

The Survey of The Low-Income Aged and Disabled: An Introduction

by THOMAS TISSUE*

As 1974 began, the Social Security Administration started distributing supplemental security income (SSI) payment checks to aged, blind, and disabled poor persons throughout the Nation. Shortly before the first SSI checks were issued, the Bureau of the Census completed personal interviews with 17,551 individuals from which SSI's clientele would be drawn—aged and disabled welfare recipients and the aged and disabled poor persons in the general population. These data, collected for the Social Security Administration in late 1973, and comparable information gathered from the same respondents in late 1974 make up the Survey of the Low-Income Aged and Disabled (SLIAD). Its findings will be used to describe the circumstances of needy aged and disabled persons before SSI, determine the program's success in attracting those who qualified for its benefits during the first year of operations, and assess the effect of participation on the well-being of recipients.

IN JANUARY 1974, the traditional welfare programs for the aged, blind, and disabled were replaced by a two-tiered income-maintenance system known as supplemental security income (SSI). Both the Federal Government and the individual States play a part in operating the new system. The Federal Government offers basic income protection nationwide but each State may guarantee higher payments to its own residents by means of an "optional supplement" to the Federal benefit.

The earlier form of public assistance for old and handicapped adults had been almost exclusively a local operation. Before SSI, States had a free hand in designing the welfare programs they would offer their adult residents. To a large extent, each State decided the amount of the welfare benefit that was appropriate and the exact criteria to be used in determining individual eligibility for assistance. Each was also responsible for staffing and operating its own system of local offices in which to take claims, calculate benefits, and make awards. The Federal Government was a silent partner, offering partial reim-

bursement to States whose aid programs conformed with basic Federal guidelines.

Adoption of the supplemental security income approach placed the Federal Government in a direct, operational role. The Federal component of SSI seeks to guarantee a minimum income to all needy aged, blind, and disabled in the 50 States and the District of Columbia. Provision of this first level of income support is entirely a Federal function. Rules and procedures are uniform nationwide, benefit checks are drawn on the Federal Treasury, and an established Federal agency—the Social Security Administration—conducts the program.

Whether it will provide a locally funded supplement to the Federal guarantee is something that each State must decide for itself, as are the amount of the benefit and the means for delivering it.¹ Although the States are required to protect the pre-SSI income level of persons transferred directly from public assistance, they are still free to define their own roles in maintaining the income of needy adults.

During January 1974—SSI's first month of operation—approximately 3.2 million aged, blind, or disabled persons received federally administered payments. The majority had been transferred directly from the assistance rolls maintained by the States. By the end of 1975, enrollment in the federally administered system exceeded 4.3 million persons. In addition, an estimated 300,000 individuals were receiving cash supplements directly from their State welfare departments. The monthly Federal guarantee (amount of the payment for those with no other income) had risen from \$140 for single persons and \$210 for couples in January 1974 to \$158 and \$237 by December 1975.² Optional supplementation by States varied widely. Some pro-

¹ If a State desires, the Federal Government distributes these supplements free of administrative charge, incorporating them in the Federal check and billing the State for its share later.

² The payment levels for December 1976 were \$168 and \$252.

* Research Branch, Division of Supplemental Security Studies, Office of Research and Statistics

vided none at all, others were underwriting supplements nearly as large as the basic Federal guarantee itself

Much attention has been focused on SSI's administrative operations. Its inability to maintain a highly accurate payment rate has been the subject of spirited discussion, as was its performance in transferring the welfare caseloads at the very beginning. Considerably less attention has been paid to examining just what the program did for the aged, blind, and disabled poor in whose name the whole enterprise was originally undertaken.

SURVEY DESIGN

The Survey of Low-Income Aged and Disabled (SLIAD) was made to collect demographic and socioeconomic data necessary for assessing the new program's effect on the target population. The basic research design was dictated by several initial assumptions regarding the target population, the sort of outcome that could be expected, and the best means for measuring and evaluating change.

Target Population

On the eve of the new program, the target population consisted of three distinct categories of potential recipients. The first included the caseloads for the aged, blind, and disabled under the former Federal-State assistance programs. The vast majority of these cases arrived on the SSI rolls via a mass administrative transfer of records. No special action by the welfare recipients themselves was required. The second group was composed of low-income aged and handicapped individuals who did not receive public assistance payments despite being technically eligible for them. The number of these eligible nonrecipients and their motives for not applying for assistance have been a likely topic of debate in connection with the adult aid programs. The third group consisted of ineligible nonrecipients—the near-poor and those almost eligible for public assistance—who would later qualify for SSI because of some minor change in their own circumstances or because the SSI eligibility standards are more lenient than those

established by the earlier State programs. Any effect SSI had on the lives of the aged and disabled poor would occur chiefly within these three special segments of the national population.

Expected Outcome

What sort of outcome was both likely to occur and worth examining if it did turn up? The program's intent is remarkably straightforward. It proposes to deliver money to people who meet its standards of eligibility. Thus, one must look first to the degree to which it has reached the members of the public that qualify for its benefits and, second, to the income status of those who have been reached. Assuming that cash payments are not ends in themselves, one must also introduce a question regarding the type and extent of increased well-being that may be attributed to an income adjustment. Such an assessment requires data that reflect not only eligibility, receipt of aid, and gross income but also extensive information on quality of life.

Assessment of Change

The simplest and most direct approach to an assessment of SSI's effect on the aged and disabled poor is to compare individual observations taken before and after SSI came into being. The performance of the welfare system is the benchmark against which SSI's success or failure can be compared. Although other standards are useful and relevant, the immediate concern is whether SSI is doing any better for its beneficiaries than was its public assistance predecessor. Use of the same respondents for both measurements provides a degree of analytic flexibility otherwise unavailable. It permits one to use "change over time" both as a form of individual behavior to be explained and as an emergent variable to be used in the explanation of other phenomena. Equally important perhaps, a panel design allows analysis of both individual and group behavior.

Methodology

With these considerations in mind, the Survey of Low-Income Aged and Disabled was cast as a

two-stage, before-and-after survey based on large samples, diversified data, and an inflexible schedule for completing each phase of the study's fieldwork. Adequate samples were selected to yield reliable estimates at the national level for each of the target populations. The data included the elements necessary to determine individual enrollment in the program as well as those that are required for examining the direct and indirect effects of such participation. Finally, the first wave of data had to be collected by December 31, 1973—before SSI had supplanted public assistance for the aged, disabled, and blind. The decision to gather second-wave data for only 1 year's interval was a compromise reached after considering such factors as how long samples of aged and disabled persons can remain intact or how long it takes for an income change to be translated into a housing change or a diet change.

Next, it was necessary to locate rosters, lists, or other population sources from which to draw samples representing target groups, both on and off the public assistance rolls. Development of an original sampling frame was out of the question because of budgetary and time limitations. Instead, the sampling resources immediately available had to be located and tailored to SLIAD's needs, and then some means for patching the gaps that remained had to be developed.

By far the most valuable resource at hand was that generated by the SSI program itself, even before it had issued a single check. During 1973, each State provided the Social Security Administration with copies of the payrolls used in the operation of its programs for the aged, blind, and disabled assistance categories so that at least in theory, the first SSI payments would be made with a minimum of duplication, omission, and confusion. The conversion rosters also served as an invaluable source from which to draw samples representing those portions of the SSI target population that had been served by welfare programs in the past.

Two basic public assistance samples, designed to represent national populations, were created for SLIAD—with the welfare aged and the welfare disabled as members. The former consisted entirely of old-age assistance (OAA) recipients, the latter included both aid to the blind (AB) and aid to the permanently and totally disabled (APTD) cases. Because the AB caseloads had

always been small, the blind were merged with other classes of disabled for the purpose of the study. Independent samples were also obtained for California, Mississippi, Georgia, Texas, and New York through selective oversampling within the States. These States received close attention because of the size of their assistance caseloads and because their programs contained elements of particular analytic interest, such as comparatively high or low payment standards, lien laws, and constitutional restrictions on certain types of payments.

Obtaining samples of the low-income aged and disabled in the general population was more difficult. Unfortunately, no agency maintained current and comprehensive rosters of old and handicapped poor people who did not receive public assistance. As a first step, it was necessary to develop general criteria for old age, disability, and low income and to locate some scientifically drawn subset of the national population within which to apply these screening standards. The Current Population Survey (CPS) administered by the Bureau of the Census to roughly 50,000 households each month was the only source that could be expected to generate the volume of cases necessary for reliable national estimates of both the aged and disabled groups.

The July 1973 CPS questionnaire was modified so that age, income, and disability data were collected for members of roughly half the households interviewed in that month's survey. Low income was defined as annual income below \$5,000 for single persons and below \$6,500 for married couples. An individual was "aged" if he had reached his 65th birthday. The "disabled" were those aged 18-64 whose ability to work regularly had been impaired by a health condition of at least 3 months' duration. Income limits were set high enough so that virtually all the prospective SSI eligibles and near-eligibles would be included. The old-age and disability standards are similar to those used in earlier studies conducted by the Social Security Administration (with the disability definition corresponding approximately to that for severe disability in those studies).

The screening operation of the July CPS identified a satisfactory number of low-income aged but fell short of the sample size anticipated

for the disabled. It was necessary to enlarge the latter sample with cases drawn from lists of earlier CPS participants. Their eligibility for the survey was determined by letter and, in some cases, by direct door-to-door fieldwork. For the most part, however, the SLIAD basic national samples had been selected by early October 1973. At that time, Census interviewers were equipped with the names and addresses needed to locate the members of SLIAD's four basic survey components—welfare aged, welfare disabled, CPS aged, and CPS disabled.

1973 INTERVIEWS

The SLIAD first-year questionnaire placed great emphasis on financial matters. Each respondent was asked to report the income received in the preceding month and year by each of three general classes of persons in the household—the sample person, his or her spouse and minor children, and any others in the household. The questionnaire listed more than 15 income sources, including payments and awards from almost every transfer program possible, earnings from jobs and businesses, gifts, and dividends.

The financial section of the questionnaire also included items aimed at establishing the value of owned property, savings, and investments, the amount of indebtedness, and the amount spent for food, shelter, and other recurring household expenditures. For the most part, the remainder of the questionnaire concerned (a) household composition, (b) personal history, (c) health, health care, and the capacity for self-maintenance, (d) standard of living, as represented by housing, diet, travel, recreation, etc., (e) factors that might affect the relation between income and standard of living, such as personal preference, physical capacity, and access, and (f) attitudinal response to these conditions, circumstances, and type of status.

All respondents were administered the same questionnaire. Whenever it was possible, the interview was conducted with the designated sample person. If the sample person was at home but unable to participate in the interview because of poor health, the interviewer was instructed to select a proxy respondent—someone who was intimately acquainted with the sample person's immediate situation. The proxy was asked about

the sample person's objective circumstances and experience but was not required to estimate his attitudes, preferences, or opinions.

If both the husband and wife in a household were designated as sample members, the interviewer noted the fact so that case weights could be adjusted accordingly but completed the questionnaire with only one spouse. Each interviewer was given a card that contained instructions on which member of the couple to choose when he first encountered a "double-eligible" situation. Thereafter, he would simply alternate between husband and wife. No limit was placed on the number of interviews conducted within a single household, as long as they did not involve both members of a married couple.

Interviews were not conducted with persons under age 18. Nor were they completed with those whose permanent residence could be classified as institutional. For purposes of the study, an institution was a place that provided personal care and maintenance to three or more paying customers.

If the designated sample person was temporarily institutionalized, the interviewer was instructed to call back later during the interview period. If the person did not return from the institution by the end of the fieldwork period, the case was designated a noninterview. Other types of noninterviews included simple refusals to participate in the survey, failure to locate the sample person, death in the interval between sample selection and interview, and prolonged absence from the home.

The 1973 interviews began in mid-October and ended in the final week of December. The median duration per interview was approximately 100 minutes. A total of 17,551 complete and non-duplicated interviews were obtained during the 1973 fieldwork phase. The interview count by major survey component, as well as the size of the population segment represented by each, is shown below.

Survey sample	Total interviews	Weighted population estimates
Welfare		
Aged	5 192	1,665 200
Disabled	6 167	1 157 800
CPS		
Aged	3 402	15,445 000
Disabled	2 790	4,726 000

The weighted population counts for the welfare components correspond to the noninstitutionalized welfare caseloads as defined by the conversion rosters available in August and September 1973. Although some sample members were no longer receiving aid when they were interviewed in the autumn and winter, all the welfare sample members had been public assistance recipients at some time during the year.

The two CPS samples include the full range of current and past recipient status to be found in a national population screened only for age, disability, income, and institutional status. In other words, the 1973 welfare samples consist entirely of noninstitutionalized recipients, and the 1973 CPS samples include recipients in proportion to their numbers among the noninstitutionalized aged and disabled poor at large. The fact that public assistance recipients are represented in both the CPS and the welfare samples prevents the simple addition or combination of the four SLIAD components. Merging the four subsamples is possible only if the public assistance cases have been removed from the CPS samples.

1974 INTERVIEWS

Beginning October 1974, Census interviewers attempted to locate all sample members who had completed the 1973 questionnaire. If respondents could be found, were willing to talk, and lived in a noninstitutional setting somewhere in the 50 States, they underwent the full 1974 interview. If a respondent had died or had been institutionalized in the year following the first interview, the interviewer attempted to complete a very brief series of questions with someone familiar with the respondent's circumstances. The procedure for taking full proxy interviews was the same as in 1973.

No new sample cases were drawn to replace those lost by normal attrition, and none were added to represent persons who had become aged, disabled, or poor after the 1973 samples were selected. Nor were any of the original 1973 respondents dropped from the 1974 field phase simply because they were no longer disabled or poor at the time of the second contact. Persons interviewed in the second year do not represent a population defined in terms of its 1974 status,

since there was no sampling adjustment. They are merely the 1973 aged and disabled poor revisited.

The 1974 questionnaire was similar to the form used a year earlier. It reproduced almost all of the earlier income and asset items but added a section on SSI payments. It collected somewhat more detail on household living expenses. It did not repeat the biographical section or the exhaustive inventory of health conditions that had appeared in 1973 but did contain new questions on a spouse's funeral expenses and one's own experience with SSI.

To the extent possible, the second year's interview was completed 50 to 54 weeks after the first year's contact took place. This time frame minimized the effects of seasonality on earnings, travel, utility expenses, etc., and standardized the elapsed time between interviews for each respondent in the survey. Eighty-six percent of the 1974 interviews were completed within the target period.

At the conclusion of the 1974 fieldwork, 15,864 followup interviews had been obtained. Of the 17,551 respondents sought, 768 had died during the year, 405 had entered institutions, 217 were lost, out of the country, or away on an extended leave; and 206 simply refused to go through the interview a second time. The second-year interview results are shown in table 1.

APPLICATION OF SURVEY FINDINGS

The Survey of Low-Income Aged and Disabled constitutes the last major attempt to describe the aged and disabled populations on the public assistance rolls. Its value derives from the size and scope of the study as well as its unique capacity to describe the adult welfare caseloads "on their way out."

If the 1973 SLIAD data constitute the final chapter for the adult categorical aid programs, they are also the preface to SSI. The information obtained from the four basic samples was easily adapted to a cross-sectional description of the new program's target population (both on and off the existing welfare caseloads) immediately before the payment of the first Federal SSI check. That description will serve as a permanent baseline against which to compare the

TABLE 1—Number and percentage distribution of interviews and of followup results, by survey component

Followup results	Welfare sample				CPS sample			
	Aged		Disabled		Aged		Disabled	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
1973 interviews, total	5,192	100	6,167	100	3,402	100	2,790	100
1974 followup results								
Complete interview	4,599	89	5,652	92	3,042	89	2,571	92
Deceased	308	6	220	4	163	5	72	3
Institutionalized	205	4	124	2	62	2	14	(1)
Unable to contact (lost, away, out of country)	48	1	103	2	18	1	48	2
Refused interview	19	(1)	23	(1)	104	3	60	2
Other	13	(1)	40	(1)	13	(1)	25	1

¹ Less than 1 percent

status, composition, and circumstances of each subsequent recipient

One may imagine any number of standards or models that are germane to an evaluation of the program's future performance, but one must always return to the question of whether its current recipients are any better off than the aged and disabled poor who managed to get along without SSI before 1974. As the most thorough and broadly drawn representation of the pre-SSI needy, SLIAD's first-year data provide a continuing benchmark for interpreting the results of all future surveys of the low-income aged and disabled.

Program Coverage

Among the many criticisms aimed at public assistance in the past was the assertion that its programs never reached all or even most of the persons who were legally qualified to receive cash payments. State and local welfare officials were accused of attempting to conceal the existence of their aid programs from the poor and devising various administrative procedures to discourage potential applicants from filing claims. It has also been suggested that large numbers of the poor knew about the aid programs and how to secure their benefits but refused to do so because of the stigma that accompanied recipient status. These propositions have seldom been tested empirically.

Nevertheless, the initial SSI caseload estimates were predicted on the dual assumption that (1) the population included a large number of aged and disabled poor persons who did not receive public assistance payments and (2) these persons

would soon appear on the SSI recipient rolls along with transferees from the assistance rolls. The exact number of new cases that would appear in response to each of the new program features was never clearly specified, but there was little doubt that their combined effect would be substantial.

In practice, their combined effect was considerably less than substantial. The SSI caseload at the end of 1974 was 2-3 million persons short of the total anticipated. The gap was largely attributable to the program's failure to develop the expected number of new cases. Either SSI was only marginally more effective than the welfare programs in attracting eligible non-recipients, or there never were many people who could qualify for SSI but who somehow had been missed by those earlier programs.

The SLIAD has yielded a great amount of data pertinent to a resolution of the caseload coverage question. Of primary value in this regard are the data collected from the CPS samples for the aged and disabled. Their 1973 information includes a welfare recipient/nonrecipient designation for each sample member as well as responses on personal income, assets, health, age, and the capacity to work. It is thus possible to distinguish between recipients and nonrecipients in the 1973 general population and to apply an approximate test of SSI eligibility to those in the latter category. The test remains "approximate" because there is no survey research equivalent to the medical examination required by an agency for certifying disability. Nevertheless, the SLIAD data are far closer to complete and better suited to this task than any other survey source currently available. The 1973 data also offer some indication of the SSI recipients' past involvement

with public assistance, the number of applications for aid filed and denied in the preceding year, and the prevailing attitude toward application for aid in the future

Taken alone, the 1973 data permit one to determine the size of the group that had remained outside public assistance but seemed likely to fall within the scope of the new SSI program. By referring to the 1974 data for these individuals, it is possible to establish how many potential recipients actually appeared on the SSI payment rolls in 1974, what factors were associated with particularly high rates of program enrollment, and what were the bases for nonparticipation. The 1974 interviews provide the ingredients necessary for another application of the SSI eligibility test, in addition to substantial material that relates to public awareness of the SSI program, perceptions of individual need for assistance, the incidence of denied applications, and resistance to SSI on stigmatic grounds.

Consideration of the coverage question seems an inevitable part of any attempt to assess the effectiveness of a major income transfer program. Present and future "outreach" efforts are sustained by the belief that great numbers of eligible nonrecipients can still be enrolled under the SSI program if enough time, money, and ingenuity are applied to another casefinding or public information campaign. SLIAD's contribution lies in its capacity to determine if that "phantom" population is large enough to warrant special attention and if it is susceptible to the standard techniques that might influence the decision to apply for SSI payments.

Income Amount, Adequacy, and Equity

One suspects that the SSI program's earliest observers believed that any change in the welfare system had to be a change for the better with respect to payment amount, adequacy, and equity. State welfare departments often paid modest amounts. Monthly payments to OAA recipients averaged less than \$80 in 37 States in mid-1973. Mean payment levels for the blind and disabled were higher, but more than half the States were making monthly payments that averaged less than \$100 in these categories. The SSI program offered some measure of improvement to persons

getting by on less than \$140 per month total income in the past but no assurance that all those transferred from the welfare programs would benefit economically. The Federal system promised higher payments only to persons whose pre-SSI income fell below the newly established national income floor. The remainder were protected against a loss in their grants but were not guaranteed much more than that by the national program alone.

The question of income adequacy is a contextual one. It is impossible to deal with the concept of adequacy without reference to the circumstances of units rather than individuals. Whether or not an individual is poor is determined not by the amount of income that one person receives from a single source. It is instead a product of (1) the total income the individual receives from all sources, (2) the total income received by others in the family or household, and (3) the size and composition of the combined economic unit. Although State agencies kept reasonably complete records of payments to recipients, it was always difficult to obtain data that described the income and composition of the households in which recipients lived. Case record surveys conducted in 1970 by the Department of Health, Education, and Welfare suggest that welfare payments produced meager unit income in a number of States. Including both their welfare grants and any other income they had available to them, South Carolina's OAA recipients were somehow getting along on average monthly income of approximately \$65. To the extent that SSI payments are larger than the old welfare payments, one may predict some improvement in regard to income adequacy. Nevertheless, the SSI system as a whole is geared to the income maintenance of individuals or, at best, couples and will not respond directly to the problem of income adequacy for larger units.

The equity issue seemed to provoke the sharpest and most persistent criticism of the adult aid program as administered in the past. Payments varied not only from State to State but from county to county within a single State. Administrative procedures, structures, and even basic operating vocabularies varied as well. The definition of old age was relatively constant but the definitions of disability and blindness were far from uniform throughout the Nation. Some

States and counties provided a single aid program for all their needy adults. Others channeled their aged, disabled, and blind into separate aid categories, each of which maintained different need standards, employment incentives, and payment schedules. The SSI program was often described as a means to reduce these kinds of inconsistencies and procedural contradictions. Certainly, the Federal portion of the program is more predictable and even-handed than was the overall system that it replaced. Nevertheless, retention of local options for supplementing the Federal payment is simply a blueprint for the type of regional payment variation that existed under public assistance. As before, the financial well-being of an individual recipient may be determined largely by his State of residence.

What the new SSI system actually did for the financial well-being of its intended clientele is, of course, the major substantive question to be asked of the program and the primary analytic issue to be addressed by SLIAD. With respect to the amount of the payment, the two welfare samples permit systematic comparison of welfare payments received in 1973 with SSI payments received by the same individuals or family units in 1974. The comparison may focus on monthly as well as annual income and may be applied to the individual beneficiary himself, his immediate family, or the household as a whole. Regardless of the level of specificity, the process is simply one of comparing the public assistance payment with the SSI payment for matched units and periods of time.

In examining income adequacy, one necessarily shifts attention from the amount of the SSI payment to a consideration of total unit income and total unit need at the two points in time. The SLIAD data are complete with respect to unit income and composition. In combination with the full 124-threshold poverty matrix, they permit a poor/nonpoor designation for each sample person's immediate family and total household, as well as the calculation of a welfare ratio (unit income divided by unit need) appropriate to each unit, both on an annual and a monthly basis.

Within the welfare samples, one is interested in a comparison of poverty status under public assistance with that prevailing both on and off the SSI rolls in the following year. Although SSI guaranteed its welfare transferees that their

grants would not decline, no one could assure that household income or need would be similarly controlled. It is entirely possible that grants may have risen across the board at the same time that poverty increased. Interest in welfare recipients who were not transferred to SSI is dictated by a need to explain their absence from the SSI rolls. Has their income situation improved markedly or have they simply slipped through the cracks of the new program for reasons unrelated to their basic financial status?

The CPS samples afford an opportunity to gauge the effect of moving from a nonwelfare status in 1973 to receipt of SSI in 1974, as well as providing a nontransfer baseline against which to evaluate the effects of moving on, off, or across the two transfer programs. In other words, the CPS samples permit a glimpse of the changes in income adequacy that occurred among people who had involvement with neither the welfare programs nor SSI. It is to this group that one looks for the basic standard to be used in evaluating all change between 1973 and 1974.

The investigation of equity is, in a sense, merely an extension of the inquiry into adequacy. When welfare ratios and other poverty measures are applied to the question of adequacy, they permit an examination of the extent to which welfare families and SSI families have enough money to meet their needs, at least as defined here. In directing interest to equity, one may use the same measures to determine whether certain classes of persons differ in the likelihood that they will have enough money within each of the systems and the degree to which the systems themselves differ regarding the origin, number, and magnitude of these disparities. How serious were the regional variations in income adequacy under public assistance, and are they reduced at all by SSI? How low and how high did public assistance go in terms of the welfare ratios it sustained, and is that range perpetuated by SSI? Does SSI appear to underwrite a higher standard of living for the aged than for the disabled or for welfare transfers in comparison with SSI recipients without welfare experience? While the major part of this analysis must be pursued within the two welfare samples, the CPS samples once again provide a baseline against which to assess the finding from both the welfare and SSI inquiries.

Effect of Income Change

Almost all means-tested transfer programs share two assumptions. A relationship exists between family income and family well-being, and additional income conferred by a transfer payment will somehow promote or enhance the well-being of the family that received it. Although both hypotheses are reasonable, the second has seldom been tested systematically. What happens when income is manipulated at or near the poverty line? More to the point, what does the new money buy for the people who receive it?

A large and diversified series of "well-being" items appearing in the 1973 and 1974 questionnaires provide some answers to this question. The objective details of housing are assessed by standard quality items (access to kitchen, shower or tub, hot and cold running water, number of persons per room, etc.) as well as by an extended inventory of appliances and utilities available for use in the home. The questionnaires include several measures of diet adequacy, a number of questions relating to recreational activity that requires some expenditure of funds, and sufficient information for identifying persons who change their housing tenure, household composition, or place of residence. Although SLIAD is considerably less than a full-fledged consumer expenditure study, it also gathers data pertaining to

monthly shelter costs and household food expenses.

The SLIAD will yield consideration of subjective or attitudinal response as well as the more conventional outcome measures. In both interviews, respondents were asked to assess the adequacy of their housing, diet, neighborhood, and a full range of factors or conditions linked to the concept of well-being.

As a result, the final SLIAD data base permits one to relate individual income change to individual change or stability in living arrangement, household composition, material well-being, and personal satisfaction with the details of everyday life. Of particular interest are the preferences or priorities established for use of the additional income, the extent to which age and health modify the relation between income and well-being over a period of time, and the actual magnitude or extent of income manipulation that seems necessary to achieve significant improvement in the way that aged and disabled people actually live. This type of analysis presents methodological problems considerably more formidable than those encountered in the examination of data gathered at a single time. Nevertheless, the SLIAD data offer a unique opportunity to examine directly the process that constitutes the goal of income-maintenance programs as a whole.