytic strategy that examines change (e.g., a fixed effects model) or one that separately models selection into perceived social support levels (e.g., an instrumental variable approach). However, the data necessary for either strategy are not available.