

The Bumpy Road off TANF for Rural Mothers

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ABSTRACT. Rural welfare mothers receiving Temporary Assistance to Needy Families (TANF) have a difficult time reaching economic security and lessening their reliance on benefits because of the impediments they face regarding employment opportunities, transportation, child care resources, and more. This article focuses on 62 rural mothers, each receiving TANF at some point during the three year *Rural Families Speak* study. By their third-year interview, only 11 of the 62 mothers had household incomes above 150% of poverty for their family size. These 11 achieved success through educational training in fields offering livable wages. The other 51 mothers were struggling to overcome barriers such as poor health and lack of transportation. The rural economy was a barrier faced by both the successful and non-successful mothers. Mothers representing those who got off TANF and those who did not were both profiled. Their words add to the quantitative findings. Rural residents face barriers measurably different from their urban counterparts, and policy makers have not considered rural-urban differences in creating TANF regulations. The barriers and pathways identified in this study should inform future public policy decisions.

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One of the little investigated and untold stories following welfare reform is the plight of rural mothers and their families. Assessments of the federal legislation focus primarily on urban majority mothers who are recipients of Temporary Assistance for Needy Families (TANF) and other public assistance (Weber & Duncan, 2001). The legislation assumed that jobs would be available for welfare-reliant adults moving into the labor force, and that the jobs would pay adequate wages for becoming—and remaining—economically self-sufficient. The rural labor market, however, offers relatively few employment opportunities with sufficient wages and adequate benefits to support a family

Rural welfare-reliant parents, predominantly mothers, have to contend with fewer affordable child care options (Walker & Reschke, 2004) and greater transportation challenges (Fletcher, Garasky, & Jensen, 2002) than their urban counterparts. Both barriers and pathways to employment lie in societal systems—personal, family, and community—that influence rural mothers' abilities to maintain employment and successfully support their families (Huddleston-Casas & Braun, 2006).

Some pathways are paved by support from family and friends, including sharing of material goods and services, cash, and emotional support (Dolan, Seiling, & Glesner, 2006; Dolan, Braun, Katras, & Seiling, 2008; Lee, Netzer, & Coward, 1994; Miller & Darlington, 2002) on-going and emergency child care assistance (Walker & Reschke, 2004); transportation and job contacts; and more (Hogan, Eggebeen, & Clogg, 1993). Rotating hours of work with evening and weekend shifts means that informal support, especially for child care, is vital to maintaining employment. Having social networks may allow some rural mothers to be more successful than others (Dolan, Seiling, & Glesner, 2006; Dolan, Braun, Katras, & Seiling, 2008).

Barriers on the road to employment and adequate wages increase in rural areas where the median earned income of female-headed households is significantly less than that of all other households with at least one working person (Economic Research Service, 2000). According to a study by the National Campaign for Jobs and Income Support (2001), many former welfare recipients remain poor even with fulltime employment because wages are low. Available jobs provide little opportunity for wage increases. In addition, rural women experience an earnings gap due to high occupational segregation by gender (Flora, Flora, Spears & Swanson, 1992; Semyonov, 1983). Part-time work or temporary jobs, considered appropriate work for women in rural areas, usually pay low wages (Gringeri, 1995), lack employer-sponsored health insurance (Boushey, 2002; Lee, 2004), and contribute to turnover.

Lichter and Jensen (2000) found that more than one-third of the working rural female household heads in their study were in poverty, primarily due to underemployment, i.e., working fewer hours than desired and/or not having one's talents fully utilized. For rural women, having a college degree did not result in improving their families' financial position. Being divorced, never married, or widowed increased the probability of underemployment among rural workers, especially for women, as did having less education, whereas having fewer children was related to an improvement of their financial situation over time (Porterfield, 2001). Simmons, Dolan and Braun (2007) found that for a sample of rural families, only about one-third progressed toward economic self-sufficiency over a three-year period. Further, marriage was not a factor leading to greater economic resources; more hours of employment was the critical variable.

Health is key in being able to sustain employment. In 2001, the World Health Organization noted a connection between mental and physical health and demonstrated that for people in poverty, a higher prevalence of mental and behavioral disorders has negative impacts on the ability to work. An earlier study in Michigan found that women with health problems have the

poorest work outcomes (Danziger, Kalil, & Anderson, 2000). Moffitt, Cherlin, Burton, King, and Roff (2002) found that women remaining on TANF were less likely to have high school diplomas or GEDs, more likely to have young children, and more likely to have health problems and/or to be depressed. In 2001, twice as many women with incomes below 200% of poverty reported that their health was fair or poor as compared to women with higher income (Levin-Epstein, 2003). This link between receipt of welfare and poor health has been reported by a number of recent studies as well. Poor health in general and reports of one or more physical or mental health issues were common among TANF recipients (Levin-Epstein, 2003; US General Accounting Office, 2001). Simmons, Anderson and Braun (2008) found that among a sample of rural mothers whose mean age was 30 years, nearly half had high frequencies of physician visits due to chronic health problems, injuries or illnesses in the preceding year. Family members' health can also be a barrier to employment for women. Caring for a child with an emotional problem, illness, or disability can limit a mother's ability to be employed, as child care is often difficult to find and is expensive when available.

Lack of access to reliable transportation is a formidable barrier for rural mothers seeking employment. Fletcher and Jensen (2000) found that only 25% of Iowa TANF recipients had a registered vehicle, but access to reliable transportation had a positive impact on both employment and wages (Fletcher, Garasky, & Jensen, 2002). The authors concluded that expanding programs to give greater access to reliable vehicles would increase the likelihood of maintaining employment in rural areas.

To better understand the bumpy road off TANF for rural mothers and their families, this paper uses data from the 15-state USDA-funded longitudinal study NC223/1011 titled "Rural Low-Income Families: Monitoring Their Well-Being and Functioning in the Context of Welfare Reform," known as *Rural Families Speak (RFS)*. Specifically, this article investigates both factors that appear to lead to successful pathways and those that are barriers. The multi-state *RFS* study was launched in response to the 1996 welfare reform legislation to better understand the conditions affecting rural families and to test some of the assumptions of the federal legislation. The findings are intended for use in programs and in public policy.

Methodology

The authors chose a mixed-methods investigation, using quantitative data to supply key demographic and economic data and qualitative data to describe the lived experience of these mothers. The mixed-methods investigation considers from both of these perspectives the experience of rural mothers who have been welfare reliant, reflected in their words and gleaned from information about the communities in which they reside.

Data are taken from the three Waves of the *RFS* study. Initially, interviews were conducted with 413 low-income mothers from 24 rural counties across the country, having at least one child under the age of 13 and being eligible for food stamps or the Supplemental Nutrition Program for Women, Infants and Children (WIC). Mothers meeting these criteria were recruited by persons working in programs serving the eligible families: Food Stamps, WIC, Head Start, work centers, social service offices, technical schools, adult education, and literacy programs. Cooperative Extension educators assisted in recruitment in many of the states.

Rural counties were identified by researchers in each state based on the Butler and Beale (1994) coding scheme. Utilizing the definition of metropolitan and non-metropolitan counties as determined by the Office of Management and Budget, Butler and Beale grouped all U.S.

counties into a rural-urban continuum by density of population. Most counties in this study were non-metropolitan counties with an urban population of 2,500 to 19,999. Others were completely rural with no population center of more than 2,500 people. In the more populous states of California, Massachusetts, and New York, small towns or rural areas were chosen. Cognizant that participants would be “lost” during a longitudinal study, a minimum sample size of 15 participants per county was sought.

Data Collection and Analysis

Trained researchers collected data, starting in 1999, using a qualitative-quantitative protocol in face-to-face interviews with the mother of the household. Interviews were administered in either English or Spanish either in the participants’ homes or public places, such as at an organization’s office or public library. Interviews were audio taped and transcribed. Quantitative data were obtained from the transcripts and from supplemental survey instruments about employment, wages, and health. Wave 2 and Wave 3 interviews were conducted in 2001 and 2002 respectively.

Sample

Of the 413 rural mothers interviewed in Wave 1, 253 were interviewed in all three Waves. Of these, the 62 who received TANF benefits at some time during the three-year period are the focus of this study.

Reported household income at Wave 3 of the 62 mothers ranged from a high of 629.2% to a low of 31.2% of poverty for their family size. Mothers whose total household income was greater than 150% of poverty for their family size were considered to be successful ($n = 11$) or thriving (Bauer, Braun, & Olson, 2000). Those whose total household income was below 150% of poverty ($n = 51$) were defined as “not-successful.”

Results

The successful and not-successful groups of rural mothers not only differed by household income in Wave 3, but on several demographic characteristics in Wave 1, as well as other factors in either Wave 1 or Wave 3. In Wave 1 rural mothers in the successful group were less likely to be married or partnered, had fewer children, were less likely to indicate symptoms of depression, and were more likely to have a driver’s license than rural mothers in the non-successful group (Table 1). In Wave 3, the successful mothers indicated they had more support from relatives than the not-successful mothers (Table 2). The mothers also differed on the number of hours worked per week (32 vs. 9 hours) and, among those who were employed, the amount of weekly earnings (\$511.75 vs. \$199.75). The not-successful mothers were more likely to still be receiving public benefits in Wave 3 than those whose household income was above 150% of poverty.

To better understand the different circumstances for the two groups, we conducted thematic analysis of a sub-sample of the interviews to identify themes and specific quotes that illuminate the lived experiences of these rural mothers and their families. A sub-sample of interviews was taken from each group; this sub-sample was comprised of mothers: 1) closest to the mean of household income and 2) closest to the bottom of household income for each group. We also

looked at random cases within the two groups to verify that the themes were widespread and not simply coincidental. Circumstances varied, but themes emerged for each group.

Table 1.

Wave 1 Demographic Characteristic of Successful and Non-successful Rural Mothers

Demographic Characteristics	Successful group (n = 11)	Non-successful group (n = 51)	Statistics
Age (mean)	31.0 years (s.d.=7.06)	30.04 years (s.d.=8.54)	ns
Marital Status			$\chi^2 = 10.73$ (p = .015)
Single	54.5%	21.6%	
Married	0.0%	35.3%	
Living with partner	18.2%	11.8%	
Divorced	27.3%	13.7%	
Separated	0.0%	17.6%	
Education			ns
8 th grade or less	0.0%	3.9%	
Some high school	27.3%	31.4%	
HS diploma or GED	18.2%	31.4%	
Specialized training	18.2%	5.9%	
Some college	36.4%	25.5%	
College graduate	0.0%	2.0%	
Number of children (mean)	1.45 (s.d.=0.52)	2.12 (s.d. = 1.29)	t = 2.77* (p = .005)
Range of # of children	1 to 2 children	1 to 7 children	
Ethnicity			ns
White, non-Hispanic	81.8%	78.0%	
Hispanic/Latino	0.0%	12.0%	
African American	9.1%	6.0%	
Other	9.1%	2.0%	
Drivers' License	90%	66.7%	t = 1.94* (p = .034)
Depression (CES-D score)	15.30	21.15	ns
Percent depressed	30.0%	60.9%	t = 1.71* (p = .050)
Health problems - mother	4.80 (mean)	5.94	ns
Health problems - partner	3.50	3.54	ns
Health problems - children	3.40	5.96	t = 3.58* (p = .001)

* 1-tailed test

Table 2.

Wave 3 Differences between the two groups of rural mothers

Characteristic	Successful group (n = 11)	Non-successful group (n = 51)	Statistics
Social support of relatives			$\chi^2 = 7.58$ (p = .028)
Never	0.0%	16.3%	
Rarely	45.5%	12.2%	
Sometimes	18.2%	22.4%	
Often	36.4%	49.0%	
Social support of friends			ns
Never	45.5%	24.5%	
Rarely	9.1%	16.3%	
Sometimes	18.2%	30.6%	
Often	27.3%	28.6%	
Hours worked per week	32.09 hours	9.22 hours	t = 3.03* (p = .005)
Hours worked per week by those employed	39.75 hours	29.38 hours	ns
Weekly earnings of those employed	\$511.75	\$199.75	t = 2.71* (p = .005)
Public benefits (mean number)	3.4	5.98	t = 3.58* (p = .001)

* 1-tailed test

Successful mothers

Jolie and Jenna exemplify the eleven (18%) rural mothers who got off TANF and were considered to be financially self-sufficient (Table 3). In Wave 3, Jolie’s household income (231% of poverty) was about at the median for the successful mothers, while Jenna’s (150.4% of poverty) was the lowest among the successful mothers. Access to education was a prominent theme that emerged for all the successful mothers. Jolie and Jenna were both able to access education that resulted in getting well-paying jobs. Having support networks was associated with successfully getting off TANF. Both Jolie and Jenna had strong social support networks, especially with family, as did most of the other successful mothers. When child care or transportation was problematic, family members and friends were consistently available to fill the gap. Successful mothers had to overcome barriers as well. Jolie, for example, had two auto accidents during the three years of interviews. When asked how she got around without a car after her first accident, Jolie responded, “My daddy’s car, I use. Or my aunt’s car, somebody’s car. I’ll call somebody.” A good network of transport providers were a boon to both Jolie and Jenna. Jenna was living with her aunt and uncle at the time of the first interview and relied on them or her grandmother for transportation: “My grandma’s always available (for rides)....at least until she starts back to work.” By Wave 3, she was living with a partner, working, and receiving no public benefits. Although her financial circumstances had improved, Jenna talked about the difficulty of getting her car repaired: “The car might have to sit in the driveway for two or three days until I got paid, but yes, I made it (got the repairs made).”

To earn the highest wages, Jolie worked second shift at a nursing home. Her family offered a great deal of support for her to do this by caring for her daughters. The schedule had its drawbacks for her, however, as she saw less of her daughters. She stated, *“The only thing is the one that’s in second grade. I’m not here to help her with her homework. My sister helps her, my mom, my little brother...but I like to help her. I like to know actually what she knows and give her my own little test to do.”*

Although her financial situation had improved by Wave 3, Jenna found it challenging to pay her bills. During the time of the study, she had a baby born with a disability. She added to her financial resources by collecting bottles and cans to get the deposits back. She stated, *“I collect cans all the time. No use giving them to the trash people when we have to pay for them...[I make] about ten bucks a month.”*

Table 3.

Successful				
Mother	Employment	Social Support	Barriers	Education
<p><u>Jolie</u></p> <ul style="list-style-type: none"> • 231.03% of poverty • Single • 2 daughters • 24 years old • African-American 	<ul style="list-style-type: none"> • In Wave 2, working full-time, plus part-time • In Wave 3 working two full-time jobs 	<ul style="list-style-type: none"> • Child Care: family cares for daughters all three Waves • Transportation: Able to borrow car from family members when without a car; get rides to classes with another student • Housing: Able to live with mother in Wave 2 to save money to buy house. By Wave 3, has purchased house • Financial support: Family helps pay mortgage and cares for Jolie and daughters after Jolie’s accident 	<ul style="list-style-type: none"> • No health insurance or sick days provided by either of her employers • Relies on SCHIP to insure daughters • Transportation: Jolie has no car in Wave 1; in Wave 2 and 3 she has been in accidents and her cars have been totaled 	<ul style="list-style-type: none"> • Able to complete LPN degree shortly after Wave 1 interview
<p><u>Jenna</u></p> <ul style="list-style-type: none"> • 150.4% of poverty • Divorced • 2 children • 21 years old • White, non-Hispanic 	<ul style="list-style-type: none"> • Working part-time in Wave 2 while in education program • Working 30-40 hours/week in Wave 3 	<ul style="list-style-type: none"> • Child care: family members help care for her son • Transportation: has transportation problems in Wave 1 (aunt helped out), but has reliable car in Wave 2 and 3 • Housing: Living with aunt at the time of Wave 1 interview. Able to move into own apartment by Wave 2 	<ul style="list-style-type: none"> • No health insurance provided by employer • Has new baby at Wave 2 interview; baby has a disability • Received no child support 	<ul style="list-style-type: none"> • Able to complete Nurses’ Aid Program by Wave 3

Not-successful mothers

Fifty-one (82%) of the mothers who had received TANF were not successful in having a total family income above 150% of poverty for their family size by the third year of interviews. In fact, 51% were still receiving TANF, and only 31.4% were employed. Those who were employed worked an average of 29 hours per week, earning an average weekly wage of \$199.75. Like the successful group, themes emerged among those who were struggling to support their families. Health issues were pervasive—not only the health of the participating mothers, but also of their children or partners. The health problems were severe enough to affect the mothers' ability to be employed or to maintain consistent employment. Transportation was also problematic. Cars were unreliable, or participants were without cars and/or driver's licenses. Child care was hard to come by as well. Many of the households survived as well as they did with the support of family and friends who helped out with transportation, child care, food, and other assistance.

Maggie's Wave 3 household income was the closest to the median for this group of mothers (72.4% of poverty), while the household income for the families of Millicent, Eliza, and Drucilla, 31.2%, 32.2% and 39.8% of poverty respectively, were the lowest (Table 4). All of these women had health problems. Maggie described her disability as *"my eyes and my nerves."* Her description of her "nerves" seemed to indicate that she was prone to panic attacks. Millicent and Eliza reported symptoms of severe depression. For Eliza, depression made it difficult to keep a job: *"Why did I leave? I left because depression set in. And I started having a lot of crises in my life, so. I just couldn't handle the work."* Drucilla was diagnosed with diabetes and placed on disability by the end of the study; her husband was disabled as a teenager due to a lumbering accident, and one of her children was disabled due to a brain injury at birth.

Transportation was also a major barrier for these mothers. Maggie did not own a car or drive: *"I can't drive it makes me too nervous. I go to Walmarts and I'll be so glad to get home. It's too many people. I can drive with my son-in-law and it scares me to death....It's other people that cuts in front of you."* For Eliza, lack of transportation was a major obstacle in getting a job and accessing resources such as food and healthcare. Eliza commented, *"They need a shopping center. Because, I mean, with people that don't have reliable transportation, [the nearby town] is a pretty good ways to travel to get to a Walmart."* In Wave 2 she stated, *"The main thing now would be transportation, because it wouldn't be so bad if it was just transportation to the point where I need to go and back, but with me there's dropping the kids off at childcare, picking them up, and then bringing us home, kind of thing."* Millicent, on the other hand, owned a car, but she talked about its unreliability: *"Oh, it's got something wrong with it where it stalls. The brakes have needed to be changed three times...something with the engine, wires and sparks plugs, a gasket."* Fortunately, she could rely on her dad for car repairs. Drucilla did not have family to rely on when her car engine and transmission went out. She walked, used the Community Action bus, got rides from friends, or rented a car.

Being married or partnered did not benefit these rural mothers to any great extent. Maggie felt that she was better off financially without a partner: *"If you ain't got a man, you've got it made! I don't want a man. I ain't funny or nothin'. I'm just better off without one. My kids got more stuff now than they ever did have. And if you got a man, sometimes he's got another kid to take care of."*

How did these women manage on such meager income? Maggie, for one, felt that she had a

good handle on her financial situation even though she had very little money. In Wave 2 she stated, *“I pay them (my bills) every month. I get them paid and then I write them back down ‘cuz I know about how much they are and I know how much I’ve got left for the rest of the month.”* Drucilla reported, however, that after the bills were paid, they were usually broke.

Eliza talked about how at the end of the month food was really low, and her kids basically got three meals without any snacks. She stated, *“It’s hard. It’s really hard. We combine things like soups, different kinds of soups, just to make things stretch.”* In Wave 2, she talked about how she managed: *“...I found out about a lot of more services. I found out a lot of more about meal planning, budgeting, and, you know. Just not finding them out, but, putting them to work. So, that helped a lot.”* To help her make ends meet, Millicent relied on her social network: *“...(I can rely) on all of ‘em. ‘Cause I always have help if I need it - you know, my parents or sister or really just everybody.”* When asked if she had any trouble paying her bills, she stated, *“No, ‘cause my parents will loan me money.”*

To feed the family, Drucilla and her husband bartered for meat, doing odd jobs for a farmer, and getting food from a friend. For extra cash, she said, *“My husband does all the jobs thing making a few dollars here and there.”* Drucilla said, *“We could go to Walmart if we are rich...”* but instead they went to the dollar store and second-hand places, hanging laundry on the line because using a dryer would *“add up.”* She relied on *“prayer and family. They help.”* In speaking to her dissatisfaction with life, Drucilla said, *“...We are going day-by-day. I feel like a caged bird or something.”*

Table 4.

Non-Successful Mothers					
Mother	Health Issues	Transportation Issues	Child Care Issues	Social Supports	Education/ Training
<p><u>Maggie</u></p> <ul style="list-style-type: none"> • 72.4% of poverty • Single • 2 daughters • 35 years old • White, non-Hispanic 	<ul style="list-style-type: none"> • Problems with eyes and nerves 	<ul style="list-style-type: none"> • No car • Does not drive because of nervous condition • Depends on older daughter, son-in-law, and friends 	<ul style="list-style-type: none"> • None, because she is home, but would have problems if tried to work. • Few before- and after-school programs 	<ul style="list-style-type: none"> • Older daughter and husband help especially with transportation • Relied on SSI, TANF, Medicaid, school breakfast and lunch • Does not get child support 	<ul style="list-style-type: none"> • Working on GED

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<p><u>Drucilla</u></p> <ul style="list-style-type: none"> • 39.8% of poverty • Married • 2 children • White, non-Hispanic 	<ul style="list-style-type: none"> • On disability due to diabetes after hospitalization for infection • Husband on disability due to back injury as teenager; food poisoning re hospitalization • Son has permanent brain injury and on meds for ADHD 	<ul style="list-style-type: none"> • Had reliable car at Wave 1; car needed engine and transmission repairs. Rented a car locally. Had difficulty traveling out of the county. Used Community Action bus 	<ul style="list-style-type: none"> • Couldn't get care for son due to medical condition. • Used grandparents for occasional child care 	<ul style="list-style-type: none"> • Grandparents helped with occasional child care • Relied on public assistance: SSI disability; TANF, food stamps, WIC, energy assistance, Medicaid and support from local service groups and food bank 	<ul style="list-style-type: none"> • Both Dropped out or HS. • Drucilla got her GED
<p><u>Eliza</u></p> <ul style="list-style-type: none"> • 32.2% of poverty • Single • 7 children • African American 	<ul style="list-style-type: none"> • Has severe depression • Struggles with substance abuse 	<ul style="list-style-type: none"> • Unreliable transportation • Depends on family, friends & public transportation • Barrier for her to get a job & to access other resources such as food and healthcare 	<ul style="list-style-type: none"> • Struggles to find care for all 7 children; she pieces together care. • Friends help her out -• Has 2 H.S. kids come to her house during the summer months 	<ul style="list-style-type: none"> • Has help from various friends • Receives TANF, food stamps, WIC, school lunch program, housing assistance 	<ul style="list-style-type: none"> • GED • Certified Nurses Aide • Started college classes
<p><u>Millicent</u></p> <ul style="list-style-type: none"> • 31.2% of poverty • Divorced and remarried • 3 children • White, non-Hispanic 	<ul style="list-style-type: none"> • Struggles with depression 	<ul style="list-style-type: none"> • Has always owned a car • Depends on dad for car repairs 	<ul style="list-style-type: none"> • Her family and friends provide care for her children. 	<ul style="list-style-type: none"> • Initially had a large social network that supported her emotionally & financially, but overtime support has diminished. • Receives childcare, housing, and energy assistance along with Medicaid, TANF, food stamps and WIC. -She does not get child support. 	<ul style="list-style-type: none"> • GED

Summary and Conclusions

The reality for the rural mothers who were part of this study is framed in their local economy: few employment opportunities that pay living wages and few opportunities for training and advancement. Some rural mothers were able to leave TANF and find employment with reasonable wages because they were able to access education and/or training. Most of the mothers, however, were not successful. During the three-year interview period, the barriers they faced were insurmountable.

Federal welfare reform legislation focuses primarily on urban, welfare-reliant mothers and was developed from the belief that those mothers need to become employed and, if at all possible, married to be personally responsible for their families. This is a difficult set of steps for rural mothers to achieve when their local labor market may not offer jobs with ample wages to support a family, even when partnered. Policy makers must address the differences that exist in rural areas by promoting the development and maintenance of vibrant local economies. Although the sample in this study is small and non-random, the themes that emerged were clear and consistent. We feel confident that the rural mothers in this sample reflect the experiences of a larger group of rural, low-income mothers.

The successful mothers' education, training, and family support enabled them to obtain and maintain employment. Mothers who had no extended family members to provide support were at greater jeopardy of being unemployed regardless of education or training; caregiving demands also can have negative impacts on family members. Those who enhanced their education had skill-sets for well-paying jobs, such as nursing. They were able to get off TANF and were on their way to economic self-sufficiency. Those who did not have adequate education were denied access to consistent, well-paying employment. Yet welfare reform has not emphasized advanced training in fields that lead to secure, well-paying employment. In fact, in some states, policy prohibited the use of government funds for these types of educational experiences. Public policy makers should look at the long-term returns of education.

For the not-successful mothers, transportation, child care and health were formidable barriers to employment. In rural areas, distances from jobs and scarcity of services may make employment difficult. Not having a driver's license or a reliable vehicle were challenges, as were the costs of repairing and maintaining that vehicle, although assistance from extended family members did help. Policies and programs that support access to low-cost, reliable vehicles, fuel subsidies, or other transportation options would help low-income rural mothers access more distant jobs.

Because TANF recipients are mothers first and employees second, the safety and well-being of their children are a priority. Safe, affordable child care in rural areas is limited. Although not addressed in this paper, the majority of the working rural women in the *RFS* study were employed in the service sector where evening and/or weekend hours and rotating shifts are common (Dolan, Seiling & Glesner, 2006). Most rural low-income mothers must rely on support of family and friends to provide child care. Local communities could focus on expansion of child-care facilities, such as offering evening and weekend care that would meet the needs of working mothers, or offer an expansion of subsidies. These resources would allow rural mothers to focus on employment.

Poor health was the most common problem among the not-successful mothers—their own, their partners' and/or their children's—that made employment difficult. The role of health has not been factored into public policy regarding receipt of TANF benefits. Rural health and the

rural health care system have well-documented critical gaps (USDHHS, 2002), and low-income rural mothers and their families find access more difficult than do those with higher incomes. Policy makers need to explore solutions such as exemptions from employment requirements for those with personal or family health issues or providing access to an appropriate disability program in a timely manner.

Finally, welfare reform encouraged marriage as a pathway out of poverty for low-income mothers. Marriage was not a factor for these women. Among the not-successful mothers, almost half were married or partnered, but the presence of a male partner did not help the family become financially self-sufficient. None of the successful mothers was married, and fewer than 20% were partnered. In the larger *RFS* study, which focused primarily on rural families not on TANF, Simmons, Dolan & Braun (2007) found that marriage did not contribute to improved economic well-being over time. Financial situations were improved through increased hours of work by mother or partners. The availability and accessibility of jobs appears to make the difference for rural mothers, both married and unmarried.

The barriers that exist for rural families are somewhat unique from those faced by urban families, making the road off TANF a bumpy one. Political action is needed to enhance local economies, improve access to jobs, strengthen healthcare, and make child care available to smooth the road off TANF for rural mothers.

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