

The Status of Women in Florida

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INSTITUTE FOR WOMEN'S POLICY RESEARCH



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Florida Coalition of Labor Union Women

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About this Report

The Status of Women in Florida is part of an ongoing research project conducted by the Institute for Women's Policy Research (IWPR) to establish baseline measures of the status of women in all 50 states and the District of Columbia. The effort is part of a larger IWPR Economic Policy Education Program, funded by the Ford Foundation, intended to improve the ability of advocates and policymakers at the state level to address women's economic issues. The first series of reports were released in 1996 and included a summary national report and 14 state reports. This report is part of the second series, which includes nine other states (Connecticut, Kentucky, Louisiana, Mississippi, Nebraska, Ohio, Oregon, Pennsylvania, and Vermont), as well as an update of the national report.

The data used in each report come from a variety of sources, primarily government agencies, although other organizations also provided data where relevant. Many individuals and organizations in Florida assisted in locating data and reviewing this report, and one organization has joined in co-publishing the report. While every effort has been made to check the accuracy and completeness of the information presented, any errors are the responsibility of the authors and IWPR. Please do not hesitate to contact the Institute with any questions or comments.

About the Institute for Women's Policy Research

The Institute for Women's Policy Research (IWPR) is a public policy research organization dedicated to informing and stimulating the debate on public policy issues of critical importance to women and their families. IWPR focuses on issues of poverty and welfare, affirmative action and pay equity, employment and earnings, work and family issues, and the economic and social aspects of health care and domestic violence. The Institute works with policymakers, scholars, and public interest groups around the country to design, execute, and disseminate research that illuminates economic and social policy issues affecting women and families, and to build a network of individuals and organizations that conduct and use women-oriented policy research. IWPR, an independent, nonprofit organization, also works in affiliation with the graduate programs in public policy and women's studies at the George Washington University.

About IWPR's Partners in this Project

In producing these reports, IWPR called upon many individuals and organizations in the states. Emily Browne, Florida NOW, served as Chair of Florida's Advisory Committee. This position involved coordinating the various individuals on the Committee, who represented organizations from all over the state. The Committee reviewed the draft report for accuracy and applicability and made suggestions for ensuring that the data contained in the report would be useful. They also help to disseminate the report across the state.

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many different viewpoints have been noted by many who worked with her throughout this process. Ms. Caiazza, a political scientist, also contributed to the data collection and analysis effort, particularly in the areas of political participation and representation and reproductive rights.

Special thanks are also due Shannon Garrett, Research Program Coordinator, for her able organizational skills, hard work, and dedication. In addition to assisting in data collection efforts and report writing, she also coordinated the manuscript preparation of all the final drafts.

In addition to those mentioned above, authors of the 1998 report series include: Katherine Allen, Study Director; Ellen Feder, Research Associate (former); Heidi Hartmann, Director; Sara Kickliter, Intern; Lois Shaw, Senior Consulting Economist; Kristine Witkowski, Study Director; and Chava Zibman, Intern. Other research team members who contributed to the study include: Katie Burns, Intern; Holly Mead, Research Fellow; Nancy Reinhardt, Intern; Monica Schneider, Intern; Linda Shade, Consultant; Zohar Siwek, Intern; and Stefanie Stern, Intern. Barbara Gault, Associate Director for Research, provided technical expertise throughout the project, as did Diana Zuckerman, Senior Consulting Scientist (and former Director of Research and Policy Analysis at IWPR).

Finally, many individuals participated in the major effort of publishing eleven reports simultaneously. IWPR is grateful to Anna Rockett, Publications Editor, for her design expertise and patience in coordinating the production process, including layout, copy editing, proofreading, and preparation of the final copy. Other IWPR staff who assisted in the production and dissemination process include Liz Schiller, Associate Director of Development, Amanda Gordon, Communications and Outreach Assistant, Laura Nichols, Research Fellow, and Nancy Bennett, public relations consultant. Jill Braunstein, Associate Executive Director and Director of Communications, directed the entire production and dissemination effort. Her experience, expertise, and vision assured the timely completion of this complex project. The project was carried out under the general direction of Heidi Hartmann, Director and President of the Institute for Women's Policy Research.

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Contents

Introduction	1
Goals of <i>The Status of Women in the States</i> Reports	1
About the Indicators and the Data	1
About IWPR	2
Overview of the Status of Women in Florida	3
Political Participation and Representation	7
Voter Registration and Turnout	7
Elected Officials	9
Institutional Resources	9
Employment and Earnings	11
Women's Earnings	11
The Wage Gap	12
Labor Force Participation	14
Occupation and Industry	18
Economic Autonomy	21
Access to Health Insurance	21
Education	21
Women Business Owners and Self-Employment	22
Women's Economic Security and Poverty	24
Reproductive Rights	27
Health and Vital Statistics	29
Basic Demographics	33
Conclusion	37
Appendices:	39
Appendix I: Methodology, Terms, and Sources for Chart I (the Composite Indices)	39
Appendix II: Terms and Sources for Chart II (Women's Rights Checklist)	42
Appendix III: State-by-State Rankings on the Composite Indices and their Components	45
Appendix IV: State and National Resources	49
Appendix V: List of Census Bureau Regions	54
References	55

Index of Charts, Tables and Figures

Charts

I. How Florida Ranks on Key Indicators	Page 3
II. Women's Rights Checklist	5
III. Political Participation and Representation: National and Regional Ranks	7
IV. Employment and Earnings: National and Regional Ranks	11
V. Economic Autonomy: National and Regional Ranks	21
VI. Panel A, Reproductive Rights: National and Regional Ranks	27
VI. Panel B, Components of the Reproductive Rights Composite Index	28

Tables

1. Voter Registration for Women and Men in Florida and the United States	8
2. Women's and Men's Voter Turnout in Florida and the United States	8
3. Women in Elected Office in Florida and the United States, 1998	9
4. Institutional Resources for Women in Florida	10
5. Women's Earnings and the Earnings Ratio in Florida by Educational Attainment, 1979 and 1995 (1997 Dollars)	14
6. Personal Income Per Capita for Both Men and Women in Florida and the United States, 1996	16
7. Full-Time, Part-Time and Unemployment Rates for Women and Men in Florida and the United States, 1995	16
8. Labor Force Participation of Women in Florida and the United States by Race/Ethnicity, 1995	17
9. Labor Force Participation of Women in Florida and the United States by Age, 1995	17
10. Labor Force Participation of Women with Children in Florida and the United States, 1995	18
11. Percent of Women and Men without Health Insurance and with Different Sources of Health Insurance in Florida and the United States, 1994-95	22
12. Women-Owned Firms in Florida and the United States, 1992	23
13. Health and Vital Statistics for Florida and the United States, 1996	30
14. Percent of Total Population, Medicare and Medicaid Recipients Enrolled in Health Maintenance Organizations (HMOs) in Florida and the United States, 1996	31
15. Basic Demographic Statistics for Florida and the United States	33

Figures

1. Median Annual Earnings of Women and Men Employed Full-Time/Year-Round in Florida and the United States, 1995 (1997 Dollars)	12
2. Ratio of Women's to Men's Full-Time/Year-Round Median Annual Earnings in States in the South Atlantic Region and the United States, 1995	13
3. Change in the Wage Ratio Between 1979 and 1995 in Florida and the United States	13
4. Percent of Women and Men in the Labor Force in Florida and the United States, 1995	15
5. Unemployment Rates for Women and Men in Florida and the United States, 1995	15
a. Distribution of Women Across Occupations in Florida and the United States, 1995	19
b. Distribution of Women Across Industries in Florida and the United States	19
7. Educational Attainment of Women Aged 25 and Older in Florida and the United States, 1997	22
8. Distribution of Women-Owned Firms Across Industries in Florida and the United States, 1992	23
9. Median Annual Income for Selected Family Types and Single Women and Men in Florida and the United States, 1995	24
10. Percent of Women in Poverty and Percent Receiving AFDC, Aged 18 and Older in Florida and the United States	25
11. Poverty Rates for Selected Family Types and Single Men and Women in Florida and the United States, 1995	25
12. Percent of Unemployed Women and Men with Unemployment Insurance in the South Atlantic Region and the United States, 1996	26
13. Distribution of Women by Marital Status in Florida and the United States, 1990	34
14. Percent of Households with Children Under Age 18 Headed by Women in Florida and the United States, 1990	34

Introduction

During the twentieth century, women have made significant economic, political and social advances that fundamentally challenge their traditional roles. They are still, however, far from achieving gender equality. To accomplish this goal, policymakers need reliable and relevant data about the issues affecting women's lives.

Recognizing this need, the Institute for Women's Policy Research (IWPR) issued a series of *The Status of Women in the States* reports in 1996. As many policymaking responsibilities shift to the states, advocates, researchers and policymakers need state-level data about women, and IWPR designed its new project to provide them with relevant information. This year, IWPR staff produced a second series of state reports as well as a national report summarizing key 1998 findings for all 50 states and the District of Columbia.

Goals of *The Status of Women in the States* Reports

The staff of the Institute for Women's Policy Research prepared this report on *The Status of Women in Florida* to inform residents in Florida concerned about the progress of Florida's women relative to women in other states, to men and to the nation as a whole. Some aspects of the reports have changed since 1996 but the essence and goals of the reports remain the same: (1) analyzing and disseminating information about women's progress in achieving rights and opportunities, (2) identifying and measuring the remaining barriers to equality and (3) providing a continuing monitor of women's progress.

In each report, indicators describe women's status in political participation and representation, employment and earnings, economic autonomy and reproductive rights. In addition, the reports provide basic demographics and health information about women in each state. For the four major issue areas addressed in this report, IWPR compiled composite indices based on the indicators presented to provide an overall assessment of the status of women in each area. Because the amount of data on health care issues is vast, IWPR did not attempt to develop and summarize one index to measure women's health status.

Although state-by-state rankings provide important insights into women's rights throughout the country indicating where progress is greater or less, in no state (including those ranked relatively highly on the indices

compiled in this report) do women have adequate policies ensuring their equal rights. In no state have women achieved equity with men. All women continue to face important obstacles to achieving equity with men.

About the Indicators and the Data

IWPR looked at several sources for guidelines on what information to include in these reports. Many of the economic indicators chosen, such as median earnings or the wage gap, are standard indicators of women's status. The same is true of voter participation and women's electoral representation. In addition, IWPR used the Beijing Declaration and Platform for Action from the U.N. Fourth World Conference on Women to guide its choices of indicators.

Ultimately, the IWPR research team made decisions based upon several principles and constraints: parsimony, representativeness and reliability, and comparability of data across all the states and the District of Columbia.

To facilitate comparisons among states, IWPR used data collected in the same way for each state. While most of the data are from federal government agencies, other organizations also provided data where relevant. Many figures rely on the U.S. Census Bureau's Current Population Survey (CPS), a monthly survey of a nationally representative sample of households. To ensure sufficiently large sample sizes for cross-state comparisons, several years of data were combined and then tabulated by IWPR researchers since few state breakdowns by gender are available in published form. One of the major changes to the state reports involved incorporating new data from the years 1994-97. Some data could not be updated and some figures necessarily rely on older data from the 1990 Census; historical data from 1980 or earlier are presented on some topics. When data were not available, it is indicated in the tables with 'N/A.'

The decennial censuses provide the most comprehensive data for states and local areas, but since they are conducted only every ten years, census data are often out of date. CPS data are therefore used to provide more timely information even though the smaller sample sizes require omitting much detail (for information on sample sizes, see Appendix I).

In some cases, differences reported between two states or between a state and the nation for a given indicator are statistically significant (unlikely to have

occurred by chance) and in other cases they are not (likely to have occurred by chance). Although IWPR did not calculate or report measures of statistical significance, the larger the difference relative to the base-value (for any given sample size), the more likely the difference is to be statistically significant.

In comparing indicators based on data from different years, the reader should keep in mind that the 1990-97 period encompassed a major economic recession at the start of the decade, followed by a slow and gradual recovery with strong economic growth (in most states) in the last few years.

The general decision to use more recent data despite smaller sample sizes is in no way meant to minimize how profoundly differences among women—for example, by race, ethnicity, age, sexuality and family structure—affect their status or how important it is to design policies that speak to these differences. Identifying and reporting on areas within the states (cities, counties, urban and rural areas) were also beyond the scope of this project. The lack of disaggregated data generally masks differences among women within the states. Pockets of poverty are not identified and groups with lower or higher status may be overlooked.

A lack of reliable and comparable data at the state level also necessarily limits the treatment of several important topics: domestic violence, older women's issues, pension coverage, lesbian rights legislation and issues concerning women with disabilities. The report also does not analyze women's unpaid labor or women in nontraditional occupations. In addition, income and poverty data across states are limited in their comparability by the lack of good indicators of differences in the cost of living by states—thus, poor states may look worse than they really are and rich states may look better than they really are. IWPR firmly believes all of these topics are of utmost concern to women in the United States and continues to

search for data that can address them. However, many of them do not receive sufficient treatment in national polls or other data collection efforts.

This highlights the sometimes problematic politics of data collection: researchers do not know enough about many of the serious issues affecting women's lives because women do not yet have sufficient political or economic power to demand the necessary data. As a research institute concerned with women, IWPR presses for changes in the way data are collected and analyzed in order to compile a more complete understanding of women's status. Currently, IWPR is leading a Working Group on Social Indicators of Women's Status designed to assess current measurement of women's status in the United States, determine how better indicators could be developed using existing data sets, make recommendations about gathering or improving data and develop short- and long-term research agendas for developing policy relevant research on evaluating women's well-being and status.

About IWPR

IWPR is an independent research institute dedicated to conducting and disseminating research that informs public policy debates affecting women. IWPR focuses on the issues that affect women's daily lives including family/work policies, employment and job training, pay equity and the glass ceiling, poverty and welfare reform, violence against women, women's political participation and access to health care.

The Status of Women in the States reports seek to provide important insights into women's lives and to serve as useful tools to advocates, researchers and policymakers at the state and national levels. The demand for relevant and reliable data at the state level is growing. This report is designed to fill this need.

Overview of the Status of Women in Florida

Although Florida women have made some important strides in several areas, they continue to face serious obstacles in achieving equality with men and with attaining a standing equal to the average for U.S. women in other areas. Their problems are evident in particularly low rankings on two of the composite indices calculated by IWPR: of the 50 states and the District of Columbia, Florida ranks 37th in political participation and representation and 38th in economic autonomy. The state does somewhat better in employment and earnings, ranking 26th, and scores above average for all states, 18th, in reproductive rights (see Chart I). Despite its better performance on these two indicators, Florida clearly does not ensure equal rights for

women, and the problems facing Florida women demand significant attention from policymakers, women's advocates, and researchers concerned with women's status.

As part of the South Atlantic region, Florida joins Delaware, Georgia, Maryland, North Carolina, South Carolina, Virginia, Washington, DC and West Virginia. Florida ranks about average when compared with these eight states and the District of Columbia. Within this economically and politically diverse region, Florida ranks third in political participation and representation, fifth in employment and earnings, seventh in economic autonomy, and fourth in reproductive rights.

Chart I.
How Florida Ranks on Key Indicators

Indicators	National Rank*	Regional Rank*
Composite Political Participation and Representation Index	37	3
• Women's Voter Registration, 1992-94	45	7
• Women's Voter Turnout, 1992-96	44	4
• Women in Elected Office Composite, 1998	30	3
• Women's Institutional Resources, 1998	1	1
Composite Employment and Earnings Index	26	5
• Women's Median Annual Earnings, 1995	28	5
• Ratio of Women's to Men's Earnings, 1995	6	2
• Women's Labor Force Participation, 1995	48	8
• Women in Managerial and Professional Occupations, 1995	21	5
Composite Economic Autonomy Index	38	7
• Percent with Health Insurance among Nonelderly Women, 1994-95	45	9
• Educational Attainment: Percent of Women with Four or More Years of College, 1990	36	7
• Women's Business Ownership, 1992	16	5
• Percent of Women above the Poverty Level, 1995	35	6
Composite Reproductive Rights Index	18	4

See Appendix I for a detailed description of the methodology and sources used for the indices presented here.

* The national rankings are of a possible 51, referring to the 50 states and the District of Columbia except for the Political Participation and Representation Indicators, which do not include the District of Columbia. The regional rankings are of a maximum of nine and refer to the states in the South Atlantic Region (DC, DE, FL, GA, MD, NC, SC, VA, WV). See Appendix V.

Calculated by the Institute for Women's Policy Research.

Florida is a demographically diverse state, with minority women making up about 30 percent of the population, compared with 27 percent for the nation as a whole. Not all these women enjoy equal access to Florida's political and economic resources, nor are they gaining equally in the fruits of progress. While this report relies primarily on aggregate data for the state—data comparable to that available for other states—it does not seek to deny important differences among Florida women. Recognizing the differences is important both to understanding the limitations of the aggregate data presented here and to developing policies that can benefit *all* of Florida's women.

Political Participation and Representation

Because rates of women's voter registration and turnout are especially low in Florida, the state ranked only 37th in the nation on the political participation and representation composite index. Florida women do have many potential avenues for institutional representation through a women's state agenda project, a commission on the status of women (the Florida Commission on the Status of Women), and a women's caucus in the legislature. To strengthen these institutional voices, women in Florida would benefit from more active voter participation: such voices could encourage more women-friendly policies enhancing their status.

Employment and Earnings

Although Florida ranked 26th on the employment and earnings composite index, its rankings on the indicators within that index varied widely. Florida women overall participate in the workforce much less often than women in the nation as a whole; African American and Hispanic women, however, worked at rates above the national average. Women's earnings in relation to men's were also substantially higher than in most of the country.

More than 65 percent of Florida women with children under 18 are working. While this percentage is below the average for the nation, it does indicate that Florida's parents increasingly need adequate child care, a policy demand not yet adequately addressed in Florida or in the United States as a whole. In an economic era when all able or available parents must work for pay to support their children, public policies lag far behind reality.

Economic Autonomy

Florida's lowest ranking among the composite indices calculated by IWPR is in economic autonomy,

where the state ranked 38th. Florida's best rank within this area is for women's business ownership, on which Florida ranks 16th, above the midpoint for the nation. In other areas, Florida ranks poorly. More than 17 percent of Florida women lack health insurance, ranking 45th in the nation, and more than 14 percent live below the poverty line, ranking 35th in the nation. These women lack the basic necessities of life.

Reproductive Rights

Although their reproductive rights have significant restrictions, Florida women have some of the reproductive rights identified as important, and as a result the state ranked 18th of 51 on this measure. State policies do not mandate parental consent and waiting periods, but poor women can receive public funding for abortion only under federally mandated, limited circumstances. Moreover, for many women, especially those in rural areas, abortion is virtually inaccessible: only 31 percent of Florida counties have abortion providers.

Women's Rights Checklist

The Fourth World Conference on Women, held in Beijing in September 1995, heightened awareness of women's status around the world and pointed to the importance of government action and public policy for the well-being of women. At the conference, representatives from 189 countries, including the United States, unanimously adopted the Beijing Declaration and Platform for Action, pledging their governments to action on behalf of women. The Platform for Action outlines critical issues of concern to women and remaining obstacles to women's advancement.

In the United States, the President's Interagency Council on Women continues to follow up on U.S. commitments made at the Fourth World Conference on Women. According to the Council (1996), many of the laws, policies and programs that already exist in the United States meet the goals of the Platform for Action and establish the rights of women identified in the Platform. In other areas, however, the United States and many individual states have an opportunity to improve women's rights.

Chart II, the Women's Rights Checklist, shows how Florida rates on selected indicators of women's rights. Many of these rights derive from the Platform for Action. They fall under several categories: reproductive rights, protection from domestic violence, access to income support (through welfare and child support collection), women-friendly employment protections and institutional

Chart II. Women's Rights Checklist

	Yes	No	Other
Reproductive Rights			
• Does Florida allow access to abortion services without mandatory parental consent laws?	✓		
• Does Florida allow access to abortion services without a waiting period?	✓		
• Does Florida provide public funding for abortions under any or most circumstances if a woman is eligible?		✓	
• Does Florida require health insurers to provide coverage for contraceptives?			Proposed
• Does Florida offer public funding for infertility treatments?		✓	
• Does Florida allow the non-biological parent in a gay/lesbian couple to adopt his/her partner's biological child?			Banned
Domestic Violence Legislation			
• Does Florida require law-enforcement officials to arrest under all or some circumstances?*		✓	
Child Support			
• Percent of single-mother households receiving child support or alimony			28.0%
• Percent of child support cases with orders for collection in which child support has actually been collected.			15.8%
Welfare (as of July 1998)†			
• Child Exclusion/Family Caps: Does Florida extend TANF benefits to children who are born or conceived while the mother was on welfare?			Modified Family Cap
• Time Limits: How many consecutive months does Florida allow TANF recipients to receive benefits?			See Note (1) Below
• Work Requirements: When are welfare recipients required to work according to Florida's TANF plan?			Immediately
• Has Florida made provision for victims of family violence in its state TANF plan?	✓		
Employment/Unemployment Benefits			
• Is Florida's minimum wage higher than the federal minimum wage as of January 1998?††			No State Law on Minimum Wage
• Does Florida have mandatory temporary disability insurance?		✓	
• Does Florida provide unemployment insurance benefits for low-wage earners?		✓	
• Has Florida implemented adjustments to achieve pay equity in its civil service?	✓		
Institutional Resources			
• Does Florida have a Commission on the Status of Women?	✓		

See Appendix II for a detailed description and sources for the items on this checklist.

(1) Florida allows recipients to receive benefits 24 months within any 60-month period, with a 48-month lifetime limit; 36 out of 72-month lifetime limit for longterm recipients with no work experience or poor job skills.

* This indicator is only one of many potential measures of anti-domestic violence policies, but data are more difficult to find for other measures.

† Under federal law, Temporary Assistance for Needy Families (TANF) benefits are restricted to a five-year (60 month) lifetime limit and are contingent on work participation after 24 months; as allowed by the law, some states set more stringent time limits or work requirements or exempt victims of domestic violence from certain requirements.

†† As of September 1, 1997, the federal minimum hourly wage was increased to \$5.15.

Compiled by the Institute for Women's Policy Research.

representation of women's concerns. Many of the indicators directly result from state policy decisions (see Appendix II for detailed explanations of the indicators).

As the chart shows, women in Florida have many of the rights identified as important to women's well-being. There is a Florida Commission on the Status of Women, and the state has implemented adjustments in its civil service to achieve pay equity. It has also opted for a family violence provision in its Temporary Assistance for Needy Families (or TANF, the new welfare program) plan. In addition, legislation requiring health insurers to provide coverage for contraceptives has been proposed.

But Florida falls short in other areas. The state stipulates relatively narrow criteria for unemployment insurance. Florida maintains a modified "family cap," so that although it extends benefits to children born while the mother is on welfare, those benefits are only partial increases for each child. Thus women and their families who receive welfare are in double jeopardy of falling deeper into poverty with the conception or birth of a child.

The state's requirement that welfare recipients begin work immediately does not allow for any upgrading of skills through further education and training. Further, failure to require mandatory TDI (Temporary Disability Insurance) coverage leaves many women, especially single mothers, vulnerable in case of injury or illness and a poor record of child support collections leaves many mother-headed families vulnerable to poverty. Finally, Florida lacks a pro-arrest policy on domestic violence. Mandatory arrest policies, however, can be somewhat controversial among domestic violence activists and experts since victims of domestic violence are sometimes arrested, presumably not the original intent of such laws.

Florida, then, truly illustrates many of the difficult obstacles still facing women in the United States. While Florida women and U.S. women as a whole are seeing important changes in their lives and their access to political, economic and social rights, they by no means enjoy equality with men, and they still lack many of the legal guarantees that would allow them to achieve it.

Political Participation and Representation

Participating in the political process is one way women can seek representation of their interests and influence policies affecting their lives. This section describes several aspects of political life important to women. Voter registration and turnout, female state and federal elected representatives and women's state institutional resources are all crucial to making women's political concerns visible.

Political participation is the foundation of democratic citizenship; it allows citizens to define their own political interests and influence public policy. In recent years a growing gender gap in voter preferences—the tendency for women and men to vote differently—suggests that women's interests may differ from men's (Delli Carpini and Fuchs, 1993; Mueller, 1988; Sapiro, 1983; Tolleson Rinehart, 1992). Many women also give issues like education, health care, children's issues and reproductive rights high priority. Because women often fill the role of primary care provider in families, these issues often affect women's lives more profoundly than men's, and voting is one way for women to express their political priorities.

Women's representation in political institutions also helps highlight their concerns in the public sphere. Regardless of party affiliation, female officeholders are

more likely than male ones to support women's agendas (Center for the American Women and Politics [CAWP], 1991; Carroll, 1994; Thomas, 1994), and support for female candidates is growing among both male and female voters. Research shows that legislatures with larger proportions of female elected officials do, in fact, address women's issues more than those with fewer female representatives (Dodson, 1991; Thomas, 1994). In addition, representation by means of permanent institutions, such as women's commissions, can provide regular procedural channels for expressing women's concerns (Stetson and Mazur, 1995). These institutions also make government more accessible to women. Thus women need to be in both the executive and legislative branches to ensure their perspectives are part of political debate.

Florida ranks 37th on the Political Participation and Representation index. Its rankings on individual indicators range from first on women's institutional resources to 45th on women's voter registration (see Chart III).

Voter Registration and Turnout

One of the basic democratic rights is the right to vote. The principle "one person one vote" helps different kinds of citizens have an equal voice in the democratic process.

Chart III.
Political Participation and Representation: National and Regional Ranks

Indicators	National Rank* (of 50)	Regional Rank* (of 8)
Composite Political Participation and Representation Index	37	3
• Women's Voter Registration (percent of women 18 and older who reported registering to vote in 1992 and 1994) ^a	45	7
• Women's Voter Turnout (percent of women 18 and older estimated to have voted in 1992 and 1996) ^b	44	4
• Women in Elected Office Composite Index (percent of state and national elected officeholders who are women, 1998) ^{c,e}	30	3
• Women's Institutional Resources (number of institutional resources for women in Florida, 1998) ^{d,e}	1	1

See Appendix I for methodology.

* The national rank is of a possible 50, because the District of Columbia is not included in this ranking. The regional rankings are of a maximum of nine and refer to the states in the South Atlantic Region (DC, DE, FL, GA, MD, NC, SC, VA, WV). See Appendix V.

Source: ^a U.S. Department of Commerce, Bureau of the Census, 1993, 1996d; ^b Strategic Research Concepts, 1998; ^c CAWP, 1998a, 1998b, 1998c and 1998d; ^d Center for Policy Alternatives, 1995, National Association of Women's Commissions, 1997, CAWP, 1998e; ^e Compiled by IWPR, based on the Center for Policy Alternatives, 1995.

Calculated by the Institute for Women's Policy Research.

Table 1.
Voter Registration for Women and Men
in Florida and the United States

	Florida		United States	
	Percent	Number	Percent	Number
1994 Voter Registration^a				
Women	57.7	3,243,000	63.7	63,257,000
Men	55.6	2,759,000	61.2	55,737,000
1992 Voter Registration^a				
Women	64.9	3,561,000	69.8	67,324,000
Men	60.2	2,925,000	66.9	69,254,000
Number of Unregistered Women Eligible to Vote, 1996^b	N/A	1,598,350	N/A	23,775,050
Percent and Number of Eligible Public Assistance Recipients Who Are Registered, 1996^c	21.4	117,095	14.1	1,311,848

* Percent of all women and men aged 18 and older who reported registering, based on data from the 1993 and 1995 November Supplements of the Current Population Survey. These data are self-reports and tend to overstate actual voter registration.

Source: ^a U.S. Department of Commerce, Bureau of the Census, 1993, 1996d; ^b HumanSERVE, 1996.

Compiled by the Institute for Women's Policy Research.

Recognizing this value, many early Western women's movements made suffrage one of their first goals. Ratified in 1920, the Nineteenth Amendment gave American women the right to vote, and in November of that year, about eight million out of 51.8 million women voted for the first time (National Women's Political Caucus, 1995). African American and other minority women, however, were denied the right to vote in Florida and many other parts of the South until the Voting Rights Act of 1964 was passed. Nonetheless, even after women of all races were ensured the right to vote, many candidates (and political researchers) did not take women voters seriously. Instead they assumed women would disregard politics and vote like their fathers or husbands (Carroll and Zerrilli, 1993; Evans, 1989). Neither assumption proved valid. Research shows women do not always vote like men.

Women now register and vote slightly more often than men. By 1994, over 63 million women, or 63.7 percent of those eligible, reported being registered to vote, compared with nearly 56 million or 61.2 percent of eligible men (see Table 1). Florida's voter registration rates are generally lower for both men and women than national ones. In Florida, 57.7 percent of women reported being registered to vote in the November 1994 elections, while 55.6 percent of men did.

Table 2.
Women's and Men's Voter Turnout
in Florida and the United States

	Florida		United States	
	Percent	Number	Percent	Number
1996 Voter Turnout^a				
Women	46.6	2,756,800	49.0	50,062,800
Men	49.6	2,544,800	49.0	46,211,800
1992 Voter Turnout^a				
Women	48.8	2,710,400	57.3	56,391,300
Men	51.7	2,604,100	53.0	48,037,100
Percent of Registered Women Who Did Not Vote in Any of the Presidential Elections in 1984, 1988 and 1992^b	12.4	N/A	12.1	N/A

* Percent of all women and men aged 18 and older estimated to have voted based on certified presidential election returns from the Federal Election Commission, Census projections of the voting age population from the 1993 and 1997 November Supplements of the Current Population Survey, and Voter News Service nationwide exit polls. These data likely tend to understate actual voter turnout.

Source: ^a Strategic Research Concepts, 1998; ^b Women's Vote Project, National Council of Women's Organizations, 1996.

Compiled by the Institute for Women's Policy Research.

Women voters have been an actual majority of U.S. voters since 1964. In 1996, 52 percent of voters were women, while in 1992, 54 percent were. Still, compared with other Western democracies, voter turnout is relatively low for both genders for a variety of reasons (Dalton and Wattenberg, 1993). Florida generally has lower voter turnout than the nation as a whole. In 1992, 48.8 percent of Florida women are estimated to have voted, as are 46.6 percent in 1996 (see Table 2). As a result, Florida ranks 44th among all the states for women's voter turnout in the 1992 and 1996 elections combined. Voter turnout dropped for both sexes in Florida and the nation in 1996. Florida women's turnout fell in 1996, remaining slightly lower than the rate for men in Florida, and somewhat lower than for men and women in the United States as a whole.

Over the years, most states in the United States have developed relatively complicated systems of voter registration. Voting typically requires advanced registration in a few specified locations. This system is one main cause of low voting rates, and two groups typically underserved by it are the poor and persons with disabilities (Wolfinger and Rosenstone, 1980). In addition, voting itself is more difficult for women with disabilities because of problems such as inadequate transportation to the polls. Effective January 1995, however, the National Voter Registration Act (NVRA) required states to allow citizens to register to vote when receiving or renewing a driver's license or applying for Aid for Families with Dependent Children, Food Stamps, Medicaid, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and disability services. By 1996, the NVRA successfully enrolled or updated voting addresses for over eleven million people including 1.3 million through public assistance agencies (HumanSERVE, 1996). Under the new welfare system, applicants for TANF and related programs will continue to have the opportunity to register to vote when seeking welfare benefits. Still, nearly 24 million eligible women remain unregistered in the United States, and almost 1.6 million of them live in Florida. Finally, states need to recognize that without transportation and accessibility to expanded places for both registration and voting, people with disabilities will continue to be unable to exercise their right to vote.

Elected Officials

Although women constitute a minority of elected officials at both the national and state levels, their presence has grown steadily over the years, and as more women hold office, women's issues are also becoming more prominent in legislative agendas (Thomas, 1994). Nine women serve in the 1997-98 U.S. Senate (105th Congress). Women also fill 53 of the 435 seats in the 105th U.S. House of Representatives (not including Eleanor Holmes Norton, the non-voting delegate from the District of Columbia, and Donna Christian-Green, the non-voting delegate from the Virgin Islands). Women from Florida filled five of a possible 23 state seats in the U.S. House, a much higher rate than the national average, but Florida has no female U.S. Senators. Florida has a higher than average percentage of state legislators who are women (23.8 percent compared to 21.6 percent for the United States). Florida is one of twelve states with a woman serving as Secretary of State (see Table 3). Women also constitute 19.2 percent of public appointees in Florida (data not shown; Center for Women in Government, 1997).

Table 3.
Women in Elected Office in Florida and the United States, 1998

	Florida	United States
Number of Women in Statewide Executive Elected Office	1*	82
Number of Women in the U.S. Congress		
U.S. Senate	0 of 2	9 of 100
U.S. House	5 of 23	53 of 435†
Percent of State Legislators Who Are Women	23.8%	21.6%
* Secretary of State.		
† Does not include delegates from the District of Columbia or the Virgin Islands.		
Source: CAWP, 1998a, 1998b, 1998c, 1998d.		
Compiled by the Institute for Women's Policy Research.		

Institutional Resources

Women's institutional resources can play an important role in providing information about women's issues and attracting the attention of policymakers and the public. They can also serve as an access point for women and women's groups to express their interests to public officials. Thus such institutions can ensure that women's issues remain on the political agenda. Florida has a government-appointed commission on the status of women, the Florida Commission on the Status of Women. This Commission decided of its own

accord to avoid reproductive rights issues. In addition, Florida has a women's state agenda project, Florida Women's Consortium, a non-governmental, state-based coalition group addressing a broad range of issues concerning women (see Table 4). Women's agenda projects can help increase the visibility of women's activism (and Florida has a variety of women's organizations and activities) through networking and support.

In the state legislature, women members have organized a caucus in both the Senate and the House. Given Florida's high ranking in women's institutional resources, it is somewhat puzzling that Florida ranks

only average to below average on some other indicators on the status of women. The infrastructure of women's organizations can provide a mechanism to improve the status of Florida women in the future.

Table 4.
Institutional Resources for Women in Florida

	Yes	No
Does Florida Have a . . .		
• Commission on the Status of Women? ^a	✓	
• Women's State Agenda Project? ^b	✓	
• Legislative Caucus in the State Legislature? ^c	✓	
House?		
Senate?	Bicameral	

Source: ^a National Association of Women's Commissions, 1997; ^b Center for Policy Alternatives, 1995; ^c CAWP, 1998e.

Compiled by the Institute for Women's Policy Research.

Employment and Earnings

Earnings are the largest component of income for most families. Thus, earnings and economic well-being are closely linked. The topics addressed in this section include women's earnings; the female/male earnings ratio; women's earnings by educational attainment; labor force participation; unemployment rates; and the industries and occupations in which women work.

Families often must rely on women's earnings to remain out of poverty (Cancian, Danziger and Gottschalk, 1993; Spalter-Roth et al., 1990). Women's employment status and earnings have grown in importance for the overall well-being of women and their families as demographic and economic changes have occurred. Men have experienced decreasing real wages during the 1980s and the early portion of the 1990s. The changes in women's labor force participation patterns have increased the importance of women's employment status and earnings for the status of women and their families.

Women in Florida rank at the midpoint on the composite measure of employment and earnings. Florida does best on the ratio of women's to men's earnings, ranking sixth in the nation, and second in the South Atlantic region. Women in Florida are ranked slightly higher than the U.S. median in the numbers of women in

managerial and professional occupations and just under the U.S. midpoint of women's median annual earnings for full-time, year-round workers aged 16 and older. Florida fares much worse in women's labor force participation, ranking 48th in the nation and eighth in the South Atlantic region (See Chart IV).

Women's Earnings

Women in Florida working full-time have lower median annual earnings than women in the United States (\$23,200 and \$24,900, respectively; see Figure 1. See Appendix I for the methodology used by IWPR to develop the earnings data). Similarly, median annual earnings for men in Florida are also lower than for the nation as a whole (\$30,500 and \$34,400, respectively). The median annual earnings for women in Florida ranked 28th highest in the nation. Alaska's women rank highest at \$31,400. Florida ranked fifth in its region for women's median annual earnings. Between 1989 and 1995 women in Florida saw their median annual earnings increase by 4.9 percent, a rate of growth that, within the South Atlantic region (consisting of Delaware, Georgia, Maryland, North Carolina, South Carolina, Virginia, Washington, DC and West Virginia, in addition to Florida) was behind West

Chart IV.
Employment and Earnings: National and Regional Ranks

Indicators	National Rank* (of 51)	Regional Rank* (of 9)
Composite Employment and Earnings Index	26	5
• Women's Median Annual Earnings (for full-time, year-round workers aged 16 and older, 1995) ^a	28	5
• Ratio of Women's to Men's Earnings (median yearly earnings of full-time, year-round women and men workers aged 16 and older, 1995) ^a	6	2
• Women's Labor Force Participation (percent of all women aged 16 and older in the civilian non-institutional population who are either employed or looking for work, 1995) ^b	48	8
• Women in Managerial and Professional Occupations (percent of all employed women aged 16 and older in managerial or professional specialty occupations, 1995) ^b	21	5

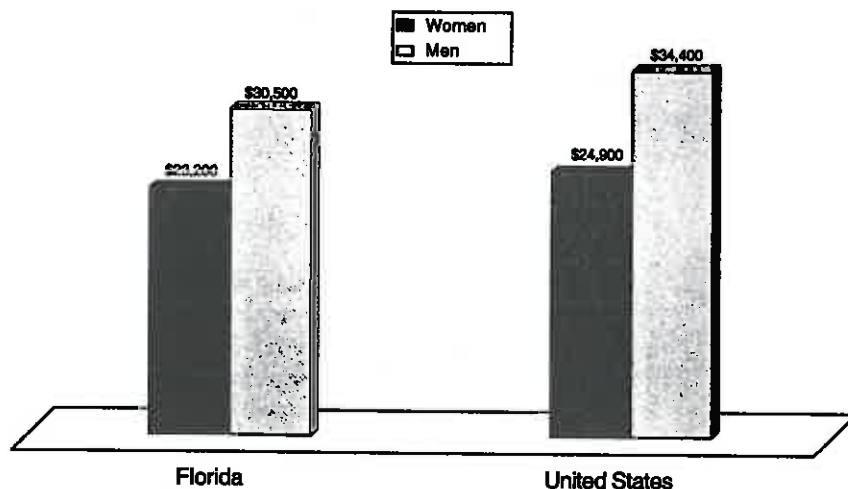
See Appendix I for methodology.

* The national rank is out of a possible 51 including the 50 states and the District of Columbia. The regional rankings are of a maximum of nine and refer to the states in the South Atlantic Region (DC, DE, FL, GA, MD, NC, SC, VA, WV). See Appendix V.

Source: ^a IWPR, 1998b; ^b U.S. Department of Labor, Bureau of Labor Statistics, 1997a.

Calculated by the Institute for Women's Policy Research.

Figure 1.
Median Annual Earnings of Women and Men
Employed Full-Time/Year-Round in Florida
and the United States, 1995 (1997 Dollars)



For women and men aged 16 and older. See Appendix I for methodology.

Source: IWPR, 1998b.

Calculated by the Institute for Women's Policy Research.

Virginia, North Carolina, South Carolina and Washington, DC (data not shown; all growth rates are calculated for earnings that have been adjusted to remove the effects of inflation).

Unfortunately, the data set on which these state-level women's earnings estimates are based does not provide enough cases to reliably estimate earnings separately for women of different races and ethnicities. National data show, however, that in 1996, the median annual earnings of African American women were \$21,470, and of Hispanic women were \$18,670, substantially below that of non-Hispanic white women, who earned \$24,890. The earnings of Asian American women were the highest of all groups at \$25,560 (median earnings of full-time, year-round women workers aged 15 years or older; U.S. Department of Commerce, Bureau of the Census, 1998c). Earnings for Native American women are not available between decennial Census years, but in 1989, earnings for year-round, full-time workers were only 84 percent of white women's earnings (U.S. Department of Commerce, Bureau of the Census, 1990). In addition, in a 1994-95 national survey by the Census Bureau, data show that the median monthly income of women with disabilities is \$1,400 compared with \$1,750 for women with no disability (data for female full time workers 21 to 64 years of age; U.S. Department of Commerce, Bureau of the Census, 1995a).

The Wage Gap

The Wage Gap and Women's Relative Earnings

According to IWPR's calculations based upon three years of pooled data, the ratio of the median earnings of women to those of men in the United States for full-time, year-round workers in 1995 was 72.3 percent. In other words, women were earning about 72 cents for every dollar earned by their male counterparts. At the same time, women in Florida were earning about 75.9 percent of what men in Florida were earning. Therefore, compared with the earnings ratio for the nation as whole, Florida women enjoy greater earnings equality with men (see Figure 2). Florida

ranks sixth in the nation, in terms of the earnings ratio between women and men for full-time, year-round workers. The District of Columbia has the highest earnings ratio at 87.5 percent. Compared with the other states in the South Atlantic region, Florida ranks second. Delaware ranks third (75.8 percent wage ratio) and West Virginia ranks ninth (64.8 percent wage ratio). Yet the wage gap remains large in Florida and elsewhere in the nation.

Narrowing the Wage Gap

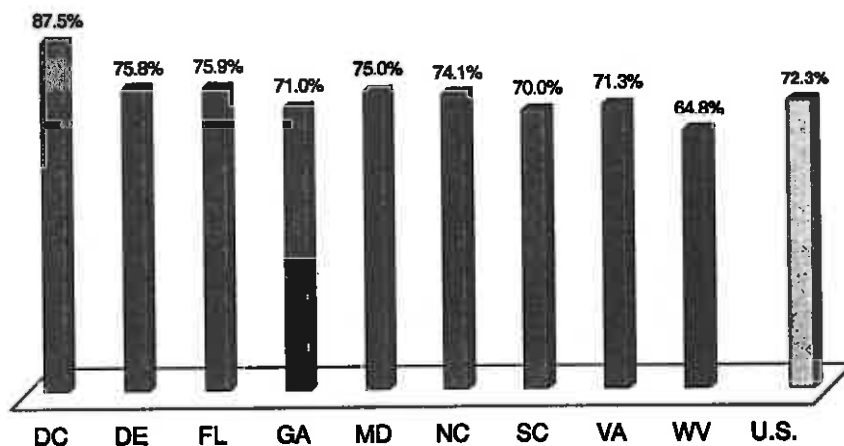
Throughout the 1960s and 1970s, the ratio of women's earnings to men's in the United States remained fairly constant at around 60 percent. During the 1980s, however, women made progress in narrowing the gap between men's earnings and their own. Women increased their educational attainment and their time in the labor market and entered better paying occupations in large numbers, partly because of equal opportunity laws. But at the same time, adverse economic trends such as declining wages in the low-wage sector of the labor market began to make it more difficult to close the gap, since women still tend to be concentrated at the low end of the earnings distribution. Had women not increased their relative skill levels and work experience as much as they did during the 1980s, those adverse trends might have led to a widening

of the gap rather than the significant narrowing that did occur (Blau and Kahn, 1994).

One factor that most likely also helped to narrow the earnings gap between women and men is unionization. Women have increased their share of union membership. Being unionized tends to raise women's wages relatively more than men's, the wages of women of color relatively more than the wages of non-Hispanic white women, and the wages of low earners relatively more than the wages of high earners (Spalter-Roth et al., 1993a). In Florida, unionization is limited by a right-to-work clause in the state constitution, which allows workers to opt out of union membership while still receiving the benefits of the union's collective bargaining and other forms of representation.

Unfortunately, part of the narrowing in the wage gap was due to a fall in men's real wages. According to research done by the Institute for Women's Policy Research, only about one-third (36 percent) of the narrowing of the national female/male earnings gap between 1979 and 1997 is due to women's rising real wages, while about two-thirds (64 percent) is due to men's falling real wages. More disturbing is the slowdown in real wage growth for women during the later portion of this period. From 1989 to 1997 almost all of the

Figure 2.
Ratio of Women's to Men's Full-Time/Year-Round Median Annual Earnings in States in the South Atlantic Region and the United States, 1995

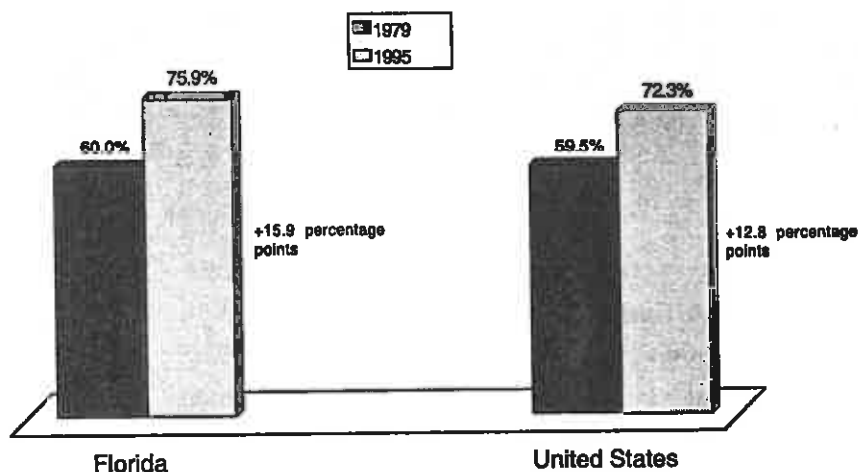


For women and men aged 16 and older. See Appendix I for methodology.

Source: IWPR, 1998b.

Calculated by the Institute for Women's Policy Research.

Figure 3.
Change in the Wage Ratio Between 1979 and 1995 in Florida and the United States



For women and men aged 16 and older. See Appendix I for methodology.

Source: IWPR, 1995a, 1998b.

Calculated by the Institute for Women's Policy Research.

narrowing of the gap was due to the fall in men's real wages (in constant dollar terms, adjusting for inflation; Institute for Women's Policy Research, 1998a).

Florida outpaced the United States as a whole in increasing women's annual earnings relative to men's between 1979 and 1995 (see Figure 3). In Florida, the annual earnings ratio increased by nearly 16 percentage points, compared with an increase of nearly 13 percentage points in the United States.

The Bureau of Labor Statistics also releases weekly earnings information. Unlike annual earnings data, the weekly data do not include earnings from self-employed workers, approximately 5 percent of the labor force. Thus, the annual earnings statistics are used for the employment and earnings composite indicators, because they are more complete. In 1997, women in Florida earned 82.7 percent of men's weekly earnings. This ratio means that Florida ranks quite high (third) in the nation in this ratio of female-male median earnings, a bit higher than its annual earnings ranking. According to the weekly data series (Council of Economic Advisors, 1998), the District of Columbia ranked first in the ratio of women's to men's weekly earnings at 97.1 percent.

Earnings and Earnings Ratios by Educational Levels

Between 1979 and 1995, women at nearly all educational levels in Florida saw their median weekly earnings as well as their earnings relative to men increase. All but those with the lowest educational attainment experienced increases in their median annual earnings. In general, women with higher levels of education saw their annual earnings increase at greater rates than women with less educational attainment. As Table 5 shows, increases

ranged from about 8.0 percent (in constant dollars) for high school graduates, to 17.9 percent for those with post-college education, while women who had not completed high school experienced an earnings decrease of 11.0 percent. Women's relative earnings (as measured by the female/male earnings ratio) increased for all groups. However, the most educated women (with more than a college education) saw the smallest increase in the wage ratio—just half of one percent. What is striking about the data in Table 5, however, is that those women with less than a high school diploma—despite enormous earnings losses—saw an increase of 14 percentage points in the earnings ratio.

The low and falling earnings of women with less education make it especially important that all women have the opportunity to increase their education. For example, many welfare recipients lack a high school diploma or education beyond high school, yet in many cases they are being encouraged or required to leave the welfare rolls in favor of employment. These single mothers may be consigned to a lifetime of low earnings if they are not allowed the opportunity to complete high school and acquire a few years of education beyond high school (Institute for Women's Policy Research, 1997). As Table 5 shows, women with some college and those who have completed college or have postgraduate training have much higher earnings than those without and their earnings have generally grown.

Labor Force Participation

One of the most notable changes in the U.S. economy over the past decades has been the rapid rise in women's participation in the labor force. Between 1965 and 1995, women's labor force participation (the proportion of the civilian noninstitutional population aged 16 and older who are employed or looking for work) increased from 39 to 59 percent (U.S. Department of Labor, Bureau of Labor Statistics, 1997a). Women now make up nearly half (46 percent) the U.S. labor force (full-time and part-time combined). According to projections by the Bureau of Labor Statistics, women's share of the labor force will continue to increase from 46 percent of the workforce in 1995 to 48

Table 5.
Women's Earnings and the Earnings Ratio in Florida
by Educational Attainment, 1979 and 1995 (1997 Dollars)

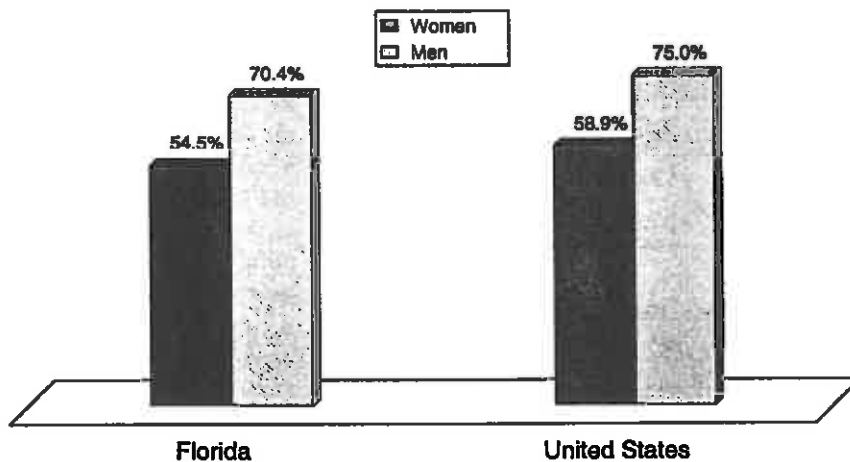
Educational Attainment	Women's Median Annual Earnings, 1995 ^a	Percent Growth in Real Earnings, 1979 ^b and 1995 ^a	Female/ Male Earnings Ratio, 1995 ^a	Percent Change in Earnings Ratio, 1979 ^b and 1995 ^a
Less than 12th Grade	\$14,112	-11.0	71.6%	+14.0
High School Only	\$20,577	+8.0	76.0%	+19.3
Some College	\$24,222	+8.7	76.7%	+13.3
College	\$31,071	+14.6	72.6%	+14.9
College Plus	\$39,057	+17.9	66.2%	+5

For women and men working full-time year-round.

Source: ^a IWPR, 1998b; ^b IWPR, 1995a.

Calculated by the Institute for Women's Policy Research.

Figure 4.
Percent of Women and Men in the Labor Force
in Florida and the United States, 1995



For women and men in the civilian non-institutional population, aged 16 and older.
Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a, Table 12.
Compiled by the Institute for Women's Policy Research.

percent in 2005 (U.S. Department of Labor, Bureau of Labor Statistics, 1995a).

In 1995, 54.5 percent of women in Florida were in the labor force, compared with 58.9 percent of women in the United States. Men's labor force participation rate in Florida was also lower than the rate for men in the United States as a whole (see Figure 4).

Unemployment and Personal Income Per Capita

In Florida, about the same percentage of workers as compared with the nation are unemployed. In 1995, the unemployment rate for women in Florida was 5.6 percent, the same as the nation's 5.6 percent female unemployment rate (see Figure 5). Florida's unemployment rate for men is just slightly lower than the national average.

Low unemployment and high growth in personal income per capita are two

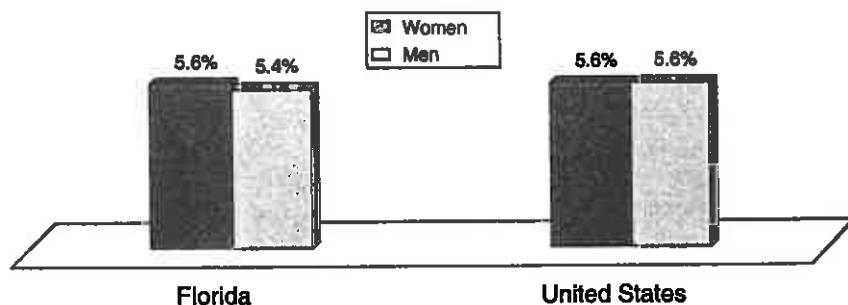
indicators of a strong economy. While Florida experienced generally lower than average unemployment rates during the 1980s and early 1990's (data not shown), personal income per capita in Florida grew at almost the same rate as it did for the nation from 1980 to 1996 (21.8 percent versus 21.2 percent; see Table 6). Personal income per capita did grow at a slightly higher rate from 1980 to 1990, but at a slightly lower rate from 1990 to 1996.

Part-Time and Full-Time Work

The percentage of women in the labor force in Florida who are "involuntary" part-time employees—that is, they would prefer full-time work were it available—is slightly

less than in the United States as a whole (2.8 percent and 3.0 percent, respectively; see Table 7).¹ This is not surprising since involuntary part-time work has been shown to be correlated with unemployment rates (Blank, 1990). Florida also has a smaller proportion of its female labor force working part-time voluntarily, and because Florida has a smaller percentage of its female labor force working part-time, a larger percentage

Figure 5.
Unemployment Rates for Women and Men
in Florida and the United States, 1995



For women and men in the civilian non-institutional population, aged 16 and older.
Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a.
Compiled by the Institute for Women's Policy Research.

Table 6.
Personal Income Per Capita for Both Men and Women
in Florida and the United States, 1996

	Florida	United States
Personal Income Per Capita, 1996	\$24,657	\$24,787
Personal Income Per Capita, Percent Change*		
Between 1990 and 1996	+4.8	+5.2
Between 1980 and 1990	+17.9	+16.9
Between 1980 and 1996	+21.8	+21.2

* In constant dollars.

Source: U.S. Department of Commerce, Bureau of the Census, 1997e, Table 706.

Calculated by the Institute for Women's Policy Research.

of the female labor force in Florida is employed full-time compared with the national average (72.2 percent and 68.5 percent, respectively).

Labor Force Status of Women by Race/Ethnicity

In 1995, women in Florida had a lower average labor force participation rate than women in the United States as a whole. According to U.S. Census Bureau data for 1995, over five of ten women in Florida, aged 16 and over, were in the labor force regardless of race. White women's labor force participation rate is substantially lower in Florida than nationwide (53.1 percent compared with 59.0 percent, see Table 8). African American women historically have had a higher labor force participation rate than white and Hispanic women, and this was true in 1995 for the United States as a whole (see Table 8). However, in Florida, the difference between African American women and white women was much larger than in the United States generally; African American women's average labor force participation rates were nearly 10 percentage

points higher than white women's in Florida, compared with only 0.5 of a percentage point nationwide. Although Hispanic women traditionally have the lowest average participation rate among women, and this is true for the United States as a whole, Hispanic women in Florida have slightly higher labor force participation rates than white women in Florida. African American women's labor force participation rates are nearly 9 percentage points higher than the rate for Hispanic women. Data for Asian American women were not available for 1995; however, in 1990, Asian American women had the highest participation rate, 60.2 percent, of women in the United States. The national labor force participation rate for Native American women was 55.4 percent in 1990 (Population Reference Bureau, 1993).

Table 7.
Full-Time, Part-Time and Unemployment Rates for Women
and Men in Florida and the United States, 1995

	Florida		United States	
	Female Labor Force	Male Labor Force	Female Labor Force	Male Labor Force
Total Number in the Labor Force	3,160,000	3,670,000	60,944,000	71,360,000
Percent Employed Full-Time	72.2	84.0	68.5	84.0
Percent Employed Part-Time*	22.2	10.6	25.9	10.4
Percent Voluntary Part-Time	17.8	8.1	21.0	7.9
Percent Involuntary Part-Time	2.8	2.0	3.0	2.0
Percent Unemployed	5.6	5.4	5.6	5.6

For men and women aged 16 and older.

* Percent part-time includes workers normally employed part-time who were temporarily absent from work the week of the survey. Those who were absent that week are not included in the numbers for voluntary and involuntary part-time. Thus, these two categories do not add to the total percent working part-time.

Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997, Tables 12 and 13.

Calculated by the Institute for Women's Policy Research.

Labor Force Participation of Women by Age

Labor force participation varies across the life cycle, with the highest participation occurring between the ages of 25 and 44, which are also generally considered the prime earning years. Table 9 shows the changing relationship between labor force participation and age. In the United States, the highest labor force participation exists in women between the ages of 35 and 44, with just over 77 percent of these women working. In Florida, the highest level of labor force participation occurs between the ages of 25 and 34 with 76.4 percent in the labor force. Young women in their teens (16-19) are

much less likely to participate in the labor market than any other age group except the pre-retirement and retired cohorts. In Florida only 49 percent of teenage women reported themselves as being in the labor force. This rate is less than the reported 52.2 percent of female teens in the

United States. As women near retirement age, they are much less likely to work than younger women. This is reflected in the participation rates of women aged 55 to 64, where in Florida only 46.7 and in the United States as a whole 48.2 percent of these women reported themselves

as in the labor force. The fact that Florida has a higher than average number of elderly people in its population also has an effect on the overall labor participation rate for the state.

Labor Force Participation of Women with Children

Mothers represent the fastest growing group in the U.S. labor market (Brown, 1994). In 1995, 55 percent of women with children under age one were in the labor force compared with 31 percent in 1976 (U.S. Department of Commerce, Bureau of the Census, 1997f).

Table 8.
Labor Force Participation of Women in Florida and the United States by Race/Ethnicity, 1995

Race/Ethnicity	Florida		United States	
	Number of Women in Labor Force	Percent in Labor Force	Number of Women in Labor Force	Percent in Labor Force
All Races	3,160,000	54.5	60,944,000	58.9
White*	2,559,000	53.1	50,804,000	59.0
African American*	522,000	62.8	7,634,000	59.5
Hispanic†	444,000	54.0	4,891,000	52.6
Asian American/ Other**	N/A	N/A	N/A	N/A

For women aged 16 and older.

* Non-Hispanic.

† Hispanics may be of any race.

** Data are unavailable for 1995; however, in 1990, Asian American women had the highest participation rate (60.2 percent) of women in the United States (Population Reference Bureau, 1993).

Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997, Table 12.

Compiled by the Institute for Women's Policy Research.

Table 9.
Labor Force Participation of Women in Florida and the United States by Age, 1995

Age Groups	Florida		United States	
	Number of Women in Labor Force	Percent in Labor Force	Number of Women in Labor Force	Percent in Labor Force
All Ages	3,160,000	54.5	60,944,000	58.9
Ages 16-19	169,000	49.0	3,729,000	52.2
Ages 20-24	325,000	72.6	6,349,000	70.3
Ages 25-34	797,000	76.4	15,528,000	74.9
Ages 35-44	853,000	76.0	16,562,000	77.2
Ages 45-54	623,000	73.3	11,801,000	74.4
Ages 55-64	296,000	46.7	5,356,000	48.2
Over 65	97,000	7.2	1,618,000	8.8

For women aged 16 and older.

Source: IWPR, 1998b

Calculated by the Institute for Women's Policy Research.

In general, the labor force participation rate for women with children in the United States tends to be higher than the rate for all women. This is partially explained by the fact that the overall labor force participation rate is for women over age 16; thus, both teenagers and retirement age women are included. Mothers, on the other hand, tend to be in the age groups with higher labor force participation. This is true in Florida as well with 65.7 percent of women with children under age 18 in the labor force compared with 54.5 percent of all women in Florida. Yet in Florida, women with children are somewhat less likely to engage in labor market activity than are mothers in the United States as a whole (see Table 10), perhaps because of greater difficulties of finding suitable child care.

The high and growing rates of labor force participation of women with children suggest that the demand for child care is also growing. Many women report a variety of problems finding suitable child care (affordable, good quality and conveniently located) and women use a wide variety of types of child care. These include doing shift work to allow both parents to provide the care; having the child accompany the parent to work or working at home; using another family member (usually a sibling or grandparent) to provide care; using a babysitter in one's own home or in the babysitter's home; using a group child care center; or leaving the child unattended (U.S. Department of Commerce, Bureau of the Census, 1996e). As full-time work among women has grown, so has the use of formal child care centers. Child care costs are a significant barrier to employment for many women and child care expenditures use up a large percentage of earnings, especially for lower-income mothers. For example, among single mothers with family incomes within 200 percent of the poverty level, child care costs for those who paid for child care amounted to 19 percent of the mother's earnings on average; among married mothers at the same income level, child care costs amounted to 30 percent of the mother's earnings on average (Institute for Women's Policy Research, 1996). Thus as more and more low income women are encouraged or required (through welfare reform) to enter the labor market, the growing need for affordable child care must be addressed. Child care subsidies for low income mothers are essential to enable them to purchase good quality child care without sacrificing their families' economic well-being.

Table 10.
Labor Force Participation of Women with Children
in Florida and the United States, 1995

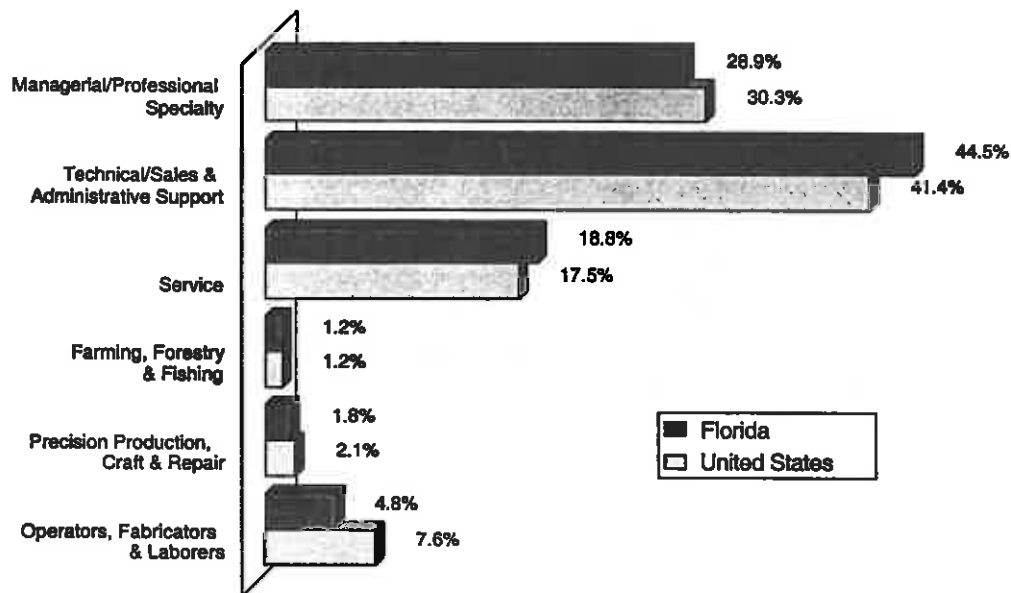
	Florida	United States
	Percent in Labor Force	Percent in Labor Force
Women with Children		
Under Age 18*	65.7	67.3
Under Age 6*	63.2	61.5
<i>For women aged 16 and older.</i>		
<i>* Children under age 6 are also included in children under 18.</i>		
<i>Source: IWPR, 1998b.</i>		
<i>Calculated by the Institute for Women's Policy Research.</i>		

Occupation and Industry

The distribution of women in Florida across occupations generally mirrors the distribution found in the United States. In both cases, technical, sales and administrative support occupations provides over 40 percent of all jobs held by women (see Figure 6a). Women workers in Florida are more likely to be in technical, sales and administrative support occupations than the United States as a whole (44.5 percent and 41.4 percent, respectively; see Figure 6a). Women in Florida are also slightly more likely to work in service occupations (18.8 percent versus 17.5 percent). On the other hand, women in Florida are less likely to work in managerial and professional specialty occupations than are women in the United States (28.9 percent versus 30.3 percent) and are also less likely to work as operatives, fabricators and laborers (4.8 percent versus 7.6 percent). Florida ranks 21st of the 50 states and the District of Columbia for the proportion of its female labor force employed in professional and managerial occupations, and ranks fifth of nine states in the South Atlantic region.

In spite of their average representation in professional and managerial occupations (compared with the United States as a whole), women in Florida still earn substantially less than men in these occupations. For example, in 1995, for the United States as a whole, Bureau of Labor Statistics data show that weekly earnings for women managers were only 68.4 percent of the earnings of men managers, well below the average female/male earnings ratio for all occupations. An IWPR (1995b) study also shows that women managers are unlikely to be among the top earners in management positions. Only one percent of women managers had earnings that placed them in the top ten percent of all managers by earnings (had women had equal access to top earning jobs, 10 percent of them would have earned in the top ten percent); only six

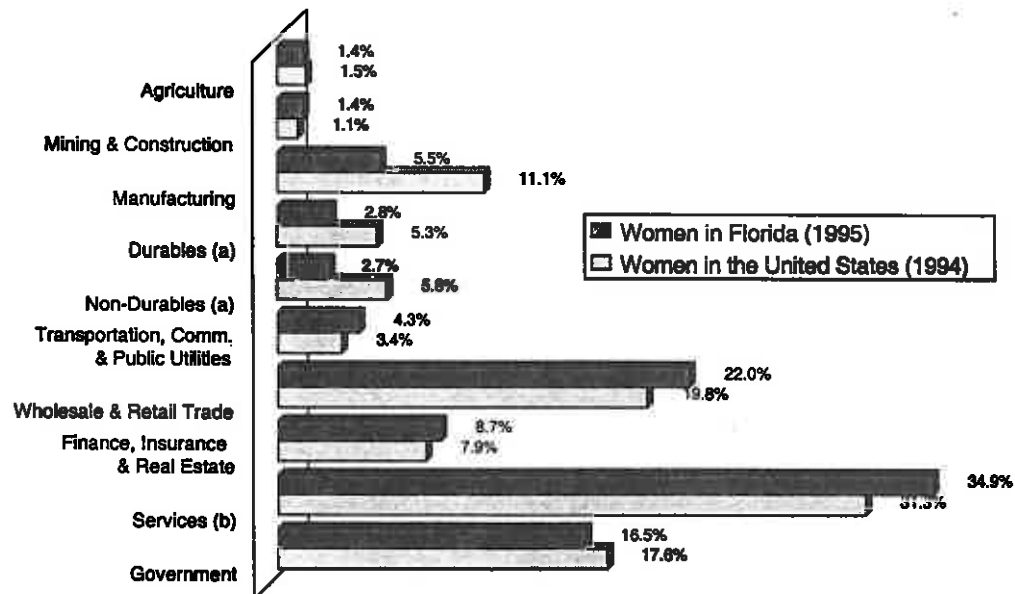
Figure 6a.
Distribution of Women Across Occupations
in Florida and the United States, 1995



For employed women aged 16 and older.

Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a, Table 15.

Figure 6b.
Distribution of Women Across Industries
in Florida and the United States



For employed women aged 16 and older.

Percentages do not add up to 100 percent because self-employed and unpaid family workers are excluded.

(a) Durables and non-durables are included in manufacturing.

(b) Private household workers are included in services.

Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a, Table 17; 1995b, Table 17.

percent had earnings that placed them in the top fifth. A Catalyst (1996) study shows that only 1.9 percent (just 47) of the 2,500 highest-earning, high-level executives in the Fortune 500 companies were women.

The distribution of women in Florida across industries is less similar to that of the United States as a whole than is the occupational distribution (see Figure 6b). In Florida, 34.9 percent of all women are employed in the services industries (including business, professional and personnel services), higher than the 31.3 percent of all working women. About 20 percent of employed women in the United States work in the wholesale and retail trade industries, while 22 percent of the women in Florida work in these industries. Almost 18 percent of the nation's women work in government, while 16.5 percent of the women in Florida work in government. Florida women

are much less likely to work in the manufacturing (durables) industries, and slightly more likely to work in the finance, insurance and real estate industry than are women in the United States.

1 Workers are considered involuntary part-time workers if they responded when interviewed that their reason for working part-time (fewer than 35 hours per week) was slack work (usually reduced hours at one's normally full-time job), unfavorable business conditions, reduced seasonal demand, or inability to find full-time work. Reasons for part-time work such as lack of child care are not considered involuntary by the Bureau of Labor Statistics, since workers must indicate they are available for full-time work to be considered involuntarily employed part-time. This definition therefore likely understates the extent to which women would prefer to work full-time.

Economic Autonomy

This section on economic autonomy highlights the issues that allow women to act independently, exercise choice and control their lives. It excludes labor force participation and earnings since these are measured in the previous section and clearly merit separate analysis.

Health insurance coverage, educational attainment, women's business ownership and self-employment and women living in poverty were selected to measure economic autonomy. The possession of health insurance plays a role in determining the overall quality of health care for women in the state and governs the extent of choice women have in selecting health care services. Educational attainment relates to economic autonomy in many ways: through labor force participation, hours of work, earnings, child-bearing decisions and career advancement. Women who own their own businesses or are self-employed control many aspects of their working lives. Women in poverty unfortunately have limited choices; if they receive public income support, they must answer to their caseworkers; they do not have the economic means to travel freely; and they often do not have the skills and tools necessary to improve their economic situation.

Although Florida ranks in the top 20 of the states in business ownership, its low ranking in health insurance, educational attainment and poverty among women brings down the composite economic autonomy index to 38th among the states (see Chart V).

Access to Health Insurance

Women in Florida are much more likely than women in the nation as a whole *not* to have health insurance. In Florida, 17.3 percent of women, compared with 13.8 percent of women in the United States, are uninsured (see Table 11). Among all the states, Florida ranks in the last quintile, at 45. On average, women and men in Florida rely less on employer-based health insurance than do women and men in the United States as a whole (59.2 percent and 66.0 percent, respectively, for women; 59.1 percent and 66.2 percent, respectively, for men). Instead, women and men in Florida rely more on other sources of health insurance coverage.

Education

In the United States, women have made steady progress in achieving higher levels of education. Between 1980 and 1997, the percentage of women in the United States with a high school education or more increased substantially to actually equal the proportion of men who completed four years of high school or more (82.2 percent of women compared with 82.0 percent of men in 1997). During the same period, the percentage of women with four or more years of college increased by 8.1 percentage points, from 13.6 percent to 21.7 percent, compared with 26.2 percent of men, bringing women closer to closing the

Chart V.
Economic Autonomy: National and Regional Ranks

Indicators	National Rank* (of 51)	Regional Rank* (of 9)
Composite Economic Autonomy Index	38	7
• Percent with Health Insurance (among nonelderly women, 1994-95) ^a	45	9
• Educational Attainment (percent of women aged 25 and older with four or more years of college, 1990) ^b	36	7
• Women's Business Ownership (percent of all firms owned by women, 1992) ^c	16	5
• Percent of Women Above Poverty (percent of women living above the poverty threshold, 1995) ^d	35	6

See Appendix I for methodology.

* The national rank is of a possible 51 including the 50 states and the District of Columbia. The regional rankings are of a maximum of nine and refer to the states in the South Atlantic Region (DC, DE, FL, GA, MD, NC, SC, VA, WV). See Appendix V.

Source: ^a Liska et al., 1998; ^b Population Reference Bureau, 1993; ^c U.S. Department of Commerce, Bureau of the Census, 1998a; ^d IWPR, 1998b.

Calculated by the Institute for Women's Policy Research

Table 11.
Percent of Women and Men without Health Insurance
and with Different Sources of Health Insurance
in Florida and the United States, 1994-95

	Florida		United States	
	Women	Men	Women	Men
Number	5,999,000	5,745,000	114,857,000	113,867,000
Percent Uninsured	17.3	21.3	13.8	17.2
Percent with Employer-Based Health Insurance	59.2	59.1	66.0	66.2
Percent with Other Coverage	23.6	19.6	20.2	16.6

Women and men below age 65 (including those under 18).
Source: Liska et al., 1998.
Compiled by the Institute for Women's Policy Research.

tend to have less college experience than women nationwide. In the attainment of a bachelor's degree or higher, Florida women lag behind both Florida men (18.6 percent of the women compared with 25.1 percent of men) and women nationally (21.7 percent; see Figure 7). However, much of this difference is probably due to the higher proportion of elderly and historically underserved minority women in Florida who have lower levels of educational attainment.

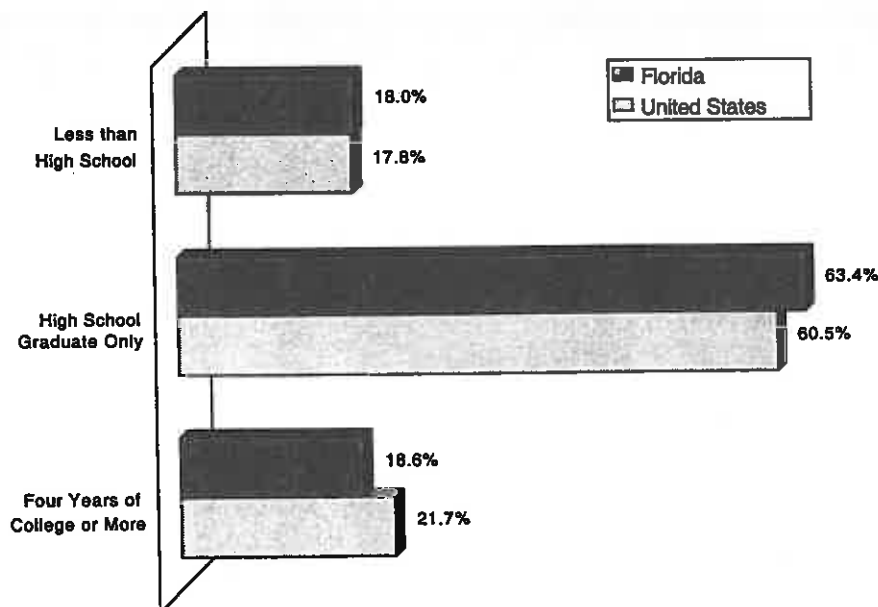
gap in educational attainment (U.S. Department of Commerce, Bureau of the Census, 1998a, 1998d).

In Florida, the proportion of women over 25 without high school diplomas is about equal to that of women in the United States as a whole (18.0 percent and 17.8 percent, respectively).¹ Women in Florida

Women Business Owners and Self-Employment

Between 1987 and 1992, the number of women-owned businesses grew 59 percent in Florida, nearly 16 percentage points more than the growth of women-owned

Figure 7.
Educational Attainment of Women Aged 25 and Older
in Florida and the United States, 1997



Source: U.S. Department of Commerce, U.S. Bureau of the Census, 1998a.
Compiled by the Institute for Women's Policy Research.

businesses in the United States (for purposes of comparability over time, these data exclude type C corporations; for a definition of type C corporations, see Appendix I). By 1992, women owned 352,048 firms in Florida (see Table 12). In Florida, 50.3 percent of women-owned firms were in the service industries and the next highest proportion (16.6 percent) was in retail trade (see Figure 8). The business receipts of women-owned businesses in Florida rose by 90 percent (in constant dollars) between 1987 and 1992. This is comparable to an increase of 87 percent in business receipts for women-owned firms nationally during this time period, also adjusted for inflation (see Table 12.)

In 1992, the U.S. Department of Commerce announced that women owned over 6.4 million firms in the United States, employing over 13 million persons and

generating \$1.6 trillion in business revenues (unlike the data shown in Table 12, these numbers include all women-owned businesses, including type C corporations; U.S. Department of Commerce, Bureau of the Census, 1996a). Projecting growth rates from 1987 to 1992 forward and including type C corporations, the National Foundation for Women Business Owners (NFWBO) estimates the 1996 number of firms for Florida to be 497,000, compared to

Table 12.
Women-Owned Firms in Florida and the United States, 1992

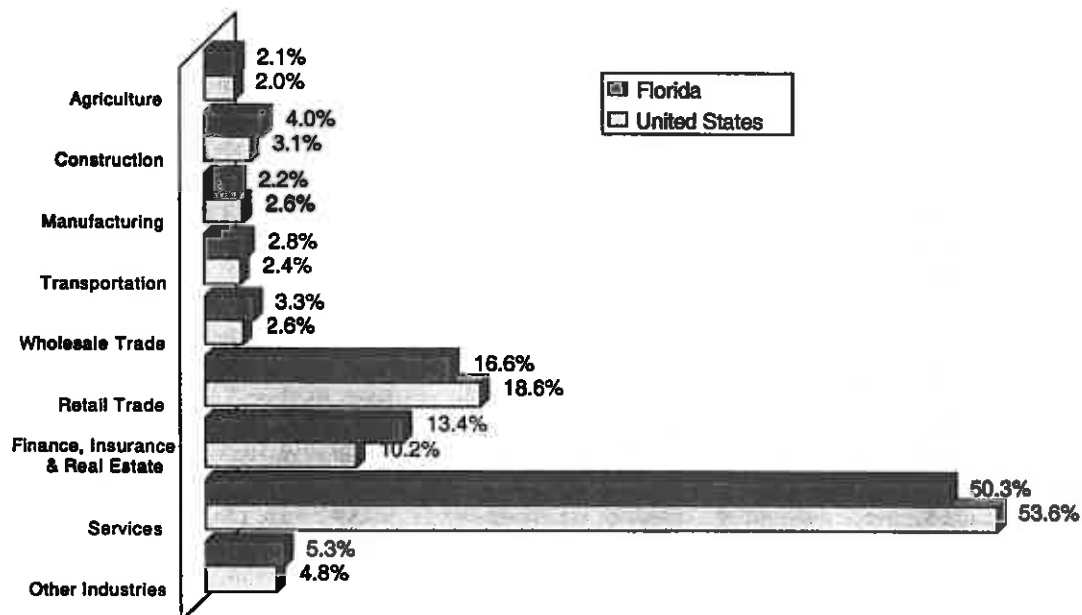
	Florida	United States
Number of Women-Owned Firms*	352,048	5,888,883
Percent of All Firms that are Women-Owned	35.2%	34.1%
Percent Increase, 1987-1992	59.0%	43.1%
Total Sales & Receipts (in billions, 1992 dollars)	\$39.5	\$642.5
Percent Increase (in constant dollars), 1987-1992	90.0%	87.0%
Number Employed by Women-Owned Firms	426,608	6,252,029

* For reasons of comparability between 1987 and 1992, these statistics do not include data on type C corporations; see Appendix I.

Source: U.S. Department of Commerce, Bureau of the Census, 1996a.

Compiled by the Institute for Women's Policy Research.

Figure 8.
Distribution of Women-Owned Firms Across Industries
in Florida and the United States, 1992



Source: U.S. Department of Commerce, Bureau of the Census, 1996a.

Compiled by the Institute for Women's Policy Research.

the nearly eight million women-owned firms in the United States (NFWBO, 1996).

Like women's business ownership, self-employment for women (one kind of business ownership) has also been rising over recent decades. The self-employed is a larger category than business women and includes many individuals who do not consider themselves as operating their own businesses, such as independent contractors in construction or business services who have, in essence, only one customer. In 1975, women represented one in every four self-employed workers in the United States, and in 1990, they were one in three. The decision to become self-employed is influenced by many factors. According to recent research, self-employed women tend to be older and married, have no young children and have higher levels of education than the average. They are also more likely not to be covered by another's health insurance (Spalter-Roth et al., 1993b). Self-employed women are also more likely to work flexible hours, with 42 percent of married self-employed women and 34 percent of non-married self-employed women working part-time (Devine, 1994).

Unfortunately, most self-employment is not especially well-paying for women and about half of self-employed women combine self-employment with another job, either a wage and salary job or a second type of self employment (for example, babysitting and catering). In 1986-87 in the United States as a whole, women who worked full-time, year-round at only one type of self-employment had the

lowest median hourly earnings of all full-time, year-round workers (\$3.75); those with two or more types of self-employment with full-time schedules earned somewhat more (\$4.41 per hour). In contrast, those who held only one full-time, year-round wage or salaried job earned the most (\$8.08 per hour at the median). Those who combined wage and salaried work with self-employment had median earnings that ranged between these extremes (Spalter-Roth et al., 1993b). Many low-income women package earnings from many sources in an effort to raise their family incomes (Spalter-Roth and Hartmann, 1993). Some self-employed workers are independent contractors; independent contracting is often viewed as a form of contingent work—temporary or on-call work that does not provide job security, fringe benefits or opportunity for advancement. Even when they work primarily for one client, independent contractors may be denied the fringe benefits (such as health insurance and employer-paid pension contributions) that wage and salaried workers employed by that same client firm receive. Indeed, the average self-employed woman who works full-time, year-round at just one type of self-employment has health insurance an average of only 1.7 months out of 12, while full-time wage and salaried women average 9.6 months (those who lack health insurance entirely are assigned a value of 0 and are included in the averages; Spalter-Roth et al., 1993b).

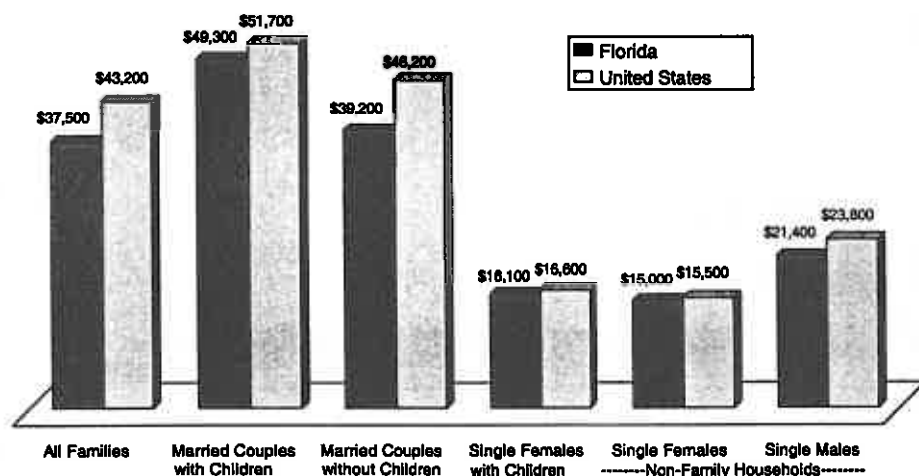
Fortunately, recent research found that the rising earnings potential of women in self-employment compared with the wage and salary sector explains most of the upward trend in the self-employment of married women between 1970 and 1990.

This suggests that the growing move of women into self-employment does represent an expansion in their opportunities (Lombard, 1996). However, women in Florida are slightly less likely to be self-employed than women in the United States generally. In 1994, 5.4 percent of employed women in Florida were self-employed, compared with 6.1 percent of women in the United States as a whole (data not shown).

Women's Economic Security and Poverty

As women's responsibility for their families' economic well-being grows,

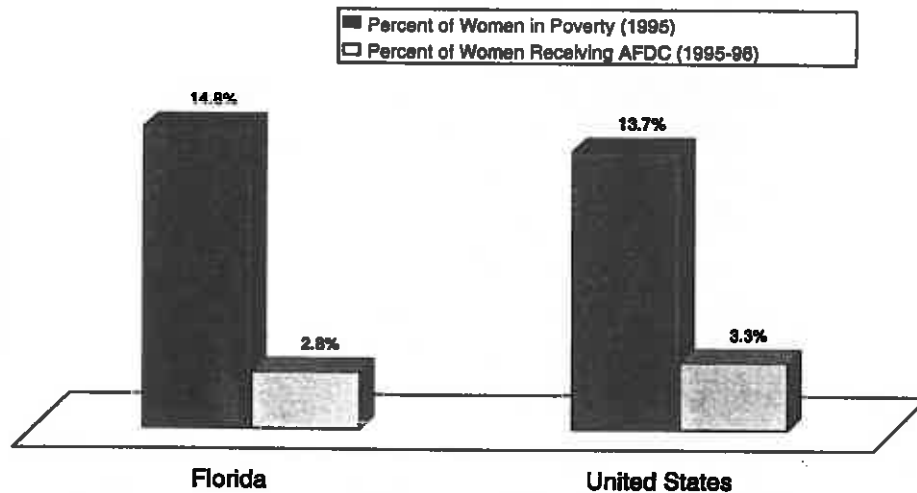
Figure 9.
Median Annual Income for Selected Family Types
and Single Women and Men
in Florida and the United States, 1995



Source: IWPR, 1998b.

Calculated by the Institute for Women's Policy Research.

Figure 10.
Percent of Women in Poverty and Percent Receiving AFDC
Aged 18 and Older in Florida and the United States



Source: ^a IWPR 1998b; ^b U.S. Department of Health and Human Services, 1997, U.S. Department of Commerce, Bureau of the Census, 1997b.

Calculated by the Institute for Women's Policy Research.

proportion of adult women receiving AFDC (the form of welfare in place in 1996) for Florida and the nation, as a measure of how effective the state and national safety nets for poor women are. Obviously, the poverty of many women is not alleviated by welfare alone; many also receive food stamps or other forms of noncash benefits, but research shows that even counting the value of these noncash benefits many women remain poor (U.S. Department of Commerce, Bureau of the Census, 1997d).

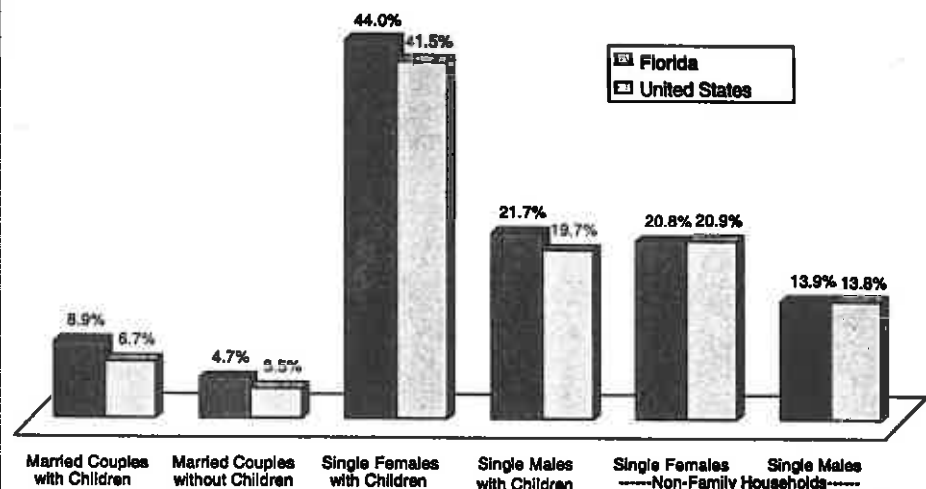
The proportion of women receiving AFDC in Florida is slightly smaller than the proportion of women receiving AFDC nationwide (see

the continuing wage gap and women's prevalence in low-paid female-dominated occupations may impede women's ability to ensure their families' financial security, particularly for single mothers. In the United States, the median family income for single-mother families was \$16,600, while that for married couples with children was \$51,700 (see Figure 9). Figure nine also shows that family incomes were lower, on average, for all family types in Florida than in the United States as a whole, including female-headed families.

During the years 1994 and 1996, the proportion of women in poverty in Florida was somewhat higher than that of women in the United States as a whole, 14.8 percent and 13.7 percent, respectively (IWPR calculations). Thus, Florida ranked 35th in the nation for women above poverty and sixth in the South Atlantic region. Figure 10 also shows the

Figure 10). In line with the higher overall rate of female poverty, the poverty rate for single mothers is 44.0 percent in Florida, higher than the nationwide rate of 41.5 percent, and much higher than for any other family type (see Figure 11).

Figure 11.
Poverty Rates for Selected Family Types and Single Men
and Women in Florida and the United States, 1995



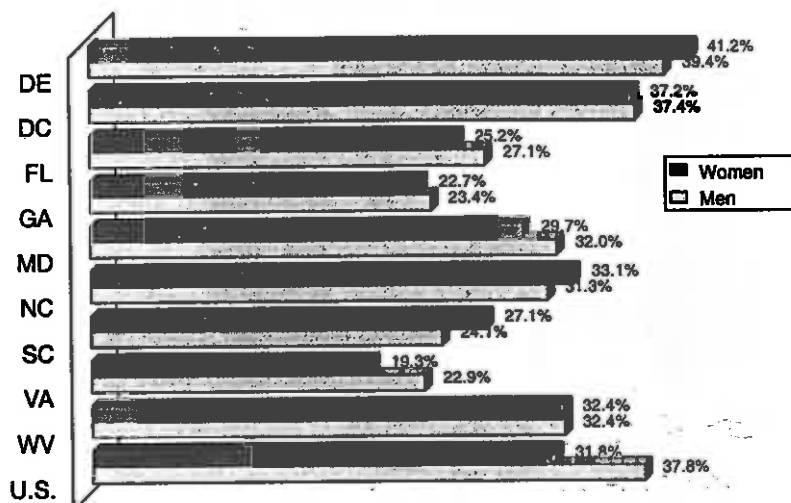
Source: IWPR, 1998b.

Calculated by the Institute for Women's Policy Research.

It is likely that even these high rates of poverty among single mother families understate the degree of hardship among these families, especially among families with working mothers. While counting noncash benefits would reduce their poverty rates, adding the cost of child care for working mothers (which was not included in family expenditures when the federal poverty thresholds were developed) would increase the calculated poverty rates, both in Florida and the nation (Renwick and Bergmann, 1993). Renwick and Bergmann found that single parents who do not work have basic cash needs at about 64 percent of the poverty line, while those who work have basic cash needs ranging from 113 to 186 percent of the poverty line depending on the number and ages of their children. The net effect of the under- and over-estimation of poverty for the different types of single-parent families as measured by the official poverty lines for the nation was a significant underestimation. Renwick and Bergmann estimated a national poverty rate of 47 percent compared to an official estimate of 39 percent in 1989 (Renwick and Bergmann, 1993). Low-income, married-couple families with working mothers would also be measured as experiencing higher poverty rates if child care costs were included (Renwick, 1993).

Florida does a less-than-average job of providing a safety net for employed women. Although the unemploy-

Figure 12.
Percent of Unemployed Women and Men
with Unemployment Insurance in the
South Atlantic Region and the United States, 1996



Source: U.S. Department of Labor, Employment and Training Administration, *Unemployment Insurance Service*, 1997.

Compiled by the Institute for Women's Policy Research.

ment rate for women in Florida is the same as the national average of 5.6 percent (see Table 7), the percent of unemployed women in Florida receiving unemployment insurance is much lower than in the United States as a whole (see Figure 12). And the same is true for unemployed men in Florida—the percentage of unemployed men and the rate of unemployment insurance receipt for men in Florida is lower than the national average.

1 For the larger states, including Florida, updated figures for 1997 are presented in Figure 7. However, for comparability across all the states, the rankings are based on the 1990 Census data on educational attainment; data shown in Appendix 3.

Reproductive Rights

This section includes information on legislation relating to access to legal abortion, public funding for abortion and public funding for the treatment of infertility, the position of the governor and state legislature on reproductive choice, bills that would require health insurers to cover contraception, and the right of gay and lesbian couples to adopt children, among other factors related to reproductive rights.

While issues pertaining to reproductive rights and health can be controversial, national and international human rights documents identify them as integral to women's physical and mental well-being. The Platform for Action from the Fourth United Nations Conference on Women, which was adopted by consensus by 189 countries including the United States, stresses that reproductive health includes the ability to have a safe, satisfying sex life, to reproduce and to decide if, when and how often to do so (U.N. Fourth World Conference on Women, 1995). The document also stresses that adolescent girls in particular need information and access to relevant services.

In the United States, reproductive rights as defined for federal law in the 1973 Supreme Court case *Roe v. Wade* include the legal right to abortion and also the ability to exercise that right. Legal issues relating to access to abortion include parental notification and mandatory waiting periods as well as the availability of providers in each county in the state. The stances of the governor and state legislative bodies are also important, considering the serious efforts to overturn federal law. Economic issues relating to abortion include public funding for women who qualify. Moreover, abortion is not the only reproductive issue. Bills requiring health insurers to cover contraception, the right of gay and lesbian couples to adopt children and public funding for infertility treatments all affect women's reproductive lives.

The reproductive rights composite index shows that Florida ranks fourth in its region and 18th in the nation (see Chart IV, Panels A and B); however, some kinds of

protection remain inadequate in promoting the reproductive rights of women.

Mandatory consent laws require that minors notify one or both parents of the decision to have an abortion, or gain the consent of one or both parents before a physician can perform the procedure. Of the 39 states with such laws on the books as of January 1998, 31 enforce their laws. Of these 31 states, 27 allow for a judicial bypass of notification if the minor appears before a judge and provides a reason that notification would place an undue burden on the decision to have an abortion. Four states provide for physician bypass of notification, and three states allow for both judicial and physician bypass. Of the 31 states that enforce consent laws, only Idaho and Utah had no bypass procedure as of January 1998. As of January 1998, Florida allowed access to abortion services without mandatory parental consent laws for minors. Moreover, the right to reproductive choice is protected by the Florida constitution, which led the Florida Supreme Court to strike down a law requiring either parental consent or a judicial waiver for minors (NARAL and NARAL Foundation, 1998).

Waiting-period legislation mandates that a physician cannot perform an abortion until a certain number of hours after the woman has been notified of her options in dealing with a pregnancy. The waiting periods range from one to 72 hours. Of the 19 states with mandatory waiting periods, as of January 1998, twelve states enforced their laws (with waiting periods ranging from eight to 72 hours). Florida is one of the 31 states without a mandatory waiting period (NARAL and NARAL Foundation, 1998).

In some states, public funding for abortions is available only under limited health circumstances or when mandated by federal law: when the pregnancy results from reported rape or incest or when the pregnancy threatens the life of the woman. Fifteen states fund abortions in all or most circumstances. Florida does not

Chart VI. Panel A
Reproductive Rights: National and Regional Ranks

	National Rank* (of 51)	Regional Rank* (of 9)
Composite Reproductive Rights Index	18	4

See Appendix I for methodology.

* The national rank is of a possible 51 including the 50 states and the District of Columbia. The regional rankings are of a maximum of nine and refer to the states in the South Atlantic Region (DC, DE, FL, GA, MD, NC, SC, VA, WV). See Appendix V.

Calculated by the Institute for Women's Policy Research.

Chart VI. Panel B
Components of the Reproductive Rights Composite Index

	Yes	No
• Does Florida allow access to abortion services without mandatory parental consent laws for minors? ^a	✓	
• Does Florida allow access to abortion services without a waiting period? ^a	✓	
• Does Florida provide public funding for abortions under any circumstances if a woman is eligible? ^a		✓
• What percent of counties in Florida have abortion providers? ^b	31.0%	
• Is Florida's state government pro-choice? ^a		
Governor	✓	
Senate		✓
Assembly		✓
• Does public funding cover infertility treatments? ^c		✓
• Does Florida require health insurers to provide coverage for contraceptives? ^d	Proposed	
• Does Florida allow the non-biological parent in a gay/lesbian couple to adopt his/her partner's biological child? ^e	Banned	

Source: ^a NARAL Foundation, 1997, 1998; ^b Henshaw and Van Vort, 1994; ^c King and Meyer, 1996; ^d Planned Parenthood, 1998; ^e National Center for Lesbian Rights, 1998.

Compiled by the Institute for Women's Policy Research.

provide public funding for abortions under any circumstances other than those required by the federal Medicaid law (NARAL and NARAL Foundation, 1998).

The percent of counties with abortion providers includes all counties that had at least one abortion provider in 1992. This proportion ranges from two to 100 percent across the states. At 31 percent (see Chart IV, Panel B), Florida's proportion of counties with abortion providers is higher than the national average of 16 percent (Henshaw and Van Vort, 1994).

About 49 percent of traditional health plans do not cover any reversible method of contraception, such as the pill or IUD. Others will pay for one or two types, but not all five types of prescription methods—the pill, implants and injectables, IUD and diaphragms. About 38 percent of HMOs cover all five prescription methods (Gold and Daley, 1994). The controversy is leading lawmakers in 19 states, including Florida, to introduce bills that would require health insurers to cover contraception (Planned Parenthood, 1998). Maryland recently became the first state to pass a bill requiring contraception coverage. Six states have provisions that require each insurance company to offer at least one insurance package that covers some or all birth control prescription methods. Congress also had a similar bill pending as of June 1998.

The National Abortion and Reproductive Rights Action League (NARAL) polled governors and members of state legislatures to determine whether they would support a criminal ban on abortion or restrictions making it more difficult for women to obtain abortions. The restrictions included (but were not limited to) provisions

concerning parental consent, mandatory waiting periods, prohibitions on Medicaid funding for abortion and bans on certain abortion procedures. NARAL also gathered official comments from Governors' offices to determine their positions on abortion (NARAL and NARAL Foundation, 1997). For this study, governors and legislators who supported restrictions on abortion rights are considered anti-choice, and those who would oppose them are considered pro-choice. In Florida, the governor is pro-choice while the majority of members of the State Senate and State House of Representatives are anti-choice.

While increasing numbers of private health insurance plans cover infertility treatments, few states in the United States allow for infertility treatments under publicly funded health plans such as Medicaid. Florida does not provide publicly funded infertility treatments for the poor (King and Meyer, 1996).

Second parent adoption allows the non-biological parent in a gay or lesbian couple to adopt the biological child of his or her partner. At the state level, courts or legislatures have both supported and limited the right to second parent adoption. As of April 1998, lower courts have approved second parent adoption petitions in 19 states, intermediate appellate courts have done so in three states and the District of Columbia, and state supreme courts have explicitly permitted lesbians and gay men to adopt the children of their partners in three states. Legislation prohibits or substantially restricts such adoption in four states, including Florida (National Center for Lesbian Rights, 1998).

Health and Vital Statistics

This section focuses on the quality of health of the population in the state. Topics include fertility and infant health, the consumption of preventive health services, environmental and cancer risks, and Health Maintenance Organization (HMO) enrollment. Health is an important aspect of the economic status of women. Illness can be costly and painful and can interrupt daily tasks people take for granted. The healthier the inhabitants of an area are, the more productive they are likely to be.

As stated in the 1994 Policy Report of the Commonwealth Fund Commission on Women's Health, women and men face different health problems, even outside of reproductive differences. Women tend to see physicians more routinely, and they use preventive services at twice the rate that men do. Women also suffer more chronic illness and disabilities, are more likely to suffer from depression, and are prescribed more drugs by their physicians, but they live longer than men do (Commonwealth Fund, 1994). Women experience depression at about twice the rate that men do. Average life expectancy in the United States in 1996 was 79 years for women and 73 years for men. The median age for women at the time of their first marriage is 24.8 years, and the median age for women giving birth for the first time is 23.8 years; (U.S. Department of Commerce, Bureau of the Census, 1998b; Centers for Disease Control and Prevention, 1997b).

As women, particularly mothers, have entered the labor force in record numbers, their health care needs have changed. Many studies have focused on the link between women's work and their health, and many have found a positive relationship between women's employment and better health. This research suggests the link may result both because work provides health benefits to women and because healthier women "self-select" to work (Hartmann et al., 1996). For some women, such as those with difficult health problems or with disabilities, work presents more difficult challenges. As women's employment rates continue to rise, studies have increasingly looked at the extent and type of access women have to health insurance coverage. The Institute for Women's Policy Research has found that about twelve million women of working age lack health insurance of any kind (Yoon et al., 1994). Women in Florida are less likely to have insurance than women nationally and less likely than women nationally to have access through their employment (see Table 11).

Fertility rates in Florida are slightly lower than nationwide (64.9 live births per 1,000 women in Florida and 65.6 births per 1,000 women in the United States as a

whole). Infant mortality rates are similar (7.5 infant deaths per 1,000 births in Florida and 7.6 infant deaths per 1,000 nationwide; see Table 12). The percent of white infants with low birth weights is slightly higher in Florida than nationally (6.4 in Florida and 6.2 in the United States as a whole). Traditionally, African American infants have much higher death rates than white infants. This trend holds true in Florida. The difference in infant mortality and low birth weight rates between African American and whites is likely due to socioeconomic differences between African American and white families, which can lead to differential access to resources like adequate prenatal care. However, the low birth weight rate for African American babies, while higher than the white rate, is lower in Florida than in the United States as a whole (12.1 percent versus 13.1 percent). This lower percentage of infants with low birth weights may indicate that African American women in Florida have greater access to prenatal care than African American women nationally. Births to teenage mothers in Florida account for a slightly higher percentage of total births than births to teenage mothers in the United States generally. Births to unmarried mothers also account for more of all births in Florida than in the nation as a whole (35.8 percent compared with 32.2 percent).

Florida does relatively well on a few aspects of preventive health care measures for women. Of women over age 40, 84.3 percent have had a mammogram, higher than the median rate for women in the United States. Likewise, of women over age 18, 94.3 percent have had a pap smear, slightly higher than the median rate for women in the United States. However, Florida women have lower rates than the United States for important preventive health care tests such as proctoscopies and blood pressure and cholesterol screening (see Table 13). As for children, Florida does better than the nation as a whole in vaccinating young children—79 percent of all young children in Florida have been vaccinated, higher than the national rate of 75 percent. Florida also has a mastectomy stay law. In addition, Florida has established a Governor's Task Force on domestic violence.

Measures of environment and cancer risks are important when assessing the overall health of women in the states. In Florida, the percentage of women, 45 to 54 years old, who smoke is similar to the national average (21.8 percent and 21.6 percent respectively). The mortality rate due to breast and ovarian cancer is lower in Florida than the United States as a whole, although mortality rates due to cervical and uterine cancer are slightly higher in Florida than in the United States as a whole (see Table 13).

Table 13.
Health and Vital Statistics for Florida and the United States, 1996

	Florida	United States
Fertility and Infant Health		
• Fertility Rate in 1995 (live births per 1,000 women aged 15-44) ^a	64.9	65.6
• Infant Mortality Rate in 1995 (deaths of infants under age one per 1,000 live births) ^b	7.5	7.6
• Percent of Counties with at Least One Abortion Provider, 1992 ^c	31.0%	16.0%
• Percent of Low Birth Weight Babies (less than 5 lbs., 8 oz.), 1995 ^d		
Among Whites	6.4%	6.2%
Among African Americans	12.1%	13.1%
• Births to Teenage Women as a Percent of All Births, 1995 ^e	13.7%	13.2%
• Births to Unmarried Women as a Percent of All Births, 1995 ^d	35.8%	32.2%
Preventive Health Care		
• Percent of Women Who Have Ever Had a:		
Mammogram (Aged 40 and Older), 1995 ^f	84.3%	81.8%*
Pap Test (Aged 18 and Older), 1995 ^g	94.3%	93.6%*
• Percent of Women Aged 45-54 Who Have Been Screened for Blood Pressure in the Previous Two Years, 1993 ^h	92.4%	95.5%
• Percent of Women Aged 45-54 Who Have Been Screened for Cholesterol in the Previous Two Years, 1993 ^h	94.9%	97.1%
• Percent of Women Aged 45-54 Who Have Ever Had a Proctoscopy, 1993 ⁱ	23.3%	25.6%
• Vaccination Coverage of Children Aged 19-35 Months (estimated percentage of those receiving four doses of diphtheria and tetanus toxoids and pertussis vaccine, three doses of polio virus vaccine and one dose of measles-mumps-rubella vaccine), 1995 ^j	79.0%	75.0%
Environmental and Cancer Risks		
• Percent of Women Aged 45-54 Who Smoke, 1993 ^k	21.8%	21.6%
• Toxic Chemicals that Could Cause Birth Defects (pounds per person), 1992 ^l	4.2lbs	36.0 lbs
• Average Annual Mortality Rate (per 100,000) Due to:		
Female Breast Cancer, 1990-94 ^m	25.1	26.4
Cervical and Uterine Cancer, 1990-94 ^m	3.2	2.9
Ovarian Cancer, 1990-94 ^m	7.6	7.8
• Estimated Number of New Cases of Female Breast, Cervical and Uterine Cancers, 1997 ⁿ	15,500	229,600
Other		
• Does Florida have a mastectomy stay law? ^o	Yes	

* Median rate for the 50 states and the District of Columbia.

Source: ^a Centers for Disease Control and Prevention, 1997b, Table 8; ^b Centers for Disease Control and Prevention, 1997a, Table 30; ^c Henshaw and Van Vort, 1994; ^d Centers for Disease Control and Prevention, 1997b, Table 16; ^e U.S. Department of Commerce, Bureau of the Census, 1997e, Table 98; ^f American Cancer Society, 1997b, Table III-B; ^g Centers for Disease Control and Prevention, 1997c, Table 13; ^h Costello et al., 1998, Table A-6; ⁱ Costello et al., 1998, Table A-9; ^j McCloskey, et al., 1996, p.226; ^k Costello et al., 1998, Table A-3; ^l McCloskey, et al., 1995, p.222; ^m National Cancer Institute, National Institutes of Health, 1997, Tables IV-10, V-7, XX-7; ⁿ American Cancer Society 1997a, p.5; ^o Miller, 1998.

Compiled by the Institute for Women's Policy Research.

Table 14.
Percent of Total Population, Medicare and Medicaid Recipients
Enrolled in Health Maintenance Organizations (HMOs)
in Florida and the United States, 1996

	Florida	United States
Total Population ^a	14,400,000	265,284,000
Percent of Total Population Enrolled in HMOs ^b	23.0	22.0
Percent of Total Population Receiving Medicare ^c	18.4	14.0
Percent of Medicare Recipients Enrolled in HMOs ^c	22.0	13.0
Percent of Total Population Receiving Medicaid ^c	12.2	13.4
Percent of Medicaid Recipients Enrolled in HMOs ^d	63.7	40.1

Source: ^a U.S. Department of Commerce, Bureau of the Census, 1997a; ^b McCloskey et al., 1996; ^c U.S. Department of Health and Human Services, Health Care Financing Administration, 1997, pp 110-113; ^d Lamphere et al., 1997.

Compiled by the Institute for Women's Policy Research.

meet the needs of heavy medical users, such as the disabled or those with severe or long-term illnesses.

Similarly, there has been an increasing trend toward HMOs among Medicaid and Medicare beneficiaries, although the impact of managed-care systems on cost-effectiveness and quality of service for Medicare and Medicaid programs is still in question (Urban Institute, 1996; Jacobs Institute of Women's Health, 1996).

In recent years, the trend toward HMOs has grown, with national enrollment rising from 9.1 million in 1980 to 58.4 million at the end of 1996 (U.S. Department of Commerce, Bureau of Census, 1997e). This major trend requires monitoring from the point of view of how well the new arrangements meet women's health care needs. In addition, concerns have been raised about how well HMOs

There is a great deal of variation in HMO membership across states. HMOs tend to play a more important role in the states of California, Massachusetts, Minnesota and Oregon and are much less prevalent throughout the South (Liska et al., 1998). The percentage of the population enrolled in HMOs is a bit higher in Florida than in the nation as a whole (23 percent and 22 percent, respectively; see Table 14).

Basic Demographics

This section includes data on different populations within Florida. Statistics on age, the sex ratio and the elderly female population are presented, as are the distribution of women by race/ethnicity and family types and information on women in prisons. The data present an image of the state's female population and can be used to provide insight on the topics covered in this report. For example, compared with the United States as a whole, Florida has a larger proportion of women over age 65, a higher ratio of women to men, a similar distribution of

households by household type, a much larger proportion of women living in urban areas and greater diversity in race and ethnicity. Demographic factors also have implications for the location of economic activity, the types of jobs that are available, the growth of markets and the types of public services that are needed.

Florida has the fourth largest population among all the states in the United States. There were over 7.4 million women in Florida in 1996. Between 1990 and

Table 15.
Basic Demographic Statistics for Florida and the United States

	Florida	United States
Total Population, 1996 ^a	14,399,985	265,283,783
• Number of Women, All Ages ^b	7,405,995	135,473,568
• Sex Ratio (women to men aged 18 and older) ^b	1.10:1	1.08:1
• Median Age of All Women ^b	39.1	35.8
• Proportion of Women Over Age 65 ^b	20.4%	14.7%
Distribution of Women by Race and Ethnicity, 1995, All Ages ^c		
• White*	69.9%	73.0%
• African American*	14.7%	12.8%
• Hispanic†	13.5%	9.8%
• Asian American*	1.6%	3.6%
• Native American*	0.3%	0.8%
Distribution of Households by Type, 1990 ^d		
• Total Number of Family and Non-Family Households	5,130,241	91,770,958
• Married-Couple Families (with and without their own children)	55.4%	56.2%
• Female-Headed Families (with and without their own children)	10.4%	11.3%
• Male-Headed Families (with and without their own children)	3.1%	3.2%
• Non-Family Households: Single-Person Households	25.3%	24.4%
• Non-Family Households: Other	5.8%	4.9%
Proportion of Women Living in Metropolitan Areas, All Ages, 1990 ^e	94.7%	83.1%
Proportion of Women Who Are Foreign-Born, All Ages, 1990 ^f	13.1%	7.9%
Percent of Federal and State Prison Population Who Are Women, 1996 ^g	5.2%	6.3%

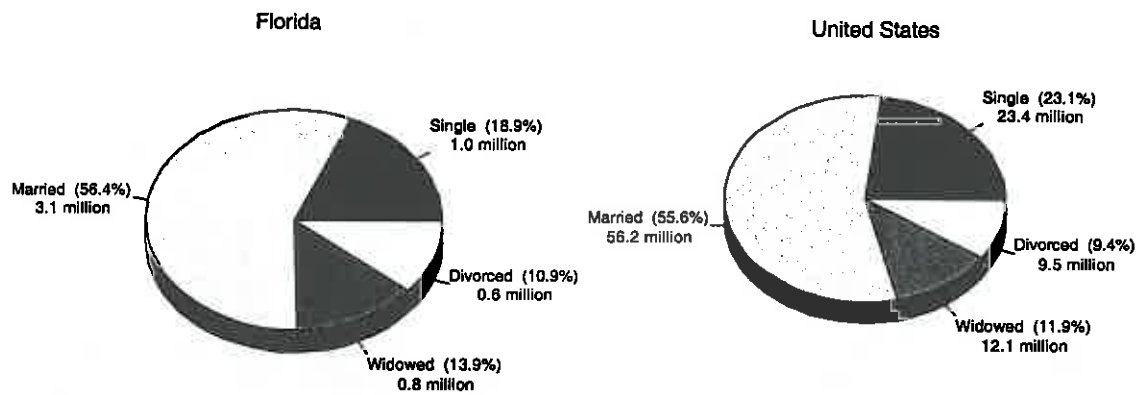
* Non-Hispanic.

† Hispanics may be of any race.

Source: ^a U.S. Department of Commerce, Bureau of the Census, 1997a; ^b U.S. Department of Commerce, Bureau of the Census, 1997b, Tables 5 and 6; ^c U.S. Department of Commerce, Bureau of the Census, 1997c; ^d Population Reference Bureau, 1993, Table 7; ^e Population Reference Bureau, 1993, Table 6; ^f Population Reference Bureau, 1993, Table 3; ^g U.S. Department of Justice, Bureau of Justice Statistics, 1997, Table 7.

Calculated by the Institute for Women's Policy Research.

Figure 13.
Distribution of Women by Marital Status
in Florida and the United States, 1990



For women aged 15 and older.

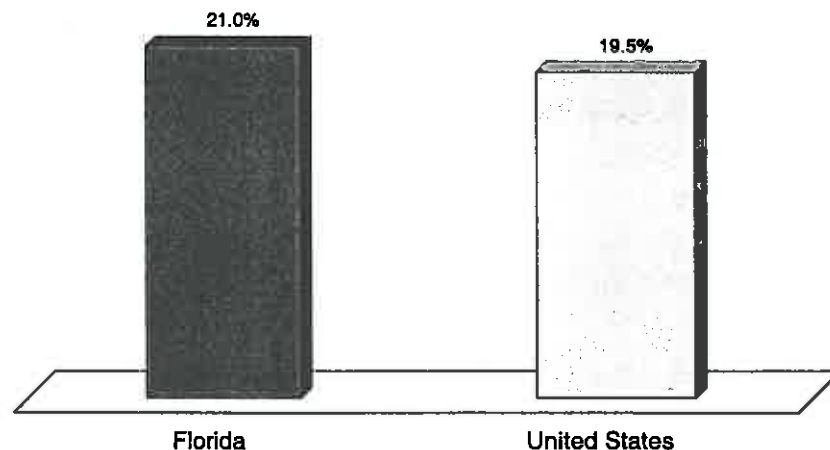
Source: Population Reference Bureau, 1993.

Compiled by the Institute for Women's Policy Research.

1996, the population of Florida grew by 11.3 percent, a rate of growth which is much higher than the nation as a whole (6.7 percent; U.S. Department of Commerce, Bureau of the Census, 1997a). The change in Florida's female population growth from 1990 to 1996 showed similar patterns (10.9 percent for Florida and 6.3 percent for the United States). This tremendous growth pattern has likely affected Florida's ability to respond to increased demand for a variety of human services. Within its region, Florida's population growth rate is second, behind that of Georgia. Florida also has a much larger proportion of women over age 65 than the rest of the United States (20.4 percent versus 14.7 percent in the United States as a whole). The female population in Florida is much more ethnically diverse than in the rest of the United States, with minorities making up more than 30 percent of women in the state (compared with 27 percent for the nation as a whole). Hispanic women constitute a larger proportion of the population than in the United States (13.5

percent for Florida compared with 9.8 percent nationwide). Florida also has a higher percentage of African Americans than in the rest of the country (14.7 percent compared to 12.8 percent). The other groups combined make up less than 2 percent of the female population in Florida, 2.5 percentage points lower than the rest of the United States.

Figure 14.
Percent of Households with Children Under
Age 18 Headed by Women
in Florida and the United States, 1990



Source: IWPR, 1995a.

Calculated by the Institute for Women's Policy Research.

The proportion of single women in Florida is lower than that in the country as a whole, while the proportion of divorced and widowed women is slightly higher (see Figure 13). The proportion of women in Florida who are married is similar to the proportion nationally (56.4 percent compared with 55.6 percent of women in the United States as a whole). Florida's distribution of family types is similar to that in the nation as a whole (see Table 15). The proportion of other non-family households in Florida (5.8 percent) is slightly larger than in the rest of the United States (4.9 percent). A higher proportion of households with children under 18 are headed by women in Florida than nationally (21 percent compared with 19.5 percent; see Figure 14).

Florida's proportion of women living in metropolitan areas is much higher than in the nation as a whole (94.7 percent compared with 83.1 percent of women nationwide). The percent of Florida's prison population that is female is a bit lower than the national average (see Table 15). There is, however, a large difference between Florida and the nation as a whole in the proportion of the population that is foreign born. Florida has a much larger foreign-born female population than does the United States as a whole (13.1 percent compared with 7.9 percent).

Conclusion

Women in the United States have made a great deal of progress in recent decades. Women are more educated, they are more active in the workforce, and they have made important strides in narrowing the wage gap. In other areas, however, women face substantial and persistent obstacles to attaining equality. Women are far from achieving political representation in proportion to their share of the population, and the need to defend and expand their reproductive rights persists. Moreover, many improvements in women's status are complicated by larger economic and political factors. For example, while women are approaching parity with men in labor force participation, women's added earnings are in many cases simply compensating for earnings losses among married men in the last two decades. And since women's median earnings still lag behind men's, they cannot contribute equally to supporting their families, much less achieve economic autonomy.

Clearly, many of the factors affecting women's status are interrelated. Educational attainment often directly relates to earnings; full-time work often correlates with health insurance coverage. Studies show that greater female political representation can result in women-friendly policies. But today's costly campaign process presents another barrier to women, who often have less access to the economic resources required to make them more competitive candidates. Thus, in many cases, the issues covered by this report are interdependent and mutually reinforcing.

In a time when the federal government is transferring many responsibilities to the state and local level, women need state-based public policies to adequately address these complex issues:

- Women's wages need to be raised by policies such as stronger enforcement of equal employment opportunity laws, improved educational opportunities, higher minimum wages or the implementation of pay equity adjustments in the state civil service.
- Rates of women's business ownership and business success could be increased by ensuring that state and local government contracts are accessible to women-owned businesses.
- Women workers would benefit from the greater availability of adequate and affordable child care, mandatory temporary disability insurance and paid parental and dependent care leave policies.

- Women's physical security can be enhanced by increasing public safety generally and by better protecting women from domestic violence via anti-stalking and other legislation and better police and judicial training.
- Women's economic security can be improved by greater state emphasis on child support collections and by implementing welfare reform programs that maximize women's educational and earning opportunities while still providing a basic safety net for those who cannot work.

National policies also remain important in improving women's status in the states and in the country as a whole:

- The federal minimum wage, federal equal employment opportunity legislation and federal health and safety standards are all critical in ensuring minimum levels of decency and fairness for women workers.
- Because union representation correlates strongly with higher wages for women and improved pay equity, benefits and working conditions, federal laws that protect and encourage unionization efforts would assist women workers.
- Policies such as paid family leave could be legislated nationally as well as at the state level through, for example, mandatory insurance.
- Because most income redistribution occurs at the national level, federal legislation on taxes, entitlements and income security programs (such as the Earned Income Tax Credit, Social Security, Medicaid, Medicare, food stamps and welfare) will continue to profoundly affect women's lives.

In most cases, both state and national policies lag far behind the changing realities of women's lives.

The Institute for Women's Policy Research's series of reports on the *Status of Women in the States* establishes baseline measures for the status of women in the fifty states and the District of Columbia. In accordance with IWPR's purpose—to meet the need for women-centered, policy-relevant research—these reports describe women's lives and provide the tools to analyze the policies that can and do affect them.

Appendix I: Methodology, Terms, and Sources for Chart I (the Composite Indices)

Composite Political Participation and Representation Index. This composite index reflects four areas of political participation and representation: voter registration; voter turnout; women in elective office, including state legislatures, state-wide elective office and positions in the U.S. Congress; and institutional resources available for women (such as a state agenda project, a commission on the status of women or a legislative caucus).

To construct this composite index, each of the component indicators was standardized to remove the effects of different units of measurement for each state's score on the resulting composite index. Each component was standardized by subtracting the mean value (for all 50 states) from the observed value and dividing by the standard deviation. The standardized scores were then given different weights. Voter registration and voter turnout were each given a weight of 1.0. The component indicator for women in elected office is itself a composite reflecting different levels of office holding and was given a weight of 3.0. The last component indicator, women's institutional resources, is also a composite of scores indicating the presence or absence of each of three resources: a women's agenda project, a commission on the status of women and a women's legislative caucus. It received a weight of 1.0. The resulting weighted, standardized values for each of the four component indicators were summed for each state to create the composite political participation index.

Women's Voter Registration: This component indicator is the average percent (for the elections of 1992 and 1994) of all women aged 18 and older (in the civilian noninstitutionalized population) who reported registering. Source: U.S. Department of Commerce, Bureau of the Census (1993, 1996d) based on the Current Population Survey. More recent data are not available from this source.

Women's Voter Turnout: This component indicator is the average estimated percent turnout (for the presidential elections of 1992 and 1996) of all women aged 18 and older. Turnout figures are calculated by first multiplying the total number of votes from the Federal Election Commission by the percentage of female voters provided by the Voter News Service exit polls in order to determine the number of female voters. The number of female voters is then divided by the projected female voting age population from the U.S. Bureau of the Census, resulting in the overall turnout rate for women. IWPR recognizes that these data on voter turnout (based on data produced

by Strategic Research Concepts) vary from government data collected by the Bureau of the Census. According to the Bureau of the Census, national voter turnout is higher than indicated by the numbers IWPR cites in this report. While national data are available from the Bureau of the Census, state level data on turnout in 1996 were not available at the time of production of this report and thus data from Strategic Research Concepts was used instead. In general, the data from Strategic Research Concepts tends to underestimate voter turnout while data from the Bureau of the Census tends to overestimate it. Source: Strategic Research Concepts (1998) based on certified presidential election returns from the Federal Election Commission, Census projections of the voting age population from the Current Population Survey (in 1992 and 1996) and Voter News Service nationwide exit polls.

Women in Elected Office: This composite indicator is based on a methodology developed by the Center for Policy Alternatives (1995).

This composite indicator has four components and reflects office-holding at the state and national levels as of April 1998. For each state, the proportion of office holders who are women was computed for four levels: state representatives; state senators; state-wide elected executive officials and U.S. Representatives; and U.S. Senators and governors. The percentages were then converted to scores that ranged from 0 to 1 by dividing the observed value for each state by the highest value for all states. The scores were then weighted according to the degree of political influence of the position—state representatives were given a weight of 1.0, state senators were given a weight of 1.25, statewide executive elected officials and U.S. Representatives were each given a weight of 1.5 and U.S. Senators and state governors were each given a weight of 1.75. The resulting weighted scores for the four components were added to yield the total score on this composite for each state. The highest score of any state for this composite office-holding indicator is 3.74. These scores were then used to rank the states on the indicator for women in elected office. Source: Data were compiled by the Institute for Women's Policy Research (IWPR) from several sources including the Center for the American Woman and Politics (1998a, 1998b, 1998c, 1998d, and 1998e).

Women's Institutional Resources: This indicator measures the number of institutional resources for women available in the state from a maximum of three, including commissions on the status of women (which are estab-

lished by legislation or executive order), women's state agenda projects (usually a voluntary, nongovernmental, state-based coalition group addressing a broad range of issues concerning women) and legislative caucuses for women (organized by women legislators in either or both houses of the state legislature). States receive 1.0 point for each institutional resource present in their state except that partial credit is given if a bipartisan legislative caucus does not exist in both houses. States receive a score of 0.25 if informal or partisan meetings are held by women legislators in either house, 0.5 if a formal legislative caucus exists in one house but not the other and 1.0 if a formal legislative caucus is present in both houses or is bicameral. Source: Center for Policy Alternatives, 1995, updated in 1998 by IWPR and Center for the American Woman and Politics, 1998e.

Composite Employment and Earnings Index. This composite index consists of four component indicators: median annual earnings for women, the ratio of the earnings of women to the earnings of men, women's labor force participation and the percent of employed women in managerial and professional specialty occupations.

To construct this composite index, each of the four component indicators was "standardized"—i.e., for each of the four indicators, the observed value for the state was divided by the comparable value for the entire United States. The resulting ratios were summed for each state to create the composite index; thus, each of the four component indicators has equal weight in the composite.

Women's Median Annual Earnings: Median yearly earnings (in 1997 dollars) of noninstitutionalized women aged 16 and older who worked full-time, year-round (more than 49 weeks during the year and more than 34 hours per week) in 1994, 1995 and 1996. Earnings were converted to constant 1997 dollars using the Consumer Price Index and the median was selected from the merged file for all three years. Three years of data were used in order to ensure a sufficiently large sample for each state. The sample size for women ranges from 431 in New Hampshire to 4,039 in California; for men, the sample size for men ranges from 564 in the District of Columbia to 4,521 in New York. For Florida, the sample size is 2,473 for women and 3,177 for men. These earnings data have not been adjusted for cost of living differences between the states because the federal government does not produce an index of such differences. Source: IWPR calculations of the 1995-97 Annual Demographic Files (March) from the Current Population Survey, for the 1994-96 calendar years; IWPR, 1998b.

Ratio of Women's to Men's Earnings: Median yearly earnings (in 1997 dollars) of noninstitutionalized women aged 16 and older who worked full-time, year-round

(more than 49 weeks during the year and more than 34 hours per week) in 1994-96 divided by the median yearly earnings (in 1997 dollars) of noninstitutionalized men aged 16 and older who worked full-time, year-round (more than 49 weeks during the year and more than 34 hours per week) in 1994-96. Earnings were converted to constant 1997 dollars using the Consumer Price Index and the medians were selected from the merged file for all three years. Three years of data were used in order to ensure a sufficiently large sample for each state. The sample size for women ranges from 431 in New Hampshire to 4,039 in California; for men, the sample size ranges from 564 in the District of Columbia to 4,521 in New York. For Florida, the sample size is 2,473 for women and 3,177 for men. Source: IWPR calculations of the 1995-97 Annual Demographic Files (March) from the Current Population Survey; IWPR 1998b.

Women's Labor Force Participation (proportion of the adult female population that is in the labor force): Percent of civilian noninstitutionalized women aged 16 and older who were employed or looking for work (in 1995). This includes those employed full-time, part-time voluntarily or part-time involuntarily and those who are unemployed. Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a (based on the Current Population Survey).

Women in Managerial and Professional Occupations: Percent of civilian noninstitutionalized women aged 16 and older who were employed in executive, administrative, managerial or professional specialty occupations (in 1995). Source: U.S. Department of Labor, Bureau of Labor Statistics, 1997a (based on the Current Population Survey).

Composite Economic Autonomy Index. This composite index reflects four aspects of women's economic well-being: access to health insurance, educational attainment, business ownership and percent of women above the poverty level.

To construct this composite index, each of the four component indicators was "standardized"—i.e., for each indicator, the observed value for the state was divided by the comparable value for the United States as a whole. The resulting ratios were summed for each state to create the composite index; thus, each of the four components has equal weight in the composite.

Percent with Health Insurance: Percent of civilian noninstitutionalized women under age 65 who are insured. The state-by-state percentages are based on the averages of two years of pooled data from the 1994 and 1995 Current Population Survey from the Bureau of the Census. Source: Liska et al., 1998.

Educational Attainment: In 1989, the percent of women aged 25 and older with four or more years of college. Source: Population Reference Bureau, 1993, based on the Public Use Microdata Sample of the 1990 Census of Population.

Women's Business Ownership: In 1992, the percent of all firms (legal entities engaged in economic activity during any part of 1992 that filed an IRS form 1040, Schedule C; 1065 or 1120S) that were owned by women. This indicator excludes type C corporations; the Census Bureau estimates that there were approximately 517,000 type C corporations in 1992. The Bureau of the Census was required to provide data on women's ownership of type C corporations by the Women's Business Ownership Act of 1988. The Bureau's methodology for doing so differs from the methods used for other forms of business ownership—individual proprietorships and self employment, partnerships and Subchapter S corporations (those with fewer than 35 shareholders who can elect to be taxed as individuals). Type C corporations are non-subchapter S corporations. The Bureau of the Census determines the sex of business owners by matching the social security numbers of individuals who file business tax returns (Form 1040, Schedule C; 1065; or 1120S) with Social Security Administration records that provide the sex codes indicated by individuals on their original applications for social security numbers. For partnerships and corporations, a business is classified as women-owned based on the sex of the majority of the owners. Data for type C corporations do not come from tax returns and because of the limitations of the sample are apparently considered less reliable. Source: U.S. Department of Commerce, 1996a based on the 1992 Economic Census. (Please note that results of the 1997 Economic Census were not available at the time of production of this report.)

Percent of Women Above Poverty: In 1994-96, the percent of women living above the official poverty threshold, which varies by family size and composition. The average percent of women above the poverty level for the three years is used; three years of data ensure a sufficiently large sample for each state. In 1995, the poverty level for a family of four was \$15,569. Source: IWPR calculations of the 1995-97 Annual Demographic Files (March) from the Current Population Survey for the calendar years 1994-96; IWPR, 1998b.

Composite Reproductive Rights Index. This composite index reflects a variety of indicators of women's reproductive well-being and autonomy. These include access to abortion services without mandatory parental consent laws for minors, access to abortion services without a waiting period, public funding for abortions under any circumstances if a woman is eligible, percent of counties that have at least one abortion provider, whether the governor or state legislature is pro-choice, public funding of infertility treatments, existence of state laws requiring health insurers to provide coverage of contraceptives and whether second parent adoption is legal for gay/lesbian couples. For more complete definitions of the components of this index and sources, see Appendix II.

To construct this composite index, each component indicator was rated on a scale of 0 to 1 and assigned a weight. The notification and waiting-period indicators were each given a weight of 0.5. The indicator of public funding for abortions was given a weight of 1.0. For the indicator of the percent of counties with abortion providers, states were given a scaled score ranging from 0 to 1. For the indicator of whether the Governor, upper house or lower house is pro-choice, each state receives 0.33 points per governmental body (up to a maximum of 1.0 point). The indicator for public funding for infertility treatments was given a weight of 1.0. For the health insurance coverage of contraceptives law, the state received a score of 0.5 if legislation had been proposed and a score of 1.0 if it had a contraceptive coverage law or provision. For the indicator of whether the nonbiological partner in a gay/lesbian couple can adopt the partner's child, states were given 1.0 point if the state supreme court has prohibited discrimination against these couples in adoption, 0.75 point if an appellate court has, 0.5 if a lower court has approved a petition for second parent adoption, 0.25 if a state has no official position on the subject, and no points if the state has banned second parent adoption. The contraceptive coverage law and gay/lesbian adoption law were each given a weight of 0.5. The weighted scores for each component indicator were summed to arrive at the value of the composite index score for each state. The states and the District of Columbia were then ranked according to those values.

Appendix II: Terms and Sources for Chart II (Women's Rights Checklist)

Reproductive Rights

Mandatory Consent. Mandatory consent laws require that minors notify one or both parents of the decision to have an abortion or gain the consent of one or both parents before a physician can perform the procedure. Of the 39 states with such laws on the books as of January 1998, 31 enforce their laws. Of the 31, 27 allow for a judicial bypass of notification if the minor appears before a judge and provides a reason that notification would place an undue burden on the decision to have an abortion. Four states provide for physician bypass of notification and three allow both physician and judicial bypass. Of the 31 states that enforce their laws, only Idaho and Utah had no bypass procedure as of January 1998 (NARAL and NARAL Foundation, 1998).

Waiting Period. Waiting-period legislation mandates that a physician cannot perform an abortion until a certain number of hours after the woman has been notified of her options in dealing with a pregnancy. The waiting periods range from one to 72 hours. Of the 19 states with mandatory waiting periods as of January 1998, 12 (with waiting periods ranging from one to 24 hours) enforced their laws (NARAL and NARAL Foundation, 1998).

Restrictions on Public Funding. In some states, public funding for abortions is available only under specific circumstances such as rape or incest, endangerment to the mother's life or limited health circumstances of the fetus, for women who meet income eligibility standards. As of January 1998, 15 states funded abortions for eligible women in all or most circumstances (NARAL and NARAL Foundation, 1998).

Contraceptive Coverage Laws. Contraceptive coverage laws require that health insurers who provide coverage for prescription drugs extend coverage to FDA-approved contraceptives (e.g., drugs and devices) and related medical services, including exams and insertion/removal treatments. As of June 1998, 18 states had proposed to enact legislation requiring health insurers to provide coverage of contraceptives. Six states had some provisions for the insurance coverage of contraceptives; Maryland was the only state to have a contraceptive coverage law as of June 1998 (Planned Parenthood, 1998).

Fertility Treatments and Public Funding. While increasing numbers of private health insurance plans cover

infertility treatments, few states in the United States allow for infertility treatments under publicly-funded health plans such as Medicaid (King and Meyer, 1996).

Same-Sex Couples and Adoption. Second parent adoption allows the nonbiological parent in a gay or lesbian couple to adopt the biological child of his or her partner. At the state level, courts and/or legislatures have upheld or limited the right to second parent adoption. As of April 1998, a lower court has approved second parent adoption petitions in 19 states, intermediate appellate courts have done so in three states and the District of Columbia and state supreme courts have explicitly permitted lesbians and gay men to adopt the children of their partners in three states. Legislation prohibits or substantially restricts such adoption in four states, including Florida (National Center for Lesbian Rights, 1998).

Domestic Violence

Mandatory Arrest. Generally, arrest is mandated only under specific circumstances; for instance, when an assault results in bodily injury to the victim, when the intent of the abuser was to cause fear of serious injury or death or when the officer believes that domestic violence is likely to continue (Hart, 1992). As of 1997, law enforcement officials must arrest domestic violence perpetrators under all circumstances in five states and the District of Columbia. Law enforcement officials must arrest under certain circumstances and may arrest under other circumstances in 12 states. Twenty-eight states permit but do not require that law enforcement officials arrest domestic violence offenders; only five states do not have legislation indicating that arrest is the preferred response in domestic violence cases (National Council of Juvenile and Family Court Judges, 1997). Some domestic violence activists and experts question the usefulness of this approach since sometimes the victim is arrested, not the original intent of the laws.

Child Support

Single-Mother Households Receiving Child Support or Alimony. This is defined as a family headed by a nonmarried woman with one or more of her own children (by birth, marriage or adoption) who has received full or partial payment of child support or alimony during the past year (Annie E. Casey Foundation, 1997). Figures

based on an average of data from the Current Population Survey for 1992 through 1996. Nationwide, only one-third (33 percent) of single-mother families received child support or alimony in 1994.

Cases with Collection. According to the U.S. Department of Health and Human Services Office of Child Support Enforcement, 55 percent of all child support cases that go to trial are granted a support order by a judge. Only in 33 percent of the cases with orders (or 18 percent of all child support cases) was child support actually collected. A case is counted as having a collection if as little as one cent is collected during the year. The enforcement efforts made by state and local agencies can affect the extent of collections (Gershenzon, 1993). Source: U.S. Department of Health and Human Services, 1996b.

Welfare

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) enacted the most sweeping changes to the federal welfare system since it was established in the 1930's. PRWORA ended entitlements to federal cash assistance, replacing Aid to Families with Dependent Children (AFDC) with the new Temporary Assistance for Needy Families (TANF) Program. Where AFDC provided minimal guaranteed income support for all eligible families (most frequently those headed by low-income single mothers), TANF benefits are restricted to a five-year lifetime limit and are contingent on work participation after 24 months. TANF funds are distributed to states in the form of block grants, and states are free to devise their own eligibility rules, participation requirements and sanction policies within the federal restrictions.

Child Exclusion/Family Caps. As of July 1998, 23 states have Child Exclusion policies, or Family Caps, which restrict the extension of TANF benefits to children conceived while the mother was on welfare. Of these states, two have a modified Family Cap and therefore give partial increases in benefits. In addition, Idaho has a flat rate regardless of family size, increases in benefits are given to a third party in Maryland and vouchers rather than cash are given in Oklahoma. Twenty-seven states and the District of Columbia do not have Family Caps (U.S. Department of Health and Human Services, Administration for Children and Families, 1998).

Time Limits. As of July 1998, 11 states have both a periodic and lifetime limit for the receipt of TANF funds. Thirty-six states and the District of Columbia have a time limit of 60 months (the maximum allowed under federal law). Nine other states report lifetime time limits less than 60 months. Michigan, Vermont and Illinois are the

only states which do not have a lifetime time limit for those individuals who are complying with TANF requirements; these states supplement their federal funds with state monies. Massachusetts reports that it has no lifetime limits, but extensions beyond its 24-month periodic limit may be granted only at the Commissioner's discretion. Oregon does not report any lifetime limits but restricts benefits to 24 months out of an 84-month period. Twenty-seven states offer limited extensions for a variety of reasons (U.S. Department of Health and Human Services, Administration for Children and Families, 1998).

Work Requirements. Federal law requires non-exempt residents to participate in work activities within two years of receiving cash assistance. States have the option of establishing stricter guidelines, and many have elected to do so. In 24 states, nonexempt recipients are required to engage in work activities immediately under TANF. Five states have work requirements within 24 months (the federally allowed maximum); another 10 states and the District of Columbia require recipients to work within 24 months or when determined able to work, whichever comes first. Nine states have work requirements within less than 24 months. In Arizona, work requirements are evaluated on an individual basis. Vermont requires unemployed two-parent families to work within 15 months and single parents to work within 30 months (U.S. Department of Health and Human Services, Administration for Children and Families, 1998).

What constitutes "work activities" is a contentious issue at both the state and federal level. State policies around these issues continue to evolve and are subject to caseworker discretion. This report uses each state's self-reported policy to identify which states require immediate work activities. To receive the full amount of their block grants, states must demonstrate that a specific portion of the states' TANF caseload is participating in activities that meet the federal definition of work. In fiscal year 1998, states must show that 30 percent of their TANF caseload is working. The required proportion grows each year until 2002 when states must demonstrate that 50 percent of the TANF caseload is engaged in work. PRWORA also restricts the amount of the caseload that may be engaged in basic education or vocational training to be counted in the state's work participation figures and only allows job training to count as work for a limited period of time for any individual.

Family Violence Provisions in TANF plans. As of March 1998, 26 states are recognized by the U.S. Department of Health and Human Services Administration for Children and Families as having adopted the Family Violence Option (which allows victims of violence to be exempted from work requirements, lifetime time limits or both) as a part of their TANF plans (U.S. Department of

ous consequences for low-wage and
who need to count more recent
The base period criterion states that
ave earned a minimum amount
d. The high quarter earnings criterion
als earn a total reaching a specified
one of the quarters within the base
ch has shown that women are less
o earnings requirements than are men
ely to be disqualified from receipt of
ound that nearly 14 percent of
workers were disqualified from
wo earnings criteria—this is more
r unemployed men (Yoon, et al.,
ly set eligibility standards for UI and
it are more or less inclusive and more
aimants. For example, some states
“moveable” base period, allowing
ntage of the claimant. Source: U.S.
, Unemployment Insurance Service,

power to decide who receives
nce benefits, some states set high
y excluding many low earners. A
;" if it was relatively generous to low
se period wages were less than or
igh quarter wages were less than or
base period wages were more than
arter wages were more than \$1,000,
"no;" "sometimes" was defined as
quarter wages which fell between
anges.

ncept of pay equity (also known as
 refers to a set of remedies designed
jobs that are undervalued at least
gender or race of the workers who
1997, 20 states had implemented
: wages of workers in female-domi-
ates' civil services (National Commit-
1997). A study by the Institute for
search found that for states that
quity remedies, the remedies
ale wage ratios (Hartmann and

Appendix III: State-by-State Rankings on the Composite Indices and their Components

POLITICAL PARTICIPATION AND REPRESENTATION	Composite Index		Women in Elected Office		Percent of Women Registered to Vote in 1992 and 1994		Percent of Women Who Voted in 1992 and 1994		Number of Institutional Resources Available to Women in the State	
	Score	Rank	Score	Rank	Percent	Rank	Percent	Rank	Score	Rank
Alabama	-3.10	41	0.66	48	73.2%	17	54.0%	28	2.5	11
Alaska	1.30	20	1.81	20	73.8%	16	64.0%	4	1	41
Arizona	3.16	13	3.07	4	65.0%	34	51.7%	34	1	41
Arkansas	-5.45	45	1.03	40	65.2%	33	51.7%	34	0.5	47
California	5.27	3	3.37	2	58.1%	48	48.4%	42	3	1
Colorado	3.55	12	2.55	6	72.4%	19	59.0%	18	1.25	38
Connecticut	4.72	5	2.38	10	74.9%	12	61.0%	15	2.25	13
Delaware	3.81	6	2.90	5	65.0%	34	52.6%	31	2	21
District of Columbia	N/A	N/A	N/A	N/A	73.9%	N/A	50.6%	N/A	2	N/A
Florida	-1.92	37	1.47	30	61.3%	45	47.7%	44	3	1
Georgia	-4.63	43	0.93	42	60.9%	46	44.3%	49	3	1
Hawaii	-0.73	29	2.40	9	57.8%	49	42.4%	50	2	21
Idaho	2.35	14	1.93	16	70.2%	25	61.5%	10	2.25	13
Illinois	2.00	16	2.24	12	69.2%	26	54.0%	28	2	21
Indiana	-1.22	32	1.63	24	63.3%	42	53.9%	30	2	21
Iowa	-0.35	26	1.31	33	76.8%	7	61.7%	9	1.25	38
Kansas	1.58	19	2.33	11	72.6%	18	61.3%	12	0	50
Kentucky	-5.84	46	0.54	49	62.9%	43	52.3%	33	2	21
Louisiana	-0.39	27	1.48	28	74.0%	15	61.4%	11	1	41
Maine	9.10	1	3.27	3	83.8%	2	68.1%	2	1	41
Maryland	3.81	6	2.52	7	68.9%	27	50.9%	37	3	1
Massachusetts	-0.96	30	1.03	40	70.3%	24	57.1%	22	3	1
Michigan	0.71	23	1.45	31	75.4%	10	58.4%	21	2.25	13
Minnesota	5.21	4	2.08	14	83.3%	3	64.3%	3	2.25	13
Mississippi	-6.43	49	0.51	50	76.6%	9	50.5%	38	0.25	48
Missouri	2.16	15	1.59	26	75.2%	11	58.6%	20	3	1
Montana	3.65	8	1.83	18	76.7%	8	68.5%	1	2	21
Nebraska	-2.18	34	1.05	39	74.4%	14	60.2%	16	1.5	35
Nevada	-2.18	38	1.84	17	57.1%	50	48.0%	43	2	21
New Hampshire	3.60	10	2.47	8	68.0%	30	59.5%	17	2	21
New Jersey	-0.22	24	1.76	22	65.8%	32	54.8%	27	2	21
New Mexico	-1.84	36	1.48	28	63.4%	39	49.8%	40	2.5	11
New York	-2.50	39	1.29	34	60.9%	46	48.8%	41	3	1
North Carolina	-2.98	40	1.08	38	66.1%	31	46.4%	46	3	1
North Dakota	3.60	10	1.39	32	92.4%	1	63.5%	7	2.25	13
Ohio	-0.60	28	1.51	27	68.1%	29	56.8%	24	2	21
Oklahoma	-1.43	33	1.10	37	72.1%	20	56.4%	25	2.25	13
Oregon	3.61	9	2.01	15	77.2%	6	61.2%	13	2.25	13
Pennsylvania	-6.23	48	0.69	46	62.2%	44	50.4%	39	1.5	35
Rhode Island	-0.33	25	1.61	25	68.6%	28	55.6%	26	2	21
South Carolina	-4.88	44	0.70	45	64.4%	36	45.4%	48	3	1
South Dakota	1.20	21	1.71	23	79.3%	5	61.1%	14	1	41
Tennessee	-7.31	50	0.78	44	64.0%	37	51.1%	36	0	50
Texas	-1.70	35	1.83	18	63.4%	39	45.7%	47	2	21
Utah	-1.06	31	1.23	36	70.7%	23	58.8%	19	2	21
Vermont	1.87	17	1.80	21	74.7%	13	63.2%	8	1.5	35
Virginia	-3.58	42	0.79	43	63.4%	39	52.5%	32	3	1
Washington	7.77	2	3.74	1	70.8%	21	57.1%	22	1.25	38
West Virginia	-6.03	47	0.68	47	63.6%	38	46.8%	45	2	21
Wisconsin	1.66	18	1.24	35	82.2%	4	63.9%	5	2.25	13
Wyoming	0.95	22	2.17	13	70.8%	21	63.6%	6	1	41
United States			1.65		66.5%		53.2%		2.0	(Median)

EMPLOYMENT AND EARNINGS

Composite Index

State	Score	Rank
Alabama	3.45	51
Alaska	4.46	3
Arizona	3.80	38
Arkansas	3.72	42
California	4.20	8
Colorado	4.11	11
Connecticut	4.34	6
Delaware	4.10	12
District of Columbia	5.06	1
Florida	3.86	26
Georgia	3.86	26
Hawaii	4.08	15
Idaho	3.81	35
Illinois	4.03	18
Indiana	3.70	43
Iowa	3.85	28
Kansas	4.03	18
Kentucky	3.69	44
Louisiana	3.55	47
Maine	3.84	30
Maryland	4.56	2
Massachusetts	4.38	5
Michigan	3.84	30
Minnesota	4.09	14
Mississippi	3.53	49
Missouri	4.00	20
Montana	3.78	39
Nebraska	3.84	30
Nevada	3.93	24
New Hampshire	4.28	7
New Jersey	4.15	9
New Mexico	3.84	30
New York	4.08	15
North Carolina	3.66	46
North Dakota	3.81	35
Ohio	3.55	47
Oklahoma	3.95	22
Oregon	3.85	28
Pennsylvania	4.14	10
Rhode Island	3.68	45
South Carolina	3.89	25
South Dakota	3.77	40
Tennessee	3.98	21
Texas	3.81	35
Utah	4.40	4
Vermont	4.10	12
Virginia	4.08	15
Washington	3.46	50
West Virginia	3.95	22
Wisconsin	3.74	41
Wyoming	3.74	41
United States		

Median Annual Earnings
Full-Time, Year-Round
for Employed Women

Dollars	Rank
\$20,577	45
\$31,380	1
\$21,906	35
\$20,577	45
\$28,158	7
\$24,749	21
\$30,541	3
\$25,721	13
\$30,865	2
\$23,169	28
\$23,169	28
\$25,276	16
\$22,223	33
\$26,329	11
\$21,606	37
\$21,606	37
\$23,581	26
\$22,635	31
\$20,235	48
\$21,906	35
\$29,241	4
\$28,808	5
\$25,721	13
\$24,909	18
\$19,494	51
\$23,663	25
\$21,606	37
\$20,577	45
\$24,909	18
\$25,992	12
\$28,435	6
\$21,606	37
\$27,400	8
\$22,635	31
\$19,548	50
\$24,692	22
\$19,852	49
\$24,909	18
\$25,450	15
\$26,750	10
\$21,606	37
\$21,063	42
\$22,743	30
\$23,196	34
\$22,116	34
\$25,276	16
\$24,692	22
\$27,075	9
\$21,063	42
\$24,201	24
\$21,063	42
\$24,909	18

Earnings Ratio Between
Full-Time, Year-Round
Employed Women and Men

Percent	Rank
63.3%	50
66.3%	44
69.7%	33
76.7%	4
76.4%	5
66.8%	42
70.7%	29
75.8%	7
87.5%	1
75.9%	6
71.0%	27
74.8%	10
70.3%	30
70.8%	28
66.5%	43
68.3%	37
72.6%	19
69.7%	33
64.4%	48
67.5%	41
75.0%	9
73.7%	15
66.0%	45
71.2%	25
70.2%	31
74.6%	11
73.3%	17
71.4%	23
73.9%	14
73.6%	16
67.9%	40
72.5%	21
74.4%	12
74.1%	13
64.0%	49
69.1%	36
63.3%	50
69.6%	35
71.2%	25
72.6%	19
70.0%	32
76.9%	3
72.0%	22
75.2%	8
68.1%	39
81.9%	2
71.3%	24
73.1%	18
64.8%	46
68.3%	37
64.8%	46
72.3%	46

Percent of Employed
Women, Managerial or
Professional Occupations

Percent	Rank
24.6%	51
34.9%	4
28.5%	26
25.6%	46
32.0%	10
31.8%	13
33.4%	7
28.9%	21
47.4%	1
28.9%	21
28.6%	24
30.0%	17
27.0%	36
29.3%	19
24.8%	50
27.4%	35
30.5%	15
26.2%	44
28.4%	27
29.6%	1
37.9%	2
35.4%	3
27.7%	31
27.9%	30
25.1%	48
27.7%	31
26.8%	37
26.3%	42
26.8%	37
33.6%	6
32.6%	8
31.0%	14
31.9%	12
31.9%	42
26.3%	37
26.8%	37
26.6%	40
28.4%	27
29.1%	20
27.6%	33
32.3%	9
25.1%	48
26.2%	44
25.4%	47
30.1%	16
28.6%	24
34.6%	5
32.0%	11
28.3%	23
28.3%	29
26.6%	40
27.6%	33
30.3%	33

Percent of
Women in the
Labor Force

Percent	Rank
55.3%	46
66.4%	6
59.6%	33
58.4%	37
56.5%	41
67.2%	4
60.7%	25
62.9%	17
61.4%	20
54.5%	48
59.2%	35
61.2%	21
62.1%	18
60.3%	28
64.2%	13
66.6%	5
63.4%	15
56.0%	42
53.6%	49
61.6%	19
64.5%	12
60.8%	23
60.5%	40
57.9%	40
69.6%	1
55.8%	43
65.0%	10
59.6%	33
68.4%	2
60.5%	27
65.3%	8
58.7%	36
55.6%	45
52.8%	50
59.8%	32
64.9%	11
58.3%	39
55.7%	44
60.8%	23
55.0%	47
58.4%	37
59.9%	31
65.8%	7
60.3%	28
60.0%	30
61.2%	21
65.3%	8
63.0%	16
60.6%	26
46.3%	51
68.2%	3
64.1%	14
58.9%	33

Appendix III: State-by-State Rankings on the Composite Indices and their Components (continued)

ECONOMIC AUTONOMY

State	Composite Index		Percent of Women with Four or More Years of College		Percent of Women without Health Insurance		Percent of Women in Poverty		Percent of Businesses that are Women-Owned	
	Score	Rank	Percent	Rank	Percent	Rank	Percent	Rank	Percent	Rank
Alabama	3.63	46	13.5%	45	15.6%	40	16.9%	45	31.5%	47
Alaska	4.31	8	22.2%	7	12.1%	27	8.1%	2	32.9%	35
Arizona	4.01	22	17.2%	25	17.2%	44	15.5%	38	37.6%	3
Arkansas	3.50	50	11.9%	50	19.9%	49	16.8%	44	31.6%	45
California	4.13	16	20.1%	13	16.9%	43	15.1%	37	35.5%	12
Colorado	4.50	2	23.5%	4	12.4%	29	9.4%	6	37.6%	3
Connecticut	4.44	4	23.8%	3	8.6%	5	9.5%	7	33.6%	28
Delaware	4.15	15	18.7%	16	13.2%	32	9.8%	9	35.3%	14
District of Columbia	4.84	1	30.6%	1	16.1%	42	20.1%	48	41.3%	1
Florida	3.84	38	15.1%	36	17.3%	45	14.8%	35	35.2%	16
Georgia	3.92	31	16.8%	27	14.9%	37	14.0%	33	33.6%	28
Hawaii	4.40	7	20.9%	11	6.7%	1	11.1%	18	37.6%	3
Idaho	3.85	36	14.6%	41	12.1%	27	12.1%	25	33.8%	25
Illinois	4.11	19	18.4%	17	10.2%	14	12.2%	26	34.5%	21
Indiana	3.83	41	13.4%	46	11.1%	17	10.9%	15	34.4%	22
Iowa	3.95	28	15.0%	38	8.8%	7	10.7%	14	34.3%	23
Kansas	4.09	20	18.4%	17	12.0%	25	13.4%	31	34.7%	19
Kentucky	3.56	48	12.2%	49	15.0%	38	16.9%	45	31.4%	48
Louisiana	3.62	47	14.5%	42	19.2%	48	21.3%	49	32.5%	37
Maine	3.98	26	17.2%	25	11.4%	20	10.9%	15	32.2%	40
Maryland	4.46	3	23.1%	6	12.5%	30	9.7%	8	37.1%	6
Massachusetts	4.42	6	24.1%	2	10.8%	16	10.2%	11	33.3%	31
Michigan	3.95	28	15.1%	36	9.6%	10	12.6%	29	35.2%	16
Minnesota	4.20	12	19.2%	15	8.0%	4	10.9%	15	34.6%	20
Mississippi	3.49	51	13.3%	47	18.4%	47	21.4%	50	30.2%	51
Missouri	3.90	32	15.2%	35	11.9%	23	11.6%	35	33.8%	25
Montana	4.00	23	18.0%	20	12.0%	25	14.8%	35	33.2%	32
Nebraska	4.06	21	16.7%	28	9.4%	9	10.6%	13	35.1%	18
Nevada	3.84	38	12.8%	48	15.1%	39	10.1%	10	36.9%	7
New Hampshire	4.25	10	21.1%	9	10.7%	15	7.6%	1	32.2%	40
New Jersey	4.19	13	21.0%	10	12.8%	31	9.0%	4	31.9%	42
New Mexico	3.90	32	17.8%	22	24.1%	51	21.6%	42	37.8%	2
New York	4.13	16	20.7%	12	14.5%	36	16.6%	42	34.1%	24
North Carolina	3.87	34	15.7%	32	11.9%	23	13.4%	31	32.4%	38
North Dakota	3.94	30	16.7%	28	11.9%	23	13.1%	30	31.7%	44
Ohio	3.84	38	14.4%	43	8.6%	5	13.1%	31	32.4%	38
Oklahoma	3.76	43	15.0%	38	11.6%	21	12.4%	28	33.7%	27
Oregon	4.16	14	18.1%	19	17.4%	46	16.3%	40	33.6%	28
Pennsylvania	3.85	36	15.3%	34	11.8%	22	11.3%	19	36.8%	8
Rhode Island	4.00	23	18.0%	20	9.7%	11	11.9%	23	31.2%	49
South Carolina	3.76	43	14.7%	40	13.9%	34	16.3%	40	31.6%	45
South Dakota	3.87	34	15.5%	33	8.8%	7	14.1%	34	32.8%	36
Tennessee	3.75	45	14.0%	44	7.8%	2	15.9%	39	31.9%	42
Texas	3.82	42	17.4%	24	21.9%	50	16.7%	43	31.1%	50
Utah	4.13	16	23.2%	5	10.1%	12	8.2%	3	33.0%	34
Vermont	4.44	4	21.3%	8	10.1%	12	10.2%	11	35.3%	14
Virginia	4.27	9	19.7%	14	13.4%	33	11.8%	21	35.7%	11
Washington	4.24	11	10.9%	51	11.1%	17	12.0%	24	35.4%	13
West Virginia	3.51	49	16.0%	31	14.3%	35	18.1%	47	36.5%	9
Wisconsin	3.99	25	16.1%	30	7.9%	3	9.3%	5	32.3%	39
Wyoming	3.96	27	17.6%	17	15.8%	41	11.8%	21	33.1%	33
United States	4.00				13.8%		13.7%		35.9%	10

Composite Index			Notification		Period		Funding		Providers		Coverage		Subcommittee	
State	Score	Rank	Score		Score		Score		Score		Score		Score	
Alabama	1.09	30	0		1		0		0.09		0.50		0.00	0.50
Alaska	2.36	15	0*		1		1		0.28		0.00		0.33	0.50
Arizona	0.90	34	0*		1		0		0.27		0.00		0.00	0.25
Arkansas	0.67	38	0		1		0		0.04		0.00		0.00	0.25
California	2.67	13	0*		1		1		0.67		0.50		0.00	0.50
Colorado	1.07	31	0*		1		0		0.24		0.00		0.33	0.00
Connecticut	4.50	3	1		1		1		0.88		0.50		1.00	0.75
Delaware	0.80	36	0		0*		0		0.67		0.00		0.00	0.25
District of Columbia	3.04	10	1		1		0		1.00		0.00		0.67	0.75
Florida	1.89	18	1		1		0		0.31		0.50		0.33	0.00
Georgia	1.02	32	0		1		0		0.14		0.50		0.00	0.25
Hawaii	5.62	1	1		1		1		1.00		1.00		1.00	0.25
Idaho	1.49	22	0		0		1		0.11		0.50		0.00	0.25
Illinois	2.22	16	0*		1		1		0.09		0.50		0.00	0.75
Indiana	0.60	39	0		0		0		0.10		0.50		0.00	0.50
Iowa	1.79	20	0		1		0		0.04		0.00		0.00	0.50
Kansas	0.19	48	0		0		0		0.06		0.00		0.00	0.25
Kentucky	0.48	41	0		0*		0		0.02		0.00		0.33	0.25
Louisiana	1.21	28	0		0		0		0.08		0.00		0.00	0.25
Maine	1.46	23	0		1		0		0.50		0.00		0.33	0.25
Maryland	3.08	9	0		1		0		0.50		1.00		0.33	0.50
Massachusetts	2.94	11	0		0*		1		0.86		0.50		0.33	1.00
Michigan	0.47	42	0		0*		0		0.22		0.00		0.00	0.50
Minnesota	2.80	12	0		1		1		0.05		0.00		0.00	1
Mississippi	0.18	49	0		0		0		0.05		0.00		0.00	0.25
Missouri	1.25	27	0		1		0		0.04		0.50		0.33	0.25
Montana	1.76	21	0*		0*		1		0.13		1.00		0.00	0.25
Nebraska	0.16	50	0		0		0		0.03		0.00		0.00	0.25
Nevada	0.93	33	0*		1		0		0.18		0.00		0.00	0.50
New Hampshire	3.50	6	1		1		0		0.50		0.00		1.00	0.00
New Jersey	3.47	7	1		1		1		0.76		0.00		0.33	0.75
New Mexico	2.43	14	0*		1		0		0.18		1.00		0.00	0.50
New York	4.68	2	1		1		1		0.60		0.50		0.33	1.00
North Carolina	1.30	26	0		1		0		0.34		0.00		0.33	0.25
North Dakota	0.15	5	0		0		0		0.02		0.00		0.00	0.25
Ohio	0.35	45	0		0		0		0.10		0.50		0.00	0.50
Oklahoma	1.43	24	1		1		0		0.05		0.50		0.00	0.25
Oregon	3.83	5	1		1		1		0.25		0.00		0.33	0.50
Pennsylvania	0.88	35	0		0		0		0.30		0.00		0.33	0.50
Rhode Island	1.15	29	0		1		0		0.40		0.00		0.00	0.50
South Carolina	0.60	39	0		0		0		0.22		0.50		0.00	0.25
South Dakota	0.40	44	0		0		0		0.02		0.50		0.00	0.25
Tennessee	0.24	47	0*		0*		0		0.11		0.00		0.00	0.25
Texas	1.82	19	1		1		0		0.07		1.00		0.00	0.50
Utah	0.45	43	0		0		0		0.07		0.50		0.00	0.25
Vermont	4.32	4	1		1		1		0.57		0.50		1.00	0.25
Virginia	1.38	25	0		1		0		0.25		1.00		0.00	0.50
Washington	3.11	8	1		1		1		0.28		0.50		0.33	0.25
West Virginia	2.17	17	0		1		1		0.04		1.00		0.00	0.25
Wisconsin	0.32	46	0		0*		0		0.07		0.50		0.00	0.00
Wyoming	0.76	37	0		1		0		0.13		0.00		0.00	0.25

* Indicates the legislation is not enforced but remains part of the statutory code.

Appendix IV: State and National Resources

Selected Florida Resources

CASA
PO Box 414
St. Petersburg, FL 33731
Tel: (813) 823-4413

Commission on the Status of Women
Florida Atlantic University
PO Box 3091
Boca Raton, FL 33431-0991
Tel: (561) 297-3910

Community Coalition Against
Poverty
1810 NW 23rd Blvd.
#276
Gainesville, FL 32605
Tel: (352) 377-0881

Dade Human Services Coalition
1172 S. Dixie Highway
#243
Miami, FL 33146
Tel: (305) 576-5001

Department of Family, Youth and
Community Services
Institute for Food and Agricultural
Services (IFAS)
University of Florida
3041 McCarty Hall
PO Box 110310
Gainesville, FL 32611-0310
Tel: (352) 392-2201

Department of Health and
Epidemiology
University of Florida
PO Box 100177
Gainesville, FL 32610-0177
Tel: (352) 395-8041

Department of Mental Health Law
and Policy
Louis de la Parte Florida Mental
Health Institute
13301 North Bruce B. Downs Blvd.
Tampa, FL 33612-3899
Tel: (813) 974-4510

Florida AFL-CIO
135 South Monroe Street
Tallahassee, FL 32301
Tel: (850) 224-6926

Florida Coalition of Abortion
Providers
577 E. Call Street
Tallahassee, FL 32301
Tel: (850) 224-2007

Florida Coalition of Labor Union
Women
2875 Sydney Street
Jacksonville, FL 32205
Tel: (904) 388-4491

Florida Commission on the Status of
Women
Office of the Attorney General
State Capitol
Tallahassee, FL 32399-1050
Tel: (850) 414-3300

Florida Department of Labor and
Employment Security
Division of Jobs and Benefits
Bureau of Labor Market and
Performance Information
The Atkins Building, Suite 300
1320 Executive Center Drive
Tallahassee, FL 32399-0667
Tel: (850) 488-1048

Florida NOW
11280 Freedom Court
Seminole, FL 33772
Tel: (813) 393-4676

Florida Women's Consortium
1000 E. Camino Real, 2B
Boca Raton, FL 33432
Tel: (407) 338-8883
Fax: (407) 395-9829

Gainesville Area NOW
PO Box 2235
Gainesville, FL 32602
Tel: (352) 376-7479

Girls, Inc.
201 South Tuttle Avenue
Sarasota, FL 34237
Tel: (914) 366-6646

National Hook-Up of Black Women
PO Box 6647
Tallahassee, FL 32314
Tel: (850) 877-0198

State of Florida
Executive Office of the Governor
The Capitol
Room 726
Tallahassee, FL 32399-0001
Tel: (850) 413-0574

Women's Studies Center
Florida International University
DM 212 University Park
Miami, FL 33199
Tel: (305) 348-2408

National Resources

AFL-CIO Department of Working Women
815 16th Street, NW
Washington, DC 20006
Tel: (202) 637-5064
Fax: (202) 637-6902
<http://www.aflcio.org>

African American Women's Association
PO Box 55122
Washington, DC 20011
Tel/Fax: (202) 882-8263

Alan Guttmacher Institute
1120 Connecticut Avenue, Suite 460
Washington, DC 20036
Tel: (202) 296-4012
Fax: (202) 223-5756
<http://www.agi-usa.org>

American Association of Retired Persons
601 E Street, NW
Washington, DC 20049
Tel: (202) 434-2277
Fax: (202) 434-6477
<http://www.aarp.org>

American Association of University Women
1111 16th Street, NW
Washington, DC 20036
Tel: (202) 785-7700
Fax: (202) 872-1425
<http://www.aauw.org>

American Medical Women's Association
801 North Fairfax Street, #400
Alexandria, VA 22314
Tel: (703) 838-0500
Fax: (703) 549-3864
<http://www.amwa-doc.org>

American Nurses Association
600 Maryland Avenue, SW, Suite 100W
Washington, DC 20024-2571
Tel: (202) 651-7000
Fax: (202) 651-7001

American Women's Economic Development Corporation
71 Vanderbilt Avenue, Suite 320
New York, NY 10169
Tel: (212) 692-9100
Fax: (212) 692-2718

The Annie E. Casey Foundation
701 St. Paul Street
Baltimore, MD 21202
Tel: (410) 547-6600
Fax: (410) 223-2927
<http://www.aecf.org>

Asian Women in Business/Asian American Professional Women
One West 34th Street, Suite 1201
New York, NY 10001
Tel: (212) 868-1368
Fax: (212) 868-1373

Association of Black Women Entrepreneurs, Inc.
PO Box 49368
Los Angeles, CA 90049
Tel/Fax: (213) 624-8639

Black Women United for Action
6551 Loisdale Court, Suite 222
Springfield, VA 22150
Tel: (703) 922-5757
Fax: (703) 971-5892

Business and Professional Women/USA
2012 Massachusetts Avenue, NW
Washington, DC 20036
Tel: (202) 293-1100
Fax: (202) 861-0298
<http://www.bpwusa.org>

Catalyst
250 Park Avenue South
New York, NY 10003-1459
Tel: (212) 777-8900

Center for Advancement of Public Policy, Washington Feminist Faxnet
1735 S Street, NW
Washington, DC 20009
Tel: (202) 797-0606
Fax: (202) 265-6245
<http://www.essential.org/capp>

Center for the American Woman and Politics
Eagleton Institute of Politics,
Rutgers University
191 Riders Lane
New Brunswick, NJ 08901
Tel: (732) 828-2210
Fax: (732) 932-6778

Center for the Child Care Workforce
733 15th Street, NW, Suite 1037
Washington, DC 20005-2112
Tel: (202) 737-7700 or (800) U-R-WORTHY
Fax: (202) 737-0370
<http://www.ccw.org>

Centers for Disease Control and Prevention
National Center for Health Statistics
6525 Belcrest Road
Hyattsville, MD 20782
Tel: (301) 436-8500
<http://www.cdc.gov>

Center for Law and Social Policy
1616 P Street, NW, Suite 150
Washington, DC 20036
Tel: (202) 328-5140
Fax: (202) 328-5195
<http://www.clasp.org>

Center for Policy Alternatives
1875 Connecticut Avenue, NW, Suite 710
Washington, DC 20009
Tel: (800) 935-0699
Fax: (202) 387-2539
<http://www.cfpa.org>

Center for Reproductive Law and Policy
120 Wall Street
New York, NY 10005
Tel: (212) 514-5534
Fax: (212) 514-5538
<http://www.crlp.org>

Center for Research on Women
University of Memphis
Clement Hall, Room 339
Memphis, TN 38152
Tel: (901) 678-2770
Fax: (901) 678-3652

Center for Women's Policy Studies
1211 Connecticut Avenue, NW, Suite 312
Washington, DC 20036
Tel: (202) 872-1770
Fax: (202) 296-8962

Center on Budget and Policy Priorities
820 First Street, NE, Suite 510
Washington, DC 20002
Tel: (202) 408-1080
Fax: (202) 408-1056
<http://www.cbpp.org>

Child Care Action Campaign
330 Seventh Avenue, 7th Floor
New York, NY 10001
Tel: (212) 239-0138
Fax: (212) 268-6515

Children's Defense Fund
25 E Street, NW
Washington, DC 20001
Tel: (202) 628-8787 or (800) CDF-1200
Fax: (202) 662-3540
<http://www.childrensdefense.org>

Church Women United
475 Riverside Drive, Suite 500
New York, NY 10115
Tel: (212) 870-2347
Fax: (212) 870-2338
<http://www.churchwomen.org>

Coalition of Labor Union Women
1126 16th Street, NW, Suite 104
Washington, DC 20036
Tel: (202) 466-4610
Fax: (202) 776-0537

Coalition on Human Needs
1000 Wisconsin Avenue, NW
Washington, DC 20007
Tel: (202) 342-0726
Fax: (202) 342-1856
<http://www.chn.org>

Economic Policy Institute
1660 L Street, NW, Suite 1200
Washington, DC 20036
Tel: (202) 775-8810
Fax: (202) 775-0819
<http://www.epinet.org>

Equal Rights Advocates
1663 Mission Street, Suite 550
San Francisco, CA 94103
Tel: (415) 621-0672
Fax: (415) 621-6744
<http://www.equalrights.org>

Family Violence Prevention Fund
383 Rhode Island Street, Suite 304
San Francisco, CA 94103-5133
Tel: (415) 252-8900
Fax: (415) 252-8991

The Feminist Majority Foundation
1600 Wilson Boulevard, Suite 801
Arlington, VA 22209
Tel: (703) 522-2214
Fax: (703) 522-2219
<http://www.feminist.org>

General Federation of Women's Clubs
1734 N Street, NW
Washington, DC 20036-2990
Tel: (202) 347-3168
Fax: (202) 835-0246

Hadassah
50 West 58th Street
New York, NY 10019
Tel: (212) 303-8136
Fax: (212) 303-4525
<http://www.hadassah>

Hispanic Women's Council
3509 West Beverly Boulevard
Montebello, CA 90640
Tel: (213) 728-9991
Fax: (213) 725-0939

HumanSERVE
Campaign for Universal Voter Registration
622 West 113th Street, Suite 410
New York, NY 10025
Tel: (212) 854-4053
Fax: (212) 854-8727
<http://www.igc.org/humanserve>

Institute for Women's Policy Research
1400 20th Street, NW, Suite 104
Washington, DC 20036
Tel: (202) 785-5100
Fax: (202) 833-4362
<http://www.iwpr.org>

Jacobs Institute of Women's Health
409 12th Street, SW
Washington, DC 20024-2188
Tel: (202) 863-4990
Fax: (202) 554-0453
<http://www.jiwh.org>

Joint Center for Political and
Economic Studies
1090 Vermont Avenue, NW, Suite 1100
Washington, DC 20005-4961
Tel: (202) 789-3500
Fax: (202) 789-6390
<http://www.jointctr.org>

League of Women Voters
1730 M Street, NW
Washington, DC 20036
Tel: (202) 429-1965
Fax: (202) 429-0854
<http://www.lwv.org>

MANA - A National Latina Organization
1725 K Street, NW, Suite 501
Washington, DC 20006
Tel: (202) 833-0060
Fax: (202) 496-0588
<http://www.hermana.org>

Ms. Foundation for Women
120 Wall Street, 33rd Floor
New York, NY 10005
Tel: (212) 742-2300
Fax: (212) 742-1653
<http://www.msfoundation.org>

National Abortion and Reproductive
Rights Action League
1156 15th Street, NW, Suite 700
Washington, DC 20005
Tel: (202) 973-3000
Fax: (202) 973-3097
<http://www.naral.org>

National Association of Women Business
Owners
1100 Wayne Avenue, Suite 830
Silver Spring, MD 20910
Tel: (301) 608-2590
Fax: (301) 608-2596
<http://www.nawbo.org>

National Association of Commissions for
Women
8630 Fenton Street, Suite 934
Silver Spring, MD 20910
Tel: (301) 585-8101
Fax: (301) 585-3445
<http://www.nacw.org>

National Association of Negro Business
and Professional Women's Clubs, Inc.
1806 New Hampshire Avenue, NW
Washington, DC 20009
Tel: (202) 483-4206
Fax: (202) 462-7253
<http://www.nanbpwc.org>

National Center for American Indian
Enterprise Development
953 East Juanita Avenue
Mesa, AZ 85204
Tel: (602) 545-1298
Fax: (602) 545-4208
<http://www.ncied.org>

National Committee on Pay Equity
1126 16th Street, NW, Suite 411
Washington, DC 20036
Tel: (202) 331-7343
Fax: (202) 331-7406
<http://www.feminist.com/fairpay.htm>

National Conference of Puerto Rican
Women
5 Thomas Circle, NW
Washington, DC 20005
Tel: (202) 387-4716

National Council for Research on Women
11 Hanover Square, 20th Floor
New York, NY 10005
Tel: (212) 785-7335
Fax: (212) 785-7350
<http://www.ncrw.org>

National Council of Negro Women
1001 G Street, NW, Suite 800
Washington, DC 20001
Tel: (202) 628-0015
Fax: (202) 628-0233

National Council of Women's Organizations
c/o National Committee on Pay Equity
1126 16th Street, NW, Suite 411
Washington, DC 20036
Tel: (202) 331-7343
Fax: (202) 331-7406

National Education Association
1201 16th Street, NW
Washington, DC 20036
Tel: (202) 833-4000
Fax: (202) 822-7397
<http://www.nea.org>

National Employment Law Project, Inc.
55 John Street, 7th Floor
New York, NY 10038
Tel: (212) 285-3025
Fax: (212) 285-3044

National Foundation of Women Business Owners
1180 Wayne Avenue, Suite 830
Silver Spring, MD 20910
Tel: (301) 495-4975
Fax: (301) 495-4979
<http://www.nfwbo.org>

National Gay and Lesbian Task Force
2520 17th Street, NW
Washington, DC 20009
Tel: (202) 332-6482
Fax: (202) 332-0207
<http://www.ngltf.org>

National Organization for Women
1000 16th Street, NW, Suite 700
Washington, DC 20036
Tel: (202) 331-0066
Fax: (202) 785-8576
<http://www.now.org>

NOW Legal Defense and Education Fund
99 Hudson Street, 12th Floor
New York, NY 10013
Tel: (212) 925-6635
Fax: (212) 226-1066
<http://www.nowldef.org>

National Partnership for Women and Families
1875 Connecticut Avenue, NW, Suite 710
Washington, DC 20009
Tel: (202) 986-2600
Fax: (202) 986-2539
<http://www.nationalpartnership.org>

National Political Congress of Black Women
8401 Colesville Road, Suite 400
Silver Spring, MD 20910
Tel: (301) 562-8000
Fax: (301) 562-8303
<http://www.natpolcongbblackwomen.org>

National Resource Center on Domestic Violence
6400 Flank Drive
Harrisburg, PA 17112-2778
Tel: (800) 932-4632
Fax: (717) 671-8149

National Women's Business Council
409 Third Street, SW, Suite 5850
Washington, DC 20024
Tel: (202) 205-3850
Fax: (202) 205-6825
<http://www.womenconnect.com>

National Women's Health Network
514 10th Street, NW, Suite 400
Washington, DC 20004
Tel: (202) 347-1140
Fax: (202) 347-1168

National Women's Law Center
11 Dupont Circle, NW, Suite 800
Washington, DC 20036
Tel: (202) 588-5180
Fax: (202) 588-5185

National Women's Political Caucus
1211 Connecticut Avenue, NW, Suite 501
Washington, DC 20008
Tel: (202) 785-1100
Fax: (202) 785-3605
<http://www.nwpc.org>

National Women's Studies Association
7100 Baltimore Avenue, Suite 301
College Park, MD 20740
Tel: (301) 403-0525
Fax: (301) 403-4137
<http://www.nwsa.org>

9 to 5, National Association of Working Women
231 Wisconsin Avenue, Suite 900
Milwaukee, WI 53203
Tel: (414) 274-0925
Fax: (414) 272-2870
<http://www.members.aol.com/nwsa925>

Older Women's League
666 11th Street, NW, Suite 700
Washington, DC 20001
Tel: (202) 783-6686
Fax: (202) 638-2356

Pension Rights Center
918 16th Street, NW, Suite 704
Washington, DC 20006
Tel: (202) 296-3776
Fax: (202) 833-2472

Planned Parenthood Federation of America
810 Seventh Avenue
New York, NY 10019
Tel: (212) 347-8500
Fax: (212) 783-1007
<http://www.plannedparenthood.org>

Population Reference Bureau, Inc.
1875 Connecticut Avenue, NW, Suite 520
Washington, DC 20009-5728
Tel: (202) 483-1100
Fax: (202) 483-3937
<http://www.prb.org>

The Urban Institute
2100 M Street, NW
Washington, DC 20037
Tel: (202) 833-7200
Fax: (202) 659-8985
<http://www.urban.org>

U.N. Secretariat of the Fourth World Conference on Women
Division for the Advancement of Women
Two United Nations Plaza
New York, NY 10017
Tel: (212) 963-8385
Fax: (212) 963-3463

U.S. Department of Commerce,
Bureau of the Census
Population Division
Washington, DC 20233
Tel: (301) 457-2422
Fax: (301) 457-2643
<http://www.census.gov>

U.S. Department of Education
600 Independence Avenue, SW
Washington, DC 20202
Tel: (202) 401-1576
Fax: (202) 401-0596
<http://www.ed.gov>

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201
Tel: (202) 690-7204
<http://www.os.dhhs.gov>

U.S. Department of Labor, Bureau of
Labor Statistics
Washington, DC 20212
Tel: (202) 606-6392 for State Labor
Force Data
<http://stats.bls.gov>

Victim Services, Inc.
2 Lafayette Street, 3rd Floor
New York, NY 10007
Tel: (212) 577-7700
Fax: (212) 985-0331

White House Office for Women's
Initiatives & Outreach
Old Executive Office Building, Room 15
Washington, DC 20502
Tel: (202) 456-7300
Fax: (202) 456-7311
<http://www.whitehouse.gov>

Wider Opportunities for Women/National
Commission on Working Women
815 15th Street, NW, Suite 916
Washington, DC 20005
Tel: (202) 638-3143
Fax: (202) 638-4885
<http://www.w-o-w.org>

Women Employed
22 West Monroe, Suite 1400
Chicago, IL 60603
Tel: (312) 782-3902
Fax: (312) 782-5249

Women Work!
1625 K Street, NW, Suite 300
Washington, DC 20006
Tel: (202) 467-6346
Fax: (202) 467-5366

Women's Bureau
U.S. Department of Labor
200 Constitution Avenue, NW
Washington, DC 20210
Tel: (800) 219-6611
Fax: (202) 219-5529
<http://www.dol.gov/dol/wb>

Women's Environmental and
Development Organization
845 Third Avenue, 15th Floor
New York, NY 10022
Tel: (212) 759-7982
Fax: (212) 759-8647

Women's Institute for a Secure
Retirement
1201 Pennsylvania Avenue, NW, Suite
619
Washington, DC 20004
Tel: (202) 393-5452
Fax: (202) 638-1336

Women's Research and Education
Institute
1750 New York Avenue, NW, Suite 350
Washington, DC 20006
Tel: (202) 628-0444
Fax: (202) 628-0458

Young Women's Christian Association of
the USA (YWCA of the USA)
726 Broadway
New York, NY 10003
Tel: (212) 614-2700
Fax: (212) 667-9716

Young Women's Project
923 F Street, NW, 3rd Floor
Washington, DC 20004
Tel: (202) 393-0461
Fax: (202) 393-0065

Appendix V: List of Census Bureau Regions

East South Central

Alabama
Kentucky
Mississippi
Tennessee

West South Central

Arkansas
Louisiana
Oklahoma
Texas

West North Central

Iowa
Kansas
Minnesota
Missouri
Nebraska
North Dakota
South Dakota

East North Central

Illinois
Indiana
Michigan
Ohio
Wisconsin

Pacific West

Alaska
California
Hawaii
Oregon
Washington

Mountain West

Arizona
Colorado
Idaho
Montana
New Mexico
Nevada
Utah
Wyoming

New England

Connecticut
Maine
Massachusetts
New Hampshire
Rhode Island
Vermont

Middle Atlantic

New Jersey
New York
Pennsylvania

South Atlantic

Delaware
Florida
Georgia
Maryland
North Carolina
South Carolina
Virginia
West Virginia
District of Columbia

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