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Residualism and Rural America: a Decade Later

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Rural residents, more so than their urban counterparts are popularly believed to view the use of social welfare programs as appropriate only as last (residual) means of obtaining help. The extent to which this belief reflected reality was assessed by Camasso and Moore (1985) a decade ago using data from a 1980 survey of Pennsylvania residents. Congruent with the residualist hypotheses they found that rural residents were less supportive than urban people of social welfare programming, even when the effects of various personal sociodemographic characteristics were controlled. This paper replicates the work of Camasso and Moore by reporting findings from a similar study carried out a decade later. Although the relative economic and social capital disadvantage of rural people has increased across time, they persist in being more likely than urban residents to express residualist views toward social welfare programming. Implications of these results are discussed.

Introduction

Residualism is an outlook on social welfare which maintains that assistance should be provided only when traditional means of meeting daily needs (e.g. family or the labor market) fail to satisfy the minimal requirements of life (Osgood, 1977). Social welfare is thus viewed as appropriate only as the last resort and only for temporary or emergency assistance (Sundet and Mermelstein, 1987). Residualists hold values that emphasize work, individualism, localism, and private rather than public solutions as being most appropriate to social welfare issues (Meenagh and Washington, 1980). The support of residualism may be related to the belief, often held by welfare recipients themselves,

that socioeconomic disadvantage is somehow the individual's fault (Sundet and Mermelstein, 1987; Hendrickson and Axelson, 1985; Kluegel, 1987; Briar, 1966; Williamson, 1974; Moffitt, 1983; Goodban, 1985). While many citizens may feel that the residualist position is desirable and related to a system of beliefs that reflects rugged individualism, a core American value (Bellah et al., 1986), regardless of one's personal views in this regard, it seems likely that residualism leads to reduced support for the provision of social welfare programming, reduced participation in assistance efforts, and social stigma for those that do participate (Osgood, 1977). As such, attitudes may represent a significant obstacle for those charged with service provision and implementation.

Residualism in Rural America

Camasso and Moore's article "Rurality and the Residualist Welfare Response" (1985) explored the hypothesis that rural residents, more so than urban residents, hold residualist values. They documented that rural areas had a disproportionate number of poor and were disadvantaged relative to urban areas in regard to health and human services, housing, and job and educational opportunities. Nevertheless, utilizing data from a 1980 statewide Pennsylvania sample, they found that rural people gave lower priority ratings than did urban residents to a wide range of social welfare programs (including health services, income maintenance, housing, employment opportunities, social services, and education). Moreover, these residence differences remained even when respondents' sociodemographic characteristics (gender, age, education, income) were controlled.

Poverty continues to be more prevalent in rural than urban areas (Jensen and McLaughlin, 1995). Nonetheless, many human service programs are urban oriented and/or more effective in urban settings (Levitan, 1991; Hirschl and Rank, 1991; Rank and Hirschl, 1993). Jensen and Eggebeen (1994) determined that public assistance was less effective in ameliorating child poverty in nonmetropolitan than metropolitan places, though this gap has narrowed somewhat overtime. They also discerned that rural children's parents were more dependent on earnings and less so on welfare than their urban counterparts—a finding consistent with residualist values.

Poverty is a severe problem in any setting, but current research has shown that nonmetropolitan/rural residents, when compared to metropolitan/urban residents, suffer: higher underemployment and unemployment (Lichter and Constanzo, 1987); slower job growth (Killian and Beaulieu, 1995); lower wages and incomes for workers (Gorham, 1992; Deavers and Hoppe, 1992; Lichter et al., 1994); a proportionally larger dependent population, with more children, elderly, and disabled (Lichter and Eggebean, 1992; McLaughlin and Jensen, 1993); and less educational attainment (Wilkinson, 1987; Jensen and McLaughlin, 1995).

Rural and urban residents alike often erroneously assume that social problems are urban based and of little importance in rural America. However, the farm crisis in the mid-1980s raised public awareness and concern about the restructuring of rural economies and the accompanying levels of rural distress (Sundet and Mermelstein, 1987). The popular media have sporadically explored various aspects of the disadvantaged state of rural America, and there has been some support for rural development/rural revitalization efforts designed to enhance the quality of life of rural residents.

While the rural disadvantage continues proponents of the idea of the massification of society argue that national media coverage, extensive internal migration, and widespread interaction between rural and urban residents will reduce residential differences in attitudes, values, and popular opinions (Olson, 1963; Shils, 1975). Of particular relevance for this research is the possible leveling of rural-urban differences in acceptance of a residualism philosophy. The goals of this analysis were: 1) to describe the level of acceptance of social welfare programming among both rural and urban residents for two time periods, and to 2) determine the extent to which there are continuing differences between rural and urban residents in regard to their residualist response to social welfare programs over time.

Data and methods

Data for this study were drawn from two statewide mail surveys of Pennsylvania residents, collected in the first months of both 1980 and 1990. These surveys were designed to gauge public

perception of contemporary issues, public and private services, and general well-being. Both surveys employed the total design method of Dillman (1978), which incorporates a standardized timetable for postcard reminders and three waves of mailings of the survey instruments. This method has been shown to increase response rates in mail surveys while reducing response rate biases (Dillman, 1978).

The Citizens' Viewpoint 1980 (the data set used by Camasso and Moore) utilized the state's drivers' license file to draw a sample of 13,300 adult residents. The initial useable questionnaires were received from 9,957 subjects, representing a nearly 75 percent response rate (Camasso and Moore, 1985). The Citizens' Viewpoint 1990, replicated many of the questions from the 1980 survey. For the 1990 study, 7,500 names and addresses were selected from telephone listings. In Pennsylvania, nearly 95 percent of all residences have telephones. In the initial sample, 896 had incorrect or insufficient addresses, which resulted in post office returns of the survey materials. A total of 3,632 people returned usable questionnaires. This represented 55 percent of the valid addressees. Since neither sample accurately represented the true demographic and residential composition of the Commonwealth, a weighting scheme based on the populations of large regions was derived from the 1980 and 1990 decennial census and implemented.

Cities, boroughs, and townships are the local governmental units in Pennsylvania. They were initially defined in the state constitution to serve areas of different populations densities and sizes. The largest units were cities; the mid-level, boroughs; and the smallest units, townships. Across time these simple designations have been eroded somewhat by population shifts, growth and decline. Nevertheless, despite considerable variation within the categories, these distinctions continue to reflect the general density of the population served. Thus, townships are generally lowest in density and are typically thought of as "rural" in character, although they can contain population concentrations that meet the U.S. Census Bureau's definition of "urban." For this analysis, township residents who described their residences as open country or farms were classified as rural; villages and built

up areas within townships were classified as urban. Those respondents living in cities or boroughs also were classified as urban.

Camasso and Moore (1985) used a slightly different definition of rural residents. They defined rural residents as those who reside in places with a population of 2,500 or less, in villages, open country, or farms. Because these definitions differ and comparability would be compromised, analysis of the 1980 data was replicated using the revised definition. Substantively trivial differences are found when the 1980 analysis is replicated using the original and revised definition of rural residence.

Twenty-four variables were used to measure residualism in social welfare in both 1980 and 1990. These variables were classified into six major areas of social welfare programming consisting of: 1) health, 2) income maintenance, 3) housing, 4) employment, 5) social services, and 6) education (Camasso and Moore, 1985). Respondents were asked: "Compared to what is being done now, what priority do you want the following areas to have in the future." The answer categories utilized were: "lower," "the same," and "higher." The specific social welfare programs examined are shown on Table 1. It was assumed that those who responded "higher" priority for a social welfare program were supportive of additional efforts in this area. "Don't know" responses were treated as missing values.

For 1980 and 1990 both bivariate and multivariate logistic regression models were estimated. Included in the tables are the percent requesting "higher" priority for both rural and urban residents, and the predicted difference for both logistic regression models. The bivariate model includes only the rural/urban variable and the social welfare program under consideration. The multivariate model included controls also for gender, age (in years), educational attainment (by highest earned degree), and income level (in quartiles). Including these sociodemographic factors in the model controlled for the possible confounding influence of differences in the population composition of rural and urban areas. As Camasso and Moore (1985) noted, logistic regression coefficients are not easily interpreted. Therefore, the predicted percentage differences between rural and urban residents for each item is presented. For the bivariate model predicted differences are the same as the differences in the percentages.

Table 1

Means and logit models for the 24 social welfare programs.

Social Welfare Programs	Year	Percent requesting higher priority		Bivariate logit model	Multivariate logit model
		Rural	Urban	Predicted Difference	Predicted Difference
HEALTH					
Hospitals	1980	45.3	45.3	0.0	-2.5
	1990	41.5	40.4	1.1	.8
Family medical services	1980	55.3	57.3	-2.0	-3.2
	1990	44.0	47.2	-3.2	-2.2
Nursing homes	1980	58.7	67.6	-8.9	-9.0
	1990	57.0	65.4	-8.4	-6.4
INCOME MAINTENANCE					
Public assistance	1980	33.4	39.0	-5.6	-6.5
	1990	30.8	38.7	-7.9	-7.8
HOUSING					
Sr. citizen housing	1980	64.3	72.3	-8.0	-8.6
	1990	60.3	68.4	-8.1	-7.0
Moderate income housing	1980	49.6	58.3	-8.7	-6.4
	1990	38.7	53.2	-14.5	-15.1
Low income housing	1980	46.0	51.0	-5.0	-4.1
	1990	41.6	52.9	-11.3	-12.4
Repair of rundown homes	1980	69.0	76.5	-7.5	-6.9
	1990	55.7	66.8	-11.1	-10.5
EMPLOYMENT					
Youth job opportunities	1980	80.1	83.6	-3.5	-3.6
	1990	66.8	70.2	-3.4	-2.9
Adult job opportunities	1980	81.6	82.5	-.9	-1.1
	1990	64.7	67.6	-2.9	-4.0
Job/career counseling	1980	61.2	68.6	-7.4	-6.5
	1990	50.2	56.6	-6.4	-5.3
SOCIAL SERVICES					
Teenage drug/alcohol	1980	82.3	85.5	-3.2	-3.3
	1990	77.9	83.8	-5.9	-5.2
Mental health counseling	1980	48.8	56.3	-7.5	-8.4
	1990	36.1	41.8	-5.7	-3.2

continued

Social Welfare Programs	Year	Percent requesting higher priority		Bivariate logit model	Multivariate logit model
		Rural	Urban	Predicted Difference	Predicted Difference
Sr. citizen services	1980	63.9	70.2	-6.3	-8.5
	1990	54.5	60.1	-5.6	-4.9
Child/elder abuse	1980	78.7	83.5	-4.8	-5.1
	1990	64.7	72.8	-8.1	-9.0
Adult drug/alcohol	1980	64.3	66.8	-2.5	-3.9
	1990	66.6	70.6	-4.0	-1.9
Day care centers	1980	35.8	41.0	-5.2	-6.6
	1990	38.4	46.5	-8.1	-6.1
EDUCATION					
Marriage/parenting classes	1980	65.3	69.6	-4.3	-4.2
	1990	56.3	62.0	-5.7	-3.0
Libraries and book services	1980	35.8	40.0	-4.2	-4.5
	1990	30.5	32.4	-1.9	-3.0
Elementary schools	1980	31.4	36.7	-5.3	-6.2
	1990	39.2	40.9	-1.7	-1.8
High schools	1980	32.8	38.5	-5.7	-6.4
	1990	40.9	42.4	-1.5	-2.6
Vocation and technical training	1980	62.6	64.5	-1.9	-2.7
	1990	55.1	51.5	3.6	4.0
College and universities	1980	26.9	31.6	-4.7	-4.8
	1990	33.3	34.8	-1.5	-1.3
Adult and continuing education	1980	49.8	52.3	-2.5	-4.4
	1990	44.0	44.7	-.7	1.1

For the multivariate model, the differences between the rural and urban scores are adjusted for the effects of gender, age, education, and income.

As in the original analysis, test of significance were not included. Because of the large samples, almost every difference would be judged to be statistically significant. What is more important here was the replication of patterns in the support for social welfare programs, which attested to the substantive significance of the findings (Camasso and Moore, 1985).

Results

Table 1 presents the bivariate and multivariate logistic regression models for the 24 social welfare programs. The most striking finding was the overall decrease in support, regardless of residence, for most social welfare programs. In the decade between 1980 and 1990, for 18 of 24 programs (75 percent), the proportion of those responding "higher priority" for social welfare programs decreased for both urban and rural residents. Only programs for adult drug and alcohol counseling, day care centers, elementary schools, high schools, and colleges/universities had increases in support over the decade. For low income housing, rural support declined, while urban support increased.

Rural residents were somewhat less likely than urban residents in both time periods to give "highest priority" ratings to these programs, suggesting their greater acceptance of the residualist response to social welfare. In 1980, 23 of the 24 items showed such differences in the bivariate case; all 24 items patterned in the same way when the effects of gender, age, education and income were controlled. By 1990, 22 items in the bivariate case, while 21 in the multivariate analysis presented evidence of somewhat greater acceptance of residualist social welfare responses among rural than urban residents.

Health

Although the net differences between rural and urban residents' responses declined somewhat between 1980 and 1990, in both time periods, rural residents were less likely than their urban counterparts to indicate that higher priority should be given to nursing homes and family medical services. For hospitals, however, there was no residence difference in 1980, and in 1990, rural people were actually slightly more likely than urban residents to express support for giving greater priority to hospitals.

Income Maintenance

In 1980, just one third of the rural respondents and 39 percent of the urban subjects felt that higher priority should be given to public assistance. Support for giving higher priority to public assistance declined between 1980 and 1990 among both rural and

urban residents. However, the decline was greater for rural people, magnifying the rural-urban differences. Camasso and Moore (1985:404) noted that this issue is "unmistakably at the center of the general public's conception of social welfare." If true, the increased residential difference suggests a continuation if not a intensification of the rural residualist social welfare response.

Housing

Most respondents in 1980 and 1990 felt that higher priority should be given to senior citizen housing and repair of rundown homes; the percentage endorsing higher priority for moderate and low income housing was somewhat lower. In both time periods, there were sizeable differences between rural and urban responses, especially for the last three items and these differences increased substantially between 1980 and 1990. Housing-related social programs were clearly less supported in rural than in urban areas.

Employment

Although there were sizeable declines between 1980 and 1990 in the percentages of rural and urban respondents who indicated that youth job opportunities, and job/career counseling programs should receive higher priority in the years ahead, the majority of the study participants saw these as areas in need of higher priority. Rural people were somewhat less likely than were urban residents to support these issues in both time periods.

Social Services

Like income maintenance, Camasso and Moore (1985) have suggested that social services are central to the public's conception of social welfare. Support was high for programs dealing with teenage and adult drug/alcohol use, child/elder abuse, and senior citizen services, but the proportion of higher priority ratings were somewhat less for mental health counseling and day care centers. In all cases, rural people were less likely than urban residents to endorse programming in these areas. While support for most services declined between 1980 and 1990, the reverse was true for adult drug/alcohol programs and day care centers.

Education

Classes in marriage and parenting, vocational / technical training, and adult/continuing education, received higher levels of support than did traditional formal education (elementary schools, high schools, colleges/universities). However, both rural and urban people increased the priority given to the latter, while decreasing their support for the former. Residential differences remained for most items, with all but two showing clear residualist differences between rural and urban respondents.

Discussion and Concluding Remarks

This analysis provides empirical evidence of decreasing support for human service programs and increasing acceptance of a residualist orientation toward social welfare during the period from 1980 to 1990 in the Commonwealth of Pennsylvania. To the extent that the opinions and attitudes that Pennsylvanians hold can be extrapolated to the national level, these findings seem consistent with casual observations of the changing emphasis in American Society. After nearly three decades of anti-poverty welfare programming, poverty remains a persistent problem in this country and the citizenry, tired soldiers in the seemingly unwinnable war on poverty have shifted their priorities to other concerns.

The Reagan-Bush years emphasized reductions in social welfare programming, in favor of private efforts (Midgley, 1992). In fact, often their rhetoric suggested that government could not be trusted to administrate most social welfare programs (Midgley, 1992). Their elections, often with great majorities, suggested that there was strong support for cutting social welfare funding. Last, the national and state budget crises might have made many respondents reticent to support increasing any social welfare expenditures. Perhaps the lessening of support can be explained by Taylor-Gooby's (1986) finding that overall people were supportive of non-state forms of welfare but were more leery of supporting activities that were characterized by conservative politicians as income redistribution by the state.

It is also important to note, however, that many of the shifts toward a residualist position observed in the current data set were small, and that support for giving greater priority to these

programs in the future were not substantively altered. In general, programs which a majority of the 1980 respondents endorsed, were also supported by a majority of the 1990 respondents. Likely reflecting changing economic circumstances, some of the most dramatic shifts occurred in the areas of enhancing employment opportunities and housing. There were also sizeable declines in support for some social services. However, the proportion of persons indicating higher priority should be given to elementary and secondary schools and colleges/universities increased rather than decreased.

Congruent with the findings of Camasso and Moore (1985) a decade earlier, this analysis found that residualism in 1990 was, in general, more prominent among rural than urban people. For some issues, the differences between rural and urban residents' views were larger in 1990 than in 1980; more often the residence distinction declined suggesting a possible weakening of the relationship across time. Nevertheless, in the 1990 data, rural-urban differences persisted across a wide spectrum of social welfare program areas—health services, income maintenance, employment, social services, education. Moreover, these residence differences were not, in general, diminished by controlling for respondent differences in gender, age, education, and income.

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