CHAIRMAN GRAHAM AND MEMBERS OF THE COMMITTEE ON HUMAN SERVICES: I am Laura Hopman, District of Columbia Assistant Deputy Auditor. Accompanying me today is Ingrid Drake, Program Analyst. Thank you for the opportunity to appear before the Committee. Pursuant to a mandate included in the Fiscal Year 2014 Budget Support Act, the Office of the District of Columbia Auditor performed an assessment of the impact of the October 1, 2013 reduction in Temporary Assistance to Needy Families benefits on families and their children.

The objectives of our examination were to determine the:

- Number of families affected;
- Total amount of reductions;
- Number of children affected in specific age categories;
- Number of service providers providing educational and employment training programs; and
- Human impact of TANF benefits reductions.
In conducting this examination, we reviewed TANF reduction and educational and employment training program information provided by the Department of Human Services. We also conducted phone interviews with 100 TANF recipients.

As indicated in our report issued on May 28, 2014, as of April 2014, DHS documentation indicated that there were 6,296 households subject to the TANF benefits reduction that went into effect in October 2013. The total amount of the reductions was $450,569 per month. The following numbers of children were affected by the October 2013 TANF benefits reduction:

- 2,215 children from ages 0 to 3;
- 5,681 children from ages 4 to 9;
- 3,005 children from ages 10 to 13;
- 2,571 children from ages 14 to 18; and
- 57 children aged 19 or older.

This adds up to a total of 13,529 children affected by the October 2013 TANF benefits reduction.

The Department of Human Services indicated that as part of its fiscal year 2014 TANF Employment Program, DHS contracted with five vendors to serve as job placement providers for TANF recipients and six vendors to serve as work readiness providers.

To assess the human impact of the October 2013 TANF benefits reduction we conducted a telephone survey with 100 households whose TANF benefits were reduced in October 2013. Specifically, we surveyed the respondents on the effect of TANF reductions, including a consideration of children in the household, regarding:

- Changes in school performance;
• Changes in after-school performance;
• Changes in health status;
• New interactions with the Child and Family Services Agency;
• New interactions with the Department of Human Services;
• New interactions with the Court Social Services; and
• New interactions with Department of Youth Rehabilitation Services.

Our sample size of 100, out of the 6,296 households affected by the October 2013 TANF benefits reduction, does not permit us to draw conclusions about the entire population, as that would require a statistically significant sample of roughly 900 families. However, based on their responses to the survey questions, we are able to summarize the impact on the 100 households with whom we spoke. Of the 100 recipients surveyed:

• 11 recipients stated that their children’s school performance had changed;
• 23 stated that their children’s after-school performance had changed;
• 13 stated that their children’s health had changed;
• 14 stated that their child had a new interaction with the Child and Family Services Agency;
• 8 stated that their child had a new interaction with the Department of Human Services;
• 7 stated that their child had a new interaction with the Court Social Services; and
• 6 stated that their child had a new interaction with the Department of Youth Rehabilitation Services.

At the conclusion of each survey, we also asked respondents if they had any additional comments about the benefit reductions. Some respondents provided information about the
challenges they face supporting their families and how improved services could better advance the program’s goal of moving families towards self-sufficiency. For example, 22 respondents stated that the reductions made it more difficult to provide for children’s basic needs, such as clothing, school uniforms and over-the-counter medications; 11 pointed to a need to improve job training and job placement services; and 9 stated that more high-quality out-of-school programs are needed for children.

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Mr. Chairman, this concludes my prepared remarks. I will respond to any questions that you have at this time.