

a child or a parent. The states have had total freedom in setting the level at which they would provide help to their needy citizens in relation to this potential. Obviously this inequitable approach cannot continue. We have rather generally glossed over the situation by noting that states with low per capita incomes could not provide as well for their citizens as states with higher per capita incomes without making excessive effort. Actually the data do not support this simple explanation. According to the Department of Health, Education, and Welfare in a release of May 1968, the national average amount expended per inhabitant for all welfare payments in fiscal 1967 was \$34.80, ranging from \$75.70 per inhabitant in Oklahoma to \$10.50 in Indiana, states that ranked just the reverse or 36th and 15th, respectively, in per capita income in 1966. We also know that almost 60 per cent of the costs of public assistance are borne by the federal government but the more than 40 per cent from state and local funds represents a significant contribution.

It is questionable whether we would move to a system which would eliminate non-federal support, throwing the entire burden on federal tax sources, but obviously the inequitable results of the present system of state-federal fiscal relations must be reformed. Thus, the recommendation of the Advisory Council on Public Welfare for an entirely new system of federal-state matching to replace the old system of additional non-federal funds being required in order to capture additional federal funds is basic. The proposal was made that on a purely objective basis the federal government would specify for each state its equitable share of the cost of a program to meet national standards. The state's share would go in as the bottom layer of funds. The federal government would then commit itself to the additional funds required to maintain the established standards and would accept the risks of any additional costs that might arise during a given fiscal year. Such a system of federal-state fiscal relations would include not only public assistance grants but also administrative costs, medical care for those unable to pay for such care, and an increasing battery of social services designed to strengthen family life, to help individuals cope more effectively with our complex society, and to promote increasing participation in community life. A single formula is not only administratively desirable, but would also provide the federal leverage for standards in all aspects of the program, not just public assistance payments.

It requires only the most cursory review of published data with regard to public welfare programs, whether they be financial assistance, medical care, or social services to recognize the need for uniform national standards. With AFDC payments per needy individual which ranged from \$8.50 in Mississippi to \$61.45 in New York in March 1968 or, as another measure from 22 children per 1,000 population under age 18 in South Carolina in December 1967 to 110 in West Virginia, states of almost equal rank in per capita income (49th and 47th in 1966), the case for uniform national standards is clear-cut. It is not a question of having further to document the need for such standards, with perhaps minor adjustments to take account of the breadth and diversity of the nation, but rather a question of how soon.

Even with the present public assistance system, congressional action to remove the 1967 coercive and restrictive provisions and to require conformity up to the maximum financial provisions of the present law would have substantial benefits. Efforts to enact legislation to require states to meet their own standards of need in full have not been successful to date and the history of efforts to reverse certain 1967 amendments is well known.

There is much attention to reducing the public assistance case load, especially the aid to families of dependent children case load, as clearly the aged and the disabled are less vulnerable to criticism. Certainly there are thousands of persons in the AFDC case load who can with appropriate training enter the labor market, although the numbers are small relative to the size of the program. The poor mother should have opportunity for training, for education, for family planning services, for adequate day care for children that other more fortunate women in higher income brackets accept so that the economically deprived mother may make choices as to what is best for her family and her children at a given period of time. The all too few available research reports support the empirical judgment of persons close to the program that large numbers of women receiving AFDC would welcome the opportunity to move into a job situation in which they could either partially or totally support their families.

Basically AFDC is for many of the recipients a short-term program, taking care of families during a period of crisis who then move into independent status