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Volume XXX June, 2003 Number 2

TABLE OF CONTENTS

The Mommy Track: The Consequences of Gender Ideology and Aspirations on Age at First Motherhood 3

Changing Women: An Ethnographic Study of Homeless Mothers and Popular Education 31

The Settlement House Tradition: Current Trends and Future Concerns 53

The First Four Months in a New Foster Placement: Psychosocial Adjustment, Parental Contact and Placement Disruption 69

Linking Welfare Clients to Jobs: Discretionary Use of Worker Social Capital 87

Head Start, Other Preschool Programs, & Life Success in a Youth Cohort 105

What's Need Got to Do with It? Barriers to Use of Nonprofit Social Services 127

Why Special Populations Are Not the Target of Family Preservation Services: A Case for Program Reform 149

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TABLE OF CONTENTS

THE MOMMY TRACK: THE CONSEQUENCES OF GENDER IDEOLOGY AND ASPIRATIONS ON AGE AT FIRST MOTHERHOOD 3
Jennifer Stewart

CHANGING WOMEN: AN ETHNOGRAPHIC STUDY OF HOMELESS MOTHERS AND POPULAR EDUCATION 31
Lorna Rivera

THE SETTLEMENT HOUSE TRADITION: CURRENT TRENDS AND FUTURE CONCERNS 53
Beverly Koerin

THE FIRST FOUR MONTHS IN A NEW FOSTER PLACEMENT: PSYCHOSOCIAL ADJUSTMENT, PARENTAL CONTACT AND PLACEMENT DISRUPTION 69
James G. Barber & Paul H. Delfabbro

LINKING WELFARE CLIENTS TO JOBS: DISCRETIONARY USE OF WORKER SOCIAL CAPITAL 87
Michelle Livermore & Alison Neustrom

HEAD START, OTHER PRESCHOOL PROGRAMS, & LIFE SUCCESS IN A YOUTH COHORT 105
Richard K. Caputo

WHAT'S NEED GOT TO DO WITH IT? BARRIERS TO USE OF NONPROFIT SOCIAL SERVICES 127
Rebecca Joyce Kissane

WHY SPECIAL POPULATIONS ARE NOT THE TARGET OF FAMILY PRESERVATION SERVICES: A CASE FOR PROGRAM REFORM 149
Ramona W. Denby & Carla M. Curtis
BOOK REVIEWS


*Drug War Heresies: Learning from Other Vices, Times & Places.* Robert J. MacCoun and Peter Reuter. Reviewed by Lorraine T. Midanik. 177

*Creating Fear: News and the Construction of a Crisis.* David L. Altheide. Reviewed by Allan Brawley. 179

*The Environment: Its Role in Psychosocial Functioning and Psychotherapy.* Carolyn Saari. Reviewed by Timothy Page. 182

*Ageism: Stereotyping and Prejudice Against Older Persons.* Todd Nelson (Ed.). Reviewed by Nancy R. Hooyman. 185

*Care Work: The Quest for Security.* Mary Daly (Ed.). Reviewed by Katherine van Wormer. 187

BOOK NOTES

*Children as Pawns: The Politics of Educational Reform.* Timothy A. Hacsi. 191


*Council on Social Work Education: Its Antecedents and First Twenty Years.* Katherine Kendall. 194

*Beyond the New Paternalism: Basic Security as Equality.* Guy Standing. 195

*The Invisible Caring Hand: American Congregations and the Provision of Welfare.* Ram A. Cnaan with Stephanie C. Boddie, Femida Handy, Gaynor Yancey and Richard Schneider. 197

*The New World of Welfare.* Rebecca Blank and Ron Haskins (Eds.). 199
While there is extensive and compelling evidence that growing up in an impoverished background leads to early fertility, few studies explain why early socioeconomic disadvantage leads to early childbearing. Using data from the National Longitudinal Survey of Youth, I test whether gender ideology, as well as educational and occupational aspirations, mediates the connection between poverty and teen fertility patterns. Traditional gender ideology depresses age at first motherhood. Adolescent aspirations appear to act as protective factors in the production of early pregnancy.

Introduction

Over the past two decades, teenage childbearing has received much scholarly investigation. Among women between the ages of fifteen and nineteen, 7.2% of white women, 15.8% of Hispanic women, and 14.4% of African American women have had one child (Bachu & O'Connell, 2001). Unfortunately, early childbearing has a variety of negative effects on the economic outcomes of both mother and child (Duncan & Hoffman, 1990; Hogan & Kitagawa, 1985; McLanahan, 1988). This research focuses on the processes that lead to teen motherhood.

Previous research has been limited in three important ways. First, the vast majority of studies have examined the teen childbearing patterns of either whites or African Americans (see e.g., Bumpass & McLanahan, 1989; Haveman & Wolfe, 1994; Hogan & Kitagawa, 1985). The inclusion of other racial and ethnic groups
may clarify the processes that contribute to teen fertility patterns. Second, while a few researchers have examined the effects of adolescent self-esteem on childbearing patterns (Nock, 1998; Oates, 1997), most studies emphasize the impact of poverty status and educational attainment on teen fertility. The role of more subjective factors such as perceptions of gender appropriate behaviors in contributing to teen pregnancy have not been widely examined. Third, previous research fails to consider the effect of teen’s educational and occupational aspirations on the likelihood of early motherhood (see Eastman, 1998 for an exception). Occupational and educational aspirations may reflect perceptions of opportunity, attitudes about goals, and gender socialization.

The present research adds to the understanding of adolescent fertility patterns. Toward this end, the effect of both structural and individual characteristics on the outcome of age at first motherhood will be examined. Additionally, this study will employ longitudinal data that contains fertility information for three racial groups: African Americans, Mexican Americans, and whites. African Americans and Mexican Americans are the largest minority groups in the United States and research that includes all three racial groups is sorely lacking. Finally, this investigation will explore the impact of young women’s personal gender role ideology, as well as educational and occupational aspirations on their fertility patterns.

This research addresses two primary questions. First, what is the impact of gender ideology on age at first motherhood? If young women have traditional attitudes with respect to gender roles, will they become mothers at an earlier age than those whose attitudes about gender roles are more contemporary? Second, can educational and occupational aspirations act as protectants in the process that leads to early pregnancy? Insofar as aspirations indicate planning and intention, it is possible that teens with high aspirations actively seek to avoid becoming mothers at early ages.

Background

Due to the negative effects of teen fertility on the future status attainment of young women and their children, teen childbearing is frequently posited as an instance of deviance. For example,
proponents of the welfare culture model of poverty transmission have argued that welfare encourages premarital fertility through eligibility rules that penalize marriage and increase benefits with the birth of additional children (Murray, 1984). Young women become pregnant, not because they value children, but because they wish to increase the amount of benefits they receive. According to welfare culture theorists, widespread public assistance dependency has rendered the stigma once attached to welfare receipt ineffective (Corcoran, 1995; Mead, 1986; Murray, 1984). Indeed, the perception that welfare rules encouraged single-parenthood is reflected in the Personal Responsibility and Work Reconciliation Act of 1996 and in block grants tied to welfare reform that reward states whose out-of-wedlock birth rates decrease.

Despite the mainstream popularity of welfare culture arguments, there is little evidence that welfare receipt is followed by a change in attitudes or beliefs. To the contrary, Kaplan (1996) finds that the mothers of teens who become pregnant hold mainstream values regarding the timing and circumstances of motherhood and view early childbearing as a threat to those values. Similarly, Wilson (1996) finds that members of the “underclass” are well aware of the labels that mainstream society attaches to them. Finally, Rank (1989) found that the fertility rate of welfare recipients is actually lower than the fertility rate among women not on welfare. Moreover, the duration of welfare dependency has a negative effect on the probability of childbearing (Rank 1989).

Alternative examinations of teen pregnancy focus on the role of factors such as parental economic status and parental marital status in contributing to teen motherhood. For black and white teens, the risk of premarital fertility is greatly reduced if the teen’s parents have high school diplomas and if the teen comes from an intact family (Bumpass & McLanahan, 1989). Similarly, Crane (1991) reports that as the number of “high status” neighbors decreases, the rate of teenage fertility increases. Living in highly segregated neighborhoods restricts access to “mainstream” social and economic opportunities and increases the rate of teen childbearing by 50% (Sucoff & Upchurch, 1998).

While factors such as educational and occupational opportunity certainly play a role in the occurrence of teen pregnancy, studies that focus on these factors fail to explain how poverty
and a lack of mainstream educational and occupational opportunities lead to early fertility. In fact, studies that examine the connection between socioeconomic standing and teen childbearing seem to insinuate, similar to the welfare culture theory, that disadvantaged backgrounds produce attitudinal and behavioral deviations from "accepted" paths to status attainment.

There are alternative theories that may be better able to account for variations in maternal age at first birth. Hoffman and Hoffman (1973) contend that children meet the needs of parents. Having children enhances the adult status and social identity of parents. Their theory suggests that children are particularly important for meeting parental needs when parents lack access to other status builders (i.e., occupational prestige). In other words, children may be particularly valuable to those who lack alternative opportunities for status attainment. Hoffman and Hoffman’s theory (1973) may potentially account for the observation that teen pregnancy is more frequent among members of lower socioeconomic strata. Indeed, Furstenberg (2000) argues that adolescents increasingly experience difficulty in attempting to "construct adult identities" given recent trends in areas such as youth employment. If motherhood is perceived as a route to adulthood, it would explain why women who are aware of the threat posed by early child bearing to their own economic and educational futures, would place themselves at risk and become young mothers.

Similarly, Geronimus (1997) argues that early childbearing is a "rational choice" for some young women, particularly minority women. Given that minority women do not see the same returns to education as do white women and given that employment options are restricted due to discrimination, early childbearing is not as "costly" for minority women as it might be for white, middle class women. Geronimus (1997) further argues that adolescents raised in economically disadvantaged communities are more mature due to the assumption of adult responsibilities (e.g., caring for younger siblings, contributing to the financial resources of families) at earlier ages than is traditionally true for middle class adolescents. In this instance, motherhood is a logical next step for poor and/or minority youth who already view themselves as adults by virtue of the responsibilities they have assumed.
A final approach applicable to the study of initial maternal age is the General Resources Model (Becker, 1981; Haveman & Wolfe, 1994). The Resources Model examines the effect of economic and interpersonal resources on individual outcomes. According to this argument, impoverished parents lack resources to invest in children. Poor parents and their children are concentrated in neighborhoods with inadequate schools, high crime rates, and substandard housing (Jencks & Mayer, 1990; Massey & Denton, 1993). Impoverished parents may be less capable of parlaying interpersonal resources into human capital (e.g., education) for their children. For example, children raised in poverty do less well on standardized tests of academic ability. As test scores are predictors of future educational and occupational success, children who fare poorly on standardized exams may see their own future opportunities limited. Having children, in this case, may be a mechanism for acquiring adult status and social esteem.

Gender Ideology

Kaplan (1996) argues that teens and their mothers are aware of the barrier to status attainment posed by early childbearing. Why then do adolescents, especially those from disadvantaged backgrounds, bear children in their teens? Kaplan suggests that teens have children for two basic reasons. First, motherhood is perceived as a way for teens to gain control over their lives at a time (adolescence) when life can appear to be very much out of control. Teens expect that their babies will provide them with unconditional love and affection. Unfortunately, teens may underestimate the severe economic burden posed by early motherhood and overestimate the ability of affective bonds with children to alleviate adolescent angst. Second, adolescents who give birth at an early age may simply be modeling a traditionally accepted route to womanhood (Kaplan, 1996). In other words, gender socialization that continues to emphasize women's prominence in the home may be counter to educational and occupational attainment.

Despite the fact that an unprecedented number of women have been incorporated into the labor market, gender socializa-
tion still emphasizes women's prominence in the home (Rosenfield, 1989). Moreover, women remain the primary caretakers of children and home, regardless of their employment status (Bird, 1999). In fact, approximately 55% of women aged 15 to 44 with infant children participate in the labor force (Bachu & O'Connell, 2001). Gender socialization provides young women with information about gender appropriate behavior and reflects prevailing discriminatory attitudes (Marini & Fan, 1997). Conservative ideology continues to blame many societal ills on the absence of women in the home. Even less conservative theorists argue that many social problems could be greatly reduced if men's employment opportunities were improved, thereby increasing their appeal as potential marriage mates (Wilson, 1987). Young women growing up in the past two or three decades may find themselves caught between economic realities which increasingly demand that women work and norms which still advocate motherhood as the most "noble of professions."

Due to the effects of socialization messages that emphasize the primacy of family roles for young women, it is expected that gender ideology will have a direct impact on the age at which young women in this study become mothers. I expect that the more traditional are young women with respect to gender ideology, the earlier their age at first motherhood will be in comparison to those young women who espouse less traditional beliefs.

Adolescent aspirations and Self-Concept

Educational and Occupational Aspirations. Educational aspirations may "protect" teens from early motherhood. Iverson (1995) finds that age at first birth had little effect on the adult incomes of teen mothers. Rather teens who lacked educational aspirations and who had failed to formulate ideas about their future occupational status received relatively less income in adulthood than those who had high aspirations. Iverson (1995) argues that young mothers, who have educational goals for themselves, may delay subsequent childbearing after the birth of the first child. It is reasonable to argue that high aspirations may also delay initial childbearing. Several studies have documented the comparably high aspirations of African American and white students (McElson, 1990; Alexander, Entwisle, & Bedinger, 1994). I hypothesize
that teens with high educational aspirations will have a higher age at first motherhood than will teens whose educational aspirations are low.

Occupational aspirations may also be an indication of the extent to which young women aspire to traditional, female-dominated occupational roles. While emphasis on the extent to which individual characteristics vary by race, gender, and social class runs the risk of "blaming the victim" for her own situation, socialization processes certainly affect individuals differentially depending on one's social placement. Individual attitudes and aspirations reflect socialization processes and dominant ideology (Kohn, 1969) and not innate differences between social groups. Marini and Fan (1997) find that 16% of the gap between women and men in earnings at career entry is a reflection of gender role socialization (i.e., women aspire to occupations that are traditionally female-dominated and that are characterized by low wages). In an earlier study, Marini and Brinton (1984) found that 61% of either women or men would have to change their occupational aspirations for the distribution of persons into occupations to be random with respect to gender. Young women with high occupational aspirations may also be willing to postpone motherhood for educational and occupational gains. Occupational aspirations are also likely, however, a reflection of the teen's belief in the viability of achieving that aspiration. I anticipate that young women with high occupational aspirations will have a higher age at the birth of first children than will young women with relatively low occupational aspirations.

Adolescent Self-Esteem. Self-esteem is a global measure that indicates an individual's beliefs about his/her own self-worth (Rosenberg, 1965). The relationship between adolescent self-esteem and early childbearing is far from conclusive. Some scholars have argued that teen fertility is a mechanism for enhancing the self-esteem of young women (Dash, 1986; Freeman & Rickels, 1993; Musick, 1993). While Oates (1997) does not find a beneficial effect of fertility on self-esteem, he acknowledges that teens may anticipate a self-esteem payoff to childbearing. High self-esteem has been found to boost the likelihood of contraceptive use among
adolescents (Holmbeck et. al., 1994). I expect that self-esteem will be inversely related to age at first motherhood.

**Personal Sense of Control.** Personal sense of control is the belief in one's ability to control individual outcomes (e.g., to complete high school or college). A strong personal sense of control has been linked to individual outcomes such as high educational attainment and good mental health (Mizell, 1999a; Mizell, 1999b; Ross & Van Willigen, 1997). Personal sense of control is affected by social class location (Lewis, Ross, & Mirowsky, 1999; Mizell, 1999b). Middle and upper class parents, by enrolling children in intramural sports, dance classes, providing tutors to improve educational outcomes, are financially better able to provide their children with efficacious experiences than are parents hampered by poverty. Personal sense of control may also impact the likelihood that women in their teens will either postpone sexual activity or use some method of birth control. Kaplan (1996) argues that teen pregnancy may be an attempt to gain control of one's life during adolescence. As a test of Kaplan's argument, I hypothesize that women with a high personal sense of control will have a higher age at first birth than will women with a low personal sense of control.

**Background Resources**

**Region of Origin.** The region in which a child grows up contributes to adult outcomes in a myriad of ways. Residents of the South are more likely to hold conservative social and political attitudes that may render them less likely to discuss sex or sexual behavior with their children (Huff-Corzine, Corzine, & Moore, 1991; Wilcox, 1992). Students in the South generally have lower academic achievement scores than do students in other regions of the country (Powell & Steelman, 1996). Southern migrants to other regions of the country also see fewer returns to education than do persons raised outside of the South (Blau & Duncan, 1967). Finally, traditional gender ideology may be more prevalent in the South. I hypothesize that growing up in the South should depress age at first motherhood.

**Central City Residence.** In recent years, much attention has been devoted to investigating the role played by residence in central
cites in producing negative outcomes. Urban centers that were once arenas of industrial production have undergone dramatic declines in the past few decades (Wilson, 1987; 1996). Given that racial minorities are disproportionately located in central cities, the disappearance of employment opportunities combined with increased rates of poverty and continued residential segregation has disproportionately affected African Americans and other racial minorities (Denton & Massey, 1991; Duncan & Rogers, 1991; Wilson, 1996). White children are also negatively affected by economic residential segregation (Brooks-Gunn, Duncan, Sealand, & Klebanov 1993). Growing up in the central city is associated with higher rates of teen pregnancy and lower rates of high school completion (Bumpass & McLanahan, 1989; Brooks-Gunn et al., 1993; Crane, 1991). Impoverished central city neighborhoods further lead to the production of low levels of personal sense of control among residents (Wilson, 1996). I expect that women who grow up in central cities will have a lower age at first motherhood than those who live outside of central cities.

Number of Siblings. Given that families constitute a micro level economic system, resources in families are limited. The number of siblings one has impacts the scarcity or adequacy of resources within families (Downey, 1995). The number and spacing of siblings has been linked to child's performance on standardized intelligence testing (Steelman & Mercy, 1980), parental willingness to fund the costs of higher education (Steelman & Powell, 1991), and marital happiness (Mizell & Steelman, 2000). Additionally, it has been suggested that children's fertility reflects the fertility of their parents (Rindfuss, et al., 1980). Given the clear linkage between sibship size and resources the number of siblings should have a direct bearing on the age at first motherhood. Due to the effects of sibship size on educational attainment outcomes and the socialization effect of growing up in a large family, it is expected that young women who have a relatively large number of siblings will have their first child at an earlier age than will those who have fewer siblings.

Parental Education and Occupation. Increased parental educational and occupational attainment result in both improved structural outcomes (i.e., education, earnings, and occupational status)
as well as improved self-concept and mental health outcomes (i.e., self-esteem, personal sense of control, and depression). Parental education levels also impact gender ideology. Children raised in homes in which parents hold relatively high levels of education tend to have less traditional gender ideology with respect to the appropriateness of roles assumed by men and women within the home and in labor markets (Haynes, 2000). Both maternal and paternal educational attainment is beneficial for children with respect to their own future educational attainment (Haveman, Wolfe, & Spaulding, 1991). Additionally, home environments in which parents have a relatively high degree of education are beneficial for children's early academic achievement as measured by standardized tests (Parcel & Menaghan, 1994). I expect that young women whose parents have relatively high rates of educational attainment will have a higher age at first motherhood than will young women whose parents have low levels of educational attainment.

Parental occupational status has been linked to a variety of outcomes for children including children's occupational status (Blau & Duncan, 1967), socialization emphases (Kohn, 1969), and risk of teen fertility (Crane, 1991). Parents with material resources can assist their children by giving them money, raising them in safe neighborhoods, and spending more time with them (as a function of increased leisure time). As a result, I anticipate that women from families where parents' occupational status is relatively high, will have their first child at later ages than will women from families disadvantaged by parents' occupational status.

**Academic Achievement**

Standardized tests provide one measure of academic achievement and have been linked to a variety of attainment outcomes including earnings, years of education completed, and good health (Farkas, England, Vicknair, & Kilbourne, 1997; Schor & Menaghan, 1995; Sewell & Hauser, 1978). Socioeconomic status (Maume, Cancio, & Evans, 1996), educational aspirations (Mickelson, 1990), and race (Farkas, England, Vicknair, & Kilbourne, 1997) are important variables in the prediction of academic achievement. Poor and/or minority women tend to be at a disadvantage with respect
The emphasis placed on exposure to white, middle class culture by most standardized tests (Maume, Cancio, & Evans, 1996). Furthermore, young women who do not perform well on standardized tests may believe their ability to achieve success with respect to educational and occupational attainment is limited. In this case, motherhood may be viewed as another valid route to status. I expect that young women who have low academic achievement scores will have a lower age at first motherhood.

Race and Ethnicity

Most examinations of adolescent childbearing attribute racial and ethnic differences in rates of teen motherhood to racial and ethnic differences in poverty rates. Other theorists have argued that motherhood may bear special significance for African Americans that may affect fertility trends (Collins, 1990). In the youngest age group (15–19 years), Hispanic women have the highest fertility rates followed by Hispanic and then white women (Bachu & O'Connell, 2001). Hispanic families have the highest proportion of households with seven or more persons while whites are more likely to be two-person households (U.S. Census Bureau, 1992). Hispanics and African Americans are more likely to have households comprised of extended family members (Robles, 1997; Stack, 1974). With respect to family size (e.g. number of children), fertility patterns tend to run in families (Rindfuss et al., 1980).

If the promise of educational and occupational opportunities act as incentives to actively prevent pregnancy, then racial minorities may adjust fertility plans to match aspirations. African American and Hispanic youth value status attainment just as do white youth (Hanson, 1994; Mickelson, 1990). If minority parents, however, have experienced low attainment either through inadequate returns to education or through frequent spells of unemployment, African American and Hispanic youth may view family as one of the few available routes to status acquisition.

Gender roles vary by race. For example, African American women are more likely than white women to see the role demands of motherhood as compatible with the demands of employment (Collins, 1990). White women's gender ideology is reflective of their mothers' gender role beliefs (Blee & Tickamyer,
14 Journal of Sociology & Social Welfare

1986). For African American women, mothers' employment experiences have a large impact on gender role beliefs (Blee & Tickamyer, 1986). Additionally, while Mexican born women who immigrate to the U.S. tend to espouse a more traditional gender ideology, Mexican American women's gender beliefs are less traditional and are similar to those of white and African American women (Guendelman, Malin, Herr-Harthorn, & Vargas, 2001).

Given the relationships between race and aspirations, opportunities, academic achievement, and gender ideology, I expect that race will predict age at first motherhood. Specifically, I anticipate that Mexican American and African American women will have lower ages at first motherhood than will white women.

Data and Measures

To investigate the process that shapes early childbearing, data are derived from the National Longitudinal Survey of Youth (NLSY). The NLSY is part of a project sponsored by the U.S. Departments of Labor and Defense under a grant to the Center for Human Resource Research at The Ohio State University (Center for Human Resource Research, 1988). The NLSY is a random, multi-stage sample that has followed a cohort of individuals who were between the ages of 14–22 years in 1979. The NLSY oversamples Hispanic, black, and economically disadvantaged whites. In addition to information regarding the labor market experiences of respondents, the NLSY contains detailed information regarding individual perceptions including measures of aspirations, self-concept, and gender ideology. The research presented here analyzes only the young women included in the original 1979 cohort who have had at least one child by 1998 and for whom complete information is available. The sample is further restricted to women between the ages of 14 and 19 in 1979 to compare women at similar stages in the life course. I use 19 waves of this survey, 1979 to 1998. Table 1 provides the means and significance tests for the various subsamples.

Measures

Age at first motherhood is the dependent variable and is measured in 1998. It is mother's reported age when her first child was born. The sample analyzed in this study includes 951 women
### Table 1
Comparison of Proportions and Means for NLSY Subsamples of African American, Mexican American, and White Women with Children

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean African American</th>
<th>Std Dev</th>
<th>Mean Mexican American</th>
<th>Std Dev</th>
<th>Mean Whites</th>
<th>Std Dev</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Aspirations</td>
<td>14.60</td>
<td>.21</td>
<td>13.94</td>
<td>.24</td>
<td>14.45</td>
<td>.21</td>
</tr>
<tr>
<td>Occupational Aspirations</td>
<td>60.08</td>
<td>20.51</td>
<td>55.07</td>
<td>19.73</td>
<td>60.23</td>
<td>20.30</td>
</tr>
<tr>
<td>Adolescent Self-Esteem</td>
<td>3.22</td>
<td>.39</td>
<td>3.08</td>
<td>.37</td>
<td>3.21</td>
<td>.40</td>
</tr>
<tr>
<td>Personal Sense of Control</td>
<td>2.74</td>
<td>.54****</td>
<td>2.76</td>
<td>.56****</td>
<td>2.94</td>
<td>.50</td>
</tr>
<tr>
<td><strong>Adolescent Background Characteristics (1979)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central City Residence</td>
<td>.36</td>
<td>.47****</td>
<td>.23</td>
<td>.40</td>
<td>.10</td>
<td>.29</td>
</tr>
<tr>
<td>Region of Origin</td>
<td>.59</td>
<td>.49****</td>
<td>.34</td>
<td>.47</td>
<td>.29</td>
<td>.46</td>
</tr>
<tr>
<td>Parental Educational Attainment</td>
<td>10.74</td>
<td>2.62</td>
<td>6.93</td>
<td>3.79****</td>
<td>12.03</td>
<td>2.50</td>
</tr>
<tr>
<td>Total Net Family Income (thousands)</td>
<td>12.23</td>
<td>10.46****</td>
<td>12.97</td>
<td>8.63****</td>
<td>22.78</td>
<td>13.33</td>
</tr>
<tr>
<td>Academic Achievement</td>
<td>20.79</td>
<td>10.66****</td>
<td>23.27</td>
<td>18.54****</td>
<td>51.49</td>
<td>25.91</td>
</tr>
<tr>
<td><strong>Household Composition (1979)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two Parent Household (1=yes)</td>
<td>.49</td>
<td>.50****</td>
<td>.75</td>
<td>.43</td>
<td>.79</td>
<td>.42</td>
</tr>
<tr>
<td>Single Mother Household (1=yes)</td>
<td>.32</td>
<td>.47****</td>
<td>.14</td>
<td>.34</td>
<td>.08</td>
<td>.29</td>
</tr>
<tr>
<td>Alternative Family Arrangement (1=yes)</td>
<td>.20</td>
<td>.40****</td>
<td>.11</td>
<td>.32</td>
<td>.13</td>
<td>.35</td>
</tr>
<tr>
<td>Number of Siblings</td>
<td>4.52</td>
<td>2.96****</td>
<td>5.03</td>
<td>3.00****</td>
<td>3.02</td>
<td>1.98</td>
</tr>
<tr>
<td><strong>Sexual Activity &amp; Fertility</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age at First Sexual Intercourse</td>
<td>16.92</td>
<td>1.67****</td>
<td>17.65</td>
<td>1.93*</td>
<td>17.43</td>
<td>1.94</td>
</tr>
<tr>
<td>Age at Frist Birth (1998)</td>
<td>22.03</td>
<td>4.53****</td>
<td>22.09</td>
<td>4.47****</td>
<td>25.03</td>
<td>4.96</td>
</tr>
</tbody>
</table>

Denotes significant differences from mean for white women. *p<.10, **p<.05, ***p<.01, ****p<.001.

Note: NLSY = National Longitudinal Survey of Youth.

1Scaled from 1 (non-traditional) to 4 (traditional).

2Rosenberg (1965) Self-Esteem Scale scored from 1 (low) to 4 (high).

3Rotter (1966) Scale scored from 1 (low) to 4 (high).
with children who had their first child between 1979 and 1998 and for whom complete information is available. Women who have not given birth as of 1998 are not included in the analysis, nor are women who gave birth prior to 1979. The average age at first birth for African American mothers in this study is 22.03 years which is significantly lower than the age at first birth for white mothers (25.03 years). Mexican American women also have their first child at younger average ages than white women (22.09 years).

**Gender Ideology**

The gender ideology scale is a composite measure I constructed from eight items that query respondents about their beliefs regarding gender appropriate roles. The items in the scale have been recoded so that high scores (ranging from 1 to 4) represent more traditional views about gender roles. The eight items comprising the scale were measured in 1979 and include the following statements: “A woman’s place is in the home”, “A wife with a family has no time for other employment”, “A working spouse feels more useful”, “An employed wife leads to juvenile delinquency”, “Inflation necessitates the employment of both parents”, “Traditional husband and wife roles are best”, “Men should share housework responsibilities”, and “Women are happier in traditional roles”. Mexican American adolescents had the most traditional gender ideology in 1979. There were no significant differences in the gender ideology of African Americans or whites.

**Adolescent Self-Concept and Aspirations**

In the NLSY, adolescent self-esteem is measured in 1980 with the Rosenberg self-esteem scale (1965). This well-known and valid scale is a ten-item measure that ranges from 1 (low) to 4 (high). Items in this scale include: “I am a person of worth”, “I have a number of good qualities”, “I am inclined to think I’m a failure”, “I feel that I am as capable as others”, “I feel that I do not have much to be proud of”, “I have a positive attitude toward myself”, “I am satisfied with myself”, “I wish I had more respect for myself”, “I feel useless at times”, and “At times, I feel that I am no good at all”. Respondents are asked to rank each statement on a scale of 1 (strongly agree) to 4 (strongly disagree). In this study, African
American and white adolescents have comparable mean levels of self-esteem (3.22 and 3.21 respectively). Mexican American adolescent females have significantly lower levels of self-esteem (3.08).

I measure personal sense of control in 1979 using Rotter’s (1966) scale as contained in the NLSY. Each respondent is presented with a set of four paired statements. The respondent is asked to indicate which statement in the pair is closer to his or her opinion. The statements used in the Rotter scale are: “What happens to me is my own doing” versus “Sometimes I feel that I don’t have enough control over the direction my life is taking”; “When I make plans, I am almost certain that I can make them work” versus “It is not always wise to plan too far ahead, because many things turn out to be a matter of good or bad fortune anyhow”; “In my case, getting what I want has little or nothing to do with luck” versus “Many times we might as well decide what to do by flipping a coin”; and “Many times I feel that I have little influence over the things that happen to me” versus “It is impossible for me to believe that chance or luck plays an important role in my life”. The mean personal sense of control of white adolescent women is the highest, followed by Mexican American, and then African American women (Table 1).

Educational aspirations is measured in 1979 and is the number of years of education respondents reported they “. . . would like to complete.” Responses are scored in years (e.g. 11, 12). Occupational aspirations is the respondent’s desired occupation at age 35, as reported in 1979. In 1979, the NLSY used 1970 Census codes for occupational classification. These original Census codes have been converted to the Duncan Socioeconomic Index (SEI), which ranges from 0 (low) to 96 (high). All respondents in the sample aspire to an average of some college education. Mexican American women’s aspirations are, however, significantly lower than African American or white women.

Adolescent Background

All adolescent background measures are recorded in 1979. Region is a dummy variable coded “1” if the respondent grew up in the southern region of the country and “0” if the respondent lived elsewhere. Over half of African American, 34% of Mexican
American, and 29% of white adolescents lived in the South (Table 1). Central city residence is also a dummy variable coded "1" if the respondent lived in the heart of a Standard Metropolitan Statistical Area (SMSA) and "0" if otherwise. African American women were the most likely to live in the central city.

I include parental educational attainment and total net family income as measures of parental resources. If both parents' educational level is available, this measure is the average of the two. If the educational attainment of only one parent is reported, that parent's information is used. The average level of parental educational attainment is lowest for Mexican American adolescents (6.93 years). African American parents also tend to have lower levels of educational attainment than white parents (10.74 and 12.03 years respectively). Total net family income is significantly higher on average for white families than for African American or Mexican American families (Table 1).

Academic achievement is measured in 1981 and is the respondent's percentile score on the Armed Forces Qualifying Test (AFQT). The AFQT is the summed score of respondent's abilities in four general areas: paragraph comprehension, word knowledge, arithmetic reasoning, and math knowledge (NLSY Documentation 1979–1988, Attachment no. 3, 1990). The average academic achievement score of white adolescents is more than double that of either African American or Mexican American adolescents (Table 1).

Additionally, I constructed two dummy variables representing parental structure. The first is coded "1" if the respondent lived in a single-mother household and "0" otherwise. The second is coded "1" if the respondent lived in an "alternative family arrangement" and "0" otherwise. Alternative family arrangements are those in which children live with non-parental guardians or with grandparents. I have included these measures due to the link between parental structure and outcomes such as early motherhood examined by Bumpass and McLanahan (1989), among others (e.g, Crane 1991). African American women are the most likely to live in single-mother households and in alternative family arrangements compared to white and Mexican American women (Table 1). The final variable capturing household composition
is the number of siblings the respondent has in 1979. Mexican American women come from the largest sibship sizes on average.

I control for age at first intercourse due to the established relationship between early sexual activity and early motherhood (Hogan & Kitagawa, 1985). Adolescents who initiate sexual intercourse at a relatively early age are at increased risk of becoming teen mothers (Hogan & Kitagawa, 1985). Adolescents are less likely than adults to use contraception either effectively or consistently (Glei, 1999; Hogan & Kitagawa, 1985). African American women report an average age at first intercourse of 16.92 years which is significantly lower than the average age reported for white women (17.43). Mexican American women report the highest age at first intercourse (17.65).

Finally, two dummy variables were also constructed to control for the race of the respondent. One is coded “1” if the respondent is African American and “0” otherwise. The other dummy variable is coded “1” if the respondent is Mexican American and “0” otherwise.

Analytical Strategy

For the analysis, I estimate a series of regression models with four blocks of variables. In the first equation, the measures representing gender ideology, aspirations, and self-concept are used to predict age at first motherhood. The second equation examines the effects of adolescent background resources and academic achievement on the dependent variable. Then, I estimate the effects of adolescent household composition on childbearing age. Next, age at first intercourse is used to predict the outcome of interest. Finally, in one full model I enter all of the blocks into the equation, including the controls for race. I have adopted this strategy because it allows me to evaluate the independent effects of blocks of variables (e.g., adolescent background resources, household composition), with and without other pertinent variables, on age at first motherhood.

Results

The gender ideology, aspirations, and self-concept measures are all significant predictors of age at first motherhood (Table 2, Panel 1). As I anticipated, women whose gender ideology was
Table 2
Regression Model of Age at First Motherhood for NLSY Sample of African American, Mexican American, and White Women (N=951).

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<tr>
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<th>Panel 1</th>
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<td>Gender Beliefs¹</td>
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<td>-2.79***</td>
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<td>-.754</td>
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<tr>
<td>Educational Aspirations</td>
<td>.529</td>
<td>6.41****</td>
<td></td>
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<td>.277</td>
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<tr>
<td>Occupational Aspirations</td>
<td>.162</td>
<td>1.99**</td>
<td></td>
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<td>.131</td>
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<tr>
<td>Adolescent Self-Esteem²</td>
<td>.776</td>
<td>2.51**</td>
<td></td>
<td></td>
<td>.007</td>
</tr>
<tr>
<td>Adolescent Personal Sense of Control³</td>
<td>.960</td>
<td>2.36**</td>
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<td>.482</td>
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Adolescent Background Characteristics (1979)

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<td>t-statistic</td>
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<td>Central City Residence</td>
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<td>-2.29**</td>
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<td>-.978</td>
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<td>Region of Origin</td>
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<td>-.308</td>
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<td>Parental Educational Attainment</td>
<td>.237</td>
<td>3.5****</td>
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<td>.125</td>
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<tr>
<td>Total Net Family Income</td>
<td>.064</td>
<td>5.13****</td>
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<td></td>
<td>.057</td>
</tr>
<tr>
<td>Academic Achievement (1981)</td>
<td>.533</td>
<td>8.05****</td>
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Household Composition (1979)

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<td>Single Parent Home</td>
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<td>Alternative Family Arrangement</td>
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<td>-6.14****</td>
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<tr>
<td>Number of Siblings</td>
<td>-.344</td>
<td>-4.67****</td>
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Sexual Activity

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<td>t-statistic</td>
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<tr>
<td>Age at First Intercourse</td>
<td>.747</td>
<td>8.7****</td>
<td>.418</td>
<td>5.26****</td>
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Race

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<td>-.976</td>
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<tr>
<td>Mexican American (1=yes)</td>
<td>-2.057</td>
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R2 (adjusted R2)

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<tr>
<td>R2</td>
<td>.116 (.111)</td>
<td>.220 (.216)</td>
<td>.079 (.077)</td>
<td>.074 (.073)</td>
<td>.287 (.274)</td>
</tr>
</tbody>
</table>

*p<.10, **p<.05, ***p<.01, ****p<.001.

Note: NLSY = National Longitudinal Survey of Youth.

¹Scaled from 1 (non-traditional) to 4 (traditional).
²Rosenberg (1965) Self-Esteem Scale scored from 1 (low) to 4 (high).
³Rotter (1966) Scale scored from 1 (low) to 4 (high).
relatively traditional in 1979 have a lower age at first motherhood than do women whose gender ideology is less traditional. Given that teen motherhood entails risks for the future statuses of both mother and child, traditional gender ideology are harmful insofar as they are associated with a lower age at first motherhood. Gender ideology develops in response to mothers' work and family experiences and reflects early perceptions of socially constructed values of gender roles (Kohn, 1989; Marini & Fan, 1997). It may also be the case that women with traditional gender attitudes aspire to occupations that are poorly compensated. If that is the case, the opportunity costs associated with early childbearing are not as severe as when young women aspire to education and time intensive "careers."

Additionally, educational and occupational aspirations are predictive of a higher age at first birth. This pattern may be an indication that women with a hopeful outlook for their futures may take explicit action to prevent or postpone pregnancy. In part, this finding confirms Kaplan's (1996) finding that adolescents are aware of the barrier to educational and occupational attainment posed by early motherhood. Further suggested is that women will postpone their own fertility if they perceive that have viable alternatives to acquire the status granted mothers. Women with non-traditional gender ideology and high educational and occupational aspirations may view childbearing as a barrier to the attainment of those goals.

Similarly adolescent self-esteem and personal sense of control, I find, are also predictive of age at first motherhood. Adolescent women with high self-esteem and personal sense of control have a later initial childbearing age. As with aspirations, self-concept may affect fertility related behavior. For example, adolescent women with positive self-concepts may believe that they control the timing and conditions of childbearing and therefore take actions that correspond to their perceptions of self. If young women have high self-esteem and a strong personal sense of control, they may be more confident in remaining abstinent or in insisting that their partners practice safe sex.

In Table 2, Panel 2, I used adolescent background characteristics to predict age at first motherhood. With the exception of growing up in the South, all of the measures that capture
adolescent resources and achievement are significantly predictive of mother's age at the birth of her first child. Adolescent women raised in central cities began childbearing at earlier ages than their counterparts raised outside of city centers. Parental resources appear to protect adolescents from early motherhood. Women raised in families where parental educational levels are relatively high have a later initial childbearing age than do women raised in families with lower parental educational attainment. Parental income has a larger effect on the outcome: high parental income levels correspond to older ages at first motherhood. Parental resources could function to delay age at first motherhood in a number of ways. First, adolescents from households with greater resources are more likely to participate in extra-curricular activities such as sports or music. Adolescents who participate in such activities are less likely to experience outcomes such as dropping out or becoming pregnant. Second, parental resources may also proxy for relevant factors such as access to contraception or education regarding sexual activity. Third, parental resources may be a measure of the extent to which adolescent aspirations can be realized.

Academic achievement also plays an important role in determining age at first motherhood. Adolescent women with higher academic achievement scores had higher initial childbearing ages. The emphasis placed on standardized testing in educational settings may influence adolescents’ perceptions of their future potential. Early achievement deficits could leave adolescent women with beliefs that educational and occupational goals are not likely to be achieved. Pregnancy prevention may become less of a priority in such an instance.

In Panel 3 of Table 2, the effects of household composition on age at first motherhood are examined. Living in a mother only household or in an alternative family arrangement is associated with a lower age at first birth compared with living in a two-parent household. Adolescent women who have a relatively large sibling size are also more likely than those from smaller sibling sets to have a younger age at first motherhood. The effect of household composition on the outcome of interest is likely through resource availability. Mother only households and, for example, grandparent households are more likely than other household types to experience poverty. If resources can “protect” women from
early pregnancy, then household structures that lack resources will be associated with earlier childbearing. Large households with respect to sibship size are also more vulnerable to resource deprivation (Downey 1995). Alternatively, young women from large families may be more likely to begin childbearing early to accommodate their own desires for larger families.

Age at first intercourse is also a significant predictor of age at first motherhood (Table 2, Panel 4). Younger adolescents who are sexually active are less likely than older adolescents or adults to use contraception consistently and effectively. Inconsistent or ineffective contraceptive use may reflect access (i.e., younger adolescents may have fewer resources or lack information about where to get low cost or free contraception) and/or an incomplete comprehension of the risks of pregnancy.

Finally, the full model including controls for race is presented in Table 2, Panel 5. This model accounts for roughly 29% of the variance in predicting age at first motherhood. In this equation, gender ideology, and educational and occupational aspirations remain significant predictors of age at first motherhood though their significance is reduced. In this model, adolescent self-esteem and personal sense of control are no longer significant predictors of initial maternal age.

In the full model, adolescent background characteristics continue to have direct effects on the age at first motherhood. Interestingly, the negative effect of central city residence has increased in significance. Living in the central city in adolescence depresses initial childbearing age. Parental educational attainment and parental income have a positive effect on age at first birth though their significance as predictors are reduced from the model presented in Panel 2. Additionally, women with high achievement scores are less likely to have children at a relatively early age than are women with low achievement scores. Young women who experience academic success with respect to measured ability may be acquiring status recognition in academic areas and therefore may actively avoid pregnancy. Conversely, women with low scores may be seeking alternative routes to adult status and recognition, one of which is motherhood.

Additionally, in the final model, of the household composition variables, only alternative family arrangements has a significant
relationship to age at first childbirth. Adolescents who lived in non-parental households had a lower age at first motherhood than their counterparts in two parent households. Living in single mother households and sibship size no longer significantly predicts initial childbearing age. These findings provide further support for the contention that it is the resource deprivation associated with single mother households and with large households that produces negative incomes. It does not appear that living in a single mother household reduces the stigma associated with single motherhood.

Age at first sexual intercourse remains a significant predictor of age at first motherhood. Consistent with previous research, an increased age at first sexual activity is also associated with an increased age at first motherhood. Recent research indicates that although the rate of contraceptive use among sexually active teens has risen dramatically since the 1980's, teens are still significantly more likely than older women to be inconsistent in their contraception use (Glei, 1999).

Finally, race influences age at first motherhood. The negative effect of race is slightly more significant for Mexican Americans than for African Americans. White women, in comparison to African American and Mexican American women, have a higher age at first motherhood. Race, in this analysis, may proxy for resources not directly measured. For example, educational segregation and the structure of school funding results in poorer quality schooling for minority children. Schools serving minority-majority student populations are more likely to lack funding for programs such as sex education, art, or athletics. Additionally, minority children who have witnessed the effects of factors such as chronic underemployment or cyclical unemployment on their parents may value children as an alternative means to acquire status in the face of barriers that limit occupational attainment and appropriate returns to education.

Conclusion

What is the impact of gender ideology on teen childbearing patterns? In this study, I find that having non-traditional attitudes with respect to gender roles postpones initial childbearing age.
Even after accounting for factors such as socioeconomic status, self-concept, aspirations, and race, gender ideology directly impacts age at first motherhood. This pattern may be illustrative of the double bind in which modern young women are caught. Trends in the economy, marital patterns, male employment and wage earning increasingly necessitate that women work. Attitudes that continue to emphasize the supremacy of women's roles in the home, may produce confusion for adolescents. Though parenting is an important social role, it does appear that the encouragement of motherhood needs to coincide with the encouragement of alternative roles that precede motherhood such as education and career attainment. If the goal is to encourage young women to postpone motherhood beyond the teen years, then alternative roads to adulthood and to status must be provided. Such measures may be especially vital for minority women who are marginalized by the educational system and who experience discrimination in the labor market (Kilbourne, England, and Beron, 1994).

Can educational and occupational aspirations act as protective factors in the process that leads to teen pregnancy? Having high educational and occupational aspirations has a positive effect on age at first motherhood. It is possible that teens who believe they are capable of acquiring education and a decent job may be more invested in their own futures. Insofar as aspirations represent goals and planning, they are important in delaying childbearing until educational and/or occupational goals have been reached.

Interestingly, I also found that single mother households do not directly contribute to age at first birth. Rather, it is likely the resource deprivation associated with single mother households that depresses age at first motherhood. Conversely, alternative family structures are predictive of decreased age at initial childbearing. Future research should examine why alternative family structures fail children even after accounting for resources.

Additional attention needs to be given to the role of gender ideology on status attainment. If having traditional attitudes is harmful to fertility outcomes, social scientists need to more fully explore the processes that lead to gender ideology formation and what it is about traditional attitudes that are harmful to young
women. Certainly a desire to parent, by itself, is not harmful. Therefore the relationship between attitudes and the timing of fertility must be further explored.

Educational and occupational aspirations, which have been examined largely in the context of educational and occupational attainment, clearly have effects on outcomes other than those traditionally highlighted in the literature. Furthermore, while researchers have investigated the role of self-concept measures such as self-esteem and personal sense of control on fertility, the interaction of aspirations with initial childbearing age have been neglected. Future research needs to further elucidate the connection between aspirations and age at first motherhood.

Finally, the role of race in predicting age at first motherhood needs further inquiry. Perceptions of opportunities that are certainly affected by race play an integral role in the decision to bear children. If adolescent fertility is a major link in the chain of intergenerational poverty, it is imperative that the processes that lead to early childbearing be understood.

References


special survey documentation. Columbus, OH: The Ohio State University Press.


Mizell, C. A. (1999b.). African American men’s personal sense of mastery:


This article discusses ethnographic research conducted between 1995 and 1998 that studied the impact of popular education on the lives of fifty homeless and formerly homeless mothers. Data collection involved in-depth interviews and participant observation in a family shelter located in one of Boston's poorest neighborhoods. The article argues that popular education increased the women's self-esteem, they were inspired to help other low-income women, they learned to advocate for their rights and they became more involved in their children's education. The findings suggest that popular education can best address the academic, personal, and community goals of very poor women.

Introduction

Between 1995 and 1998, I studied the impact of popular education on a group of fifty homeless and formerly homeless mothers who participated in a shelter-based adult literacy program located in one of Boston's poorest neighborhoods. When I first visited The Family Shelter, I met with a group of homeless mothers who were studying for their General Education Diplomas (GED). They said they were returning to school to improve their economic opportunities and to provide a better life for their children. They also said they were fortunate to be clients in the Family Shelter's unique popular education program because it provided them with more than basic literacy skills.

The popular education classes at The Family Shelter were rooted in a model of education that involved problem-posing and consciousness-raising activities based upon the problems or
"generative themes" in the lives of the poor women. Popular education is a methodology of teaching and learning through dialogue that directly links curriculum content to people’s lived experience and that inspires political action (Beder, 1996; Freire, 1990, 1973; Williams, 1996). The majority of the popular education classes I observed in the Family Shelter focused on generative themes related to Motherhood and Parenting, and Social Inequality. The generative themes were also linked to subject matter that developed and strengthened reading and numeracy skills. Teachers used stories written by homeless women, neighborhood newspapers and photographs as "codes" to represent the generative themes in the lives of the women. In their classes, the women discussed the problems represented in codes, how they had experienced these problems, why the problems existed, and what could be done to address them. I observed how the popular education classes inspired homeless and formerly homeless mothers to become actively involved in changing their community, both inside and outside of The Family Shelter. I sought to learn more about popular education and its potential for promoting collective social action.

The purpose of this article is to examine how the homeless mothers were affected by their participation in the popular education program at the Family Shelter. Based on my observations, I argue that the Family Shelter’s popular education philosophy and the provision of comprehensive social services addressed the women’s personal, academic, and community needs. I argue that popular education had a positive impact on the lives of the homeless mothers that extended beyond learning important reading and numeracy skills.

Methodology

This article focuses on a sub-set of data from a larger study (Rivera, 2000). Between January 1995 and June 1998, I gathered data from 50 currently and formerly homeless women about their classroom experiences in popular education classes at the Family Shelter. I conducted over 1500 hours of participant observation in popular education classes at the Family Shelter. Most of the observations occurred in classrooms as women participated in
discussions based on subject material provided by teachers or injected by the women into the program planning. Research also included an open-ended education history questionnaire.

Over three years, I collected a significant amount of data from fieldnotes, education histories, and transcripts from interviews. In analyzing the data, I looked for the frequencies in which several women came up with similar comments and observations. Specifically, I examined whether there was an order or process that led to a particular action or event (Lofland & Lofland, 1995). I also cross-referenced fieldnotes and interview data from the same women as a way of conducting “consistency checks” (Carspecken, 1996, p. 166). I organized recurring themes into conceptual categories using three broad categories of “School-Life,” “Family-Life,” and “Community-Life.” Under the category of “School-Life,” I examined the women’s educational histories before they entered the program; under the category of “Family-Life,” I analyzed the poverty-related obstacles in the women’s lives based upon in-depth interviews. The data for this article are drawn primarily from the third category, “Community-Life,” in which I examined how the women related to one another within the context of the popular education classes and how they were affected by popular education.

Profile of Sample

Fifty women who had participated in popular education classes from three months to three years were included in the study. Most of the women were referred to The Family Shelter by the Massachusetts Department of Transitional Assistance (DTA) or by homeless shelter follow-up programs. Twenty (40%) were African-American, eleven (22%) were Puerto-Rican, six (12%) were from Haiti, and most of the rest were from English-speaking Caribbean countries.

Forty-two percent of the women in the study were homeless for at least three months between 1995 and 1998. The other 58% had been homeless for at least three months between 1990 and 1995 and were still considered to be “at-risk” of homelessness. In addition, 80% of the women received AFDC/TANF welfare benefits at least some of the time between 1995–1998. The mean age of the women, at the time when they enrolled in the program
was 30, with a range from 21 to 47. The average number of children was 2, with a range of 1 to 5. In addition, 66% of the women had participated in the paid labor force prior to their enrollment in the popular education classes.

In this study, all of the mothers lacked a high school diploma. Most of the women quit school at the 10th grade, some as early as the 7th grade, and seven women never attended school at all. 82% of the women had attended at least one other adult education program prior to enrolling at the Family Shelter. In addition, the reading comprehension levels of the women were varied: 28% of the women entered the program with reading comprehension levels ranging from 0 to 4th grade; 46% had reading levels between 5th and 8th grade; and 26% had reading levels between 9th and 12th grade.

Theoretical Framework

What is Popular Education?

In 1998 the federal Workforce Investment Act (WIA) consolidated over 50 employment, training, and literacy programs into three block grants to states. Under Title II of the new law, the Adult Education and Family Literacy Act, one of the primary goals for adult education is to assist adults in becoming literate and obtaining the knowledge and skills necessary for employment and self-sufficiency.

The passage of the WIA further fueled a long-standing debate in the field of adult literacy education regarding the purposes of literacy and what it means to be literate (Beder, 1987; Heaney, 1996; Hunter & Harmon, 1979; Macedo, 1994). Since the 1970's there has been a growing critical literacy movement that questions the conditions that create the need for literacy programs and that explores adult literacy as a tool for social change (Aronowitz & Giroux, 1993; Lankshear & McLaren, 1993). According to Degener (2001), “Critical theorists believe that critical education should guide students toward becoming political. Different theorists have different names for this process—emancipatory education, liberatory education, democratic education, transformative education—but it all boils down to the importance of moving...
students beyond learning content and toward taking political action" (p. 37). The Center for Popular Education and Participatory Research (CPEPR) states that the following are central themes in popular education:

First, popular education is community education, aimed at empowering communities through cooperative study and action. Secondly, popular education is political education, with a stated goal of collective social action toward a more equitable society. Thirdly, popular education is people's education, traditionally aimed at marginalized and disenfranchised communities (CPEPR, 2001, p. 1).

Popular education's roots can be found in Brazil in the late 1950's and early 1960's during a period of political reform, industrialization, and great social changes (Ferreira & Ferreira, 1997). In 1961 the Catholic Church in Brazil sponsored a national literacy program based on the work of Paulo Freire, who had been developing literacy programs using popular education methods (Ferreira & Ferreira, 1997; Freire, 1973; Gadotti, 1994). Freire was influenced by Catholic, existentialist, phenomenological and Marxist philosophies (Berryman, 1987; Gadotti, 1994; Giroux, 1981; Gramsci, 1971; McLaren, 1989). Marx's views on praxis—the "free, universal, and self-creative activity through which man creates (makes, produces) and changes (shapes) his historical, human world and himself" (Bottomore, 1983, p. 388) and Hegel's "dialectic" between master and slave are central concepts in Freire's best known work, *Pedagogy of the Oppressed* (first translated into English in 1970).

Freire (1990, 1973) argued that humans named the world through dialogue. He opposed situations in which some humans "named" on the behalf of others and criticized "banking" methods of education that treated learners as if they were empty objects into which the teacher "deposits" knowledge. Banking education fostered "cultures of silence" in learners, and in order to break through the "cultures of silence" the issues discussed in educational activities must be related to the reality of the learners. These issues or problems became "generative themes" and teachers and learners developed "codes" which were concrete representations of the generative themes such as an object, a photograph, a drawing, a poem, a film, or a skit. The generative
themes and codes were the basis for discussion, reflection and action in classes (Freire, 1990, 1973). This dialogic process inspires *conscientization*, the development of a "critical consciousness" (Freire, 1990, 1973; Shor, 1992). According to Degener (2001), "When students begin to understand the reasons behind their problems, they begin to understand their world and what they need to do to change it. When disadvantaged learners are able to reflect on their commonsense knowledge and get beyond it, they begin to understand that they can take action to transform their lives" (p. 36). It is this rationale that influenced the development of the popular education program at The Family Shelter.

In October 1990, at the request of former shelter residents, The Family Shelter began its own on-site adult literacy education program. The volunteer teachers were Catholic nuns who recognized that for the homeless mothers a traditional GED program had little sense of context. They used popular education methods because they wanted to help the women gain literacy skills in a meaningful context. In addition, the design of the popular education program was influenced by the Catholic sisters' beliefs in liberation theology and the principles and practices of the Catholic Action method that emphasized a "historical process of reflection and action" and a mission to help others "see reality, articulate experience, judge, interpret, act, plan, decide, organize, evaluate and celebrate" (SND Fieldnotes, 1996; Berryman, 1987).

**Studies on the impact of Popular Education**

A longitudinal study of adult literacy participants by Bingham, Ebert, & Smith (1999) found that after one year participants reported positive changes in at least one of the following categories: employment, self-esteem, and children's education. However, the researchers found "no significant changes in community awareness or in how people felt about their community" (p. iii). They suggest that, "The lack of changes in community awareness could be partially explained by the traditional curriculum in literacy programs, the content of which has little to do with local communities" (p. 23). Another study by Beder (1998) found that participation in adult literacy education had several impacts on adult learners, including: changes in employment, job quality, and income; reduction of welfare dependency; learning gains in reading, writing, and mathematics; GED acquisition; changes in
self-confidence and increased participation in children's school activities (1998, p. 3). However, the study's findings were contradictory because there were differences between what objective measures found (i.e. standardized assessment tools) and learners' self-reports. Beder proposes that more qualitative research is needed that examines the "meaning of impact" from the perspective of adult learners (1999, p. 81). Ethnographic studies by Benmayor (1991) on El Barrio Popular Education Program in New York City's East Harlem neighborhood and Young & Padilla's (1990) study of Mujeres Unidas en Accion in Boston, provide evidence regarding the empowering effects of popular education on the lives of low-income women. However, these studies unlike my own, do not focus specifically on the experiences of homeless mothers in a shelter setting.

Thus, my ethnographic research with homeless women and popular education makes a unique contribution to a small but growing body of literature about popular education in the United States (McLaren & Giarelli, 1995; Williams, 1996). Few adult literacy programs in the United States identify their approach as popular education and much of the current literature about popular education focuses on the work of non-governmental organizations in developing nations (Torres, 1995). According to Beder (1996), popular education programs in the United States are more likely to be offered in community-based organizations (CBO's) rather than in organizations funded by federal or state governments. Government and for-profit organizations are more likely to reflect the interests of those in power and operate in a "top-down" operation. In contrast, the work of CBO's is compatible with the popular education philosophy: "education that serves the interests of the popular classes (exploited sectors of society), that involves them in critically analyzing their social situation and organizing to act collectively to change the oppressive conditions of their lives" (Beder, 1996, p. 74).

Findings

Why do the Women Return to School?

Beder & Valentine's (1990) research suggests "10 basic motivations" for adults attending adult literacy education classes: "self-improvement, family responsibilities, diversion, literacy de-
development, community/church involvement, job advancement, launching, economic need, educational advancement, and urging of others" (quoted in Wikelund, 1993, p. 28). The homeless mothers I studied confirm these findings, with an overwhelming majority of the women stating that their children were the primary motivating factor in their decision to return to school. For example, Renata wanted to be a "role model" for her kids:

I decided to go back to school so I could be a good role model for my kids. And I say that because how can I teach them something or tell them something I don't know? How can I tell my kids to go to or finish school if I didn't? They'll be looking at me sayin', why should I go to school you didn't finish!

The women also returned to school because they believed that once they obtained their high school diplomas they would have increased access to decent jobs, get off of welfare, and/or be accepted into a good job training program or college. Leticia said:

I wanna get my GED. I need this certificate for myself, for my son, to get higher education, to get, to get a good job. You know? To prove to myself that I can do it. You know, that I finally done it after all these years. I went back to school. You know? I mean, back in the day I had no choice but to drop out, but, you know, I want to get that GED paper. I wanna go into a computer-training program. But that GED, it's real important to me. You know? It's real important.

Many of the women had fond memories of elementary school. For example, Yvette explained that she used to be a good student: "Math and reading was my favorite subject and I had certificates and awards and all that from math. All my awards was for math, you know. Because I was a math crazy freak right then!" When Yvette, as well as other women, went to high school they began to have problems, or their existing problems worsened, and this is consistent with much research on urban high school dropouts (Fine, 1991; Way, 1998).

Although some women stated that they were involved in gangs while in high school and that they had skipped school on a regular basis, most of the women who attended high school, dropped out because they got pregnant. They could not return to school because they lacked childcare or because of family
problems. Also, the majority of the women said that they regretted dropping out of high school but that they did not have a choice. Florence demonstrates this:

I had a baby. And at 18, I was in 11th grade. They didn't have what they have for women today. You know what I'm sayin'? And, um, the father had start keepin' him for a while and I didn't like to come home and my room is destroyed. The baby didn't take a bath, you know. I just couldn't deal wit him tryin' to raise him 'cause he was still using [drugs] and he would take the baby wit him over to his other women houses and stuff like that. And I knew the smell on my baby was not a man's smell. It was a woman's smell. So I just said, "I'm gonna stop school and I'll take care of my baby."

According to Beder (1996), "Although the intrinsic benefits that derive from community, dignity, and empowerment are important in popular education, meeting participants' basic material needs through popular education is also important" (p. 78). The Family Shelter addressed some of the women's problems by providing comprehensive social services, including: counseling, childcare, food pantry, clothing, after-school youth programs, healthcare, housing advocacy and legal advocacy. 82% of the women in this study attended at least one other Adult Basic Education (ABE) program prior to enrolling in popular education classes at The Family Shelter. The women said that their former ABE programs were not able to help them with regards to accessing social services. For example, Florence compared her experience in another ABE program to the Family Shelter's popular education program. She said that in her other school, "They okay when it comes to education, but then when it comes to life, they like, you know, skid off a little. It's like nobody be able to talk about life." She said, the Family Shelter is "a better place for you to be in especially if you have problems, you have children, you have all kind of things, this is the better place for you to be." The Family Shelter's popular education approaches were better suited to help homeless mothers because their personal, academic, and community goals were addressed simultaneously and on an on-going basis.

Next, I will provide evidence of the positive impact of popular education by presenting the voices of homeless mothers who describe how their self-esteem increased and how they worked to
help other poor women like themselves. The women also became stronger advocates for their basic legal rights related to welfare, housing, health, and education, and they became more involved with their children’s education.

"I Have More Self-Esteem"

This research confirms findings from studies that show participation in adult literacy education has a positive impact on adult learners’ self-esteem (Fingeret & Drennon, 1997). All of the women who participated in the popular education classes saw their return to school as a “big change” in their lives. For example, Maxine said, “Going back to school has made a big improvement in my life. I see things changing.” Yet, for many women, their decision to go back to school, especially during a time of crisis, was not supported by their family or friends. Maxine said, “Some people are encouraging me to keep going on and to finish. Other people have an attitude like they don’t want me to finish. It’s like they are envious or jealous.”

Tashawna, a recovering addict, also said people did not want her to change and because she was no longer using drugs her old friends “disappeared.” She said, “Everybody used to want to come over on Mondays and Tuesdays, and Wednesdays, because they didn’t want me to change. They didn’t like the change. But now they have no choice, because I don’t have nothin’ in my way anymore. So now, they are all just scattered everywhere. They disappeared on me.” Florence, who lived in a public housing development, described how her neighbors criticized her in the mornings when she went to the classes at The Family Shelter. She relied upon her mother for support: “My mother always calls me and says, ‘Girl, you hold your head up high, and act like you don’t hear it.’”

The longer the women participated in the program, the more they saw themselves as changing and the better they felt about themselves. According to Leticia, “I have more self-esteem ‘cause I used to call myself a failure. I used to be like, ‘Oh I’m a failure. I fail at everything.’ So, it’s like now I’ve got a lot of self-esteem. I went and took half of my GED tests and I know I’m goin’ to get those points and I’m goin’ to get where I want to go.”
At first, women who entered the program did not trust each other. When Leticia first joined the program she had negative feelings towards some of the women. She said, "I don't think about the other girls. I worry about myself. Because there's girls here who've been here for 2 years, and they still haven't went for nothin'. You know? I don't think about them. I think about myself gettin' the work done." She also criticized some of the women: "They're scared. They have low self-esteem. That's the way I see it. You know? I come here, I don't expect all the teachers to help me. I don't expect all the students to help me. You know, if I feel I need to work on my own, I will. So I don't worry about nobody else that comes to this class."

Not unlike debates among adult educators and policymakers, the women had conflicting beliefs regarding the purposes of education. In particular, new students struggled to understand the popular education process in their classes. The focus on generative themes in classes was viewed critically by some of the women, especially when they did not see how the problems being discussed were related to the subject material required for the GED. Some women such as Florence, Tashawna, Delila, Crystal, Holly, Georgia, Rae, and Maxine spoke openly about their problems in classes, but they did not relate these problems to the entire group. For example, Yvette complained: "There's times that we was upstairs that, you know, Florence is mad and we had to wait for them to calm her down before we get on a problem, you know before we start readin' or somethin'. So that's what I'm sayin'. Personal problems like they've had maybe should be left at home."

A few women who held traditional views about school refused to participate in activities that they did not see as related to the GED. Some of these activities included workshops with guest speakers about health, housing, and welfare, fieldtrips, arts activities, conferences, neighborhood events and holiday celebrations. These women, Yvette, Edith, Celia, Rhoda, and Rachel, were older and had held full-time jobs before enrolling in the popular education classes. They would often ask teachers, "Is that gonna be on the GED?" For example, Rachel, who did not want to attend a holiday party, asked, "Why is it that we are obligated to attend all these things, pot lucks, pizzas, and so on? I asked her why she
didn’t want to attend group celebrations and she argued, “There’s nothing you could do here, but provide the tools for people, who have to pick them up and use them.”

Yet, women’s relationships changed over time as they discussed commonly shared problems in classes and as they worked together to complete group projects. For example, a group of women were asked what they “expect” from each other:

Tashawna: I expect their support. You know when I need help, I expect that um, I can feel comfortable. You know, and I can go and talk to them and ask them for help. Could they help me? And I expect for them not to, you know, feel like they know it all and for me to ask somebody else. I expect for them to help me when I ask for their help. That’s what I expect.

Florence: Same here.

Leticia: Me too. I expect support.

Tashawna: But some students are not that way.

Florence: Yeah, but that’s not the way life goes. ‘Cause somebody learned it to teach you, so you teach somebody else.

Florence’s comment, “Cause somebody learned it to teach you, so you teach somebody else” embodied the spirit of popular education and fostered a sense of community among the women. One day I observed Delila telling a group of new women, “It’s very hard to work and accomplish something if you don’t work together.” Women like Rachel, Cynthia and Leticia who at first claimed that they did not care about the other women, later assumed teaching or leadership roles in the program. Yvette, who complained about how other women aired their problems in classes, later said, “Coming here gives me more strength to see that I’m not out there by myself. It’s not just me.”

Because the homeless mothers had weak social networks outside of the program (shelter was a last resort for many of them), they began to develop a community of support within the context of their popular education classes. The teachers described the women as a “community of learners,” and the women reinforced this notion by helping one another with schoolwork, by offering parenting advice and exchanging goods such as clothing or furniture. Tashawna described the popular education program as “like a family” and “different than a regular school”:
Changing Women

Oh, it's been the best. Oh, God only knows. It's been the best. I'm tellin' you. It's been the best because I mean, it's, it's so different than a regular school. You know, because I mean, there's people here that you can, you know, communicate with. I mean, it's just real. People here that you can communicate with. It's like a family, um, it's like a family setting.

"It Gave Me a Backbone"

My findings show that the popular education program not only increased the women's self-esteem and their sense of responsibility to one another, but the women also wanted to address the root causes of problems and they often talked about changing "the system." Some women like Celia, Leticia, Elsie, Loretta, Holly, Concepcion, and Yolanda became volunteer advocates for homeless women and welfare recipients at local shelters, neighborhood community centers, and health centers. Others like Frieda, Octavia, and Chauntal said they learned about their "rights" and how to "stand up for myself" while at the Family Shelter. For example, Chauntal said that the program "gave me a backbone." She explained:

There was a lot stuff that they showed us how we should do, you know? Um . . . better involved us, ourself to learn how the system, how the system can work for you and how they can work against you. So, that was, um . . . really good, you know, because I stayed involved, this was just a lot of stuff I be fighting now, um, with the system . . . . Boston Public School system in regards to my children which I think, they're the ones that gave me that, that backbone to don't take no, you know, because there's hope, you know? That's what I consider I really got from the program is that even with me living here [in The Family Shelter] how they had me fight for my housing like if welfare told me, "Oh no well, you don't qualify, you can't get this," you know, they [the program] showed me well, you can write an appeal because they don't have no reason to refuse you. So, the program all in all, they, they the ones that gave me a lot of backbone to stop acting like well okay, it's no, it's no. I'm just gonna walk away. I can't do it. They push, they push you a lot to say, "No, you can do it!" you know?

In this instance the encouragement from teachers and other women as well as the provision of needed legal services at The Family Shelter helped foster Chauntal's belief that the "system" could be challenged. Similarly, Delila told me, "I don't like working with the
government because I would be working against the government, so . . . (pauses) See, I like to work to change things, to make better things, you know.”

As the women at The Family Shelter became actively involved in their learning they developed a critical consciousness—an understanding of their “own being in the world”—and the popular education classes inspired collective action outside of The Family Shelter (Freire, 1990). For example, I observed how the women circulated petitions to extend the two-year Massachusetts welfare time limit. In their writing classes, the women wrote letters to state and federal legislators protesting changes in welfare policies and advocating for affordable housing. The women organized and attended lobby days at the State House where they met with their legislators. Other women spoke at rallies to increase affordable housing and to change the welfare reform legislation. When the Family Shelter received a “Participatory Health Education” state grant, the funds were used to train the women as popular educators, and they developed materials for information booths at local health fairs and neighborhood festivals. Elsewhere I examine how political cartoons and letters to the editor in local newspapers were especially effective codes for facilitating dialogue, critical reflection, and action (Rivera, 2000).

“We Sit Down and Do Homework. They Do Theirs, I Do Mine”

Popular education strengthened the women’s ability to advocate for their children’s education. For example, Renata and Soledad studied the effects of Ritalin on their children and they later met with their children’s special education teachers to express their concerns about the drug’s long-term effects on their children’s health. After learning more about child development in their classes, and after a lengthy critical discussion about their childcare providers, a group of women developed a set of questions and a guide for choosing a quality daycare provider.

As stated earlier, the majority of the women returned to school during a time of crisis because they wanted to help their children. For example, Delila was not able to help her son with his homework until she gained the literacy skills she needed to understand the material. According to Delila:
We sit down and do our homework. They do theirs, I do mine. And, before he [her son] never asked me for help, he look at his homework, if he could not do it, he put it back in his bag, he never asked me for help. Now, when he comes and he looks at his work and he puts aside what he needs help with, and then he does what else he needs to do. And he goes like, "Mummy, mummy, I need your help." "In what?" "In my homework." I say, "How am I supposed to help you?" "I help you! Why don’t you help me?" That’s what he says!

As the women and their children studied together, education became a common bond for the family. The mothers and their children learned together and supported one another’s educational goals. In addition, the women held high expectations for their children’s education. The women wanted their children to have opportunities that were not accessible to the women, and they wanted them to succeed. According to Billie: "You know, I always encourage her [my daughter]. Stay in school because if you don’t stay in school, you’re gonna have a hard time like me. You know, even though I’m still trying to go back and I’m still tryin’, I refuse to give up.”

Some mothers, Soledad, Cynthia, Maxine, Florence, and Phyllis, brought their children—who had been suspended from school—to class with them because they did not want to miss school themselves. When these children came to school with their mothers, the other mothers made sure they were kept busy and were learning something. Other women offered advice to these children telling them to “Study hard,” or “Stay in school.” On one occasion, I overheard Norma lecturing Soledad’s son. She asked him, “Do you want to end up like your mother?”

Outcomes

In 1995, although 50% of welfare recipients in Massachusetts had less than a high school education, under the state’s two-year welfare reform “work-first” policy, welfare recipients were mandated to find employment as soon as possible. Welfare recipients who had been participating in adult literacy education programs were forced to forgo their education for the sake of low-paying jobs. Several studies have documented significant dropout rates and declining enrollments in adult education (D’Amico, 1998; Hayes, 1999; Imel, 2000; Kates, 1999; Knell, 1997; Pachikara, 1998;
Many of the adult education programs that had the greatest decline in enrollments were intensive (20 hours a week), community-based programs that offered classes during the morning hours to accommodate the schedules of mothers with school-aged children (Reuys, 1997; Sparks, 1999). Some of these programs were popular education programs like the Family Shelter's that, in addition to providing literacy instruction, were also aimed at increasing political empowerment and social change.

By 1999, only one woman, Kimberly, was still a participant in the popular education program. 36% of the women left the Family Shelter's popular education program without completing their high school credential because of welfare reform. Specifically, Leticia, Delila, Coletta, Adrienne, Georgia, Margarita, Celia, Octavia, Tracy, Cynthia, Rosario, Edith, Valerie, Susan, Renata, Maxine, Soledad and Denise all dropped out because they were pressured to enroll in welfare-to-work training programs at the risk of losing their welfare benefits. They all went to work in minimum wage jobs that did not lift them out of poverty, and many of them struggled to obtain subsidized childcare from the Massachusetts Department of Transitional Assistance.

Other women (26%) dropped out of the program during the course of the study because they continued to face poverty-related obstacles that prevented them from attending school or working full-time. Elsewhere I document how the women faced severe barriers to education and employment including: health problems, learning disabilities, lack of transportation, lack of child care, domestic violence, and substance abuse (Rivera, 2001). Specifically, in this study of 50 homeless women: 36% of the women reported participation in drug rehabilitation counseling; 64% reported violent experiences in their past such as rape, child abuse, homicides of family members, gang violence, and family violence; 44% reported that they were currently in abusive relationships. I suspect the number of battered women is higher because most of the women became homeless because of domestic violence, and it is common to deny abuse. Grace and Bernice dropped out because of health problems and Billie, Chauntal, and Augusta dropped out because they got pregnant. Two women, Rachel and Latrice, died during the course of this research. Phyllis, Crystal,
and Claudia dropped out because they had drug addictions, and they remained homeless. In addition, Tashawna, Jessie, and Rae were transferred to other shelter programs during the course of this study.

Research has shown that a high school diploma, or a GED, provides little economic rewards and that "the surest path to a middle-class income is to complete at least two years of education beyond the high school level" (Moscovitch, 1997, p. 1). Thus, while 36% of the women at The Family Shelter successfully completed their GEDs, they continued to struggle with homelessness, illness, lack of childcare, and insufficient income. For example, Sylvia and Loretta got full-time jobs after completing their GEDs, but they remained homeless. Florence and Norma also finished their GEDs and were working full-time jobs at minimum wage. Yvette finished her GED and was about to enroll at the local community college when her sister died and she was granted custody of her nieces and nephews. Both Holly and Rayna finished their GEDs but they are disabled and cannot work.

The popular education program had a strong collaboration with a local public university and philanthropic foundation that supported a scholarship for formerly homeless women who wanted to attend college. After finishing their GEDs Magdalena, Helena, and Frieda all received scholarships to attend college, but they dropped out because they lacked childcare. Concepcion and Yolanda were also awarded scholarships for college, but Massachusetts Department of Transitional Assistance did not approve of their college plans and they too were forced to find employment. As of 1999, Emma, Louise, Shanequa, Elsie, Rhoda, and Winnie were full or part-time college students.

Implications of the Study

I have argued that the Family Shelter's comprehensive social services and its popular education approaches helped address the women's personal, academic, and community goals. Through a process of collective sharing and reflection, the homeless mothers in this study began to "act upon the world," challenging their internalized oppressions and understanding how structural forces shaped and constrained their lives (Freire, 1990). Their growing
awareness of their relationship to others and to the world increased their self-esteem, challenged their “cultures of silence,” and inspired them to help other women and become stronger advocates for their children.

Yet, more research is needed about the impact of “work-first” welfare reform legislation on popular education programs that seek to promote political empowerment and social change. Welfare reform increased pressure on teachers at The Family Shelter to meet the goals of women who needed their GEDs as soon as possible. Teachers worried that the program’s goals of political empowerment and social change were being subsumed to meet the practical necessity of the GED credential. More and more teachers were hearing from new students, “Is this gonna be on the GED?” Robin, a teacher, told me, “I have never seen it like this. The women are so focused on getting the GED. They are in such a rush to take the test, even though they are not ready yet.”

Popular educators and critical theorists like Freire argue that schools reproduce social inequalities. This research highlights the contradictions in the belief that education is the path to economic success. By limiting access to adult literacy education through “work-first” welfare reform policies, social inequalities are produced and reproduced. The fastest-growing sector in Massachusetts’ labor market is the services industry. Denying access to education for the women in this study ensured that they serve as a source of cheap labor. Kates (1999) writes, “There is a disconnect between a) economic trends that indicate education and training levels of workers should be raised and b) public assistance policies that have greatly reduced access to education and training for hundreds of thousands of women who are entering the workforce” (p. 1).

As Congress prepares to reauthorize the Personal Responsibility and Work Opportunity Act, it should increase access to education for those who need it most. Some women continued to attend popular education classes at The Family Shelter despite the “workfare” requirement. They hoped that the law would change and tried to advocate for changes. For example, Delila explained, “Look, I tell my friends, don’t give up on education because welfare is pushing you. Okay? Yeah, the law is fine today, okay? There is a new law this minute, but who knows what’s gonna happen [next year]? Things can change.” Indeed, the time is ripe for change.
Notes

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1. See http://www.doe.mass.edu/ACLS for more details.

2. The Adult Education and Literacy System (AELS) in the United States encompasses programs such as Workplace Education, English for Speakers of Other Languages, Family Literacy, Native Language Literacy, Adult Basic Education, and Adult Secondary Education. See www.nifl.gov for more information.

References


The Settlement House Tradition: Current Trends and Future Concerns

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The settlement tradition represents a comprehensive approach that "strengthens individual and neighborhood assets, and builds collective capacity to address community problems" (Hirota, Brown, & Martin, 1996, p. i). While there is a rich literature on the history of the settlement movement, there is little information about contemporary settlement houses. This paper reports findings of a national survey of settlement houses/neighborhood centers that provide information about programs and services offered, populations served, unmet community needs, and policies or trends that contribute to or respond to these needs.

In recent years, there have been calls within the social work profession for a return to our settlement house roots (e.g., Husock, 1993; Jacobson, 2001; Lundblad, 1995). In contrast to an individualized and deficit-oriented approach, the settlement tradition represents a comprehensive approach that "strengthens individual and neighborhood assets, and builds collective capacity to address community problems" (Hirota, Brown, & Martin, 1996, p. i). Over the years, settlement houses have remained multi-service neighborhood centers. However, "an increasingly fragmented and categorical funding environment" has contributed to "limited opportunities for community-building approaches" in contemporary centers (Hirota et al., p. i).

Settlement houses have often been on the front line of community change, recognizing and responding to unmet needs created by demographic, economic, and policy trends. The twin objectives of the settlement movement were to provide immediate services and to work for social reform (Trolander, 1987). To what extent
do contemporary neighborhood centers continue the settlement house tradition? There is little information about contemporary settlement houses/neighborhood centers, but there is an extensive literature on the rich history of the settlement house movement.

Literature Review

Settlement House: Historical Perspective

The settlement movement was influential in the late 19th and early 20th centuries when most settlement houses were established, predominantly in northern and midwestern urban centers. The movement began in response to a rapidly growing immigrant population, large-scale industrialization, and the problems of urban slums. Settlement leaders “sought to overcome the centrifugal forces of urban disintegration to restore order to a society that had lost coherence, to maintain face-to-face friendship in a society increasingly impersonal and anonymous” (Chambers, 1963, p. 115). Settlement houses developed a broad array of services to address social ills, as well as programs that were not problem-focused, such as day nurseries and kindergartens, courses in child care and domestic science, recreational/educational groups, lending libraries, and cultural activities—art, music, theater, folk festivals. The diversity of programs reflected the needs of individual neighborhoods, changing social conditions, and the belief that the “range of settlement activity must be as wide as human need . . . .” (Woods, 1923, p. 48).

But even with such diverse programs, “the settlements, by themselves, could no more than nibble at problems whose solutions . . . required concerted action of the entire community” (Chambers, 1963, p.17). Therefore, settlement leaders were also involved in social reform activities. They influenced municipal governments to set aside land for parks and playgrounds and to improve sanitation and public health programs; they engaged in political activism to effect reform at local, state, and national levels on such issues as minimum wage, child labor laws, and woman’s suffrage. Thus, the settlement house movement reflected a dual responsibility for social service and social reform. The “most immediate work” of the settlement was to meet individual needs,
but in such a way that "progress is . . . made toward removing the social need for giving that particular kind of help to other individuals" (Holden, 1922, p.39).

_Settlements in Transition_

Estimates vary as to the number of settlement houses in existence at any given time. In 1913 the _Handbook of Settlements_ listed 413 settlements in 32 states (Husock, 1993). A variety of forces affected the decline of the settlement movement. Trolander (1987) asserted a "fundamental conflict" existed between the trend toward professionalism in social work and the settlement ideal (p.31). By the 1920's, most settlement workers "thought of themselves as social workers rather than social reformers . . . and began to speak of the people they were helping not so much as their neighbors as their clients" (Davis, 1967, p. 231). Changing demographics also affected settlement houses during the 1920's as European immigration declined and African Americans moved to urban centers. Settlement houses responded by shutting down, operating segregated activities and separate facilities, or following their white neighbors to other neighborhoods (Lasch-Quinn, 1993). The post war recession and conservatism of the 1920's also contributed to the settlement movement decline (Trattner, 1984).

Peterson, Lauderdale, and Bard (1971) noted little effort to provide neighborhood-based services from the 1930's to the 1960's, given the growing emphasis on centralization of service delivery. During the 1960's War on Poverty, approximately 400 publicly funded local community action or neighborhood service programs were established, and traditional settlement houses also received funding for anti-poverty programs. By 1965, neighborhood centers nationally were receiving public funds equal to what they received from United Ways (Berry, 1986).

_Contemporary Settlement Houses and Neighborhood Centers_

Landers (1998) suggested that approximately 900 "bustling social service centers" known as community houses, neighborhood or community centers, are "today's settlements" (p. 3). However, the Neighborhood Houses of New York estimated that 300 settlements in 80 cities were "survivors" from the settlement
era (Husock, 1993); many survived by adapting to changes in the policy environment—offering government-funded programs like child care and drug treatment services. Husock (1993) conducted one of the few studies of contemporary settlements with his analysis of 14 settlements in 11 cities. He found settlements continued to provide an array of services to a broad cross section of citizens in specified geographic areas. Some programs were problem-focused, and others aimed to maintain the well being of individuals and their communities. While some settlements were heavily dependent on public funds, the average level of government support was 33.4%; United Way was the major funding source.

In 1991, United Neighborhood Houses (UNH) of New York City did a study of its 38 member neighborhood centers. The budgets of these centers ranged from $250,000 to $24 million. Over 80% of funding came from public contracts, with New York City providing 65% (Menlo, 1993). Menlo observed that the trend toward single-problem-focused public funding had created barriers to comprehensive and coordinated services. Kraus and Chaudry (1995) studied New York’s 37 settlement houses, which served over 200,000 people annually, providing prevention, treatment, recreation, and cultural programs. Government funding represented 85% of their revenues. Kraus and Chaudry noted that settlements often resembled their funders—“with specialized staff, organized by categorical programs, who often answer more to the rules and regulations of their funding agencies than to changing neighborhood conditions” (p. 34). Apart from these few studies, there is little information about contemporary settlement houses/neighborhood centers. This paper reports findings of a national survey of settlement houses that was initiated to fill this gap in the literature.

Methodology

Design and Sample

This exploratory study used a cross-sectional survey design. The sample was drawn from The United Neighborhood Centers of America (UNCA), a nonprofit, national organization of neighborhood-based agencies. Founded in 1911 by Jane Addams,
UNCA was formerly known as the National Federation of Settlements and Neighborhood Centers. Questionnaires were sent to the 171 neighborhood centers that were UNCA members when this study was undertaken.

Instrument

The author developed a 25-item instrument that included questions in three areas: (1) services provided, demographics of populations served, service delivery arrangements, and recent changes in services or populations served; (2) current and future unmet needs in the service area, as well as national trends or policies contributing to and responding to these needs; and (3) center’s background (when established, region of the country), budget and revenue sources, and information about the administrator completing the questionnaire. The questionnaire was critiqued by several colleagues, pre-tested by the associate director of a local settlement house, and modified based on the feedback.

Data Collection and Analysis

Questionnaires were mailed to the Executive Directors of UNCA member agencies in August, 1999, with a cover letter explaining the purpose of the study and a self-addressed postage-paid envelope. A follow-up letter was mailed several weeks later, including another questionnaire and return envelope. Eighty-three centers (N = 83) completed the questionnaire for a response rate of 49%. Descriptive univariate statistics were used to analyze quantitative data, and valid percentages are reported in the following discussion of results. Content analysis was used to identify themes in responses to open-ended questions.

Results

Characteristics of Respondents and Sample

Questionnaires were completed by neighborhood center administrators; 82% (n = 68) held positions of Executive Director or President. Other respondents were assistant/associate directors and various program directors (e.g., youth and family services, community development). These administrators had experience in their current management roles (M = 9.77 years, SD 8.36) and
in neighborhood center/settlement house work in general ($M = 17.21$ years, $SD = 12.10$). Of the 74 administrators who responded to questions concerning education and experience, 74.3% ($n = 55$) held graduate degrees, including the MSW degree (37%, $n = 27$) and doctoral degrees (9.1%, $n = 7$).

Reflecting the heyday of settlement growth, 25.3% ($n = 21$) were established between 1876 and 1900, and another 31.3% ($n = 26$) between 1901 to 1925. Three centers (3.6%) were established between 1850 and 1875, 14.5%, ($n = 12$) between 1926 and 1950, and 20.5% ($n = 17$) between during 1951–1975. During the last 25 years, only 4 centers (4.8%) were established. While 73.5% ($n = 61$) reported their centers had been established as settlement houses, 93.9% ($n = 77$) indicated their mission was consistent with the settlement house tradition.

The neighborhood centers in the sample mirrored early patterns of the settlement movement, with fully 90.1% located in the northeast ($n = 36$) and central/midwest United States ($n = 37$), and a handful in the south and west (9.9%, $n = 8$). This distribution paralleled the location of UNCA member agencies in some ways; 8% of member agencies were located in the south and west and 92% in the north and central/midwest, but 35% were in the northeast and 57% in central/midwest.

The centers varied tremendously in size of staff and budget. The smallest center had one full-time employee and a $73,000 budget, while the largest reported a staff of 1,000 full-time employees and a budget of $60,000,000. However, the median full-time staff size was 30 and the median budget $1,400,000. Although respondents were not asked about additional staff resources, several provided comments about part-time and seasonal employees and volunteers (e.g., “8 full-time employees but 12 FTE”; “full-time staff is supplemented with over 400 volunteers annually”).

**Service Areas and Service Delivery Arrangements**

Neighborhood centers served diverse geographical areas via several service delivery arrangements. Most centers (56.6%, $n = 47$) served several neighborhoods, 16.9% ($n = 14$) served a single neighborhood, and 15.7% ($n = 13$) served a citywide service area. Additionally, 10.8% ($n = 9$) indicated other geographical service areas, such as statistical planning area or school district.
Just 18.3% \( (n = 15) \) indicated that services were provided only in the neighborhood center itself. The most frequently cited service delivery arrangement \( (37.8\%, \ n = 31) \) was provision of programs in the neighborhood center and its satellites, followed by neighborhood center and partner agencies \( (22\%, \ n = 18) \). An additional 22% \( (n = 18) \) reported other service delivery arrangement, with eleven of these noting a combination of the previous categories \( (e.g., \) services provided in the neighborhood center and its satellites and partner agencies). Several respondents also indicated service provision in schools, homes, on the street, and in shelters.

**Programs and Services**

Neighborhood centers offer an array of programs. Recreation/socialization services were offered by the greatest number of respondents \( (95.2\%, \ n = 79) \), followed by information and referral \( (89.2\%, \ n = 74) \), parenting education and support \( (85.5\%, \ n = 71) \), child care \( (79.5\%, \ n = 66) \), individual counseling \( (69.9\%, \ n = 58) \), group work services \( (69.9\%, \ n = 58) \), transportation \( (67.5\%, \ n = 56) \), employment/training \( (50.6\%, \ n = 42) \), and emergency financial aid \( (44.6\%, \ n = 37) \).

Additionally, 50.6% \( (n = 42) \) indicated one or multiple “other” services, usually with a specific focus and targeted to particular populations. Most frequently cited “other” programs were: senior services, including adult day care \( (n = 17) \); education and literacy programs, including ESL, ABE, RIF, tutoring, and libraries \( (n = 16) \); housing and homelessness-related services, including shelters, transitional housing, tenant services, assistance to first time homebuyers \( (n = 15) \); food pantries and meal programs \( (n = 10) \). Some centers provide health-related services \( (n = 10) \), including health centers, health screenings, HIV/AIDS prevention and education, family planning and pregnancy prevention, and others provide mental health and substance abuse programs \( (n = 6) \).

Children, youth, and families were identified as the focus of a number of “other” services. Children’s services ranged from early childhood programs \( (e.g., \) preschool, Headstart) to after-school programs, special education services, and child welfare services \( (n = 10) \). Teen programs included truancy and delinquency prevention as well as pre-employment preparation and
college guidance \((n = 7)\), and family support programs included family resource centers and domestic violence services \((n = 7)\). A number of centers specified enrichment programs, e.g. theater, arts, and culture programs \((n = 6)\) and sports, camping, and outdoor education programs \((n = 4)\).

In addition to direct services to individuals and families, 67.5\% \((n = 54)\) provide community development programs. These programs include neighborhood/community organizing \((n = 49, 62.8\%)\), leadership development programs \((n = 38, 48.7\%)\), political organizing \((n = 32, 41\%)\), and economic development \((n = 42, 41\%)\). "Other" community development services were reported by 13.3\% \((n = 11)\), such as voter registration, community policing, environmental survey and research, developing block or tenant associations, grass roots organizing, and advocacy related to specific issues, such as "keeping public hospitals public." Neighborhood centers that did not have community development programs were more likely to have been established since 1951, well after the settlement house era; 38.5\% \((n = 10)\) of centers without community development programs were established between 1951 and 2000, compared to 18.5\% \((n = 10)\) of centers with such programs. Not surprisingly, 34.6\% \((n = 9)\) of centers without community development responded "no" or "not sure" when asked if their center began as a settlement house, compared to 25.9\% \((n = 14)\) of centers with these programs.

**Populations Served**

Neighborhood centers reported serving diverse populations, in terms of age, race/ethnicity, and socioeconomic status. Most centers (63.9\%, \(n = 53\)) provided services to all age groups, from very early childhood to elder adults. Almost all centers provided programs for children 6–12 years of age (98.8\%, \(n = 82\)) and teenagers 13–18 (95.2\%, \(n = 79\)), with somewhat fewer providing programs for children 4–5 years old (86.7\%, \(n = 72\)) or infancy to 3 years old (74.7\%, \(n = 62\)). Ninety-four percent \((n = 78)\) reported serving adults, with an equal number providing programs for people 65 years and older.

Centers provided services to diverse ethnic and/or racial groups, with the 63.9\% \((n = 53)\) serving three or four racial/ethnic groups, 21.7\% \((n = 18)\) serving five of six groups, and only 14.5\%...
The Settlement House Tradition

(n = 12) serving just one or two such groups. Respondents were asked to indicate the percentage breakdown of the racial/ethnic populations they serve. The mean percentage of African Americans served by these centers was 47.33 (SD = 29.80), followed by White/non-Hispanic (M = 27.78; SD = 24.80), Latino (M = 16.93; SD = 21.55), Asian American (M = 5.40; SD = 13.70); Native American (M = .77; SD = 2.06), and “other” (M = 1.42; SD = 4.69), such as multi-racial individuals, East African immigrants, Arab-American, Portuguese, and Russian immigrants.

In keeping with the settlement house tradition, the majority of centers served low-income individuals and families, but they also provided services to other socioeconomic groups. Respondents were asked to indicate the breakdown of the populations served in terms of: percentage well below the poverty line for their geographic area, percentage at or near the poverty line, and percentage safely above the poverty line. The mean percentage of individuals/families below the poverty line was 56.99 (SD = 26.53), followed by those at or near the poverty line (M = 29.43; SD 17.17), and last those above the poverty line (M = 13.15; SD = 18.33).

Trends and Changes

Respondents were asked about changes their centers had experienced in terms of services/programs provided, populations served, and funding sources. Two-thirds (n = 54) reported “major changes” in programs/services offered within the last five years. Only four centers reported the elimination of a program or service; rather, respondents indicated they had initiated, expanded, and/or reorganized a variety of programs: day care/child care (n = 11), children and youth programs (n = 11), employment services/job training (n = 8), and services to families (n = 7). Centers also developed or expanded recreation and creative arts programs (n = 5), computer training for children and families (n = 4), services for the developmentally disabled (n = 4), juvenile justice-related programs (e.g., gang intervention, adolescent sex offender program, etc), (n = 4) services to specific ethnic or racial groups (n = 3), transitional housing and shelter programs (n = 3), and community development/community building programs (n = 3).
The most frequently cited reason for many of these changes was welfare reform; several centers reported initiating or expanding service availability during evening hours to accommodate welfare-to-work family schedules and needs. Other reasons included: community needs or requests, demographic changes, request or mandate from local or state government to offer a program or funding availability for a specific program. In addition to programmatic changes, respondents reported changes in administration and service delivery. Several commented on growth in number of clients and staff, increase in service hours, and physical expansion (e.g., additions to the center building, expansion of settlement sites). Others noted increased computerization, collaboration, and contracting out some services.

Changes in client demographics were noted by 43.4% \( (n = 36) \) of respondents. The most frequently cited changes were increases in the Latino populations served, followed by Asian-Americans and East Asians. Other centers reported increases in diverse immigrant populations from Africa, the Caribbean, the former Soviet Union, and Arab nations. Changes in income demographics and related population shifts were also noted. Respondents identified gentrification trends that apparently had different impacts in different neighborhoods (e.g., one center noted a stable economic level of populations served, despite gentrification, while another cited the growing problem of affordable housing for low-income people).

A critical aspect of neighborhood center functioning is its funding base. When asked about changes in the center's sources of funding, 51.2% \( (n = 42) \) indicated there had been major changes within the last five years, and 57.5% \( (n = 45) \) expected major changes in the next five years. Most respondents reported a complex funding base, with 90% \( (n = 65) \) receiving support from at least 5 sources; over one third (36%, \( n = 26 \)) indicated their budgets were funded from 8 or more sources. Respondents were asked to indicate the percentage of the annual budget provided by various funding sources. The highest mean percentage was United Way \( (M = 23.26; SD = 22.93) \), followed by local government \( (M = 18.87; SD = 21.18) \), state government \( (M = 16.46; SD = 17.85) \), federal government \( (M = 10.75; SD = 15.49) \), foundations \( (M = 8.20; SD = 9.33) \), fees for service \( (M = 6.79; SD = 11.92) \),
"other" (M = 6.69, SD = 15.07), individual donors (M = 4.94; SD 5.51), and corporations (M = 3.77; SD 4.80). "Other" revenues included the following sources in rank order: investment, interest, endowment, capital gains; special events and fundraising; rental of center space; church and civic association contributions; cost sharing with partner agencies and subcontracts from other agencies; client contributions.

The primary patterns of change were declining support from United Way and increasing efforts to generate revenue from other sources: government grants and contracts, private foundations, fundraising and special events, annual giving/individual donors. Of the 38 respondents that described their funding changes, 7 noted significant or "dramatic" United Way cuts, and 2 others referred to flat or uncertain United Way funding. Centers reported different experiences with governmental sources of income, most indicating increases in local, state, or federal funding but with a few noting reduced support. This diverse response likely reflects different patterns of support in specific states or localities as well as gains or losses in targeted program funding (e.g., "increased HUD funding for our shelter program"; "lost $250,000 in Drug Prevention funds").

Neighborhood center administrators reported similar patterns of change anticipated over the next five years: ever-growing reliance on fundraising efforts, with board members playing an active role, and continuing decline in United Way support. Respondents expected increased revenues from annual giving and solicitation of individual donors, governmental funds, grants, fee-based services, businesses, endowments, foundations, and churches. Several respondents noted the potential impacts of political and economic trends on future fund development, such as possible decreases in corporate community support due to mergers, stock market fluctuations and balanced budget effects, and fierce competition for funding resulting in larger agencies "overpowering the neighborhood settlement houses."

Community Needs: Present and Future

Respondents were asked to identify the greatest unmet need in their service area at this time. However, this task appeared to be difficult, reflecting one respondent's comment: there is "no
single greatest unmet need." Consequently, the 81 responses to this question generated 114 unmet needs (Table 1). Affordable housing was the most frequently identified need, followed by employment needs (job training, jobs that pay a living wage and afford health care, welfare-to work training programs). Service needs for various age groups were also identified, such as affordable, quality child care; programs for children, at-risk youth, teens, and elders. Agency resource needs were also identified, including computerized networks, long term volunteers, and fiscal resources. Other needs reflected community infrastructure issues, such as economic development, quality public education, transportation, and community social problems like violence and drug dealers.

Asked to anticipate what would be the greatest unmet need in the next five years, 80 respondents cited 106 unmet needs (Table 1). Forty-four (55%) indicated that future unmet needs would be the same as current needs. Not surprisingly, projected unmet needs were similar to current needs, with affordable housing and employment services topping the list. This ranking reflects one addition to the list of current needs due to the potential impact of welfare reform on families reaching the five-year time limit for TANF benefits. Respondents indicated that when these families are no longer eligible, they would likely need income assistance and supportive community services to gain self-sufficiency.

Finally, respondents were asked to identify national trends or policies that were factors in creating the unmet needs in their community; 72 respondents identified 93 such factors (Table 2). Welfare reform was most frequently cited, followed by housing policies and trends, such as loss of Section 8 funding, federal cuts in McKinney and HUD funding, gentrification, and steering and redlining. Funding trends were also cited, including reduced public funding due to tax-cutting and budget-balancing policies, privatization, and managed care. Income distribution patterns were also noted, such as the increasing income gap between the have-s and the have-nots and the powerlessness of the poor. Other trends identified were related to employment, such as jobs moving out of the city or not providing adequate wages and benefits; demographics of an aging population; and community violence.
### Table 1

**Current and Projected Unmet Needs**

<table>
<thead>
<tr>
<th>Current Needs n = 81</th>
<th>Projected Needs n = 80</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordable housing</td>
<td>Affordable housing</td>
</tr>
<tr>
<td>Employment/job training</td>
<td>Employment/training</td>
</tr>
<tr>
<td>Childcare/day care</td>
<td>Child care/day care</td>
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<tr>
<td>Children/youth programs</td>
<td>Children/youth programs</td>
</tr>
<tr>
<td>Teen programs</td>
<td>Senior services</td>
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<tr>
<td>Senior services</td>
<td>Safety net/TANF limits</td>
</tr>
<tr>
<td>Center’s resources</td>
<td>Quality public education</td>
</tr>
<tr>
<td>Economic development</td>
<td>Economic development</td>
</tr>
<tr>
<td>Quality public education</td>
<td>Teen programs</td>
</tr>
<tr>
<td>Transportation</td>
<td>Transportation</td>
</tr>
<tr>
<td>Infant/toddler services</td>
<td>Family services</td>
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<tr>
<td>Family services</td>
<td>Center’s resources</td>
</tr>
<tr>
<td>Community concerns</td>
<td>n = 4</td>
</tr>
<tr>
<td>Health care</td>
<td>n = 3</td>
</tr>
<tr>
<td>Services for men</td>
<td>n = 3</td>
</tr>
</tbody>
</table>

Note: Table includes only policies or trends identified by three or more respondents.

Respondents were also asked to identify national trends or policies that address these unmet needs; only 63 respondents answered this question, identifying 70 trends or policies (Table 2). The most frequent response was that appropriate responses are not being made. Respondents noted there were no policies or trends to address community needs or that they were inadequate: e.g., “few and far between beyond Social Security and Medicare”; “Don’t see feds doing much of anything anymore”; “These issues are not being addressed. Settlements may need to lead in focusing on this issue.” While certain funding trends were identified in the previous question as factors contributing to unmet needs, other funding patterns were reported to address community needs: increased grant opportunities, federal and state grants without matching requirements, more funding for child care and youth services, and increased philanthropic giving. Similarly, while welfare reform was cited as a factor contributing
Table 2
Policies/Trends Related to Unmet Needs

<table>
<thead>
<tr>
<th>Creating Needs</th>
<th>n = 72</th>
<th>Addressing Needs</th>
<th>n = 63</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welfare reform</td>
<td>n = 22</td>
<td>None/inadequate</td>
<td>n = 20</td>
</tr>
<tr>
<td>Housing policies/trends</td>
<td>n = 14</td>
<td>Funding flexibility</td>
<td>n = 15</td>
</tr>
<tr>
<td>Funding trends</td>
<td>n = 11</td>
<td>Welfare reform</td>
<td>n = 6</td>
</tr>
<tr>
<td>Income distribution</td>
<td>n = 10</td>
<td>Focus on education</td>
<td>n = 6</td>
</tr>
<tr>
<td>Employment trends</td>
<td>n = 6</td>
<td>Economic supports</td>
<td>n = 4</td>
</tr>
<tr>
<td>Demographic changes</td>
<td>n = 6</td>
<td>More at-risk youth programs</td>
<td>n = 3</td>
</tr>
<tr>
<td>Community violence</td>
<td>n = 3</td>
<td>Accountability trends</td>
<td>n = 3</td>
</tr>
</tbody>
</table>

Note: Table includes only policies or trends identified by three or more respondents.

to unmet needs, some respondents identified these reforms as positively addressing needs, e.g., "a family building welfare reform", "emphasis on self-sufficiency." Other trends cited were emphasis on education, economic supports for the working poor through tax credits and expanded income eligibility for childcare, and more programs for at-risk youth.

Discussion
This study is limited by the sample size (N = 83); therefore, findings cannot be generalized to the several hundred settlement houses and neighborhood centers across the country. However, the sample does include centers established during the settlement era, as well as more recently, and ranging from very small agencies to huge operations. The study's findings provide a snapshot of contemporary neighborhood centers, including similarities to and differences from historical settlement houses. Like the early settlements, contemporary neighborhood houses continue to provide an array of programs and services to individuals and families of diverse ages and income levels. They work with diverse racial and ethnic groups and new immigrant populations in low-income neighborhoods, but unlike the traditional settlement, contemporary centers often serve multiple neighborhoods, with services delivered in the community house, in satellite centers, and in partner agencies.
Settlements are still "on the front lines" in recognizing and responding to the impacts of social policy and social change on community residents. Many centers have initiated or expanded programs to assist families affected by welfare reform, and some have created adult day care and other eldercare services in light of demographic trends. Service provision has been both a strength and a limitation of contemporary settlements. The variety of programs/services provide "multiple entry points" and enhance the quality of community life because of "the intrinsic connection between individual well-being and the common good" (Hirota, Brown, Mollard, & Richman, 1997, p. 2).

However, as centers became large scale service providers, they became less involved in community building and social action (Landers, 1998), as reflected by this study's finding that nearly a third of the centers do not provide community development programs. Hirota, Brown, and Martin (1996) cited funding patterns as the primary reason for this changing emphasis; to survive, settlements shifted from a community focus to providing services to "discrete groups of 'needy' residents." However, as the limits of this approach are becoming more apparent, "settlements are devising strategies to recapture or enhance their traditional community-building functions" (p. 1). Berry (1983) suggested that contemporary neighborhood centers may still have a strong commitment to their social reform tradition. However, many of the problems they deal with are increasingly "complex and intractable" (p.5). In fact, many of the unmet needs identified in this study reflect inadequacies in community infrastructures, e.g., adequate low-cost housing, economic development, transportation, quality public education. These problems often require solutions beyond the scope of neighborhood or locality. Thus, neighborhood centers will need to join coalition efforts to effect change. Community centers continue to have an important role to play in documenting the effects of policy initiatives, like welfare reform, on the people and neighborhoods they serve. They may serve the traditional settlement function of marshalling evidence about social conditions and providing an "early warning signal of changes in community and national life which affect the lives of neighbors who have few social and financial resources" (Hillman, 1960, p. v).
References


Intake and four-month follow-up measures were obtained for 235 children referred into a new foster care placement over a 12-month period in the Australian State of South Australia. Twenty-five percent of the sample returned home within 4-months, and for those who remained in care throughout, there had been modest gains in behavior, psychological adjustment and adjustment at school. On the other hand, there were considerable levels of placement disruption, a high degree of non-compliance with parental visiting plans, and a high proportion of children fell outside ninety-five percent confidence intervals for the general adolescent population on most well-being measures, particularly conduct disorder.

Introduction

Despite the fact that child welfare legislation everywhere advances child well-being as one of its most fundamental objectives, efforts to measure the well-being of children in state care have been surprisingly rare and unsustainable. Altshuler and Gleeson (1999), for example, recently noted that measures of success in foster care are dominated by indicators of permanency and safety, while child well-being is rarely incorporated into administrative databases or built into the evaluation of system performance. No
doubt one of the reasons for this omission is that whereas permanency and safety can be readily inferred from administrative data such as re-abuse and re-referral rates, the measurement of child well-being is a more subjective and potentially labour-intensive task.

In a recent paper on the measurement of child well-being, Barber and Delfabbro (2000) argued that for well-being assessments to become routine, there is a need for briefer, more useable measures than are currently available; measures that can be incorporated into the day-to-day casework of child welfare professionals. Many of the more commonly advocated measures of child well-being such as the Child Well-Being Scales (Magura & Moses, 1986) and the Child Behavior Checklist (Achenbach, 1981) are much too laborious to pass this test. Another problem with the available research into foster child well-being is that most studies have been cross-sectional (see Altshuler & Gleeson, 1999 for a review). In the most common research design, the functioning of children in foster care is compared with that of children in the general population or from comparable groups in the child welfare population at a single point in time (cf. Kinard, 1994). Such designs provide no adequate baseline against which to compare change in foster care outcomes. What longitudinal studies have been conducted are mainly retrospective. Large archival data-sets, such as those routinely maintained by agencies, have been used to examine the long-term outcomes of care (e.g., Courtney, 1994, 1995; Courtney & Wong, 1996; Fernandez, 1998; Goerge, 1990). These studies have proved highly effective in predicting changes in case-status over time, but have been limited by the range of variables included, the sophistication of the measures available, and by the absence of follow-up measures more proximal to the outcomes predicted. For example, it is questionable whether particular outcomes can be clearly associated with factors such as abuse which may have occurred 5–10 years earlier.

Accordingly, prospective longitudinal studies are increasingly advocated in the child welfare field (Courtney et al., 1998; Fanshel, 1975a; Wulczyn, 1997). In addition to being able to compare subsequent results with a consistent baseline, prospective studies are in a position to collect a greater volume of information, and to choose what information should be collected. Archival
or case-file information can be combined with child self-reports and reports from others who have regular face-to-face contact with the child. Furthermore, although concerns can be raised about potential biases resulting from the selective loss of subjects over time, a prospective study often has the capacity to identify, and maybe control for, any systematic differences between the retained sample and those who drop out.

The present study represents the first stage of a prospective study into foster child well-being. Brief measures of behavioral disorder, psychological adjustment and adjustment at school were routinely administered at intake and again four months later. The frequency and reliability of parental visiting was also assessed because it has been consistently related not only to family reunification (Fanshel, 1975b; Gibson et al., 1984; Lawder et al., 1986; Milner, 1987; Seaberg & Tolley, 1986) but also to children’s well-being in care (Cantos, Gries, & Slis, 1997; Fanshel & Shinn, 1978; Poulin, 1985). Given that details of family contact are often not adequately documented in case-files (Grigsby, 1994; Hess, 1982; Hess, Mintun, Moelhman, & Pitts, 1992), the use of face-to-face interviews in the present study, combined with pre- and post analysis, may offer a more accurate and detailed insight into this key area of practice.

Method

Study Design

Two-hundred-and-thirty-five children referred into out-of-home care over a twelve-month period were recruited for the study. Baseline information was obtained from the children’s case files and from face-to-face interviews with their social workers. Four-months later, the 164 (70%) children who remained in care were followed-up,1 and their social workers reinterviewed. This study reports on placement movements between intake and follow-up for the whole sample (n = 235), and on the behavioral, psychological, and educational progress of the 170 children who remained in care throughout the study period. Scores on behavior and psychological measures for adolescents in the sample were also compared with a normative sample (n = 985) of adolescents from the general population.
The Foster Care Sample

The original sample involved 235 children (121 boys, 114 girls) with a mean age of 10.8 years and an age range of 4–17 years. Children were selected if they were referred for a new placement between May 1998 and April 1999. Excluded from the sample were children on detention orders, children placed into supported accommodation, those referred for family preservation services, those referred for respite from a continuing placement, and those with placements expected to last for less than 2 weeks. The final sample represents the entire cohort of children meeting the selection criteria referred via the central referral agency for both metropolitan and rural areas of South Australia during the study period. Included in the sample were 39 (16%) Aboriginal children and 195 (84%) non-Aboriginal children (1 missing item). Sixty-three (27%) children were from rural areas of South Australia and 172 (73%) were from the metropolitan area of Adelaide. A breakdown of the intake sample by age showed that 65 (28%) were aged 4–8 years, 80 (34%) were 9–12 years and 90 (38%) were aged 13–17 years. At intake there were 110 children aged between 12 and 17 years but by the follow-up point 85 adolescents in that age group remained in the sample.

The Normative Sample

Comparative data for the adolescent foster children were obtained from a data-set involving 985 parents drawn from the general population in Canada. All parents in the sample had children drawn from 95 Canadian schools in the province of Alberta. One school was randomly selected from each of the 9 school districts and within these schools individual students were selected by stratified random sampling according to age group from 12 through 17 years. Individual school districts were responsible for drawing the sample based on a required sample size. Following identification of the students, mailing labels containing parents' names and addresses were prepared by each school district. Each of these parents was dispatched a letter describing the study and inviting them (the parent) to participate. The parents who agreed to participate had children whose mean age was 14.31 years (s.d. = 2.51), comprising 502 males (51%) and 483 females (49%). Although the normative sample and the foster care sample came from different countries, recent research indicates that the
general Canadian and Australian adolescent populations display very similar levels of well-being (Barber, 2001).

Measures and Procedure

1. The Foster Care Sample

In order to recruit the foster care sample, referral records at the central agency were monitored each week. Data on the children selected were recorded along with the contact details and location of the social worker responsible for each case. Information was collected from central agency records and government databases, and verified in face-to-face interviews with social workers. Four-months later most of the measures described below were re-obtained for those children (n = 164) who remained in care.

Among the variables extracted from agency records were: (a) demographic characteristics, (b) placement history, and (c) details of current placement, including type of legal order and type and frequency of contact with family of origin. The types of contact included: information only, indirect contact (e.g., telephone), direct visits, and overnight stays. Frequency of each type was measured on a 6 point scale: 1 = never, 2 = monthly or less often, 3 = 2-3 times per month, 4 = once per week, 5 = 2-6 times per week, 7 = daily or more often. The referral form also provided a checklist of factors that were taken into account when making the referral, such as whether or not the child had been the victim of abuse, child mental health problems, suicide attempts, substance abuse, developmental delay, self-destructive behaviors, offending, truancy, and other general behavioral problems.

Among the measures obtained from interviews with the child’s social worker was an abbreviated form of Boyle et al.’s (1987) Child Behavior Checklist (CBC). The CBC contains four subscales: conduct disorder, hyperactivity, somatization disorder and emotional disorder. All subscale items were designed by Boyle et al (1987) to operationalize DSM criteria for the relevant disorder. The items selected from the CBC for inclusion in this study were those found in a previous study involving the senior author of over 2,000 junior and senior high school students to possess the highest item-total correlations within their relevant subscales (Barber, Bolitho & Bertrand, 1998; 1999a; 1999b). Using this approach, 6 of the 15 conduct disorder items could be extracted without negatively affecting alpha for the conduct
disorder subscale. Similarly, 3 of the 6 items comprising Boyle et al.’s (1987) hyperactivity subscale, 5 of their 13 emotionality items, and 4 of their 11 somatization items were selected for the remainder of the abbreviated CBC. Internal consistency for each of the abbreviated subscales was found to be acceptable using the intake sample from the present study: $\alpha = .83, .87, .82,$ and $.84$ for the conduct disorder, hyperactivity, emotional disorder, and somatization disorder subscales respectively.

In addition to behavioral and psychological adjustment measures, social workers were asked to respond to 10 items concerning the child’s behavior and adjustment at school. All items were scored on 4-point scales: 1 = often, 2 = sometimes, 3 = rarely, 4 = never. Four items referred to general school performance: ‘Has been well-organised’, ‘Has been interested in his/her studies’, ‘Has produced work of a good standard’, ‘Has been attentive in class’. Six items referred to the child’s behavior and level of cooperation: ‘Has not completed homework or set work’, ‘Has been disruptive in class’, ‘Has refused to take part in school activities’, ‘Has been disciplined by teachers and other staff members’, ‘Has been late to class’ and ‘Has wagged (skipped) school’. If the child was not attending school, workers were asked to indicate why this was so on a short checklist which included: left-school, excluded, school refusal. Finally, as an objective indicator of school adjustment, social workers were asked to indicate how many times the child had changed school, been suspended or excluded during the 12 months prior to entering the study (at intake) and in the four-months since intake (at follow-up).

2. The Normative Sample

Parents of the adolescent children selected for the sample were asked to complete the long form of Boyle et al.’s (1987) CBC in relation to their child. Items included in the abbreviated CBC were extracted from the parent dataset for analysis in this paper.

Results

1. Placement Change and Stability

The overall sample can be divided into three groups: 1) new referrals to care ($n = 40$); 2) those who were returning to care after going home from a previous placement ($n = 89$); and 3) those who
were currently in care but were changing placements (n = 106). Figure 1 identifies these 3 groups and describes the status of the sample at the follow-up point.

Analysis of the reasons for the 123 placement changes during the four-month period revealed that 83 (67%) of the children were moved for reasons beyond their control, such as because better or more permanent arrangements became available or because of changes in carer circumstances. However, 40 (33%) of the children who experienced at least one placement change were moved because the foster carer had been unable to cope with the child’s
Table 1

Status at follow-up by origin of child

<table>
<thead>
<tr>
<th></th>
<th>New into Care ( (n = 40) )</th>
<th>Returning to care ( (n = 89) )</th>
<th>Changing placement ( (n = 106) )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Returned home</td>
<td>20 (50.0%)</td>
<td>29 (32.6%)</td>
<td>10 (9.4%)</td>
</tr>
<tr>
<td>Still in care</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In 1 stable placement</td>
<td>11 (27.5%)</td>
<td>30 (33.7%)</td>
<td>35 (33.0%)</td>
</tr>
<tr>
<td>Changed placement</td>
<td>7 (17.5%)</td>
<td>30 (33.7%)</td>
<td>54 (50.9%)</td>
</tr>
<tr>
<td>Change due to child's</td>
<td>3 (7.5%)</td>
<td>10 (11.2%)</td>
<td>27 (25.5%)</td>
</tr>
<tr>
<td>behavior</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

behavior. The mean number of placements experienced by these 40 children in the 4-month period was 5.7 (s.d. = 4.2).

Table 1 shows that placement status at follow-up varied significantly depending on the group to which the children belonged at intake. Proportion difference tests showed that new referrals were significantly more likely to return home than the other two groups, \( z = 3.99, p < .01 \), whereas children who were already in the system at intake were no more likely to change placement overall, \( z = 1.61, p > .05 \), but were more likely to experience a placement change due to their disruptive behavior, \( z = 3.25, p < .01 \). As 59 of the original sample had returned home by the follow-up point (and were therefore no longer under State supervision), comparisons between intake and follow-up measures in the remaining sections were confined to the children who remained in care throughout the study period \( (n = 164) \).

2. Family Contact

Analysis of case plans indicated that almost all \( (n = 212 \text{ or } 90\%) \) of the children in this study did have explicit plans in relation to family contact, although in 52 cases \( (22\%) \), the plan was for no contact\(^2\) and only 127 \( (54\%) \) were expected to have direct, personal contact, as opposed to telephone contact. When contact was planned, in whatever form, it was usually planned to occur at least weekly. Furthermore, half of the children for whom no contact was planned did, in fact, receive family contact over the period anyway. McNemar change tests, which compared
the intake and follow-up frequencies for each contact category, showed that children were significantly less likely to have 'no contact' than had been anticipated (predicted=22%, actual=11%, \( p < .05 \)), and stayed overnight more often than predicted (intake=11%, actual=27%, \( p < .001 \)). Further analyses compared the predicted and actual frequency of contact by collapsing the original 6 response categories into separate binary frequencies (1 month or less vs. 2–3 times per month or more). This analysis showed that frequency of all three types of contact (indirect, direct visits and overnight stays) did not differ from what had been predicted.

Further analyses revealed that the generally high level of conformity with family contact plans at the aggregate level masks a considerable degree of non-compliance at the individual level. Planned contact did not occur between 6% and 19% of the time, depending on the type of contact in question. And in around 20% of cases, contacts were made when no such plans had been made.

3. Psychological Adjustment

Table 2 presents mean item scores on three of the CBC subscales for the children in care at intake and follow-up. (There were no changes in somatization scores). Mean item scores were obtained by adding all items completed and dividing by the total number of items completed. Within samples analysis of mean item conduct score revealed an improvement in conduct from intake to follow-up. Analysis of individual conduct subscale items showed that the change in overall score was due to a significant reduction in 2 of the 6 conduct items, with children being less likely to destroy property or lie and cheat once they had been in care for 4 months. Similarly, there was a significant reduction in overall hyperactivity, due in this case to 2 of the 3 items: concentration problems and distractibility. Finally, the change in overall emotionality score was due to improvement in 1 of the 5 items—“worried a lot”. Taken together, then these analyses suggest that children in care were generally better behaved, less agitated and less worried than they had been at intake. However, assessments of effect size based upon a comparison of mean difference scores and the standard deviations (Cohen, 1992), revealed that the effect sizes \( (d) \) for all comparisons were only small (i.e., < 0.30).

Figure 2 depicts the distribution of mean conduct scores for
Table 2

Means, standard deviations (in parentheses), and valid cases for CBC subscales at intake and at 4 months

<table>
<thead>
<tr>
<th>Conduct</th>
<th>Intake</th>
<th>4-months</th>
<th>t-value</th>
<th>Effect size(d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Damaged property</td>
<td>0.50 (0.64)</td>
<td>0.40 (0.67)</td>
<td>1.88</td>
<td>0.15</td>
</tr>
<tr>
<td>Destroyed property</td>
<td>0.68 (0.67)</td>
<td>0.48 (0.72)</td>
<td>3.01**</td>
<td>0.29</td>
</tr>
<tr>
<td>Disobedient at school</td>
<td>0.92 (0.75)</td>
<td>0.84 (0.76)</td>
<td>1.07</td>
<td>0.11</td>
</tr>
<tr>
<td>Lied or cheated</td>
<td>1.13 (0.69)</td>
<td>0.97 (0.76)</td>
<td>2.41*</td>
<td>0.22</td>
</tr>
<tr>
<td>Stole things</td>
<td>0.49 (0.70)</td>
<td>0.40 (0.66)</td>
<td>1.53</td>
<td>0.13</td>
</tr>
<tr>
<td>Physical attacks</td>
<td>0.52 (0.69)</td>
<td>0.41 (0.63)</td>
<td>1.94</td>
<td>0.17</td>
</tr>
<tr>
<td>Mean score</td>
<td>0.71 (0.51)</td>
<td>0.59 (0.52)</td>
<td>3.02**</td>
<td>0.21</td>
</tr>
<tr>
<td>Hyperactivity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couldn't concentrate</td>
<td>1.33 (0.72)</td>
<td>1.17 (0.81)</td>
<td>2.26*</td>
<td>0.21</td>
</tr>
<tr>
<td>Couldn’t sit still</td>
<td>1.00 (0.79)</td>
<td>0.93 (0.82)</td>
<td>1.21</td>
<td>0.09</td>
</tr>
<tr>
<td>Distractible</td>
<td>1.20 (0.72)</td>
<td>1.02 (0.79)</td>
<td>2.89**</td>
<td>0.24</td>
</tr>
<tr>
<td>Mean score</td>
<td>1.17 (0.66)</td>
<td>1.00 (0.70)</td>
<td>3.08**</td>
<td>0.28</td>
</tr>
<tr>
<td>Emotionality</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unhappy, sad or depressed</td>
<td>1.21 (0.59)</td>
<td>1.14 (0.61)</td>
<td>1.14</td>
<td>0.12</td>
</tr>
<tr>
<td>Not as happy as other children</td>
<td>1.21 (0.60)</td>
<td>1.11 (0.69)</td>
<td>1.43</td>
<td>0.16</td>
</tr>
<tr>
<td>Nervous and tense</td>
<td>0.94 (0.76)</td>
<td>0.86 (0.75)</td>
<td>1.14</td>
<td>0.11</td>
</tr>
<tr>
<td>Too fearful or anxious</td>
<td>0.81 (0.73)</td>
<td>0.78 (0.64)</td>
<td>&lt;1</td>
<td>0.04</td>
</tr>
<tr>
<td>Worried a lot</td>
<td>1.11 (0.65)</td>
<td>0.95 (0.72)</td>
<td>2.22*</td>
<td>0.23</td>
</tr>
<tr>
<td>Mean score</td>
<td>1.07 (0.53)</td>
<td>0.93 (0.51)</td>
<td>2.80*</td>
<td>0.19</td>
</tr>
</tbody>
</table>

*p < .05, **p < .01

the normative sample and for children between the ages of 12 and 17 years who were in foster care at intake and follow-up. Sixty-percent of foster children at intake and 41% at follow-up fell outside the 95th percentile for the normative population. Notwithstanding the apparent decline in the number of foster children within this outlier group, independent samples t-tests showed that the foster care sample scored significantly higher than the normative sample on overall mean score at both points in time (p < .001). Similar results were obtained for the other
two CBC subscales. Twenty-eight percent of foster children fell outside the 95th percentile for hyperactivity at intake, compared with 21% at follow-up, and 25% fell outside the 95th percentile for emotionality at intake compared with 23% at follow-up.

4. Behavior at School

Table 3 indicates that a substantial number of children were experiencing significant problems in school at intake. Approximately a quarter were often disruptive in class and were not
Table 3
School performance and adjustment at intake and follow-up (follow-up figures in bold, negative items shaded)

<table>
<thead>
<tr>
<th>Item</th>
<th>n</th>
<th>Often (%)</th>
<th>Sometimes (%)</th>
<th>Rarely (%)</th>
<th>Never (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has not completed homework or set work.</td>
<td>82</td>
<td>21 (25.6)</td>
<td>35 (42.7)</td>
<td>16 (19.5)</td>
<td>10 (12.2)</td>
</tr>
<tr>
<td>Has been attentive in class.</td>
<td>94</td>
<td>29 (30.9)</td>
<td>48 (51.1)</td>
<td>16 (17.0)</td>
<td>1 (1.2)</td>
</tr>
<tr>
<td>Has been disruptive in class.</td>
<td>118</td>
<td>27 (22.9)</td>
<td>41 (34.7)</td>
<td>14 (11.9)</td>
<td>16 (13.6)</td>
</tr>
<tr>
<td>Has refused to take part in activities.</td>
<td>82</td>
<td>11 (13.4)</td>
<td>31 (37.8)</td>
<td>16 (19.5)</td>
<td>24 (29.3)</td>
</tr>
<tr>
<td>Has been well-organized.</td>
<td>78</td>
<td>21 (26.9)</td>
<td>20 (25.6)</td>
<td>28 (35.9)</td>
<td>9 (11.5)</td>
</tr>
<tr>
<td>*Has been interested in studies.</td>
<td>89</td>
<td>26 (29.2)</td>
<td>43 (48.3)</td>
<td>16 (18.0)</td>
<td>4 (4.5)</td>
</tr>
<tr>
<td>Has been disciplined by staff.</td>
<td>92</td>
<td>31 (33.7)</td>
<td>41 (44.6)</td>
<td>9 (9.8)</td>
<td>11 (11.6)</td>
</tr>
<tr>
<td>Has produced work of a good standard.</td>
<td>85</td>
<td>18 (21.2)</td>
<td>43 (50.6)</td>
<td>18 (21.2)</td>
<td>6 (7.1)</td>
</tr>
<tr>
<td>Has been late to class.</td>
<td>80</td>
<td>18 (22.5)</td>
<td>15 (17.6)</td>
<td>9 (11.3)</td>
<td>38 (47.6)</td>
</tr>
<tr>
<td>Has wagged (skipped) school.</td>
<td>94</td>
<td>16 (17.0)</td>
<td>11 (11.7)</td>
<td>6 (6.4)</td>
<td>61 (64.9)</td>
</tr>
</tbody>
</table>

completing set work, over a third were often disciplined by staff members, and nearly a third were skipping school often or sometimes. Between 1 in 5 and 1 in 3 children at intake were reported as rarely or never being attentive in class, interested in their studies, or producing work of a good standard. Encouragingly, results showed some improvement in school performance. McNemar change tests compared the relative percentage of children in the often + sometimes group for each item compared with the per-
percentage in the rarely + never category. Children were significantly less likely to skip school in their new placement (29% at intake versus 16% at follow-up, \( p < .05 \)), and to refuse to take part in school activities (51% at intake versus 35% at follow-up, \( p < .05 \)). On the other hand, social workers reported no significant improvement in how much interest children were showing in their studies, in the quality of work produced, level of organisation, or general attentiveness.

A more objective measure of school adjustment could be derived by comparing the rate of school suspensions and exclusions prior to and following placement. Sixty of the children in receipt of care throughout the study period had been suspended at least once in the 12-months prior to the study for a mean duration of 14 days, and 9 had been excluded. During the first follow-up period, 26 children were suspended with 8 having been suspended on 3 or more occasions. Each suspension was for approximately 2–7 days. There were also 6 exclusions, with 4 of these children not returning to school at all. An approximate suspension rate can be calculated by dividing the pre-placement mean by 3 to give mean suspension per quarter rate (i.e., \( 0.95/4 = 0.32 \)). This compares with 0.17 for the first follow-up period using the same algorithm. Thus, both social worker ratings and suspensions data demonstrate a decrease in problematic school behaviors during the first four months in a new placement.

Discussion

This paper began by arguing the need for quick, reliable measures of child well-being that can be readily integrated into the casework of foster care workers. While the abbreviated CBC scales developed in the present study certainly proved to be both easy to administer and reliable, a feature of the dataset was the large amount of missing data on the abbreviated CBC because social workers simply did not know the answer. This finding underscores an observation we have made more than once before (Barber & Delfabbro, 2000; Delfabbro, Barber & Cooper, 2002) that the amount and quality of information on which child welfare decisions are commonly based tends to be very limited. We have further suggested that this problem is endemic in the child welfare
field because so many of the relevant variables refer to inherently private states and behaviors and because respondents frequently have some incentive to disguise the truth. Interestingly, the degree of missing data in our abbreviated CBC corresponds quite closely to that recorded by Boyle et al. (1987) for the longer version of the CBC.

Notwithstanding the problem of missing data, results of this prospective study are consistent with the conclusion that foster placement tends to be accompanied by improvements in the short-term in levels of conduct disorder, hyperactivity and emotional disorder. The present study also found a statistically significant improvement in foster children’s attendance and participation at school between intake and follow-up. This improvement in school behavior was reflected in a lower rate of school exclusions once the children came into foster care.

Offsetting these positive results somewhat was the finding that when the well-being of adolescents in foster care was compared with a normative sample from the general population, a sizeable proportion of the foster children fell outside acceptable confidence intervals at intake and at follow-up. It must be acknowledged, however, that the extent to which this result is attributable to the different raters used for the two groups of children (social workers for foster children versus parents for normative children) is unknown. It must also be emphasised that in the absence of an adequate control condition, improvements in behavior and well-being cannot be attributed to foster placement itself. Among the more obvious threats to the internal validity of this conclusion, for example, are: (a) child maturation and (b) instrumentation, particularly changes in social worker expectations. Moreover, as Nelson, Singer, and Johnson (1978) note, improvements in the child’s functioning on entering care may be short-lived as most children can be expected to conform at least temporarily to the behavioral expectations of a new setting. In order to assess this possibility, further follow-up of the children in this study is planned.

Results of the family reunification data showed that nearly twenty-five percent of the sample had returned home prior to the four-month follow-up point, although this aggregate figure masked considerable variation between referral types. Of par-
The First Four Months in a New Foster Placement 83

ticular concern is that the most difficult group to reunify—those referred for a change of placement—was also the most numerous. Whereas around forty percent of new referrals and one-third of children returning to care from home were reunited with their families within four months, only around nine percent of those referred for a change of placement could be reunified within four-months. Moreover, around half of the children referred for a change of placement were forced to change placement again at least once within four-months, in almost fifty-percent of these cases because the foster carer was unwilling or unable to tolerate the child's disruptive behavior any longer. Results of the family contact data also suggest that social workers were aware of the importance of explicit plans in relation to family contact, as ninety-percent of the children in care throughout the study period did have a family contact plan. However, the data showed a considerable level of non-compliance with the plan.

Taken together, then, our findings present a mixed picture of the first four months in foster care. Of particular concern is the number of children who appear to be adrift in the foster care system. That is to say, they wander from foster home to foster home, neither returning to their families nor settling down with alternative carers. The present study suggests that over half of the children in South Australia who are referred into out-of-home care will, for one reason or another, be forced to change placement at least once in the first four-months. While it is acknowledged that some of these moves constitute transition arrangements, such as where a child needs an emergency placement while more stable arrangements are worked out, this does not alter the fact that placement change is a very disruptive experience. For this reason, one of the most fundamental objectives of an alternative care system must surely be to provide placement stability from the outset.

Notes

1. Follow-up was undertaken for children whose case were still open (or only recently closed) irrespective of their status. However, our analyses are confined to those children still in care.

2. Contact is often proscribed because of the risk of abuse to the child.
References


The First Four Months in a New Foster Placement


Linking Welfare Clients to Jobs: Discretionary Use of Worker Social Capital

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College of Social Work

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Judicial Council of California
Administrative Office of the Courts

The overarching theme of the 1996 welfare reform law was to move clients from dependency to self-sufficiency by facilitating their entry into the labor market. While numerous mechanisms were used to do this, this study explores discretionary actions taken by workers to help clients find jobs, namely, tapping into their own social capital. Respondents in one urban and one rural county in a southern state reported using their own social capital to get information regarding job openings and to exert influence to get clients hired. Notably, respondents at all levels of the bureaucracy expected this behavior to occur. Both the positive and negative aspects of social capital emerged as points of discussion in the rural county. Potential benefits and risks of worker social capital use are discussed as are future research directions and implications.

A plethora of research undertaken in recent years addresses the impact of the TANF program on clients. This research documents a variety of factors that affect the success or failure of clients in securing and maintaining employment, including the economic conditions of an area, skill levels of recipients, child care, transportation, and client attitudes (Brayfield and Hofferth, 1995; Ong, 1996; Hofferth, 1999; Danziger et al., 1999; Kalil, Schweingruber, and Seefeldt, 2001). The Work First strategy driving the Personal Responsibility and Work Opportunity and Reconciliation Act of 1996 (P.L. 104-193) focuses on pushing welfare
recipients into the labor force as rapidly as possible (Midgley and Rainford, 2000). Much of the discourse surrounding welfare reform focuses on the client's responsibility to work while the specific responsibilities and tasks to be undertaken by the state in the welfare-to-work era eludes most inquiry (Brodkin, 1997). Thus, a closer look at how state agencies and individual workers implement their side of the welfare-to-work contract is warranted (Brodkin, 1997). Otherwise, as Brodkin (1997) points out, bureaucratic processes are reduced to the proverbial black box. One area not sufficiently discussed in the literature is the formal and informal mechanisms used by welfare workers to find employment for their clients. This study explores one informal job search mechanism: worker social capital. It seeks to determine whether or not workers use their own social capital to help clients find jobs, ascertain the factors that influence this use and examine the attitudes and opinions of workers regarding its use.

Theoretical Framework

Social Capital and the Job Search

Social capital exists in the social relations of individuals (Lin, 1999) and like Bourdieu's (1985) conception of the term, social capital, in this paper, refers to elements of social relationships that result in economic benefits to individuals. This includes the social-structural resources available to individuals that facilitate actions that further their interests (Coleman, 1990). Especially useful in the job search are the social resources present in the networks of others, known as alters, in an individual's network. Individuals whose alters have higher levels of wealth, status, and power have greater access to information and influence that can improve stratification outcomes (Lin, Ensel, & Vaughan, 1981). Research has demonstrated that social networks are essential in obtaining both professional and entry-level blue-collar jobs (Granovetter, 1981; Kaye and Nightingale, 2000). Newman (1999) affirmed these findings in reference to the low-skilled work force during her research in Harlem, "employers can be very choosy, and they use social networks, among other things, as a mechanism for streamlining the choice-making process" (p. 84).
Worker Social Capital And Discretion

Job readiness and search classes, on-the-job training, community work experience placements (CWEP) and other subsidized employment opportunities provide welfare recipients avenues to enter the work force. Some recipients also use their own personal networks to find jobs. This study explores whether or not caseworkers use their own social capital to help clients find jobs. Arguably, this would benefit clients as long as workers' networks include individuals with higher status and better education than those of their clients since such people would have access to better jobs.

Using personal networks to help clients is not in the job description of case managers. However, this does not rule out the practice since research indicates broad bureaucratic discretion in welfare-to-work programs, both at the state and caseworker level (Brodkin, 1997). We argue that the prevalence of discretionary action by street-level bureaucrats (Lispy, 1980) makes use of their own social capital to help clients find jobs a distinct possibility. Furthermore, workers have an incentive to do this since their effectiveness is measured by participation rates, or the percentage of recipients participating in a countable activity.

Research Design

Qualitative methods are employed because this such methods are appropriate when studying a topic about which little is known (Padgett, 1998, p. 7). While much research on welfare reform exists, it focuses on the outcomes of reform and the impact of the policy change on clients (Long, 2001; Freedman, 2000; Brady-Smith et al., 2001 and others). Other studies assess how agencies implement existing policy and manager/client perception of programs (Danziger and Seefeldt, 2000; Sandfort, 1999). The phenomenon of interest here, worker social capital use, is not included in any agency policy manual and it is not in the job description of employees in welfare agencies. Little is known about this topic because researchers simply have not asked questions about it.
Guided Conversations

Guided conversations with key informants were conducted to gather information. A guided conversation is a discussion between a respondent and a researcher that is guided by the researcher. The goal of this type of data collection is to increase understanding of an issue and to uncover other issues. This "discovery process often leads the researcher to explore issues and ideas not part of the original study" (Lofland and Lofland, 1995). The advantage of this is that researchers get closer to reality than they would if they only asked questions defined by previous research. A guided conversation can be differentiated from an interview because it is less structured. Interview schedules used with this methodology are "lists of things to be sure to ask about when talking to the person," rather than a list of questions that must be asked (Lofland and Lofland, 1995: 85).

Data Collection Procedure

In this type of research, much of the success of the data collection relies on the researchers' ability to ask follow-up questions to informant leads. To maximize the quality of data collection both researchers were present for conversations whenever possible. One researcher led the conversation and the other monitored and asked follow-up questions. This type of observer triangulation enhances the rigor of qualitative research (Padgett, 1998). Due to time constraints, case managers were interviewed by only one of the researchers.

Each of the guided conversations was taped and the researchers transcribed the tapes. In all cases, a room with a door was provided for the conversation to enable respondents to speak candidly. Signed consent was obtained from all participants. While direct quotes are used in this paper, care was taken to insure the anonymity of respondents: no names are included and all references to individuals or places that could be used to identify individuals were removed.

Sample Selection. Both purposive and convenience sampling techniques were used to select respondents. Purposive sampling was used in order to get the perspective of individuals in different positions within the welfare bureaucracy. Thus, respondents
included state-level administrators, managers in charge of welfare offices, supervisors of case managers, and case managers. All top-level administrators in the state office were included as were the managers of selected sites. A convenience sample was used for case managers and supervisors to minimize agency disruption. Managers selected these participants based on their availability during scheduled interview times.

**Site Selection.** Research sites included state offices, one rural county and one district office in an urban county. Site selection used both purposive and convenience sampling. Since differences in rural and urban social structures are widely documented in the literature, both types of counties were included in the study to elicit experiences in each type of locale. The largest urban county in the state was selected because of its size and the rural county because it is one of the poorest in the state. Both counties were poorer than the national average with higher levels of unemployment and declining populations (U.S. Bureau of the Census, 1997; U.S. Department of Labor, 2000; U.S. Census Bureau, 2000). Since the urban county had more than one welfare office, one district office was chosen as the study site. To inform the selection, state administrators were asked to identify a typical welfare office. Typical was defined as average, not the best and not the worst. Another criterion was that the office not be participating in other aspects of the welfare evaluation project in order to decrease agency disruption.

**Data Analysis and Coding**

Each interview tape was transcribed and both researchers coded the data independently from the written transcripts. The first step involved marking all references to client job search or worker use of social capital. Second, both coders developed initial codes describing statements extracted from the transcripts. Care was taken to create numerous and varied codes (Lofland and Lofland, 1995, p. 192). The next step, focused coding, involved analyzing the codes and determining which were useful and which could be eliminated. The two coders compared notes and modified codes when they overlapped or needed to be subdivided.
This paper focuses on responses related to the personal network theme identified through the coding. The subcategories of this theme included (1) general examples of self using personal networks; (2) specific examples of self using personal networks; (3) general statements that others use personal networks; (4) specific incidences of others using personal networks; (5) statements that personal networks are seldom used; and (6) statements that personal networks are never used.

Findings

Findings demonstrate that some workers use their social networks to gather information about available jobs and share this information with clients. Some workers also exert influence through their networks to help clients obtain employment. Finally, negative and positive dimensions of social capital as related to the job search of clients emerge in conversations with rural respondents.

Worker Social Networks and Job Information

Social network contacts are seen as important to the job candidate because they may possess information about available jobs not already known by the job candidate (Granovetter, 1973; Lin, Ensel, & Vaughan, 1981). Some workers noted that they shared information obtained through their own social networks about jobs with their clients. One supervisor in the urban county, for example, noted that she obtained information about two job opportunities from classmates in graduate school. A case manager in the urban area discussed a similar experience that occurred recently. She shared job availability information with a coworker that she obtained by chance from an acquaintance:

"An incident just happened this morning where another worker asked me did I know anyone that was hiring. This lady that I know . . . works for [a hotel in the city] . . . She asked me what I did and when I explained to her what I did she gave me her card and said that if I had anybody to send down there to her [to do so]."

Both of these comments support Lin and his colleagues' (1981) argument that high status contacts contribute to positive job search outcomes. In these cases, high status contacts with individuals possessing graduate degrees provided information about
jobs to workers and they passed along this information to recipients.

Another urban case manager expressed general knowledge that workers obtained information about jobs available from their personal networks and relayed this information to clients. Additionally, a rural case manager noted that she relayed information received through her social network regarding job openings to her clients. However, since the area has a high unemployment rate, this did not occur often.

Numerous respondents stressed that worker social capital was not the most common mechanism used by clients to find jobs. One case manager noted, for instance, that she did not think recipients commonly found jobs through such informal means, even though she did have a recent example. Similarly, another case manager in the urban county stated that she had on occasion heard about jobs through her personal network and informed clients. However, this did not happen regularly. The administrator of the rural parish, in fact, noted that most clients found jobs through word of mouth. While some of this happened in the family support office, it mostly occurred in their own communities.

**Worker Social Networks and Influence Exertion**

Social network contacts are also important because they enable some individuals to exert influence on the hiring process (Granovetter, 1973; Lin, Ensel, & Vaughan, 1981). One urban case manager noted that she had several alters in her network, including her sister and friends, who obtained information about job openings. She did, however, note discretion in using these ties to actually exert influence.

"I wouldn't call on a personal friend to get a job for somebody unless I have a feeling about that client, unless I know that client is going to work out because I don't want to have to hear about this from a personal friend. Yes, for clients that I trust and that want to work—then I will call on someone I know and say, 'Look I have someone finishing in bookkeeping, don't y'all have something? Anything? If we could just get them in, they can prove themselves.' And they say, 'Okay, there you go again.' For select clients I do pull some stuff. Other than [that], I go through job fairs and such . . ."
The case manager reported that she had sent someone to a particular business and the employer was not satisfied. The business owner is now skeptical of her clients and refuses to give them a chance when she calls.

A tendency to reserve one's social capital to help the most needy clients surfaced in the rural parish. An administrator noted,

"... If I hear a worker is having trouble placing a client, I know this guy that manages this place. I'll call him and see if he will try this. Sure, I was never above calling in for favors..."

Similarly, a rural worker noted that when she had a large number of clients to be placed, she called on a relative of one of the other individuals in the office to develop a community work experience placement.

Such behavior appears to be condoned by administrators as well as case managers. When asked whether case managers use their own connections to find jobs for clients, a rural parish administrator answered affirmatively:

"Sure they do. Their neighbor may own something down the street, they will say, 'Let me call them and see what I can do.' They use personal contacts. It's kind of an overlapping thing. I've done it before, all of us probably have."

Two state-level administrators support this view also. In fact, even though not part of any official job description, they expected this behavior to occur. One stated,

"(County) administrators (especially in smaller communities) are well known and can exert influence on employers. They approach employers and ask them to hire or provide [CWEP] placements..."

Another state administrator noted that even at the higher levels of the bureaucracy, individuals tap into their social networks to exert influence to have recipients hired. She gave a hypothetical example,

"If I happen to know that I have a friend who... is in the daycare business... I say, 'You need to come to this meeting... I think you need to do something to help us.'"

Even though the use of worker social capital for exerting influence is not an explicit duty of workers, it does fit within
the realm of acceptable actions of workers and is sanctioned, at least informally, by administrators. As demonstrated in previous research, case workers in public welfare agencies use discretion in executing their job duties (Brodkin, 1997). Specifically, there appear to be three instances when workers use their social capital to exert influence: (1) when the client is especially competent, (2) when the client is especially vulnerable, and (3) when there are a large number of clients needing jobs.

**Negative and Positive Ramification of Social Capital**

Alejandro Portes (1998) in a critical review of the idealistic rhetoric surrounding social capital, emphasizes that social capital has a negative side. He argues that current research and discourse regarding social capital focuses only on the positive attributes, failing to acknowledge the characteristics of social capital that have negative effects on individuals. For example, the closed social systems praised by social capital proponents also restrict access to opportunity and individual freedom.

Research on the social structure of rural communities reveals the potential negative effects of social capital on the job prospects of the poor. Studies of rural communities demonstrate large social divisions between the poor and the nonpoor and job opportunities linked to personal contacts, influenced by individual and family reputations and controlled by elites (Duncan, 1992; Duncan & Lamborghini, 1994; Tickamyer and Duncan, 1990; Vindich & Bensman, 1958).

Conversations with administrators and workers in the rural county reflect both the positive and negative effects of social capital. The administrator of the rural county noted that it was difficult to place clients in private corporations. She thought this was because of the community's small size:

"It's worse because they know everybody. They know the client. They know their momma . . . momma's history. It's harder in a small place."

The regional specialist agreed with this stating:

". . . if they come from a family without a very good reputation . . . we've had employers say on more than one occasion, I'm not hiring them, that's old so and so's child."
A similar incident was mentioned by a rural supervisor in the context of trying to place clients in community work experience placements.

"Yes, a lot of times [businesses ask who the client is before agreeing to the placement]. And a lot of times if they are known for drugs or something like that, they say they wouldn’t prefer to have that person. So they pick and choose."

When asked whether the closed social setting could also have a positive effect on increasing the ability of workers to exert influence to get clients hired, the answer was swift,

"No, not here. It’s the old stigma. They are just on welfare. That’s a lot of what you have to overcome."

This respondent elaborated, revealing the positive ramifications of social capital. She noted that in order to overcome this obstacle, case workers *sweet talk* employers:

"We’ll tell them, ‘We’ve got this girl. She’s got two babies. Give her a shot. We’ll get her here and get her day care. Just take her and see if you can train her. If it doesn’t work out, I’ll come get her. We’ll do something else.’"

Later, the rural administrator continued discussing this topic,

"... Now that’s the advantage to being in a small [county]: where the businesses know all the clients, the case managers know all the businesses. It works both ways. They know what type of person each business will take. [It] all boils down to the case managers sweet talking them... Picking up the client... Helping out."

In rural areas, the closed social system seems to restrict opportunities for some while making it possible for workers to overcome these restrictions by exerting pressure on employers.

*Study Limitations*

Before discussing the implications of this study, it is important to note that it has several limitations. The nature of qualitative research with a small and non random sample of respondents means that this work cannot be considered representative of workers in public welfare agencies nationally or even in the South. Additionally, due to the methodology, the study elicits information and raises new questions; it does not prove or disprove
hypotheses. In spite of these limitations, this work brings the voices of workers into the discourse regarding worker roles in the client job search process.

Discussion

Social welfare programs are complex constructs whose daily operations are determined by a multitude of factors ranging from federal laws to the actions of individuals. Within the system, individual workers put policies into practice using their own discretion. This study found that welfare workers in both a rural and an urban county in a southern state used their own social capital both to obtain information about available jobs and to exert influence to get clients hired.

Most interesting was the extent to which this behavior was expected and informally supported by state-level administrators, although not a part of the job officially. Also, a categorization of occasions that warranted the exertion of influence by workers emerged. Such action occurs with especially competent clients, especially vulnerable clients or in situations where many clients are in need. In the rural county, both the positive and negative effects of social capital were noted in conversations. There the job search of clients was impeded when employers had a negative impression of the client or the client's family. However, the closed social system that provided employers negative information about clients and their families also gave workers the opportunity to pressure business owners to hire clients. As one respondent succinctly stated, "It works both ways."

The finding that some workers used their own social capital to assist clients and that such action was implicitly expected by administrators indicates that the topic warrants further exploration and study. The final section addresses potential benefits and risks of such action. It also identifies avenues for future research and policy implications.

Potential Benefits

The most intriguing potential benefit of worker use of their own social capital in the client job search relates to one of the fundamental missions of the social work profession: poverty alleviation. The poor in the United States are typically isolated from the social and economic mainstream. In addition to being
poor, welfare recipients are often disadvantaged due to closed social systems. Worker social capital offers a potential link to the socioeconomic mainstream and may be used to overcome the negative effects of social capital.

Such action by welfare workers also challenges one critical view of the welfare system by identifying elements within the system which promote progressive reform even when this is not dictated by law. The welfare system in the United States has historically been criticized for its remedial nature. The latest welfare reform has been criticized for being punitive and for focusing on decreasing caseloads instead of decreasing poverty. This research presents evidence that some workers in the welfare system have, on their own accord, surpassed the limited nature of current and historic policies. In effect, they have bridged the socioeconomic divide that isolates the poor from the nonpoor by using their own social networks to help clients.

These findings also identify instances where worker discretion is not categorically bad. Research on worker discretion generally portrays such action as detrimental to clients. Discretionary action often includes service rationing, rationalizing program objectives, delivering services only to the more cooperative clients (Goodsell, 1981; Lipsky, 1980), and failing to elicit information from clients or respond to their needs in order to move them through the system more quickly (Brodkin, 1997).

In addition to helping clients, worker use of their own social capital may benefit the agency and employers. When worker social capital use results in job placement, participation rates also increase, helping to secure funding for the agency. In addition, employers often hire individuals known by a personal contact because obtaining sufficient and accurate information about job candidates is difficult. The potential for a good match is increased in this case because the worker knows both parties. An added amount of social control exerted on the recipient by the worker may also make the placement more sustainable.

Potential Risks

While this form of discretionary action occurs and may benefit the client, agency and employer, potential risks of such action also exist. It may open the door to the development of dual
Linking Welfare Clients to Jobs

relationships between social workers and their clients which is prohibited in the NASW Code of Ethics (1996) (Section 1.06.c). Using alters in one’s personal network to obtain information about jobs or to exert influence to help clients gain employment makes it possible for clients to become members of the social networks of social workers.

In addition to the dangers faced by clients, workers may also be harmed by such practices. Expecting workers to use their personal resources to meet participation benchmarks could be viewed as worker exploitation. This can be compared to asking them to use their monetary capital to help clients. DeFilippis (2001) makes a similar argument about the use of social capital in community development initiatives. Expecting workers to use their own social capital in this way would be especially problematic if workers are not connected to individuals of a high social status or if they work in areas that are economically depressed.

Pressuring or requiring workers to use their own social capital may also damage their social capital because their relationship with a recipient is contractual rather than social. Social relations contribute to the formation of social norms, rules that regulate behavior in certain settings. Such norms serve as social capital when they facilitate individual action that would not be possible or would be more costly if they did not exist (Coleman, 1988, 1990). When individuals exert influence to get a friend or relative a job they expect the person to behave in a respectful manner in the job out of a sense of obligation and because of potential informal sanctioning by network alters. Since the client is not actually a part of the workers’ network, this form of social control is not present, thus increasing the risk involved in such action. Such risk was discussed by one on the respondents.

"...I talked them into hiring someone who didn’t work out and so every time they say, ‘Oh, no. We’re not hiring any more of your people.’ I tell them, ‘look, it wasn’t my fault.’ That’s why you have to be careful.”

Furthermore, a potential administrative concern is that such action undermines the intent of the program. An underlying tenant of T.A.N.F. is encouraging the self-sufficiency of recipients. Expecting workers to find jobs for clients may shift the
responsibility of the job search from clients to workers. Another administrative concern is that it may be impossible to promote the discretionary use of worker social capital while discouraging other types of discretionary action.

**Future Research and Policy Implications**

One of the most noteworthy changes that has occurred in the post-welfare reform era is the shift of priorities from eligibility and case management to job finding and maintaining placements. Respondents emphasized the shift in these work tasks throughout the guided conversations. Admittedly, such tasks are not new to the field of social work: job finding and coaching can be traced to supported employment programs for the mentally and physically challenged (Shaefer, Hill, Seyfarth, & Wehman, 1987). However, for welfare offices and workers, this is a new priority.

Elaborate formal models of job development exist; some states have merged Departments of Labor with welfare departments, while other areas hire specific job finders. In this study, nearly all workers were implicitly or explicitly responsible for job finding and coaching, even in the office with a designated job finder. Because these findings cannot be extrapolated to broader populations, further research should examine whether workers commonly evoke their social capital in offices with elaborate job development models and job finders. Thus, while it is important to acknowledge the role of the formal job finder and the parallels to supported employment, the implications from our research are substantively different.

Connections matter in finding jobs in the post-welfare reform era, albeit formal or informal connections. Currently, the ramifications of workers utilizing their informal connections to fulfill work requirements are unclear. This research documents some evidence of this practice but it does not address the prevalence or results of such action. This is a clear next step for future research. Such research is important because this phenomenon may be affecting welfare reform evaluation results without being detected.

While it is true that due to their position in the social status hierarchy, workers could use their social capital as a bridge to better jobs for clients, we are not prepared to advocate or disavow
Linking Welfare Clients to Jobs

such action. We instead ask whether or not this is an action that should be expected or allowed by welfare administrators and the broader social work community. Given the potential benefits and risks noted earlier, should this practice be encouraged, discouraged, or formalized?

References


Tönnies, Ferdinand. (1957). *Community & society (Gemeinschaft und Gesellschaft)*


Head Start, Other Preschool Programs, & Life Success in a Youth Cohort

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This study assesses the effects of Head Start and other preschool programs on five life success measures in a U.S. cohort of youth (N = 5,621). The life success indices are average annual income-to-poverty ratios, economic mobility, and number of years the youth lived in families whose incomes fell below official poverty thresholds, received Food Stamps, and received TANF/AFDC. Controlling for a variety of background and other factors in separate regression models for each life success measure, results show that youth who participated in preschool programs other than Head Start had higher average annual income-to-poverty ratios than non-preschoolers. Bivariate findings corroborate previous research indicating that Head Starters are economically and behaviorally disadvantaged compared to both other preschool and non-preschool children. Multivariate findings of this study also show that Head Starters do as well as non-preschoolers in regard to the four other life success measures. In essence, on these measures Head Starters become mainstreamed by the time they enter the labor force, start their own families, and form their own households, such that they fare no better or worse than other preschoolers and non-preschoolers in regard to economic mobility, years lived in poor families, and receipt of Food Stamps and TANF/AFDC. Findings support continued funding of Head Start but also suggest that higher levels of funding may be necessary to raise family incomes above poverty comparable to other preschool programs.

This study examines long-term effects of preschool intervention programs on a U.S. cohort of youth. Controlling for a variety of background, early childhood, sociodemographic, human capital, structural, and other factors, the author seeks to determine how those who participated in Head Start and other preschool
programs fared in regard to economic well-being compared to those who had no preschool experience. The study uses data from the 1979 Cohort of the National Longitudinal Survey of Youth (NLSY79).

Over the past several decades, scholars and others have devoted much attention to Head Start and other preschool interventions like the Perry Preschool Project and the Abecedarian Project. The related literature is extensive and sufficiently covered elsewhere (e.g., Children's Defense Fund, 1992; Grimmet & Garrett, 1989; McKey, et al., 1985; Washington & Oyemade, 1987; Zigler & Muenchow, 1992; Zigler & Valentine, 1979). Caputo (1998) notes that the literature is mixed in regard to Head Start’s enabling poor families to break the cycle of disadvantage and his study of the children of NLSY79 mothers shows that Head Start children spend more time in persistent poverty than other children from poor families and benefit from behavioral and emotional adjustments. In an earlier NLSY79 study, Mott and Quinlan (1991) report short-term cognitive gains, but possible negative effects on emotional development. Currie and Thomas (1995), also relying on the NLSY79, report that the short-term cognitive gains among both whites and blacks were quickly lost among blacks.

In a more recent meta-analysis of 35 studies published between 1990 and 2000 that assessed short- and long-term benefits of preschool programs, Gorey (2001) finds large positive effects on standardized measures of academic achievement and intelligence, lasting even after 5 to 10 years, and substantial lessening of personal and social problems measured by cumulative indices over a 10- to 25-year period for those who had attended preschool (e.g., school drop out, welfare dependence, unemployment, and poverty. Also see Reynolds, Temple, Robertson, & Mann, 2001). Gorey notes however that preschool programs like Head Start are generally placed at the low end of a continuum in terms of the amount of preschool intervention and his findings suggest that both short- and long-term benefits are associated primarily with the more intensive programs like the Perry Preschool and the Abecedarian Project. Hence, by extension, if Gorey is correct, the public benefits from tax dollars supporting preschool interventions (e.g., additional tax revenue, decreased social welfare
and related expenditures) are attributable to these more intensive programs, not to Head Start.

Further, in their study of Head Start programs in Nashville, TN Kaiser et al. (2000) underscore that the population of 259 three-year old children they examined is at elevated risk for behavior and language problems. To the extent Gorey (2001) and Kaiser et al. are correct, additional resources may be required for Head Start than might be the case for other preschool programs to obtain notable gains in social benefits. This is so because Head Start children face many initial cognitive, emotional, and to a lesser extent physical disadvantages than do other children and they may need far more intensive services than the broad array of social, parental, and medical services that Head Start already makes available to the families of program participants (Administration for Children and Families, 1998 & 1999; Lee, Schnur, & Brooks-Gunn, 1988).

In this study, I seek to assess the long-term merits of Head Start by providing evidence linking Head Start and other preschool programs with effects on several life success measures, notably income inequality, family poverty, and economic mobility. It should be borne in mind that Head Start began in 1965 as part of a larger anti-poverty effort of the Johnson Administration and that an ongoing objective of the program was to break the cycle of disadvantage poor children faced by leveling the academic playing field and thereby increasing the chances for these children to escape poverty (Beatty, 1993; Cravens, 1993; Zigler & Muenchow, 1992). In light of the contemporary climate of opinion reflected in the welfare reform legislation of 1996 and the Bush Administration proposals for renewal of that legislation, reliance on public assistance programs such as Temporary Assistance for Needy Families (TANF) is perceived as a public burden and efforts to reduce the expenditures for and use of such programs are seen as desirable outcomes of anti-poverty programs (Bush, 2002; Working Toward Independence, n.d.). Such standards, however, may be exceptionally high as social programs go. Nonetheless knowledge about such long-term outcomes can aid policymakers and others interested in the economic well-being of children in their deliberations about Head Start programming and funding. In doing so I control for a variety of personal, sociodemographic, and structural factors
that might also influence the economic well-being of the youth over the course of their life spans. In particular, I address the following questions:

1. To what extent do Head Start children vary from other preschool children and from children who never participated in any preschool programs in regard to life success and other background and risk measures?
2. To what extent does Head Start participation affect income inequality, family poverty, economic mobility, and use of public assistance programs when controlling for background, risk, and other factors?

Answers to such questions will enable policymakers and others interested in the well-being of children to make more informed decisions about promoting expansion of preschool education in general and Head Start in particular at public expense.

Methods

Data

Data for the study were obtained from the National Longitudinal Survey of Youth (NLSY79), a representative sample of 12,686 noninstitutionalized youth in the U.S. aged 14 to 21 as of December 31, 1978. Respondents were interviewed annually between 1979 and 1994, again in 1996 and in 1998. For the 1998 survey, the most recent available at the time of this study, 8,399 respondents were interviewed, a 66.2% unweighted retention rate (79.0% weighted).

Respondents in 1998 differed on several sociodemographic measures from those in 1979, with the major difference in average adjusted family income ($13,598 vs. $9,788). In 1979 they were also on average slightly younger (17.6 vs. 17.9 years old), less educated (10.3 vs. 10.5 years of schooling), from larger families (4.70 vs. 4.26 members), with proportionately more blacks (14.3% vs. 13.6%, weighted) and proportionately more women (51.4% vs. 49.2%, weighted). The attrition of lower income youth is in part offset by the over sampling of them in the earlier survey years and by the use of a weighted measure when showing percentage distributions of characteristics of the sample. The data are well suited
for the present study because the same individuals are surveyed over a twenty-year period, thereby allowing the construction and use of cumulative indices of life success measures in addition to other relevant family background personal, social, and structural measures.

The study sample comprises 5,621 youth who reported all relevant information except as noted below where mean values of appropriate race/ethnicity/sex categories were used for missing ordinal and interval level data. Results and recommendations are made with the differences between the original and most recently available samples of the youth cohort in mind. Further documentation about the national sample can be found in the *NLS Handbook 2000* (Center for Human Resource Research, 2000) and the *NLSY79 User's Guide 1999* (Center for Human Resource Research, 1999).

**Measures**

Respondents are categorized into three preschool program participation groups, Head Start participants, other preschool program participants, and non-preschoolers. The five life success or outcome measures in this study are number of years youth reported that they lived in poor families, received TANF/AFDC, and Food Stamps, average annual income-to-poverty ratios, and economic mobility between 1985 and 1998. Survey year 1985 was chosen as the start year because that was the first year all youth were eligible to answer questions about home ownership or rental, signifying that they were considered old enough to form their own households. The income-to-poverty ratio is a function of respondents' reported family income and the annually adjusted U.S. poverty thresholds that take into account family size. Economic mobility reflects the average change in respondents' income-to-poverty ratios rank ordered by deciles between 1985 and 1998. The permissible values of economic mobility range from a low of -9 to a high of +9. Respondents who reported $0.00 family income are assigned an annual nominal income of $1.00. For respondents who had missing values for annual family income, means by race/ethnicity and sex were assigned.

Background measures include a variety of personal, familial, and structural indices. Whether or not respondents' mothers
completed high school (coded 1=yes, 0=no) serves as a proxy for the socio-economic status of the youths' families during their preschool years (Committee on Economic Development, 2002). Family structure when respondents were 14 years of age is included because family structure during childhood and adolescence has been shown to affect children's educational attainment, which in turn impacts the likelihood and duration of poverty, use of public assistance, and other life success measures (e.g., see Garasky, 1995). Family structure, which refers to the type of family respondents lived in when they were 14 years of age, is captured by three dummy variables (each coded 1=yes, 0=no): two-biological parent family, two non-biological parent family, and single-parent family. Youth who were either expelled or suspended from school (coded 1=expelled/suspended, 0=not) is used to identify and control for behavior signifying difficulty they may have had with educational attainment.

Two common psychological measures, mastery over one's environment and self-esteem, found in the NLSY79 and thought to influence life success, are used primarily as controls. The Pearlin Mastery Scale captures a sense of mastery or control over one's life (Pearlin, Lieberman, Menaghan, & Mullan, 1981). There is evidence that psychosocial factors like sense of powerlessness and perceptions of mastery affect one's well-being (e.g., see Kessler, House, Anspach, & Williams, 1995). The Pearlin Mastery Scale was administered 1992, with higher scores signifying a greater sense of mastery. The Rosenberg Self-Esteem Scale, administered in 1980 and 1987, measures the self-evaluation of self-esteem that an individual makes and customarily maintains (Rosenberg, 1965). Summaries of the items that constitute each scale, their validity and reliability, and scoring can be found in Center for Human Resource Research (1999).

Finally, a variety of personal, social, and structural cumulative indices thought to influence life success are used as control measures. These are: whether or not respondents were born in the U.S. (coded 1=yes, 0=no) and whether or not respondents lived in an urban environment at age 14 (coded 1=yes, 0=no); whether or not respondents were ever suspended or expelled from school (coded 1=yes, 0=no), respondents' economic mobility and income-to-poverty ratios, and the number of years respondents lived in poor
families prior to 1985; the number of years respondents were out of the labor force between 1985 and 1998; and the average unemployment rate of their area of residence, the number of years respondents lived in center cities, and were married throughout the entire study period. Finally, race and sex are coded as six dummy variables signifying Hispanic, non-Hispanic black, and non-Hispanic white males and females.

**Procedures**

Pearson’s correlation is used to determine the associations among the life success indices and thereby assess the extent to which they are statistically independent of one another and, by extension, theoretically distinct. ANOVAs and chi-square analyses are used to obtain bivariate descriptive information on life success indices and other predictor measures by preprogram participation group. When an ANOVA test is significant, the Duncan post hoc statistic is used to show the rank order of the measures by preprogram participation group. Multiple regression analysis is used to assess the effects of preschool programs on life success measures when controlling for the other predictor measures. Because of theoretical and/or practical significance, separate models are used for each of the five life success measures. In each model, non-preschoolers constitute the reference category preprogram participation group.

**Limitations**

This study relies on one cohort of youth who were representative of the population 14 to 21 years of age as of December 31, 1978. Hence, the population sample is not representative of the general U.S. population at that time, nor does it represent other cohorts of youth. Generalization of results is thereby compromised. Further, there were no measures available in the data files in regard to the socio-economic circumstances of the youth while they were of preschool age. As noted, whether or not mothers of the youths completed high school serves as a proxy for the socio-economic status of the families while the youth were of preschool age. Further, there were no measures about specific aspects of either Head Start or other preschool programs. Hence, there was no way to control for variation in program quality and services, a
subject better suited for future research that relies on different
data and methods than those used here. Discussion of results
and conclusions are made with these limitations in mind. Despite
these limitations, this study adds to the body of knowledge about
longer-term effects of Head Start and other preschool programs
on children who participate in them.

Results

Of the five life success measures, the number of years re-
 sponsents lived in families that received TANF/AFDC and that
 received Food Stamps were the most strongly correlated \( r = .86 \),
suggesting that one measure could serve as a proxy for the other
and theoretically signifying the reliance of low-income families on
public assistance. Although the TANF/AFDC and Food Stamps
are statistically correlated, they are nonetheless distinct programs
warranting separate consideration as outcome measures, with
Food Stamps having the broader socioeconomic constituency of
users and greater longstanding bipartisan support. Other asso-
ciations among life success measures were moderate to weak:
the number of years respondents lived in families that received
Food Stamps and average income-to-poverty ratios \( r = -.46 \),
the number of years respondents lived in families that received
TANF/AFDC and average income-to-poverty ratios \( r = -.37 \),
the number of years respondents lived in families that received
Food Stamps and the number of years they lived in poverty \( r =
.34 \), average income-to-poverty ratios and the number of years
they lived in poverty \( r = -.30 \), the number of years respondents
lived in families that received TANF/AFDC and the number of
years they lived in years of poverty \( r = .29 \), the number of years
respondents lived in families that received TANF/AFDC and
economic mobility \( r = .15 \), the number of years respondents lived
in families that received Food Stamps and economic mobility \( r =
.15 \), years of poverty and economic mobility \( r = -.13 \), and
average income-to-poverty ratios and economic mobility \( r = .05 \).

Of the 5,521 youth in the study sample, 735 (7.0% weighted—
hereafter, all percents are weighted according to the 1998 sam-
ple) were Head Start participants, while 928 (17.4%) attended
other preschools. On most of the nominal level measures, Head
Pre-school Programs and Life Success

Starters differed significantly from both other preschoolers and non-preschoolers. Of the three preschool program participation groups, Head Starters were much less likely to have mothers who completed high school, 48.2% vs. 79.9% for other preschoolers and 66.7% for non-preschoolers, signifying the relative socio-economic disadvantage of this group while the youth were of preschool age. Head Starters were also less likely to be living with both biological parents at age 14, 55.2% vs. 76.4% for other preschoolers and 77.9% for non-preschoolers and they were more likely to be living in single-parent families, 29.7% vs. 15.5% for preschoolers and 10.0% for non-preschoolers. Head Starters were more likely to be black female and black male, 29.0% and 22.9% respectively vs. 06.6% and 06.4% for other preschoolers and 04.8% and 04.6% for non-preschoolers. They were also more likely to have been expelled or suspended from school, 27.9% vs. 17.0% for other preschoolers, and 21.0% for non-preschoolers. Finally Head Starters were roughly as likely to have been born in the U.S. (97.7%) and living in an urban environment at age 14 (77.8%) as were other preschoolers and non-preschoolers.

On eleven of seventeen ordinal and interval level measures, Head Starters were significantly different from other preschoolers and non-preschoolers. As Table 1 indicates, Head Starters differed from preschoolers and non-preschoolers on four of the five outcome measures. Between 1985 and 1998 Head Starters lived in poor families longer (0.20 years) and received TANF/AFDC and Food Stamps longer (1.33 & 2.10 years respectively) vs. 0.12, 0.56, & 0.92 years respectively for preschoolers and 0.14, 0.74, & 1.14 years respectively for non-preschoolers. They also had the lowest income to poverty ratios between 1985 and 1998, 2.6 vs. 3.3 for non-preschoolers and 3.8 for other preschoolers. In regard to economic mobility between 1985 and 1998, both Head Starters and other preschoolers had statistically similar and greater upward mobility (0.67 and 0.51 deciles respectively) than did non-preschoolers (0.16 deciles).

Head Starters also differed from preschoolers and non-preschoolers on one of two background measures, one of three psychological measures, and four of seven cumulative/structural measures. Head Starters were on average younger (35.5 years old in 1998) than other preschoolers and non-preschoolers (roughly
Table 1

Ordinal and Interval Level Study Measures by Preschool Program Participation, Means, ANOVA & Duncan Post Hoc Results

<table>
<thead>
<tr>
<th>Measures</th>
<th>Head Start Participants (N = 735)</th>
<th>Other Preschoolers (N = 928)</th>
<th>Non-preschoolers (N = 3958)</th>
<th>F-value</th>
<th>Duncan Post Hoc</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Success / Outcome</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Economic mobility</td>
<td>00.67</td>
<td>00.51</td>
<td>00.16</td>
<td>008.81***</td>
<td>Head Starters, Other preschool &gt; No preschool</td>
</tr>
<tr>
<td>Income-to-poverty ratio</td>
<td>02.57</td>
<td>03.79</td>
<td>03.32</td>
<td>100.23***</td>
<td>Other preschool &gt; No preschool &gt; Head Starters</td>
</tr>
<tr>
<td>Yrs. received food stamps</td>
<td>02.10</td>
<td>00.92</td>
<td>01.14</td>
<td>040.26***</td>
<td>Head Starters &gt; No preschool, Other preschool</td>
</tr>
<tr>
<td>Yrs. received TANF/AFDC</td>
<td>01.33</td>
<td>00.56</td>
<td>00.74</td>
<td>023.46***</td>
<td>Head Starters &gt; No preschool, Other preschool</td>
</tr>
<tr>
<td>Yrs. lived in poverty</td>
<td>00.20</td>
<td>00.12</td>
<td>00.14</td>
<td>007.47***</td>
<td>Head Starters &gt; Other preschool, No preschool</td>
</tr>
<tr>
<td>Measures</td>
<td>Head Start Participants (N = 735)</td>
<td>Other Preschoolers (N = 928)</td>
<td>Non-preschoolers (N = 3958)</td>
<td>F-value</td>
<td>Duncan Post Hoc</td>
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<tr>
<td>Background</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age of respondent</td>
<td>35.53</td>
<td>37.13</td>
<td>37.05</td>
<td>164.55***</td>
<td>Other preschool, No preschool &gt; Head Starters</td>
</tr>
<tr>
<td>Highest grade completed—respondent</td>
<td>13.04</td>
<td>14.07</td>
<td>13.22</td>
<td>055.20***</td>
<td>Other preschool &gt; No preschool, Head Starters</td>
</tr>
<tr>
<td>Psychological</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mastery</td>
<td>22.17</td>
<td>22.42</td>
<td>22.14</td>
<td>003.04*</td>
<td>Other preschool &gt; No preschool, Head Starters</td>
</tr>
<tr>
<td>Self-esteem 1980</td>
<td>32.16</td>
<td>32.93</td>
<td>32.32</td>
<td>010.05***</td>
<td>Other preschool &gt; No preschool, Head Starters</td>
</tr>
<tr>
<td>Self-esteem 1987</td>
<td>33.11</td>
<td>34.03</td>
<td>33.55</td>
<td>010.73***</td>
<td>Other preschool &gt; No preschool &gt; Head Starters</td>
</tr>
<tr>
<td>Other Cumulative/Structural</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Economic mobility—1978–84</td>
<td>00.20</td>
<td>-00.19</td>
<td>-00.13</td>
<td>003.68*</td>
<td>Head Starters &gt; Other preschool, No preschool</td>
</tr>
<tr>
<td>Measures</td>
<td>Head Start Participants (N = 735)</td>
<td>Other Preschoolers (N = 928)</td>
<td>Non-preschoolers (N = 3958)</td>
<td>F-value</td>
<td>Duncan Post Hoc</td>
</tr>
<tr>
<td>----------------------------------------</td>
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<td>------------------------------</td>
<td>---------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Income-to-poverty ratio—1978–84</td>
<td>01.79</td>
<td>03.02</td>
<td>02.73</td>
<td>187.36***</td>
<td>Other preschool &gt; No preschool &gt; Head Starters</td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>02.98</td>
<td>02.87</td>
<td>03.03</td>
<td>023.40***</td>
<td>No preschool, Head Starters &gt; Other preschool</td>
</tr>
<tr>
<td>Yrs lived in center city—1979–98</td>
<td>03.61</td>
<td>03.38</td>
<td>02.47</td>
<td>029.52***</td>
<td>Head Starters, Other preschool &gt; No preschool</td>
</tr>
<tr>
<td>Yrs. lived in poverty—1978–84</td>
<td>02.04</td>
<td>00.94</td>
<td>01.04</td>
<td>108.31***</td>
<td>Head Starters &gt; No preschool</td>
</tr>
<tr>
<td>Yrs. married—1979–98</td>
<td>05.37</td>
<td>06.82</td>
<td>08.00</td>
<td>071.97***</td>
<td>No preschool &gt; Other preschool &gt; Head Starters</td>
</tr>
<tr>
<td>Yrs out of the labor force—1985–98</td>
<td>114.33</td>
<td>87.04</td>
<td>95.37</td>
<td>008.95***</td>
<td>Head Starters &gt; No preschool, Other preschool</td>
</tr>
</tbody>
</table>

*Note: Duncan Post Hoc Test results are significant at .05 or below.*

***p > .001, *p > .05.*
Pre-school Programs and Life Success

37.1 years each). They also had the lowest levels of self-esteem measured in 1987, 33.1 on the Rosenberg Self-Esteem scale, vs. 33.5 for non-preschoolers and 34.0 for other preschoolers and the fewest years married, 5.4 years vs. 6.8 for other preschoolers and 8.0 for non-preschoolers. Head Starters spent more time in poverty (2.04 years) between 1978 and 1984 and more time out of the labor force (114 weeks per year) between 1985 and 1998 than either other preschoolers or non-preschoolers, yet they were the only group characterized by upward economic mobility between 1978 and 1984 (0.20 deciles), invariably a function of their having the lowest average income-to-poverty ratios during the same period (1.79).

On one structural measure, number of years they lived in center cities, Head Starters were indistinguishable from other preschoolers (3.6 and 3.4 years respectively), while both differed from non-preschoolers (2.5 years). On the three remaining measures, Head Starters were indistinguishable from non-preschoolers. They were comparably educated, having completed a bit more than 13 years of schooling vs. 14.1 for preschoolers. Head Starters and non-preschoolers had comparably lower levels of mastery, 22.1 each on the Pearlin Mastery Scale vs. 22.4 for preschoolers and self-esteem measured in 1980, 32.1 and 32.4 on the Rosenberg Self-Esteem scale, vs. 32.9 for preschoolers.

As can be seen in Table 2, of the five regression models, the study measures accounted for the greatest variance in the average income-to-poverty model (Adjusted before each \( R^2 = .53 \)), followed by the Food Stamp model (Adjusted before each \( R^2 = .41 \)), TANF/AFDC model (Adjusted before each \( R^2 = .35 \)), economic mobility model (Adjusted before each \( R^2 = .22 \)), and the family poverty model (Adjusted before each \( R^2 = .12 \)). Preschool program participation was found significant only in the average income-to-poverty model. Youth who had participated in preschool programs other than Head Start were more likely than non-preschoolers to have higher average annual income-to-poverty ratios.

The relative influence of preschool participation on the average annual income-to-poverty ratio between 1985 and 1998 (Beta = 0.02), however, was dwarfed by other measures, particularly the average annual income-to-poverty ratio of the early adolescent,
<table>
<thead>
<tr>
<th>Measures</th>
<th>Models of Life Success Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Income-to-poverty ratio</td>
</tr>
<tr>
<td>Preschool Program Participation</td>
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<tr>
<td>Head Start</td>
<td>0.01</td>
</tr>
<tr>
<td>Other preschool</td>
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<tr>
<td>No preschool</td>
<td>Reference</td>
</tr>
<tr>
<td>Background</td>
<td></td>
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<tr>
<td>Age of respondent</td>
<td>-0.01</td>
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<tr>
<td>Highest grade completed—respondent</td>
<td>0.26***</td>
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<tr>
<td>High school grad—respondent’s mother</td>
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<tr>
<td>Family structure at age 14</td>
<td></td>
</tr>
<tr>
<td>Two-biological-parent family</td>
<td>Reference</td>
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<tr>
<td>Two-non-biological-parent family</td>
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<tr>
<td>Single-parent family</td>
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<tr>
<td>Race/ethnicity/sex</td>
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</tr>
<tr>
<td>White male</td>
<td>Reference</td>
</tr>
<tr>
<td>Black male</td>
<td>-0.05***</td>
</tr>
<tr>
<td>Hispanic male</td>
<td>-0.03**</td>
</tr>
<tr>
<td>White female</td>
<td>-0.01</td>
</tr>
<tr>
<td>Black female</td>
<td>-0.05***</td>
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<tr>
<td>Hispanic female</td>
<td>-0.04***</td>
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</table>
## Models of Life Success Measures

<table>
<thead>
<tr>
<th>Measures</th>
<th>Income-to-poverty ratio</th>
<th>Economic mobility</th>
<th>Years received food stamps</th>
<th>Years received AFDC/TANF</th>
<th>Years lived in poverty</th>
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</thead>
<tbody>
<tr>
<td>School behavior</td>
<td>-0.03**</td>
<td>0.00</td>
<td>0.05***</td>
<td>-0.05***</td>
<td>0.03*</td>
</tr>
<tr>
<td>Urban environment at age 14</td>
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<td>-0.02</td>
<td>-0.00</td>
<td>-0.00</td>
<td>-0.00</td>
</tr>
<tr>
<td>US born</td>
<td>-0.02*</td>
<td>0.01</td>
<td>0.04***</td>
<td>0.02</td>
<td>0.00</td>
</tr>
<tr>
<td>Psychological</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mastery</td>
<td>0.07***</td>
<td>0.04**</td>
<td>-0.05***</td>
<td>-0.02</td>
<td>-0.03*</td>
</tr>
<tr>
<td>Self-esteem 1980</td>
<td>0.02</td>
<td>-0.02</td>
<td>-0.00</td>
<td>0.01</td>
<td>0.00</td>
</tr>
<tr>
<td>Self-esteem 1987</td>
<td>0.08***</td>
<td>0.03*</td>
<td>-0.03*</td>
<td>-0.03*</td>
<td>-0.05**</td>
</tr>
<tr>
<td>Other Control/Cumulative/Structural</td>
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<td></td>
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<tr>
<td>Economic mobility—1978–84</td>
<td>—</td>
<td>-0.44***</td>
<td>—</td>
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<td>—</td>
</tr>
<tr>
<td>Income-to-poverty ratio—1978–84</td>
<td>0.37***</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>-0.08***</td>
<td>-0.00</td>
<td>0.08***</td>
<td>0.07***</td>
<td>0.03*</td>
</tr>
<tr>
<td>Yrs. lived in center city—1979–98</td>
<td>0.00</td>
<td>-0.01</td>
<td>0.05***</td>
<td>0.03*</td>
<td>0.03*</td>
</tr>
<tr>
<td>Yrs. lived in poverty—1978–84</td>
<td>—</td>
<td>—</td>
<td>0.18***</td>
<td>0.15***</td>
<td>0.07***</td>
</tr>
<tr>
<td>Yrs. married—1979–98</td>
<td>0.04***</td>
<td>0.06***</td>
<td>-0.13***</td>
<td>-0.18***</td>
<td>-0.10</td>
</tr>
<tr>
<td>Yrs. out of the labor force—1985–98</td>
<td>-0.16***</td>
<td>0.04**</td>
<td>0.35***</td>
<td>0.36***</td>
<td>0.21***</td>
</tr>
<tr>
<td>Adjusted R²</td>
<td>0.53</td>
<td>0.22</td>
<td>0.41</td>
<td>0.35</td>
<td>0.12</td>
</tr>
</tbody>
</table>

*** p > .001, ** p < .01, * p < .05.
1978–1984 period (Beta = 0.37) and the highest grade completed by the youth (Beta = 0.26). Higher levels of income relative to the poverty thresholds during early adolescence, as well as of educational attainment, were good predictors of relatively high levels of income relative to the poverty thresholds between 1985 and 1998. Time out of the labor force had a strong negative relationship with average annual income-to-poverty ratio (Beta = -0.16). All race/ethnicity/sex groups except white females had lower average annual income-to-poverty ratios than white males between 1985 and 1998. Their relative influence was modest compared to the average annual income-to-poverty ratio of the early adolescent, 1978–1984 period, highest grade completed by the youth, and time out of the labor force. Average annual unemployment rate in the area of residence, a structural measure, also had a moderate inverse relationship with the average annual income-to-poverty ratio, while two psychological measures, namely mastery and self-esteem in 1987, had relatively modest positive relationships (Beta = 0.07 & 0.08 respectively).

As noted, preschool program participation accounted for no variance in life success measures beyond that of other indices in any of the four other regression models. Time spent out of the labor force had the greatest relative, positive, influence on the number of years the youth lived in families that received Food Stamps (Beta = 0.35), TANF/AFDC (Beta = 0.36), and that were poor (Beta = 0.21). Living in poor families between 1978 and 1985 also increased the time spent in families receiving Food Stamps (Beta = 0.18) and TANF/AFDC (Beta = 0.15), and to a lesser degree, living in poor families between 1985 and 1998 (Beta = 0.07). Economic mobility in early adolescence had a strong inverse relationship with economic mobility between 1985 and 1998 (Beta = -0.44), suggesting that some youth whose families were upwardly mobile during their childhood and early adolescence were downwardly mobile as they entered the workforce, formed their own families and households. The reverse was the case during later adolescence and young adulthood for other youth whose families were downwardly mobile during their childhood and early adolescence.

Compared to white males, black males and to a lesser degree Hispanic males spent fewer years receiving Food Stamps (Beta
= -0.10 & -0.03 respectively) and receiving TANF/AFDC (Beta = -0.12 & -0.04 respectively) between 1985 and 1998. Black females and to a lesser degree Hispanic females spent more time receiving Food Stamps (Beta = 0.16 & 0.03 respectively) and receiving TANF/AFDC (Beta = 0.15 & -0.04 respectively). Both mastery and self-esteem in 1987 had modest positive relationships with economic mobility (Beta = 0.04 and 0.03 respectively) and modest negative relationships with receipt of Food Stamps (Beta = -0.05 and -0.03 respectively) and year living in poor families (Beta = -0.03 and -0.05 respectively). Living in center cities had a relatively modest positive relationship with receipt of Food Stamps (Beta = -0.05), receipt of TANF/AFDC (Beta = 0.03), and living in poor families (Beta = -0.03).

Discussion

Results show that preschool program participation affected only one of five life success indices used in this study when controlling for a variety of personal, social, structural, and other cumulative measures. Participation in preschool programs other than Head Start increases the economic well-being of the youth as measured by their families' income-to-poverty ratios when compared to those who never attended preschool. This finding suggests either that preschool programs are doing something right that benefits their graduates more so than whatever benefits accrue to Head Starters, or that those who attend preschool programs begin with advantages that are well above those of Head Starters and that continue to serve them well through later adolescence and young adulthood, or both. Gorey's (2001) meta-analysis of research studies of preschool programs published in the 1990s suggests that preschool programs like Head Start are generally placed at the low end of a continuum in terms of the amount of preschool intervention and that both short- and long-term benefits are associated primarily with the other types of preschool programs many of which are more intensive than Head Start.

As noted, there are no measures of preschool program quality in the NLSY79 data files, so there is no way to determine if preschoolers received more intensive educational experiences
than did Head Starters. Results of this study nonetheless indicate that these other preschoolers start out with greater advantages than do Head Starters, indicated by the higher percentage of mothers having completed high school, even more so than the mothers of non-preschoolers. Although higher income-to-poverty ratios for the preschoolers may be due in part to the early socio-economic and other advantages they are likely to bring to the programs, it is plausible to infer that many parents of other preschoolers can and do send their children to more intensive programs than are available to lower income families. Further, the finding holds when controlling for whether or not mothers' completed high school, suggesting that the preschool experience contributes something beyond the early socio-economic and other advantages they are likely to bring to the programs. As noted previously, however, establishing a more direct empirical link regarding program intensity per se and economic well-being goes beyond the scope of this study and is a subject for future research that uses different data and methods than those relied upon here. To the extent that Head Starters are at a greater disadvantage than other preschoolers and non-preschoolers, as several bivariate findings of this study suggest (e.g., greater likelihood of residing in single-parent families at age 14, spending more years living with families whose income falls below official poverty thresholds), then modifications in Head Start are warranted to ensure a more even playing field so Head Start graduates can achieve roughly comparable income-to-poverty ratios throughout their young adult lives.

The findings of non-statistical significance of preschool program participation in regard to the other life success indices should not be interpreted as having no discernable effect. On the contrary, to the extent that Head Starters are at a greater disadvantage than other preschoolers and non-preschoolers, as findings of this study and previous research (e.g., Caputo, 1998; Kaiser et al., 2000) suggest, then the multivariate findings of this study show that they do as well as other preschoolers and non-preschoolers in regard to economic mobility, number of years the youth lived in poor families, and the number of years they lived in families that received Food Stamps and TANF/AFDC. In essence, when controlling for a variety of personal, social, structural, and other
cumulative factors, preschool program participation overcomes obstacles to economic well-being over the life span associated with such disadvantages as persistent childhood poverty and behavioral problems. Although initially disadvantaged, Head Start graduates are to some degree mainstreamed, such that they fare no better or worse than other preschoolers and non-preschoolers in regard to economic mobility, number of years the youth lived in poor families, and number of years they lived in families that received Food Stamps and TANF/AFDC.

Although this study focused on the effect of preschool program participation on life success indices, the influence of cumulative measures during the period of early adolescence, that is, from 1978 through 1985 when significant numbers of youth were deemed ineligible to be asked if they owned or rented the home or apartment in which they lived, should be noted because it appears to be highly determinative. Early adolescent poverty for example is a strong relative determinant of poverty in later life, as well as of receipt of Food Stamps and TANF/AFDC. And a family’s income-to-poverty ratio during a youth’s early adolescence is a strong determinant of one’s income-to-poverty ratio later in life, while economic mobility during a youth’s early adolescence is a strong determinant, albeit inverse, of economic mobility in later life. This last finding might be less paradoxical than initially thought, inviting some speculation. Children from upwardly mobile families may have lower family incomes as they form their own families and households. They are just starting out in their careers and may be experimenting with a variety of jobs before settling into a steady career track. On the other hand, the opposite might be the case for children from downwardly mobile families. Having experienced downward mobility, these children might be more prone to settle into an upwardly mobile career path. Testing such theories is beyond the scope of this study, but is a viable topic for future research. On the whole, findings about the influence of cumulative measures suggest that one’s socioeconomic condition during early adolescence sets a trajectory of economic well-being as one begins building one’s career by participating in the labor force and forming his/her own family. Further research is needed to determine the nature of appropriate interventions during early adolescence needed to
increase the opportunity for low-income youth to spend less of their maturing and adult lives in poverty and as recipients of public assistance. The relative robust positive association between education and each of the five life success measures used in this study suggests the merits of efforts increasing public and private investments in education to ensure that greater proportions of adolescents complete both high school and college.

Finally, it should also be noted that more time spent married is positively associated with higher income-to-poverty ratios and to economic mobility, and inversely related to number of years in poor families and as recipients of Food Stamps and TANF/AFDC. Given that TANF/AFDC targets primarily single-parent families, this last finding is no surprise. Findings related to the other life success measures, however, show that marriage has socioeconomic benefits, given the potential of pooling spousal with other family members’ resources, and suggest a reason why legislators and many others extolled the virtues of marriage in 1996 when they successfully sought to end the federal guarantee of money to states to support poor single-parent families and why the Bush Administration promotes marriage among his proposals to renew that legislation (Bush, 2002). Married people fare better economically and they are apt to demand less of public assistance programs targeted toward low-income individuals.

References


What's Need Got to Do with It? Barriers to Use of Nonprofit Social Services

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In recent years, legislators have called upon private nonprofit and proprietary organizations to assume a larger role in provision of public benefits to poor persons. Little research, however, has examined poor people's willingness to use nonprofit agencies in lieu of public welfare. This analysis draws data from over 2 years of fieldwork and in-depth interviews with twenty poor women in Philadelphia. I demonstrate that decisions to use nonprofits are contingent upon stigma, information, practical predicaments (e.g., agency hours), and perceived need. I explore the implications of these impediments in a post-welfare reform landscape, while focusing on how decisions to use private services differ from those to use public welfare. One cannot assume that because people have needs they will use nonprofit services to meet them.

Introduction

With passage of the 1996 welfare reform (Personal Responsibility and Work Opportunity Reconciliation Act, P.L. 104–193, henceforth, PRWORA), the federal government no longer has responsibility for determining welfare eligibility, nor are welfare recipients “entitled” to such benefits by law. The responsibility for providing for America’s needy families now rests mainly on the states; however, PRWORA also allows for private nonprofit and proprietary organizations to take on a larger role in the provision of public benefits to poor people by allowing them to act as subcontractors of the government (Katz, 2001). In addition, many policy makers assume that private, nonprofit social service organizations (NPs) will assist current and former welfare recipients.
reach self-sufficiency and make ends meet with their own private funds.

Encouraging local nonprofit and governmental agencies to provide aid to poor peoples is nothing new (Katz, 1989; 1996). Policy makers, however, are increasingly applying market models to social policy, often regarding private agencies as more efficient than public agencies, largely because of their ability to compete (Katz, 2001). A growing number of politicians believe that NPs should directly relieve the ills of poor women now and as time limits hit, replacing the government in this role. Questions remain, however, as to how poor persons think about receiving aid from NPs, what kind of services they use, when they will use them, and what factors inhibit their use. In the eyes of poor women, private delivery of services may not be favorable to public delivery.

Literature

Many politicians and scholars alike assume that if former and current welfare recipients need additional help to make ends meet or to improve their lives, they will be willing and able to access private, nonprofit social services. Researchers have tried to track participation in government (public) social service programs (see Coe, 1983; Bishop, Formby, and Zeager, 1992; Blank and Ruggles, 1996; Kim and Mergoupis, 1997; Gleason, Schochet, and Moffitt, 1998), but fewer individuals have examined participation in nongovernmental (private nonprofit) social service programs.

The existing research on NP use tends to study utilization within a larger examination of poor individuals’ social support and survival strategies (Stack, 1974; Stagner and Richman, 1986; Snow and Anderson, 1993; Edin and Lein, 1997). Overall, researchers have found that use of NPs is rather limited, and poor individuals are likely to seek aid from family and friends over NPs. For example, Stagner and Richman (1986) extensively examined “help-seeking behavior” among poor, largely AFDC-reliant, Chicago household heads in the early 1980s. Respondents identified the top three problems they faced during the past year and how they attempted to resolve these problems. Half (49%) of the respondents did not turn to a social service provider (i.e.,
churches, government social service programs, and private social service agencies) for any of their reported problems. Only 23% of the respondents had sought help from a private social service agency while 28% had used churches or government services but not private providers. Reasons for nonuse of known provider services included the procedures of the provider (43% of cases), the respondent's attitude about receiving help (29% of cases), the personnel at the provider (17% of cases), and location (9% of cases). In 31% of the cases, the respondents claimed "something else" was the reason for nonuse.

In their four-city study, Edin and Lein (1997) reported higher percentages of women receiving help from private charity than Stagner and Richman (1986) reported ten years earlier. Thirty-one percent of the welfare-reliant mothers and 22% of wage-reliant mothers in Edin and Lein's sample reported receiving cash or a voucher from a private charity in the past year. A larger percentage had received in-kind help from agencies in the past year—over half of the welfare-reliant mothers and about a third of the wage-reliant ones. Edin and Lein (1997), however, argue that receiving assistance from nonprofit agencies ranked very low on the mothers' list of survival strategies, largely because they were humiliating and offered little help.

Other studies have also briefly examined why people do not use NPs. Brabson and Himle (1987) in their survey of rural poor and unemployed Michigan residents found that most of these individuals would not utilize services of "social welfare agencies" because the agencies were not open when needed (25%); their location was unknown (24%); they feared what others might think (14%); and/or the agencies were too far away (13%). Chen and Marks (1998) found that the parents of the Akron youth they surveyed did not know where to go for help.

These studies help us understand how poor people think about and use, or resist using, NP services. However, they do not study this resistance in any detail or let us hear the voices of the potential clients themselves. In addition, without specific knowledge of NPs on which to probe respondents, these studies may actually underestimate use or miss aspects of the nonparticipation story (see "Data and Method" section). Furthermore, more studies in specific locales are important given the varied
landscape of NP services available to poor populations and the devolved nature of public aid (Boris, 1999). Finally, none of these studies compares how poor persons think about public versus private aid in any depth.

Data and Method

This analysis draws data from over 2 years of fieldwork as well as qualitative, in-depth interviews with 20 poor women living in the Kensington section of Philadelphia. I began fieldwork in Kensington in the summer of 1997 for Manpower Demonstration Research Corporation’s (MDRC) Project on Devolution and Urban Change. For MDRC, I interviewed executive and program directors of various Kensington NPs and conducted an informal neighborhood census. Separate from the MDRC project, I also was a participant-observer at a local soup kitchen, where I had volunteered for about 6 years.

Early in my fieldwork, I compiled a census list of the names and addresses of Kensington NPs by three main methods. First, I, along with two colleagues, drove and/or walked down every street in the main Kensington census tract, logging each nonprofit agency we saw. Second, I drove through the other sections of Kensington less systematically and logged additional NPs. Third, I used the phone book, the internet, NP referral literature, and word of mouth to locate previously undetected agencies. The resulting list of over 50 social service NPs included multi-service, grassroots, basic needs, and community development organizations.

This list and my fieldwork served as a foundation for my interview questions on voluntary NP programs, such as food and clothing distribution, housing, children/youth services, adult education, energy assistance, domestic violence, drug rehabilitation, employment services, and life skills programs. I asked respondents about a variety of agencies and programs in an attempt to maximize heterogeneity and capture the broadest range of agencies and possible users.

Each respondent first named all the agencies that she had heard of and/or used in the neighborhood. Then, I asked her about use and knowledge of specific agencies that I named. When
I mentioned specific agencies, the respondents reported being aware of about twice as many agencies and recalled using roughly twice as many services than they did before this probing. These results suggest that surveys that ask, "Have you used any social services in the last year?" or "Do you know of an agency that provides [X] service?" might underreport social service use and knowledge by not probing on particular agencies. In addition, researchers may fail to recognize nonuse of known services and the reasons for this nonuse.

After determining agency knowledge and use, I asked respondents to describe their experiences with nonprofit social services, when they would be willing to use and had used services, their decision-making process in using services, their reliance on other types of support (public or private), as well as a host of other related topics. The tape-recorded interviews lasted between 30 minutes and 3 hours and occurred between December 1998 and March 1999.

The Study Site and Sample

In Philadelphia, as in other urban centers across the U.S., welfare caseloads dropped more slowly than those nationwide. Caseloads in Philadelphia declined only 36 percent between 1994 and 1999, while Philadelphia's share of the state's welfare caseloads increased from 39 percent in 1994 to 49 percent in 1999. Philadelphia County contained 4.2 times the share of Pennsylvania's welfare cases as its share of Pennsylvania's total population in 1999, which was fourth highest in the nation (Allen and Kirby, 2000). This is not surprising, since Philadelphia's unemployment rate (about 6.0) was a couple of points above the national average.

The Kensington section of Philadelphia has long been a working class and poor white ethnic neighborhood; however, in recent years more African Americans, Puerto Ricans, and Albanian and Vietnamese immigrants have entered the neighborhood. While Kensington's residents are ethnically diverse, its whites live in highly segregated blocks with many white Kensingtonians refusing to share their streets with other racial and ethnic groups. The study participants live in a section of Kensington where roughly 33% of residents lived in poverty in 1990, 26% received some form of public assistance in that year, and approximately
85% of the residents were white (US Census). By William Julius Wilson's (1987) classification, this area is a "high-poverty area" as its poverty rate exceeds 30%. Thus, in Kensington, whites live in conditions of concentrated poverty more typical of the minority poor.

Of the 20 poor white women in the study, 17 received TANF at the time of the interview or had received it within the previous 2 years. Ten of the women worked and six of the workers combined welfare and work. All workers earned less than $8 an hour and were therefore roughly representative of users of NPs and those at risk of utilizing welfare. All the study participants had one to six children under 18 years old at the time of the interview. The women were between 21 and 50 years old; most were between 30 and 40 years old. Because the sample included only white women, these findings may not be generalizable to other ethnic groups, to whites not living in concentrated poverty, nor to males.

Historically, Kensingtonians are distrustful of outsiders, especially intellectuals (Binzen, 1970), and will not talk to researchers without a personal contact. Because of this and the sensitive nature of the interview topics, I decided to gain the sample through a non-randomized, snowball method similar to Edin and Lein (1997). I first recruited respondents through referrals from social service providers. I then asked these respondents to refer me to another person whom I may not find through an agency. The two differently recruited groups of respondents did not vary in service knowledge or use. However, given the network ties between the agency-recruited and respondent-recruited groups, this study still may overestimate service use and knowledge among low-income women with dependent children by over-sampling users.

I coded all the interview data across a variety of themes connected to reasons to use and not to use agencies and services. I derived some of these themes inductively, while others I drew deductively based on the literature on nonparticipation in public welfare and NP programs. I began coding the data while I still was conducting other interviews, so that as new themes emerged, I could go back into the field to probe respondents on these themes, a process known as theoretical sampling (Corbin and Strauss, 1990).
Results

While most respondents had used at least one nonprofit service in the last year, the main story the women told was unequivocally one of nonparticipation. Respondents used very few Kensington agencies and did not have plans to do so in the future. On average, the women had only used 1.9 programs in the past year and were eager to share their reasons for not using NPs.

Information Barriers

Lack of knowledge about NP assistance was one of the main differences in use of private versus public aid. While all the women were aware of public welfare and how to apply for it, many of the mothers did not know where to go for aid from NPs, even with many social service agencies in the neighborhood. In fact, most of the women lived within a few blocks from several NPs. After I asked the respondents about specific agencies in the neighborhood, the women reported having “heard of” anywhere from six to 24 different organizations. The average respondent expressed familiarity with 13 agencies. Before probing with specific examples of local agencies, the average respondent could only identify six different agencies.

The women as a group knew 66 different nonprofit agencies in Kensington and did not express more familiarity with services within any particular domain. Four agencies were especially well known, with over 15 respondents having heard of them. One was a soup kitchen, another offered only educational services (e.g., GED, ABE), and the other two were very large multi-service agencies offering over 30 different programs. At least ten of the respondents knew about another four agencies—a CDC, a soup kitchen, a small multi-service agency, and a very small church that offered children’s services and a food cupboard.

We discussed over 150 neighborhood services extensively. For these services, the respondent’s social network was the most likely source of information. Nearly half of the time, the women named a family member or close friend as the source of information on an agency or service. They also heard of NPs from other network sources, such as neighbors, welfare caseworkers, and staff at other nonprofit organizations (20%); local newspapers (9%); “just seeing” the agency (8%); or flyers (5%). When they
could not remember how they had found out about an agency (9%), most had “always” known about it through “growing up” or being “from the neighborhood.” Because knowledge sometimes came from walking or driving by an agency or “from the neighborhood,” residential stability may be a factor in knowledge. Since Kensington’s residents typically have lived in the neighborhood many years or all their lives, this level of agency knowledge among poor women may be a best-case scenario.

I also coded the extensiveness of each respondent’s network and analyzed the relationship between the number of network members and number of agencies the respondent knew. I found no relationship despite my expectations that those with extensive network ties, both strong and weak, would know more agencies, just as those who have larger networks know more about jobs (Granovetter, 1995). I found three potential explanations for this paradox. First, some of the women with the largest networks did not have knowledge of or seek out services because their networks provided them with in-kind and cash support. In these cases, families and friends acted as a private informal safety net, rather than as information resources about nonprofits. Samantha, a mother of a young child, stressed that her family, specifically her mother, provided her with all the support she needed. She said, “Luckily, I have a good mom. She helps me [a lot]. If I’m running out [of food] she’ll pick up some odd and ends things . . . If it wasn’t for her, I don’t know where I’d be.”

A second reason some women with large networks did not have information on agencies was that they said they did not receive or share information about social services with family and friends. The women may not have exchanged information about “stigmatized” services due to the embarrassment of admitting having known about or used them. When using what they considered a high-stigma service, like a food cupboard, the women often said they did not share this information with others. However, if they perceived no stigma costs in obtaining a service, such as an after-school program, then they did tell others about it. For example, Becky reported that she told others about a parenting support group that she really loved, but not about the housing, food, job placement, and energy assistance programs that she also knew about and in some cases had used. On the other hand,
respondents who were aware of many nonprofits felt strongly that one should share this knowledge with others. Eileen, who named 14 neighborhood agencies, incredulously asked, “If it helps someone else like it helped me, why not spread the word?” Through telling others of their experiences with agencies, the respondents often heard about other agencies in return, thus increasing their own service knowledge.

A third reason some women with large networks had little agency knowledge was that they did not have friends and relatives who used or knew about the types of services that they needed. Melissa complained that she did not know of any food cupboards and that “none of my friends use them.” If a woman’s network members do not share her class position or if they do not use services for some other reason, they may not be very helpful in referring her for certain types of help. Overall, it is the composition and type of one’s networks not the size that matters.

Those women who were well informed could choose among agencies and stop going to agencies that they perceived exacted a high psychological toll, opting instead to use “nicer” agencies. The majority of respondents, however, did not have this luxury of choice. Most did not “shop around” for the best or most desirable agency; rather, once they found an agency that offered the service they needed, they “stopped looking.” Repeatedly, when I asked respondents if they knew of another agency that offered the same service they replied, “No,” after giving me an inquisitive look (as if the question was completely inappropriate). This occurred despite the fact that multiple neighborhood agencies offered many of the same services.

Often, the respondents, especially those that worked, did not know of alternative agencies because they did not have the time to look for them. Finding nonprofit social services often required high search costs with little gain in return. Many nonprofit organizations in the neighborhood did not advertise their services, but instead relied upon word of mouth to gain clientele (unpublished data). Therefore, if one did not know of an agency from a member of her network, finding out about an agency and its programs may involve considerable effort. For example, after staff at a NP told Jennifer she could not attend a computer class because she was ineligible, she did not look for a substitute class. She explained,
I was working full-time during the day, so it's not like I was out looking around for other places—I'm sure that there were some if I had looked... By the time you get off work, all those places are closed... Between taking care of the household and the kids and working full-time... there's not much time left after that [to look].

**Location**

While knowledge was a large part of the nonparticipation story, location was also important. For most respondents how far an agency was within their neighborhood did not matter very much as long as the NP was accessible via public transportation. Becky, who used a parenting program that required her to switch buses twice, said, "If you really like something and it is helping you, [the distance] is worth it because you are getting positive feedback." However, when all else was equal (e.g., in terms of stigma costs, administrative hassles, etc.), the women chose agencies that were closest to them, especially when they used food cupboards and had to carry groceries home. Most respondents walked to the NPs they used; some also drove, got rides from friends, or took public transportation.

More important than distance, however, was location. Nine of the respondents said they did not use a service that they otherwise would have because the agency was in a "dangerous" section of the neighborhood. The women had strong conceptions of boundaries between safe and unsafe zones and generally agreed where these boundaries were. The streets that demarcated these boundaries often were only a couple blocks from their homes. Agencies in an unsafe zone might thus be closer than other agencies. Given respondents' racial views, it is not surprising that the "bad zones" corresponded to those areas of Kensington where the African American and Hispanic populations lived. Most did not say directly that they avoided these sections of Kensington because of the presence of Latinos and blacks (though some did); rather, they identified the areas as dangerous because of the presence of prostitutes, drugs, and violence. Danielle avoided all agencies located in the "Badlands" of Kensington:

I don't like the spot where you got to go [to use the daycare/youth program] in Kensington. All the prostitutes are out there; there are drugs all over. I mean the kids aren't out[side], they are inside [the
agency], but when they come out, that is what they have to look at. . . No, no, no, I would be afraid to [put my kids in that program]. If I had a car, if I get out of the car, am I going to get mugged?

Sometimes the women recounted experiences that they said had taught them to avoid certain locations. For example, Eileen described an attack in a "bad" area of Kensington:

I would not let [my children enter an after-school program] because it was down on the Avenue and I do not want them down on that part of the Avenue. . . . I got jumped [in that area,] some guy. . . . wanted my water bill money [that I had just gotten from an agency] and he had this big ring on and he hit my face and left me laying on the ground. . . . I do not knock the program because it sounds pretty good but I do not like the area . . .

Similarly, Ashley refused to use NPs located in the "Badlands" of Kensington after someone stole her $700 paycheck once and almost raped her another time. She said, "I'm like not going to go down there [where she was attacked] or other areas like them. . . . people might say that she's probably really racist, it's just in certain neighborhoods—they just scare me."

Ironically, the welfare office that the women used was located in the area that they deemed too dangerous to enter for NP services of any kind. When probed about this contradiction, the women claimed that the public welfare office had more security in the vicinity and was on the police's beat. Private nonprofits did not offer this same sense of security.

*Stigma*

Even when the women knew of available nonprofit social services in safe locations, they often chose not to use them because of stigma. Not all services were equally stigmatizing, however. Overwhelmingly, when the women talked about shame, embarrassment and loss of self-respect as reasons for nonuse of NP services, they were discussing basic need services, especially services related to food distribution, basic health care, and utility assistance.

Researchers have argued stigma costs are highest when use of a service is extremely visible (Coe, 1983; Rogers-Dillon, 1995). It is little wonder that soup kitchens and food cupboards, where one
might have to wait outside in line and are open to "identification,"
engendered the most feelings of stigma among the women. Tara,
a mother of one teenaged and four adult children, did not use a
soup kitchen initially because she feared others would see her:

I don’t think I was too proud for it . . . I think I was just feeling
like someone was going to see me going in there . . . You just didn’t
want to go to those places . . . while you are standing there, you are
thinking, what if someone comes by and sees me?

The women especially worried about what their children thought.
For example, Catherine, a laid off mother of two, said her children
would “make fun” of her if she used a soup kitchen.

Sometimes we pass it [soup kitchen] and the kids will start laughing
at the people in line and I have to tell them that’s wrong and you
can’t be laughing at them. But we’ll never get in that line. We’d be
hungry [before we would get in that line].

Most respondents considered themselves different from users
of basic need services and felt using the services would mark
them as “tainted.” Eileen, who worked for minimum wage at
a laudromat, believed that soup kitchens were only for people
willing to “degrade” themselves:

[The agency has a] soup kitchen, but I would never be caught dead
in there . . . Because they are not my kind of people . . . They are like
from the Avenue, street people, people that use drugs, or that are
hookers. You don’t know what they got in their hair, and they look
like they need a bath, it can get pretty messy, people that lived in
abandoned houses go there . . . that would be one place you would
not get me. . . . It’s not that I think I’m better than them, I just want
to hang out with someone a little more normal.

Race of clientele mattered to some as well. The women
avoided services that few whites used. When asked if she would
go into a local soup kitchen for a meal, Jennifer, a mother of two
on unemployment insurance, responded, “Hell no! Definitely
not! . . . If you want me to be straight up honest, all I see are
some, I’m going to say, a bunch of black guys in their 20s and 30s,
North men [those living in the Latino/African American section
of Kensington] . . . So, I wouldn’t want to go there for the fact
that it is all black men there.”
Many women believed the staff at some agencies made them feel "ashamed" and "worthless." With most feeling badly about using services, staff that degraded them worsened the situation and discouraged some from using NPs in the future. For example, Marie, a welfare-reliant mother of two, stopped using a food bank because she felt the staff treated her badly.

[The staff] are real snobs; nobody really likes going there. They act like they are giving you something that's like gold, and it's coming out of their pocket, and they look down at you like you are a piece of trash. I will never go there again . . . I wouldn't go there even if I was starving.

Months later when Marie's son stole her food stamps and she literally was starving, she still refused to go to that food cupboard. Marie dropped from 120 pounds to 85 pounds.

The women were not just concerned about the loss of others' respect for them or how staff at agencies would treat them; they worried about a loss of self-respect for failing to make it on their own. Carly, a welfare-reliant mother of two boys, refused to use most services because it violated her belief in self-sufficiency. She claimed she would not go to a clothing bank,

[Since] I am not one that goes for just having people handing it to me. I had to work for it, have to pay for it . . . [if I used a food pantry] I would feel like I cannot take care of my kids on my own. It all has to do with motherhood pride, motherly pride . . .

Many scholars have discussed the stigma associated with public welfare use (Horan and Austin, 1974; Kerbo, 1976; Loewenberg, 1981; Snow and Anderson, 1993; Bobo and Smith, 1994; Handler, 1995; Rogers-Dillon, 1995), and much of what the respondents said about using NPs was strikingly similar to these accounts. The notable difference was that these women relied upon public aid despite the stigma, but refused to use or severely restricted their use of stigmatizing private aid, often because agencies did not offer enough aid to compensate for the stigma costs. For many of the women use of basic need services was actually worse in terms of stigma than use of welfare. Lisa, for example, "did not like" being on welfare but remained on it, while she found use of NPs embarrassing and would not use them. She
said she would not go to a food bank or soup kitchen, “Because I would feel funny about it. I am so dependent on myself, that just to go down there. I wouldn’t feel right. I don’t even like being on welfare, [use of a food bank] is like an embarrassment.”

The women alluded to numerous differences between NP and public aid, although the data do not allow me to tease this out fully (current research underway will). First, use of NP basic needs services was more visible than use of public aid like food stamps, largely because the Philadelphia Department of Welfare (DPW) disperses food stamps via EBT cards making their usage less noticeable. When agencies gave the women vouchers to use at a grocery store, since it was more like food stamps, it was less stigmatizing. Second, the women lived in communities where welfare receipt was common and where they knew others receiving it. Less common (or known) was use of NP services, making it less acceptable in the women’s eyes. Third, the women often believed that use of NP services signified not only that one was in hardship, but also that one was actually worse off than those who just received welfare. In addition, it often meant that one had no family to which to turn. Finally, some of the women argued that welfare was less stigmatizing than NP aid because it was an “entitlement,” while NP aid was “charity.”

Administrative Nightmares

The women also frequently complained about “administrative nightmares,” such as long waits, elaborate paperwork, and tedious documentation, associated with receipt of NP basic need services. For example, Carol refused to use a CDC for utility assistance anymore because of the paperwork, despite the fact that her provider had threatened to shut off her utilities for delinquency. Carol, who cares for her son, her mother-in-law and frequently has to go to the doctor and psychologist herself, claimed,

It is too much work, too much hassle [to use the agency], I have no time for getting together a bunch of paperwork and everything else—I just don’t have the time. I’m too busy running around every day doing everyday things. I just don’t have the time.

More accurately, perhaps, is that Carol was not willing to make the time to go to the agency, since she had made the time to get
certified for her SSI, which involved many hours of paperwork, doctor’s appointments, and interviewing.

Some women complained about the "business-like" attitude of some NPs and the routines of some faith-based organizations. Kelly, a welfare-reliant and mother of three, claimed, "They wanna give you these little [religious] pamphlets. It's things that they do—they have routines, it's not like they are doing it with feeling. It's hard to explain... Oh yeah [I avoid places like that]. I don't go anymore."

In addition, the women emphasized the amount of questioning that they received from the NPs and the uncertainty of assistance. Carol related that at the food cupboard,

You can only get food once every 3 months, and they would always be prying, "Why, why, why? Why are you out of food so soon? Why don't you have the money for food? What are you using your money on?" Oh, it was awful, they were so nosy—that's the word, nosy. My nerves were shot by the time I left and every time it was about 45 minutes to get the food—you would wait 45 minutes and if you were qualified, if they thought you were desperate enough, then you might get a bag of food. There were times I went down and I didn't even get a bag of food... They said "You don't need it, you don't qualify for it." It was terrible... They [shouldn't] probe you for every last detail of your life and then turn you down, you know?

One also has to endure scrutiny from welfare, but only once (plus during re-certifications), and a client gets more for her trouble. At the food cupboard, for instance, staff might inspect a potential client every time she needs a meal (as in Carol's case above), and the gains are low. In essence, there are high transaction costs and great uncertainty, making use of NPs less desirable for the women than reliance on welfare.

Perception of Need

While some respondents were not using NPs because they felt they did not "need" the help, many more were not using services because they felt those more disadvantaged should receive aid in their place. The women were psychologically comforted by thinking themselves relatively better off than other community residents; however, I often considered them worse off than their
neighbors (e.g., based on their housing conditions). They believed NPs did not have enough resources to serve everyone; and their using a service, especially emergency services, meant another needier could not. Tara worried about taking services for which she was not “desperate,” even during times when she had no income coming into the household. She said,

[I didn’t use the food cupboard] because I thought someone . . . let’s say a woman with four little kids could use it more than me . . . I only use them if I was really, really need to. There are some people that I ran into that don’t have nothing. If it wasn’t for the free breakfast and lunches at school, these kids might not even eat. So if their family can go down there and get two days worth of groceries I’d rather them go. Because what if I did that, what if I went up there and I stocked my refrigerator and my cabinets and they were overflowing and some little child that is 5 or 6 years old goes hungry that night?

Similarly, Eileen, who herself has six children, thought others needed food assistance more than she, despite having had her utilities shut off when she chose to buy food for her family instead of paying her bills. She believed “there is always someone else out there [in more need] who is elderly, or maybe another needy family with a lot of kids.”

The women criticized those who did not share their views on what constituted need and “abused” NPs by selling food from food cupboards or using services to “hoard” their money. Granted, only one or two respondents actually could name a person whom they thought did this—but the urban myth of service abuse was strong in the women’s minds (and probably agency staff’s minds, hence their prying). No respondent thought to use NPs to assist her getting out of poverty; that is, to use services to save money for a home, a car, an education, or other things that may improve her life. This was unacceptable because doing so might mean another needing the service for survival might “go without.” For example, Samantha complained,

I know a lot of people that go there [to NPs] that have money. It’s not like they need it . . . I feel the people who need it should be the people who get it . . . because when they [the food bank] run out of food . . . the people who really need [food] can’t get it.
Interestingly, the women's belief that their using a service would mean others would go without in most cases was unfounded. Through fieldwork, I learned that most programs (except residential ones) in Kensington were not at capacity and could handle more clients to varying degrees. Some agency heads expressed they did not even have a "capacity," and they could and would meet the needs of any number of people who walked through their doors. Note, however, that while not at capacity, many NPs could not have handled an immense increase in clientele. Perhaps, the women's views on what constituted "true need" prevented a flood on services.

The women did not worry about the resources of DPW in the same way they did about NPs. While many thought welfare reform was unfair for targeting the deserving poor and not going after the "druggies" or "cheats," they did not think welfare would fail to provide assistance because it lacked resources. Their welfare reliance, therefore, would not harm another in need.

**Scheduling, Cost, and Pregnancies**

Respondents, especially working ones, also offered the inconvenience of NP hours as a reason for nonparticipation. Managing the hours of programs that required frequent participation (such as adult educational services) or two trips in a day to the agency (such as daycare or a youth recreational program) was particularly problematic. Lisa, a single working mother of two boys, had to pull one of her young sons out of a preschool program at a church because she had no time to take him there and pick him up. The woman who had been taking him for her had just found a job to fulfill her own welfare-to-work requirements. Lisa, who really thought that the preschool program was good for her son who has Attention Deficient Hyperactive Disorder (ADHD), substituted informal care provided by her family and friends on a rotating basis. Lisa also had stopped attending GED classes and a nutritional program that provided food because her work schedule conflicted with program hours. She wanted to go to counseling and parent support group meetings but said "it is too late by the time I get out of work." She acknowledged that
even if agencies offered these programs in the evening, she would probably be too exhausted to attend.

None of the respondents said they had considered contacting an agency to see if their hours had changed recently, which I knew was the case for several programs in the area (unpublished data). For example, a respondent who had used a daytime playgroup at one nonprofit complained of needing a nighttime playgroup since she had begun working. She was unaware that the agency had already added an evening group; even though the agency had implemented the night group some 6 months prior to accommodate working mothers.

It is disconcerting that women who had recently moved from welfare to work could no longer manage programs that they believed beneficial for themselves and their children. Researchers have shown that infants and toddlers benefit cognitively and academically from center-based care (NICHD Early Child Care Research Network, 2000), school-aged children benefit academically and socially from after-school programs (Posner and Vandell 1994, 1999), and children benefit from stable environments (McLanahan and Sandefur, 1994). With mothers struggling with the transition from welfare to work, removing children from stable, center-based care will likely harm children.

Besides having scheduling problems, many respondents complained they did not use certain programs (particularly daycare, after-school, and recreation programs) because they cost too much. Eileen pulled her children out of a half-day preschool program at a church when she could not afford the new fee of $10 a week per child, despite the fact that she really liked the program. She said, “The environment is really great. They teach the kids responsibility, learning to clean up after themselves, learning to get along, how to share. I just can’t afford it no more.” As nonprofits respond to declining federal assistance with increased use of fee-for-services (Salamon, 1993), more poor children may lose access to center-based programs.

Finally, pregnancy was a factor. Respondents gave pregnancy, along with inconvenient hours, as the main reason for discontinuing educational programs. Melissa quit a GED program because of a “trouble pregnancy,” and Carly quit one when she became pregnant and “couldn’t handle” the stairs or the “heat” in the non-
air-conditioned building. Differences between public and private aid may be less salient when we consider cost, scheduling, and health as reasons for nonuse of services; I suspect it does not matter if the government or a NP ran the programs.

Discussion

The findings from this study in many ways buttress previous research on utilization of NP services. The respondents were generally not using many NPs, often because they lacked information on them or they disliked their location. In addition, the women offered more specific reasons to avoid basic needs NPs, notably high stigma costs, administrative nightmares, and perceiving others were more in need. The women did not use youth and educational services because of scheduling difficulties, pregnancies, and affordability.

While the women may have given me rationalizations for their behavior, in many ways, the reasons they gave for not using basic needs services reflect the weaknesses scholars often attribute to the nonprofit sector. Lester Salamon (1987) argues that there are four primary failures of the nonprofit sector: philanthropic insufficiency, philanthropic particularism, philanthropic paternalism, and philanthropic amateurism. The first factor, philanthropic insufficiency, refers to the problem nonprofits have generating reliable resources adequate to provide their services. The women felt this issue keenly as they often refused to use NPs because they felt that they did not have the resources to serve all that were needy. In addition, many NPs may have restricted their aid because of resource insufficiency, thus making service use not worth the costs (e.g., stigma). Furthermore, unreliable funding streams may cause inconsistent service delivery, a complaint that the women had about private aid. The second factor, philanthropic particularism, refers to the tendency of nonprofits to target certain subgroups. The women had detected this, believing that certain NPs were for certain types of people (e.g., the homeless or Hispanic population). Additionally, the prying that the women criticized may reflect agency staff’s attempts to serve the most deserving poor and weed out those who are not. The third factor, philanthropic paternalism refers to the fact that those who command resources
(e.g., funders) define community needs, leaving clients often passive and dependent. This also leads NPs to provide aid as a matter of charity not a right. The women felt this distinction; many thought that private aid was more stigmatizing than public aid. The fourth factor, philanthropic amateurism, refers to nonprofits' connection to amateur approaches to remedying problems. The women experienced this problem when they received religious instruction and moral inspection from volunteer staff when all they wanted was food.

Of course, with PRWORA, the public sector now mirrors much of the weaknesses of the nonprofit sector. Public welfare has lost its foundation as an entitlement and the reliability of its funding. In addition, as the discretion of welfare caseworkers increases, the uncertainty of welfare receipt also grows, even when one goes through all the administrative hassles. As policymakers move more towards private service delivery models, we might expect that women who previously relied on public welfare will come to view public assistance in similar ways to private NP assistance and stop using it. Welfare rolls will continue to decrease, and nonprofits will not be flooded (since the same barriers will be at work there too). Policymakers may then trumpet tales of success but poor women surely would tell a different story.

References


Boris, Elizabeth T. 1999. "Introduction—Nonprofit Organizations in a Democracy: Varied Roles and Responsibilities." Pp. 3-29 in *Nonprofits and Govern-


Why Special Populations Are Not the Target of Family Preservation Services: A Case for Program Reform

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The number of children who have been placed outside their homes of origin as a result of abuse, neglect, delinquency, emotional problems, or developmental disabilities, is astronomical and steadily increasing. Of this number, “special populations” like children of color continue to be disproportionately represented. Intensive family preservation, a program that attempts to reduce out-of-home placement rates, has not demonstrated empirically, a sustained record of success in the reduction of placement rates among special populations. The purpose of the current study was to understand the manner in which special populations are targeted for services by examining the attitudes, beliefs, and behaviors of a national sample of family preservation workers. Results indicate a significant bias against targeting family preservation services to special populations in general, and children of color in particular. Specific recommendations about the targeting of special populations are given.

The reality that there exists extraordinary numbers of children in out-of-home care within the U.S. child welfare system is now common knowledge. Nationally, at the end of 1999, there were 550,000 children in out-of-home care (Administration for Children and Families, 2002). The situation specific to “special populations” like children of color is even more bleak, given the fact that they are disproportionately represented across the
service continuum. In fact, children at most risk of remaining in substitute care for extended periods of time are children of color (Black Administrators in Child Welfare, 2001; Gustavason & Segal, 1994; W.K. Kellogg Foundation, 1995). Additionally, other special populations like "older children," "sibling groups," and the "emotionally disturbed," have experienced a rise in their out-of-home placement rates. The Administration for Children and Families (ACF) reports that over 120,000 of the half-million children currently in out-of-home care cannot return home safely because of their special needs.

Although many discussions have taken place concerning the need to remedy the overrepresentation of special populations within the child welfare system, a significant, programmatic address was not hoped for until the implementation of intensive family preservation services. Intensive family preservation services are short-term, home-based, family-centered programs that provide therapeutic intervention as well as concrete services to families who are at risk of losing their children to out-of-home care. Formal family preservation services began to surface in 1974 with the introduction of the Tacoma, Washington Homebuilders Program (Kinney, Haapala, Booth, & Leavitt, 1991).

Currently, there is widespread disagreement concerning the efficacy of family preservation programs. In January of 2001, the U.S. Department of Health and Human Services released the findings of major evaluations of family preservation that were conducted in New Jersey, Tennessee, and Kentucky. All three programs reported little program effect in reducing out-of-home placement rates and improving overall family conditions. However, concurrent with the release of the government’s evaluation of family preservation services, Kirk (2000) released his final report of a retrospective evaluation of North Carolina’s family preservation services. Contrary to the government’s evaluation, Kirk found that not only were services effective, but previous studies have not provided evidence that there is a lack of treatment effect in family preservation services. Kirk concluded that previous studies have been unable to detect treatment effect because of the lack of practice wisdom employed in the design of evaluations. Despite the debates, fiscal year 2000 funding for family preservation services was $295 million (ACF, 2002). For
fiscal year 2002, the Promoting Safe and Stable Families amendment (sub-part of the 1997 Adoption and Safe Families Act which guides family preservation service funding) will be funded at $375 million (NASW, 2002). Although there is an increase in funding from previous years, there is a caveat. Funding levels are not guaranteed as they have previously been. Moreover, the funding continues to support four programs: family preservation services, community-based support services for prevention, time-limited reunification, and adoption services.

Family preservation services are critical to the child welfare system and they remain one of the largest prevention entities within the system. Given the fact that special populations such as children of color are most affected by the child welfare system, prevention programs such as family preservation should make these groups the focal point of service delivery. However, research has clearly demonstrated that children of color are not likely to receive prevention services (National Association of Black Social Workers, 1992; NBCDI, 1989; Pinderhughes, 1991; Stehno, 1990).

This article includes the findings of a study that sought to uncover reasons why special populations do not receive prevention services, such as family preservation, at the expected rate. In doing so, the aim of this study was to seek the impressions of a national sample of family preservation workers concerning their experiences in targeting services to special populations. Although the concept special populations can and does include a range of groups, this article focuses specifically on children of color due to the differential service bias against them which was a key finding in this study as well as many others (Courtney, 1994; Neuspiel & Zingman, 1993; Roberts, 2002; Stehno, 1990; U.S. Dept. of Health and Human Services, 1997).

Family Preservation Under Examination

Service Efficacy

As of late, family preservation services have come under close scrutiny because of mixed reports concerning program success and also because of the public attention given to several high-profile “system” tragedies. Researchers, both internal and external to the philosophy of family preservation, have debated the
program's merit (Berliner, 1993; Maluccio, Pine, & Warsh, 1994; Nelson, 1994; Pecora, 1994; Rznepnicki, 1994; Seader, 1994).

There appears to be some agreement that if family preservation programs are not having their intended impact, it is because of six main reasons: (1) inappropriate children and families are the target of services; (2) treatment models and modes of intervention are incompatible to client needs; (3) workers do not espouse nor demonstrate program values; (4) legislative guidelines are not being followed; (5) measures for determining client appropriateness are flawed; and (6) ambiguity is increasing concerning what constitutes an effective outcome and how the outcome should be measured.

Why Target Special Populations?

As family preservation decision-makers begin to rethink future program direction, the plight of special populations warrants attention. A significant factor in the decision-making process employed by family preservation programs should be the practice of targeting special populations. It can be argued that special population families experience a disproportionate number of hardships which can lead to their children being placed outside the home. Such hardships place special populations in a precarious situation, requiring the services of family preservation programs. In the child welfare system (ACF, 2002) as well as mental health, the following groups have been identified as special populations: children of color (Gustavasson & Segal, 1994), homeless children (Douglass, 1996), sibling groups (Drapeau, Simard, Beaudry, & Charbonneau, 2000; Smith, 1996), children of the mentally ill (Coiro, 1998; Finzi & Stange, 1997; Luntz, 1995), reunification families (Frame, Berrick, & Brodowski, 2000; Fraser, Pecora, & Haapala, 1991; Smith, 2000; Sudia, 1982; Talbot, 2001; Walton, Fraser, Lewis, Pecora, & Walton, 1993), potential adoption disruption families (Triseliotis, 2002), older children (Sedlak, 1997), chronic juvenile offenders (Loeber & Farrington, 2000; Scherer, Brondino, Henggeler, Melton, Gary, et al., 1994), severely emotionally disturbed—SED (Jonson-Reid, Williams, & Webster, 2001; Solnit, Adnopoz, Saxe, Gardner, Fallon, 1997), children under the age of five (Berrick, Needell, Barth, & Jonson-Reid, 1998), first-time parents, perinatal parents, children with birth abnormalities and/or the medically vulnerable (Berthier, Oriot, Bonneau, Chevrel, et al.,
Why Special Populations Are Not the Target of Family Preservation

1993), children who are HIV positive or those who have AIDS (Anderson, 1998; Goicoechea-Balbona, 1998; Tenner, Feudo, & Woods, 1998), and status offenders (Nugent, Carpenter & Parks, 1993). More recently, children whose parents are infected with HIV/AIDS have been identified as a special population (Cameron, 2000; Draimin, Gamble, Shire, & Hudis, 1998; Mason, 1998; Taylor-Brown, Teeter, Blackburn, Oinen, & Wedderburn, 1998). The literature is most developed around the special population group, children of color. Children of color, enter the system at greater rates, remain longer, and experience more difficulty with permanency planning. However, what is neither fully known nor understood is the role of the special population criterion in selecting families for family preservation services.

**Decision-Makers, Gate-Keepers and Federal Legislation**

Arguably, key decision-makers and gatekeepers involved in the process of establishing criteria for the selection of children and families for services include: (1) legislators; (2) judges; (3) program managers; (4) referral agents; and (5) workers. Each of these five gatekeepers has a distinctive role in helping programs to realize their legislative goals, one of which is the targeting of services to special populations and other high risk groups.

Understanding the attitudes, beliefs, and behaviors of family preservation workers towards special populations may be facilitated by a review of the policy or legislative foundation that informs their practice. Child welfare practice is grounded in policy that is established through federal and state laws. Change in relevant statutes and subsequent change in practice is often influenced by demographics or demand for services, funding restrictions, or changes in appropriations, as well as philosophical shifts. One such philosophical shift can arguably be associated with the passage of the Adoption & Safe Families Act (ASFA) of 1997, P. L. 105–89. For children in the out-of-home care system there has been a shift away from family preservation aimed at supporting, if not reuniting, a child(ren) with the custodial parent(s), to a “child-centered goal” of permanence to include long term foster care, guardianship, or adoption as appropriate.

Family preservation has been discussed as both a philosophy which guides practice and as an approach to permanency planning for children in the out-of-home care system (Downs, Moore,
McFadden, & Costin, 2000). The statutory foundation which supports and/or limits family preservation as both a philosophy and approach to permanency planning follows.

Special populations under P. L. 96–272. Some practitioners attribute the introduction of family preservation as a philosophy in service planning and development to the passage of the Adoption Assistance and Child Welfare Act of 1980, P. L. 96–272, and to the related research and demonstration projects that informed the passage of the legislation (Allen, Golubock, & Olson, 1983). Under this legislative mandate fiscal incentives at the federal level were directed toward substantive reforms aimed at ensuring permanent families for children. While the phrase “family preservation” is not in the statute, P. L. 96–272 was crafted to address the statutory goal of providing preventive and reunification service programs aimed at ensuring permanent families for children through the Child Welfare Services Program, Title IV-B of the Social Security Act (U.S. Code Congressional, 1980). Legislative history affirms that Congress intended for states to provide a range of services to prevent foster care, or ensure that reasonable efforts are made to return the child to the family, if appropriate, thus preserving the family unit (U.S. Code Congressional, 1980).

Prior to the passage of this legislation and the introduction of the reform measures aimed at family reunification and preservation, federal policy often encouraged the inappropriate separation of children from their families. States receive a substantial federal payment through the Foster Care Program, Title IV-E of the Social Security Act, to augment the costs of caring for children who are removed from their homes when allegations of child maltreatment are made, thus the incentive. The introduction of the “battered child syndrome” in the 1960s and heightened awareness of physical maltreatment, resulted in increased numbers of substantiated victims of child maltreatment and of those children who were removed from their home on a “temporary” basis. These factors contributed to the large number of children in the out-of-home care system during the 1970s (Wang & Daro, 1997).

During the 1970s a number of research initiatives identified a frightening trend of growing numbers of children being removed from their homes on a temporary basis then remaining in out-
of-home care for long periods of time. This phenomenon referred to as *foster care drift*, overwhelmingly and disproportionately affected the special population children of color, specifically African Americans, Hispanics, and Native Americans. Other affected groups include sibling groups and children with physical and emotional challenges. The aforementioned research would provide the foundation for reform measures contained in The Adoption Assistance and Child Welfare Act of 1980, P.L.96–272. The victims of foster care drift and those for whom systemic barriers prevented permanency were identified as “special needs children” (or as the strengths-based literature and more contemporary practice jargon says, “special populations”). The legislation called for unique efforts to promote permanency for this population (Allen, et.al., 1983; U.S. Code Congressional, 1980). One of the more controversial requirements was that in every case:

reasonable efforts will be made (A) prior to the placement of a child in foster care to prevent or eliminate the need for removal of the child from his home, and (B) to make it possible for the child to return to his home (Department of Health and Human Services, 1996).

Critics of the *reasonable efforts* standard maintain that services which tend to help keep children with their families, when the family is unable to provide adequate care, place the child(ren) at unnecessary risk.

Statistics would suggest that the goals outlined in P. L. 96–272 were realized in part as the number of children estimated to be in the out-of-home care system in 1972 was 500,000, but by 1982 that figure was down to approximately 262,000 (Spar, 1993; Wang & Daro, 1997). This trend did not continue and by 1995 the caseload spiraled back to approximately 494,000 (Spar, 1993; Wang & Daro, 1997).

There are a number of reasons why the service goals of returning children to their families or keeping them from foster care were not sustained. States’ initial resistance to broad sweeping system change and scarcity of resources resulted in minimal state program reforms. Alternative service or program initiatives introduced and replicated after the passage of P. L. 96–272 suffered from major cuts in federal funding in 1981, combined with height-

Special populations under P. L. 103–66. The continued increase in the number of children referred for child protective service precipitated the introduction of a new federal program in 1993. A program of family preservation and family support services was proposed as part of the Omnibus Budget Reconciliation Act of 1993, P. L. 103–66. The child welfare system nationwide was once again reeling from increased demands for protective services (e.g., the crack cocaine epidemic is partially blamed for the precipitating crisis in child welfare, other factors include poverty, homelessness, AIDS, mental health issues, other forms of alcohol and substance abuse) while also confronting high staff turnover and low morale, and a shortage of related support services such as drug and alcohol treatment and mental health care (Spar, 1993).

This program for preventive and supportive child welfare services for families is authorized by Title IV-B, Subpart 2 of the Social Security Act, and requires that states eligible for a share of a “capped” or limited federal appropriation must devote such funds to family preservation and family support services (U.S. Code Congressional, 1993). According to federal statute, family preservation services are intended for children and families in crisis or for families at risk of losing their children to foster care while family support services are intended to prevent crises, such as child maltreatment, from occurring.

Despite this legislative mandate, federal dollars have been used historically to support children after they are placed in foster care as opposed to providing services for families to prevent placement in foster care (Allen, et al, 1983; U.S. Code Congressional, 1993). For some states, placing emphasis on prevention and support services with federal funds represented a major departure from traditional practice (Spar, 1993). In fact, many states which began developing innovative approaches to helping families avoid losing their children to foster care, including family preservation services, relied on nonfederal and private resources (Spar, 1993).

When P.L.96–272 was written, “special needs” children (more
conventionally referred to as "special populations") included those who were at increased risk of being removed from their home due to allegations of child maltreatment. These children were and remain today disproportionately poor, Black, Hispanic, and Native American (Stevenson, Cheung, & Leung, 1992). Likewise, because federal family preservation and support service funds were also earmarked for special populations, they should be targeted for these services.

Without engaging in the "muddy" and emotionally charged discourse concerning the effectiveness of family preservation and support services, including the argument by many that the prima facie issue is poverty and the impact on its victims, the focus of P.L.103–66 was to target families at risk to prevent the need for foster care and to provide support to families in crisis. At the time the respondents completed the survey under report, agencies were providing family preservation and family support services funded in part by federal funds under the Social Security Act, Title IV-B, Subpart 2, and therefore special populations, including children of color, should be targeted for services.

"Despite significant advances in family preservation policy, practice, and programs, there was a rising chorus of criticism of the services that help keep children with their families and prevent entry into care, and of foster care practices that return children to their families when the family is unable to provide adequate care" (Downs, et al., 2000, p.310). Such thinking fueled passage of the Adoption and Safe Families Act of 1997, P.L. 105–89. With its passage, issues of child safety and permanence are currently at the fore of public policy implementation and practice consideration.

Special populations under P. L. 105–89 (ASFA). The data reported herein suggest that when legislative mandates required a programmatic focus on services intended to eliminate the need for foster care placement, giving special consideration to victims of foster care drift and special populations, most child welfare workers opted not to target services accordingly. Now that the legal standard required by P.L. 96–272 for reasonable efforts to keep children with their families is no longer unilaterally a stated policy goal (i.e., passage of P. L. 105–89, ASFA, results in circumstances
for which reasonable efforts to keep children with their families are not required), can we be assured that all that can be done before children enter foster care will occur so that we can be comfortable with pursuing adoption for permanency?

**Special populations under non-child welfare but related legislation.** By virtue of the "risk" factors alone, many, if not all, of the previously explicated groups of special populations clearly receive protection under child welfare legislation. To strengthen an already compelling case, mental health as well as disabilities legislation also provides the rationale for why certain groups of children are classified as special populations.

**Methodology**

**Design**

This research project focused on an examination of the decision-making process involved in targeting children and families for intensive family preservation services. The issue of targeting was examined through an exploration of a critical approach to service delivery, namely, the practice of targeting special populations. The purpose of the research was to evaluate how family preservation workers handle the issue of special populations in deciding service delivery. "A Theoretical Model of Decision Making in Family Preservation Programs" guided inquiry (Denby, 1995). One major component of the decision making model involves the role played by workers in decisions to target service populations. The theory maintains that such factors as workers' values, biases, and characteristics have an effect on their attitudes, belief structure, and their subsequent behavior. Ultimately, these factors influence service delivery. The overall design for this study was exploratory-descriptive research that used the cross-sectional survey method. Specifically, the mail-survey method was used and was designed according to Dillman's (1978) "Total Design Method (TDM)."

**Research Questions**

Researchers explored the role played by workers in decision making, by posing the following questions: (1) are special popu-
lations targeted for family preservation services?; (2) if agencies do not use special populations as a service criterion, then what families are served?; (3) what factors hinder workers from using the special population service criterion?; and (4) why do those workers who favor using the special populations service criterion not use it?

Sample and Instrumentation

A list of 250 agencies was generated from the National Resource Center on Family-Based Services Annotated Directory of Selected Family-Based Services Programs, 1994, using a systematic random sampling technique. Each agency received two instruments which produced an attempted sample of 500 family preservation workers.

The study's research questions were pursued through the use of the "Decision-Making Survey," a 127-Likert item scale. In keeping with the literature which was discussed previously, the main measure, special populations, was operationalized for the respondents by providing a list of 16 types of children considered within child welfare to be a special population. The definition included the following: children of color, medically vulnerable, homeless children, sibling groups, children of the mentally ill, reunification families, potential adoption disruption families, older children, chronic juvenile offenders, severely emotionally disturbed (SED), children under the age of five, first-time parents, perinatal parents, children with birth abnormalities, children who are HIV positive or those who have AIDS, and status offenders. Although all sixteen types of special populations were studied, this article focuses on the findings which related to children of color. The instrument was developed as a probe for ascertaining the frequency and extent to which workers use the service criterion special populations as a target for service delivery.

Face, content, and construct validity. Survey items were developed using two sources: (1) results of a study on imminent risk (Walton & Denby, 1995); and (2) empirical literature. Themes that emerged from the Walton and Denby inductive analysis of 71 interviews with family preservation workers and administrators who represented both contract and referring agencies, were used
to construct the "Decision-Making" instrument. The "Targeting Services by Special Populations," portion of the instrument included 52 questions. These questions pertain to four main constructs: (1) *attitudes* about the use of special populations as a targeting strategy; (2) the frequency of the *use* of the criterion special population in service delivery (*behavior variable*); (3) *beliefs* that influence the use or nonuse of special population; and (4) *attributes* associated with workers and the agencies for which they work. Additionally, the instrument was constructed in such a manner as to identify populations which are receiving service in the absence of the criterion special population.

*Reliability.* After close adherence to the TDM, a 60% return rate was achieved. This return rate is considered "good" for this level of survey research (Babbie, 1986). Nonetheless, Miller and Smith (1983) recommend a technique for assuring that nonresponse error is not a factor in conducting survey research. Miller and Smith instruct researchers to compare respondents to nonrespondents by taking a random sample (10–20%) of both, and comparing them on demographic data by computing a *t* test. The *t* test ascertains whether there is a difference between those who answer the survey and those who do not. A random sample of 20% of early and late respondents was selected for an analysis of nonresponse bias. Results of the *t*-test indicate categorically, that there is a non significant difference between the two groups' mean scores. There is no difference on demographic data between those respondents who returned their surveys early and those who returned them late. Therefore, because research has suggested that late respondents are most like nonrespondents, it can be inferred that those family preservation workers who did not return their surveys were no different from those who did; thus, nonresponse bias is assumed a non factor.

The "Decision Making" survey was pilot tested prior to implementation. Reliability scores on Part II, "Targeting Services by Special Populations," were strong. The Cronbach Alphas for the six sub-scales ranged from .63 to .98, suggesting strong inter-item correlation.

Various descriptive and inferential statistics were used for data analysis, including nonparametric tests and advanced multi-
variate techniques. Specific to the findings reported in this article, the following tests were used for analyzing the data: descriptive statistics were used to organize the raw responses into indices that summarized the entire set of data; and correlation matrices were executed to ascertain whether a co-relationship exists among workers' willingness/nonwillingness to target services to "special populations" and moderating variables such as supports and barriers to targeting practices.

Findings

Demographics

The majority (63%) of the respondents in this study represent private, nonprofit agencies. Public agencies comprise the next highest category (31%). Most (72%) workers carry caseloads of 1–10 families. Twenty-four percent (24%) of the respondents reported that their cases can remain open for up to 10 weeks. Twenty percent (20%) of the workers service cases 11–15 weeks.

There is a wide range of age categories. More than half (56%) of the respondents are under the age of 40. A third of the respondents are 41–50 years of age. The remaining respondents are over the age of 50. The majority (76%) of the respondents are female. A third of the respondents report 1–5 years of experience in social services. Another third of the sample has 6–10 years of experience. The remaining third have anywhere from 11–20 years of experience. Overwhelmingly, the vast majority (65%) of the sample have worked in family preservation services for only 1–5 years. Twenty-three percent (23%) have 6–10 years of experience in family preservation.

One-half of the sample reported using a "family systems" approach to treatment. Twenty-two percent (22%) use a modified Homebuilders or some other approach. Nearly seventy percent (70%) of the sample's clients enter the service system primarily as a result of child abuse and neglect. Nearly eighteen percent (18%) report that their clients are largely referred as a result of mental health difficulties. The majority (70%) of the sample indicate that their primary service population is European American. African American and Hispanic clients only comprise twenty-one percent
(21%) and three percent (3%), respectively, of the primary service population.

The majority (63%) of the respondents work in family preservation units that are housed within major agencies. Eighty-three percent (83%) of the sample are European American. Workers of color make up the remaining seventeen (17%). The majority (42%) of the sample possess a master’s degree. Another twenty-two percent (22%) have at least a bachelor’s degree. A near even split, forty-nine percent (49%) of the sample has social work degrees, while the other forty-six percent (46%) hold nonsocial work degrees.

Special Populations are not the Target of Family Preservation

Strong targeting support for any of the 16 groups of special population could not be found in this study. In fact, the greatest disagreement for targeting services to special populations occurred in the category of children of color \( (M = 2.35) \). Conversely, the group of children most strongly supported were children under the age of five \( (M = 2.85) \). The scores for the other groups of children are as follows: medically vulnerable \( (M = 2.65) \), homeless children \( (M = 2.78) \), sibling groups \( (M = 2.59) \), children of the mentally ill \( (M = 2.79) \), reunification families \( (M = 2.75) \), potential adoption disruption families \( (M = 2.73) \), older children \( (M = 2.61) \), chronic juvenile offenders \( (M = 2.48) \), severely emotionally disturbed—SED \( (M = 2.73) \), first-time parents \( (M = 2.65) \), perinatal parents \( (M = 2.50) \), children with birth abnormalities \( (M = 2.50) \), children who are HIV positive or those who have AIDS \( (M = 2.69) \), and status offenders \( (M = 2.51) \).

Table 1 represents one of the sub-scales contained in the Special Population section of the “Decision-Making Survey.” The questions sought workers’ perceptions of their own behaviors and action with regard to the special population service criterion. Although items “A” and “B” may suggest that the respondents in this study do not exclude special populations, the remaining behavior items, collectively, suggest that workers do not strive to include special populations. Workers do not believe that family preservation services should be targeted using the service criterion, special population. For example, more than half (53%) (see Item “D”) of the respondents disagree with establishing service eligibility policy that gives preference to special populations.
### Why Special Populations Are Not the Target of Family Preservation

#### Table 1

**Extent to Which Special Populations are Targeted for Service Delivery**

<table>
<thead>
<tr>
<th>Item</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Of the last eight cases, how many were served primarily on the basis that a child was considered to be a special population?</td>
<td>0</td>
<td>36.7%</td>
</tr>
<tr>
<td>1–3</td>
<td>84</td>
<td>32.8%</td>
</tr>
<tr>
<td>4–8</td>
<td>70</td>
<td>27.3%</td>
</tr>
<tr>
<td>Total:</td>
<td>248</td>
<td>96.8%</td>
</tr>
<tr>
<td>b) Within the last year, have you decided not to open a case because it was a special population?</td>
<td>Yes</td>
<td>9.4%</td>
</tr>
<tr>
<td>No</td>
<td>226</td>
<td>88.3%</td>
</tr>
<tr>
<td>Total:</td>
<td>250</td>
<td>97.7%</td>
</tr>
<tr>
<td>c) Have you disagreed with someone because you wanted to deliver services primarily to special populations?</td>
<td>Yes</td>
<td>15.2%</td>
</tr>
<tr>
<td>No</td>
<td>212</td>
<td>82.8%</td>
</tr>
<tr>
<td>Total:</td>
<td>251</td>
<td>98.0%</td>
</tr>
<tr>
<td>d) If you had to establish a policy for intensive family preservation service eligibility, would you eliminate rules which state that special populations will be given priority consideration?</td>
<td>Yes</td>
<td>53.5%</td>
</tr>
<tr>
<td>No</td>
<td>107</td>
<td>41.8%</td>
</tr>
<tr>
<td>Total:</td>
<td>244</td>
<td>95.3%</td>
</tr>
<tr>
<td>e) Have the majority of your most recent cases been special population types?</td>
<td>Yes</td>
<td>44.1%</td>
</tr>
<tr>
<td>No</td>
<td>134</td>
<td>52.3%</td>
</tr>
<tr>
<td>Total:</td>
<td>247</td>
<td>96.4%</td>
</tr>
<tr>
<td>f) Have you felt that special populations should be the primary criterion by which services are delivered and then told someone?</td>
<td>Yes</td>
<td>9.8%</td>
</tr>
<tr>
<td>No</td>
<td>225</td>
<td>87.9%</td>
</tr>
<tr>
<td>Total:</td>
<td>250</td>
<td>97.7%</td>
</tr>
<tr>
<td>g) Have you requested that a referring source stop sending cases that are not special populations?</td>
<td>Yes</td>
<td>2.0%</td>
</tr>
<tr>
<td>No</td>
<td>241</td>
<td>94.1%</td>
</tr>
<tr>
<td>Total:</td>
<td>246</td>
<td>96.1%</td>
</tr>
<tr>
<td>h) In recent months, I have returned a referral because it was not a special population case.</td>
<td>Yes</td>
<td>3.5%</td>
</tr>
<tr>
<td>No</td>
<td>237</td>
<td>92.6%</td>
</tr>
<tr>
<td>Total:</td>
<td>246</td>
<td>96.1%</td>
</tr>
</tbody>
</table>

*Note: Percent scores which sum to less than 100 contain missing data.*
Additionally, more than half of the workers (see Item “E”) report that the majority of their most recent cases have not been special populations. Workers report that they have not advanced the notion that special populations ought to be the primary service criterion (Item F). Ninety-four percent (94%) of the sample indicated that they have not intervened with a referring source to the extent that they’ve requested that non-special populations not be the primary type of referrals they receive (see Item “G”). Finally, nearly the entire sample (93%) has not returned a referral to a referring agency because the referral did not fall under the eligibility criterion special population.

The Children and Families who do Receive Services

Workers were asked to define those categories of children and families who comprise the family preservation service population. Workers report that fifty percent (50%) of the clients who receive family preservation services represent the “general population” and do not possess any distinguishing features that would set them apart from other child welfare clientele. The other half of the family preservation population comprises twenty-five percent (25%) special populations, twelve percent (12%) “imminent risk,” and another thirteen percent (13%) percent whose service criteria are unclear or “unknown.”

Factors that Hinder Workers’ Targeting of Special Populations

Table 2 is a display of workers’ opinions of why they do not target family preservation services to special populations. In cases where a worker disagrees with the special populations service criterion, agency-level, macro-structural issues do not hinder him/her from targeting services to special populations. Likewise, researchers could not find overwhelming support for the premise that such moderating variables as agency policy or funding specifications cause workers to avoid using special population as the primary service criterion. Seemingly, what hinders workers’ use of the service criterion special population, is the manner in which the term is conceptualized and the workers’ own internal ideologies and/or biases. Workers expressed the following:

the term special population does not have real significance because it has come to mean everyone (Item G, M = 3.4);
Why Special Populations Are Not the Target of Family Preservation

Table 2
Factors That Hinder Workers’d Use of Special Population as a Service Criterion

<table>
<thead>
<tr>
<th>Item</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Although I support the notion that services should be targeted to special populations, my agency’s policies do not allow such a practice.</td>
<td>1.91</td>
<td>0.562</td>
<td>183</td>
</tr>
<tr>
<td>b) Although I support the notion that services should be targeted to special populations, so few cases are what I would consider special populations.</td>
<td>3.05</td>
<td>0.466</td>
<td>199</td>
</tr>
<tr>
<td>c) Although I support the notion that services should be targeted to special populations, referring or funding sources discourage such a practice.</td>
<td>2.1</td>
<td>0.631</td>
<td>197</td>
</tr>
<tr>
<td>d) Although I support the notion that services should be targeted to special populations, these types of cases demand more time and resources than we have.</td>
<td>3.17</td>
<td>0.59</td>
<td>200</td>
</tr>
<tr>
<td>e) Although I support the notion that services should be targeted to special populations, the agency’s eligibility criteria are so general, they hinder the use of special populations as a service criterion.</td>
<td>2.08</td>
<td>0.621</td>
<td>182</td>
</tr>
<tr>
<td>f) Although I support the notion that services should be targeted to special populations, the agency’s treatment model is not conductive to directing services specifically to special populations.</td>
<td>2.06</td>
<td>0.602</td>
<td>192</td>
</tr>
<tr>
<td>g) Although I support the notion that services should be targeted to special populations, the term “special populations” has come to mean everyone.</td>
<td>3.4</td>
<td>0.544</td>
<td>205</td>
</tr>
<tr>
<td>h) Although I support the notion that services should be targeted to special populations, there are few community resources to help us deliver services to these groups.</td>
<td>3.39</td>
<td>0.525</td>
<td>203</td>
</tr>
</tbody>
</table>

Note: Scale values range from 1 to 4, where 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.
so few cases are what they would actually consider special populations (Item B, $M = 3.05$); special populations demand more time and resources than what the workers feel they have available (Item D, $M = 3.17$); and workers felt that the lack of community resources available to aid them in their delivery of services to special populations (Item H, $M = 3.39$), could potentially be the hindering factor.

Several "belief structure" variables proved to be significant in attempts to understand why workers who are in favor of using the special population service criterion do not use it. When workers are in support of the special population service criterion but still do not use it to make a service decision, agency policies and the lack of community resources account for their actions. For example, moderate support ($R = .48, p = .003$) was found for the premise that agency-level barriers may influence workers who agree with the criterion but do not use it. Strong correlations ($R = .64, p = .001$) were found between workers' desires to target services to special populations and their perception that agency eligibility criteria are too general and thus impede their ability to target special populations. Finally, the problem of few community resources again surfaced as a factor imposing on the use of the criterion, special population. The community resource variable is not only positively correlated ($R = .60, p = .000$) with a favorable attitude toward the special population service criterion, but it is one of the few study variables which distinguishes between family preservation workers who have delivered service based on the criterion and those who have not.

Discussion

The results of this study indicate that special populations are not the target of intensive family preservation services. The results are consistent with a content analysis of the sampling frame used to draw the names of agencies. Recall, the Annotated Directory of Selected Family-Based Services Programs served as the major sampling frame for the study. A content analysis of the 368 programs registered with the Annotated Directory, revealed that 212 of the programs do not indicate within their program description, an official policy of targeting services to special populations. It seems
that even in the face of legislative mandates and policy directives that emphasize service priority to special populations, workers do not utilize such classifications in their decision-making. In this study, there appears to be two parallel issues that are in operation. First, the study consisted of a significant number of workers who do not believe services should be targeted under the service criterion, special populations. Their belief structure is prompted by the manner in which they believe the term special population is defined. Seemingly, workers opposed to the special population service criterion also appear to be so because of some personal ideologies. Those workers that do not agree with targeting services to special populations are not hindered by agency-level, macro-structural issues. Second, in this study researchers discovered that there are a number of workers who do believe that special population ought to be used as a service criterion. Interestingly, unlike the workers who disagree with the special population criterion, workers who do agree, but do not target, are in fact hindered by agency-level, macro-structural issues. The only belief structure that is common to both groups of workers (i.e., those who support “special populations” and those who do not) is the opinion that there are too few community resources to aid the practice of targeting services to special populations.

Best Interpretation of the Results

Exploratory studies that rely heavily on descriptive and correlation analyses have inherent limitations. Given the limitations, results from this study should be interpreted cautiously. One potential limitation of the study concerns the issue of construct validity. There are three types of construct validity: convergent validity (measures correlate with the variables of the study in a predicted manner), discriminant validity (measures do not correlate with the variables that they should not), and sensitivity to change (the study’s interventions produce expected change in observed measures and variables) (Anastasi, 1988 In Bloom, Fischer, & Orme, 1999). In this study the belief variables that measure workers’ attitudes toward the criterion special population highly correlate in the predicted manner with the variables that measure workers’ behavior; thus, there is evidence of convergent and discriminant validity. However, there is always the
possibility that the manner in which the researchers operationally defined the notion special populations might not convey the same meaning for respondents. Although great care was given to operationalize the term special populations into categories of 16 groups, respondents may not have retained the specific definition as they answered other parts of the survey. Nonetheless, given the richness of the data, a solid direction for follow-up research is provided.

Implications and Conclusion

*Strategies for Reforming Family Preservation Programs*

The findings of this study have important implications for policy and practice. The field of intensive family preservation services is in an era in which its very efficacy is being called into question. Family preservation programs are currently scrutinized because program officials are unable to clearly identify who they believe family preservation services benefit most. The criticism of family preservation services abounds under a legislative cloud which prompts states to do something to reduce out-of-home placement rates. Moreover, legislative directives as far back as P. L. 96-272, P. L. 103-66, and now, P. L. 105-89, contain language which indicates that services are to address the needs of special populations. Taken together, all of these factors (i.e., program criticism, legislative mandates) prompt the question, “Is there a need to reform family preservation services?” The literature providing a rationale in support of targeting special populations, given their predicament within the child welfare system, is readily available and it is decisive. It would seem that if family preservation programs are to undergo restructuring, the “targeting dilemma” would be a good place to start. Deciding what families are most appropriate for services, is imperative. In any discourse concerning practice and policy reform, attention should be given to the plight of special populations. All decision-makers have a role in reforming intensive family preservation services and assuring that programs give attention to the needs of special populations.

*Correcting the conceptualization of the term special population.* State legislators can adopt specific targeting guidelines that define
who special populations are within their jurisdiction. They can mandate committees to oversee the implementation of newly developed targeting guidelines. Additionally, workers have a vital role in the reform process. There is a need to emphasize who special populations are, and why they are. In this study, workers thought the term special population has come to mean virtually everyone. Workers can use practice wisdom to assist in defining who special populations are. Practice-inspired definitions should take into account such factors as general risk, legislation guides, and child vulnerability issues like age and ethnicity. As states work to shape policy directives that take into account the needs of special populations, child safety should always be the primary service goal no matter the classification of special population.

**Combating bias ideologies.** Additionally, referring agents might consider a practice of contracting exclusively with service agencies that utilize proven, culturally-specific intervention models. Finally, program managers share a critical role in reforming services and making sure programs address the needs of special populations. Program managers can begin to implement demonstration projects that target services to special populations.

**The resource issue.** Out-of-home placement among special populations like children of color, is a complicated issue and there certainly are no easy answers. Although the focus of this study was an examination of the attitudes, beliefs, and behaviors held by family preservation workers, program reform is by no means their sole responsibility. In fact, this study found that a significant number of workers do believe that the criterion special population should be used in service decisions. These workers are hindered in their efforts to target because there are not enough resources to support their practice. It seems that multi-level, system-wide changes are needed. If a wide-base of support for targeting special populations can be obtained among professionals, change should be desired and certain.

**Note**

1. Scale values for the subscale "Attitude Toward Using Special Population as a Service Criterion" range from 1 to 4, where 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.
References


social work. Dissertation abstracts international, A: The humanities and social sciences, 62(1-A), 335.


Book Reviews


This book should be read by anyone interested in the changes taking place in social welfare policies and services, particularly in the so-called 'welfare states'. It is also relevant to anyone interested in the political and economic trends influencing those changes, as well as in at least one major perspective concerning the possible future of global social provision. The introductory chapter by Goldberg is itself worth the price of the book.

As is commonly the case with edited books, the entries vary considerably in depth and style, but not in perspective. Those who follow the work of the fine scholars who edited this book will not be surprised to find it relentlessly left-wing and obsessively feminist. Not all readers will find that a shortcoming. However, many may wish that it covered a wider area: it deals exclusively with Euro-American countries, except for Japan. There are chapters on the United States, Canada, the United Kingdom, France, Italy, Germany and, of course, Sweden. An entry on Hungary represents the former members of the Warsaw Pact (COMECON). It is a curious choice, partly because Hungary is not typical of that particular cohort of nations, and partly because the author of the chapter does not seem to have the same impressive scholarly credentials as do all the other authors.

Very different discussions explain the changes in social provision in each country, but certain conclusions seem to be consistent. Among them: there has been a general erosion of social provision, along with lower expectations, which bodes poorly for any general up-welling of resentment leading to social action; the concept of severity of loss depends on what the benefits had been previously, as well as on the dominant social philosophy; the changes have not been so much abolition of social provisions as re-structuring of them, a change in which old people have often profited and children have lost ground.

In Canada, devolution has taken place under the guise of protecting the programs; only health care is still universal and
it is in peril. The UK seems to have maintained its social provision despite very hostile governments, but inequality has increased. Germany's programs have suffered a long decline, the end of which is not in sight. Italy's social welfare services reflect that nation's historic north-south split, with the south remaining traditional and poor and services remaining particularistic and personal, with a hint of the dead hand of Fascism. In Japan as in Italy, tradition is still a powerful force and has been used adroitly by successive governments to require the family to continue being the major provider of social welfare services, a policy under increasing pressure as the population rapidly ages. Hungarian social provision has declined sharply since that country abandoned socialism for capitalism and people report feeling less secure than formerly, but Hungarians who lived under socialism may have a somewhat less romantic memory of communist 'social equality' than is presented here. Sweden remains the "poster child" of American social welfare writers, but growing policy problems are subtly implied as immigration brings multiculturalism to that formerly homogeneous country. For example, one might wonder if the report of "non-Nordics" living in "increasingly segregated outer-ring suburbs" (p. 107) might not be described elsewhere simply as new ghettos.

In her thoughtful summary chapter, Goldberg notes that poverty generally has increased in these 'welfare states', as has inequality in distribution of benefits, with inequity in taxation. Virtually everywhere, the gap between the bottom quintile and the top has become a chasm and continues to grow. Policy decisions leading on social welfare are taken, according to Backer and Klammer in their discussion on Germany, for fiscal reasons, not to achieve greater social justice. It is seen in other countries, as well. Where savings have resulted from curtailing some programs, the money has not gone to build others. Thus, policy and program changes do not benefit those most in need of them. Moreover, program eligibility is frequently tied to employment. As unemployment increases, funding for social programs is reduced—just when the need for them rises. It is a distressing dilemma which Goldberg avers requires global organizing to limit negative effects of economic globalization. She advocates organizing to press local politicians to act in the interests of the people rather than blaming
the problems of world economies on the cost of social programs. She ends her discussion without holding out much hope for such large-scale international organizing.

This is not a happy book, but it is an important one for anyone involved in or even concerned about the present state of social provision in industrial countries, how it got where it is, the directions in which it seems to be headed, and what might be done.

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In 1970, Troy Duster wrote a groundbreaking book entitled The Legislation of Morality in which he argued that "... moral beliefs upon which we have based our public policy are themselves founded on myths about both the physical effects of drugs and errors about the total quality of persons addicted (p. 239)." Now, 32 years later, MacCoun and Reuter have taken this argument further by carefully developing a set of frameworks by which specific drug policies can be assessed. They rightly argue that unnecessary and unproductive dichotomies have been presented in the literature that polarize policy options. Total prohibition is one view strongly held by almost all political leaders, law enforcement, and to a large extent, the general public. It argues that illicit drugs are harmful and should continue to be legally prohibited with stronger enforcement and somewhat more severe penalties because they are morally unacceptable. Harm reduction/legalization, the other view, is held primarily by a few academics and researchers who argue that the sheer fiscal costs associated with prohibition in terms of criminality and law enforcement demonstrate that these policies need to be loosened or possibly abandoned. This book makes a creative effort to narrow or bridge the gap between these two views and provide a neutral assessment of different policy in light of a critical assessment of historical and international trends.
The book is divided into four parts. The first section provides an overview that sets the tone for how the analysis will proceed. The authors describe a set of dichotomies which define how drug policy is generally perceived. These include abstinence versus harm reduction as goals for drug policy; criminalization versus legalization as national drug strategies; and, criminal versus public health problem for how drug use/abuse is defined. The rest of the book goes well beyond these dichotomies in an attempt to “depolarize” these views and resolve their differences in the hopes of developing a truly effective national drug policy. The reframing of dichotomous extremes and their likely effects on society is the main contribution of this work; it provides a refreshing break from the work of scholars advocating for a particular view. While it is clear that these authors are not supporting current drug policy per se, MacCoun and Reuter are not blinded by their own views, and they succeed in presenting a neutral assessment of what is and what might be.

While the book does provide in depth description of drug policy in The Netherlands, Switzerland and other countries in Europe, its unique contribution stems from the last part of the book in which the authors project possible outcomes of different strategies, such as depenalization, a regulated adult market, and maintenance of drug use for different drugs including cocaine, heroin and cannabis. In a fairly cautious manner, MacCoun and Reuter attempt to project how these various regimes may affect the prevalence of use, harms related to use, and distributive issues in the U.S. if adopted. They also are clear about how much uncertainty is related to their projections. For example, for some drugs, there is better knowledge of some outcomes given the experiences of other countries, such as the Dutch experience with cannabis. For other drugs, there is much uncertainty given that there is less or no experience with these strategies, for example, cocaine and heroin. What is exceedingly clear from the authors’ analysis is that this is an extremely complicated area ladened with morality and uncertainty thus it is easy to determine why the U.S. has generally maintained an abstinence, prohibitionist position over the years.

While this book does illustrate some possible policy alternatives, there are several places that could have been developed
more fully. First, while one can construct rational arguments for why our current prohibitionist drug policy does not and cannot work and propose other policies that might well be somewhat better, there is always the political process which itself is often entrenched in moral claims. The book provides few insights into what it would take to change this process so that drug policy reform could possibly occur. At present politicians and the public support the zero-tolerance, abstinence approach to illicit drugs and overwhelmingly reject legalization with the exception of "compassionate use" of medical marijuana legislation that has passed in some states. What will it take for these public perceptions to change so that harm reduction approaches can gain better and stronger support? Another area that is problematic in the book is the brief inclusion of gambling and prostitution as "other vices." These few pages seek to draw a parallel between these behaviors and illicit drug use, but their brevity precludes a thorough assessment. Thus, it might have been better to eliminate these areas from the book. Sadly, there is also considerable redundancy in the book—the overview reviews several arguments in depth and the reader sees them again in later chapters of the book. Throughout the book, the authors constantly refer backwards and forwards to different chapters which is confusing and probably indicates more overlap than necessary.

Despite these limitations, the book is well written, and it provides a fresh perspective on several options for drug policy. It offers a reasonable approach to the often irrational arguments in this field which often claim moral certainty. One hopes that those in a position to develop and/or influence drug policy will read this book as it certainly gives a valuable perspective on these enduring issues.

Lorraine T. Midanik
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Why are those members of our society who are least likely to be victims of crime and violence arming themselves in unprece-
dent numbers, taking self-defense classes, wiring their homes with security devices and retreating to gated communities? According to Altheide and other media scholars, the mass media are the principal contributors to the discourse of fear that pervades the popular culture today. Certainly, there are real dangers that exist in our society that the prudent citizen is wise to be aware of and take all reasonable steps to avoid. However, the anxiety, distrust, and willingness to tolerate limitations to our freedom of movement and association that many of us manifest are attributable to an unjustified fear created by the workings of the mass media.

Altheide has spent his academic career examining how the mass media function, the values that underlie their operations, their formats and perspectives, how these various elements affect the messages they send, and the consequences for society of the dominant messages. This study builds on the work that he and others have done on the inter-relationships among popular culture, the mass media and social control. The specific research on which this book is based examines the nature of the social power or control that flows from the ability of the modern media (as well as those adept at working with the media) to define social situations in ways that have highly undesirable social consequences.

Using a computerized research methodology that track discourse in major media outlets from the 1980s into the 1990s, Altheide’s research reveals ever-increasing uses of fear in stories, newspaper and television and headlines. He describes how the “problem frame” has emerged in media news production, and how this has constituted a virtual “fear machine” that creates a belief that danger and risk pervade our everyday lives.

Altheide contends, along with other media scholars, that the mass media and popular culture, by marketing fear in both news and entertainment communications and by increasingly blurring the line between these two formerly distinct formats, have changed our social expectations and our daily lives in ways that are destructive to our communities, our well-being and our control over our lives. In the name of informing and/or entertaining the public, the media bombard audiences and readers with problem-oriented and often anxiety-provoking reports on a daily basis. Fear is no longer limited to specific objects or events. It
is experienced as the background environment or context that specific acts or events simply illustrate and reinforce.

Who benefits from the marketing of fear? Certainly, the large media conglomerates do by drawing audiences that they can sell to advertisers. Also benefiting is the "fear industry" that sells us security services and equipment. But, perhaps most importantly, the formal agents of social control, primarily the police and other law enforcement institutions are the primary beneficiaries. Law enforcement agencies are the primary source of information to the media regarding crimes and, increasingly, their viewpoint tends to dominate media perspectives on crime and violence and frame public debate of these and related topics. Who loses? Most obviously, the unprecedented number of people (primarily low-income and members of minority groups) who have received increasingly harsh treatment by the criminal justice system during a period when crime statistics, including for violent crimes, have gone down. The taxpayer has, of course, borne the cost of dramatically increased policing, processing and incarceration while other critical social needs like health care and education have been seriously under-funded. Especially serious, from Altheide's perspective, has been the costs to all of us resulting from the transformation that has occurred in our effective environment. Appropriate awareness of specific dangers has been replaced by a generalized fearfulness that pervades our daily lives. Altheide notes that fear is corrosive of justice. Its pervasiveness causes us to seek solutions that involve serious consequences for public policy, civil liberties, and the health of our communities. He believes that this state of affairs has to be changed and that this will require broad understanding of the processes that have gotten us into our present predicament. This book is his latest effort to promote such understanding.

This is a well-written account of the role of the media in distorting the public's understanding of crime and related social problems and in creating an exaggerated fearfulness on the part of the citizenry. It is a useful addition to the body of literature on the construction of social problems and provides a good example of the way in which careful research on media affects is carried out.

Scholars familiar with research on media depictions of crime and violence will not find a whole lot that is entirely new in this
book. However, this is an accessible and articulate presentation of important research that is part of a large body of scholarship with which more social workers, social scientists, policymakers and media professionals should be familiar. On a practical level, those of us in the social sciences and human services should actively seek out journalists and provide them with more accurate information on issues, convince them of the value of presenting different viewpoints, and alert them to the consequences of always using the problem frame. Altheide admits that this is easier said than done, since fear sells and the existing formats are familiar, effective, and profitable. However, it is a responsibility that we can ill afford to ignore.

Allan Brawley
Arizona State University West


In her new book, Carolyn Saari sets out to integrate developmental and clinical social work practice theories to address, as she sees it, shortcomings in current thinking in sufficiently accounting for the influence of the social environment on human functioning. The problem, she writes, has been that:

"Clinical social work, as a profession, has always believed in the importance of the environment and has regarded theories of the "person-in-situation" or the "person-environment configuration" as necessary in order to understand human needs . . . Yet because paradigms of Western thought separated the individual and the environment into two quite different frameworks, it has been extremely difficult to find a viable bridge between these inner and outer aspects. Thus social work theories have espoused either an intrapsychic approach or a more social approach, with the advocates of each both criticizing and competing with those of the other . . ." (p. 2)

For Saari, it is the limited attention to environmental influences in psychoanalytic theory, specifically, that she seeks to address. Her approach to this problem is a novel one: to answer these
limitations through an integration of psychoanalytic theory with post-modernist philosophies. Saari proposes that post-modern thought, particularly social constructivism, can supply a view of the significance of social context that could in effect move psychoanalytic theory into the 21st century.

Saari organizes the nine chapters of her book into three sections, each aimed primarily toward building an integrated theory of both perspectives. In the first three chapters, she discusses the foundational views of Freudian theory, and integrates more recent ideas from developmental theory and research and post-modern concepts, such as language and meaning, and culture and identity. In this section, among other contributors, she refers to the cognitive psychologist Katherine Nelson's tri-partite theory of the development of meaning and relies on this viewpoint as a major organizing framework for the book, consistent, as she sees it, with the post-modern emphasis on meaning-making as a central human activity. In the second set of three chapters, Saari explores Michel Foucault's ideas about psychotherapy, particularly his assertion that psychoanalytic psychotherapy is an instrument of social control and oppression, as a backdrop for framing the discussion of the contemporary role of psychotherapy. In the final three chapters, the author expresses her views about a theoretical basis for psychotherapy that integrates the influence of the environment from the perspective of social constructivism. The case illustrations, found in eight of the nine chapters of the book, are particularly well-written (most have appeared in other publications of the author) and work well as illustrations of her major points.

It isn't hard to see why post-modern thought has become a major influence in our profession in recent years. Consistent with many of our core professional values, and our discomfort with the medicalized role of the expert, post-modern thought calls attention to the problems of biases in social science that favor the world views of socially dominant groups and exclude the experiences of oppressed populations. However, the use of post-modernism to address deficiencies in psychoanalytic theory strikes me alternately as curious and ironic. To begin with, because most social work practitioners are not as concerned about Freudian theory as Saari is, and operate on the basis of more
holistic models, I doubt that her view of a rift between intra-psychic and social theories is widely shared. Ironically, Freudian and social constructivist views share one important characteristic: isolation from the scientific community. While the isolation of Freudian theory is a result of obsolescence, the isolation of social constructivists from positivist scientific inquiry is self-imposed. In their view, any attempt at so-called objective observation is misguided and a violation of the subject’s true experience.

I am among those who believe that post-modernist views cannot provide our profession with a strong practice theory base. Pursuing such a path will present the same sort of intellectual deadlock that befell our Freudian-inspired colleagues. Contrary to post-modern views, it is indeed possible to discover truths about the human condition that translate into viable practice interventions, as a myriad of examples of evidence-based practice can demonstrate. The contradiction between social constructivism and evidence-based practice is illustrated, but not acknowledged, in what Saari calls her ‘Guidelines for the Construction of New Meaning’ [in psychotherapy]. Guideline number one reads: “The absence of known universal truth requires the clinician to pay careful attention to the ethics and values of the mental health professions . . .” In contrast, guideline number four asserts, “Newly created meaning should be informed by and consonant with the best available understanding of human development and functioning” (p. 117). How can the best available understanding of human functioning be recognized as such in the face of the absence of known universal truths? It seems that we are being told that empirical inquiry into human functioning is OK as long as we don’t conclude that our findings may be applicable to all people. If we were to take this apparent message seriously, we would have to abandon a considerable portion of our knowledge base.

Our response to the inadequacies of our theory base and social science should not be a blind embracing of an idea that leads to what is in effect nihilism in our practice theories and science. We social workers are dedicated to fostering understanding of human diversity in its many facets, and in doing so we should also dedicate ourselves to making our scientific systems better,
more inclusive, and more accountable, not abandoning the ever-growing scientific base of our profession.

Timothy Page
Louisiana State University


Todd Nelson’s edited book, *Ageism: Stereotyping and Prejudice Against Older Persons* is the first comprehensive approach to addressing the complexity and multidimensional nature of ageism. Although Robert Butler first coined the term in 1980, few researchers subsequently have grappled with the insidious nature of ageism in our society and among professionals. Not surprisingly, given the relative invisibility of older adults in our society, research on ageism (or the third “ism”) in the behavioral and social sciences is comparatively limited, especially when compared to the other isms of racism and sexism. This edited volume makes a significant contribution to advancing knowledge regarding ageism by bringing a range of theoretical perspectives on the causes, functions and consequences of our ageist culture and society. Several themes, which underlie the chapters as whole and challenge the reader to examine their own beliefs about aging and older adults, are highlighted in this review.

Ageism occurs across the lifespan and is not limited to any particular age group or population. In fact, age is one of the earliest characteristics we notice about other people, whether young and old. From an individual’s perceived age, we infer their competencies, beliefs and abilities. Accordingly, younger persons are also categorized by age (e.g., “you are not old enough to stay out that late” or “you are not responsible enough to have the car.”). And some older adults may fear and avoid interactions with youth, associating them with greater risks of violence, crime, or other types of antisocial behavior. Nevertheless, the authors emphasize that to note a person’s age in our social interactions is not inherently offensive. It is the consequences of such differentiating that can be harmful; ageism is most invidious when it is
institutionalized in employment health care or public policy and has discriminatory effects on older adults.

Age prejudice—the one prejudice that we all experience, regardless of our race, ethnicity, gender or sexual orientation—is a socially condoned and institutionalized form of prejudice. Consider how we laugh at “over the hill” 50th birthday parties, greeting cards, or jokes while we will not tolerate racist and sexist remarks. In fact, the authors repeatedly refer to the widespread occurrence of socially acceptable expressions of negativity toward older adults. On the one level, such negativity can operate without conscious awareness, control or intention to harm, in other words, there is not a strong, explicit hatred toward older adults as there may occur toward particular racial or ethnic groups (particularly in the current anti-terrorist climate). Yet it is this implicit nature of attitudes and knowledge about age—the wide acceptance of negative feelings and beliefs—that makes ageism so insidious and difficult to counteract.

Rather than changing our attitudes or behaviors toward older adults in general, exceptions are highlighted and given considerable attention. Consider how frequently the media will report on the “exceptional” older adults—the astronaut John Glenn, the master athlete, the woman who first summits Mt. Rainier at age 77. Our preoccupation with such exceptions is itself ageist. Similarly, the current gerontological focus on “successful” or “productive” aging can serve to perpetuate ageism, implicitly implying that those who do not “age well” are failures to be feared or avoided.

Given that we are all aging, ageism encompasses attitudes toward the aging process in general and our own aging in particular. Because the ‘personal’ cannot be separated from the ‘political’ or the ‘professional’, studying and understanding ageism is especially complex and challenging. Accordingly, professionals need to be aware and reflective on their ageism in both studying and working with older adults. Ageism is so deeply rooted in our culture and our unconscious because it is inextricably intertwined with our cultural and societal fears of illness, death and decline.

Several of the authors point to ways that individuals can avoid the negative effects of ageism through different identity styles
and a process of identity assimilation. Such "mindful approaches toward the world" can reduce prejudice and stereotyping by increasing discrimination not against persons but between them. In other words, making distinctions about a given individual can serve to prevent one characteristic (e.g., age) from dominating or defining them. This suggests the value of students, researchers, and educators engaging in planned interactions with older adults, such as intergroup dialogue techniques, in which such differences can be openly confronted, grappled with and understood.

Developing such mindful approaches toward the world has implications for how we educate and prepare our students to be more conscious of how their own ageism is embedded in their cultures, interactions and worldviews. To support a process of critical thinking and reflection, this edited volume is a useful supplement to required gerontology and social work courses. This volume can be a useful resource for educational programs that seek to bring a multicultural lens, embracing age, race, gender, ethnicity, sexual orientation and physical/mental ability, to bear on all students' learning experiences

Nancy R. Hooyman
University of Washington


In contrast to America, which promotes marriage and welfare-to-work mandates as the road to ending poverty, Europe is far more family friendly in terms of the offering of adequate social supports to reconcile work and parenting. Apart from law wages and poor health care benefits, a major cause of the high poverty rate among U.S. women is the unwillingness of the state to shoulder the costs of care work. The concept, "care work", which is the subject of this book, is the British term for the "work of looking after the physical, psychological, emotional, and developmental needs of one or more other people." (p. 17).

The topic of care work has been neglected historically, as Mary Daly, the editor of this text, argues. Among the causes of this neglect are: the universality and taken-for-grantedness of
the caring; the fact that economists and statisticians have failed to measure the extent or value of this work; and the legacy of the belief that this form of work was unproductive labor. Daly predicts care work will occupy a much higher place of prominence in the 21st century due to the changing social and economic status of women, the deconstruction of extended families, and the aging population.

What is the role of the state in making care available for dependents (children, the aged, persons with disabilities)? By what means should carers be compensated? Should it be by payments to the person in need of care or to the provider? Should it be for low-income persons only? Will care work be less valued when it is done not out of love or duty but for remuneration? These are among the issues addressed in this volume. Its thirteen chapters, each written by an observer from the country in question, provide detailed (at times too detailed) information on the nature of relevant provisions within the social and economic context of the nation. Innovative programs, and the lobbying that led to their establishment, are described.

This study is one of the first to stem from the International Labour Office (ILO) In Focus Programme on Socio-Economic Security. The theme of the study reflects the twin themes of ILO that the fundamental principle of distributive justice requires basic income security and people in need of care have the basic right to have sufficient voice in decisions affecting their lives.

These themes run through the four divisions of the book. The three chapter of Part I establish the framework for understanding care. The focus of chapter 1 is on the need to subsidize personal care giving and the need for an organizing body such as a union to represent the workers.

Paid parental leave is one of the subjects covered in Chapter 2. This policy, strangely, is endorsed throughout Western Europe, in all countries except the United Kingdom and Ireland. These latter countries and Italy, however, are quite generous regarding care provisions at the other end of the age spectrum. In other countries where family solidarity is stronger and family care (usually by female relatives) a given, there is less reliance on government funding. Chapter 3 pursues this theme further with a focus on gender. The author's singling out of the Scandina-
vian "dual earner model" is helpful. The Scandinavian model recognizes the need for family care and imparts permission for workers to exit the labor market without penalty. Swedish "lone" (or single) mothers get almost as much income from the state as they do from earnings.

The chapters of Part II discuss care arrangements in India, Brazil, and Russia. The interdependence and male gender-bias themes are key to East Indian child rearing; care of the elderly becomes a problem under conditions of modernization. The Brazilian and Russian social structures are characterized by great social inequality; in Russia higher income families qualify for higher monthly child allowances than do poor families.

The writers of Part III explore social benefits in Finland where informal care has been transformed from a public to a private matter; universalism of care is the theme. Nevertheless, the attention to the needs of the elderly has failed to match the generous provisions for small children. In the Netherlands, care is becoming highly privatized; care dependents such as the frail elderly are given personal budgets with which to purchase the services they need. The third chapter of this section discusses relevant issues in the provision of services in the U.S. such as the distress of managed health care limitations. The availability of unpaid family leaves for some employees is shown to be clearly inadequate to the need. Elder care provisions are clearly inadequate, forcing many nursing home residents to have to exhaust their personal resources before Medicaid pitches in.

The two chapters of Part IV highlight case studies of political organization among professionals who provide care. Descriptions of collective action in England, Ireland (where neighbors often provide the care), as well as in Los Angeles County in the U.S. provide an encouraging note on which the book concludes.

Since each chapter is written by a scholar who discusses the strengths and liabilities of care provisions in that country, it is hard to compare the living standards cross-nationally. From my personal knowledge of conditions in post-Communist Russia and the Netherlands, moreover, I felt that the description of care provisions in the former was too rosy and of the latter, too critical when viewed in the international context. These drawbacks, notwithstanding, Mary Daly has provided researchers and policymakers
with an informative and well-documented resource. Americans, especially, can learn a lot from this international survey of how governments can help eliminate much of the mess in arranging for high quality care for its most needy citizens.

Katherine van Wormer
University of Northern Iowa

In recent times, education (and school level education in particular) has become a highly politicized topic. Beliefs about what type of schooling is the most effective are permeated with ideological preferences, and serious research into what interventions work best are often ignored as values derived from political, religious and other convictions increasingly govern decision making. Although political campaigns today are not exclusively focused on educational issues, it is rare for politicians to downplay education. Issues such as school vouchers, class size, curriculum content, educational administration and related topics now form a prominent part of the electoral process.

However, as Timothy Hacsi demonstrates in this readable and engaging book, political statements about education are often uniformed, clouded with rhetoric and usually erroneous. While politicians blithely contend that this or that remedy will magically solve the problems facing schools today, few base their opinions on a serious assessment of the facts. In some cases, they allow ideological beliefs to override the facts but, in others, they are just ignorant of the facts. Consequently, sincere commitments to improve education and educational opportunities for children are mired in incorrect knowledge, opinion, bias, ideology and tradition—all the things that modern science is supposed to dispel through careful and rigorous investigation.

Hacsi illustrates his argument by discussing five topics that are often raised in political debates about education. These are the role of preschool education (and particularly the Head Start program) in enhancing educational achievement; the effects of bilingual education; the significance of class size; the issue of social promotion, and finally the question of whether the quality of schools can be improved through the allocation of additional resources. All have featured prominently in recent political debates on education. The book offers a lively overview of these issues.
showing that popular views on each of them are based on an astounding lack of scientific evidence. Despite their importance and prominence today, research findings into these issues is largely ignored. On the other hand, despite a huge volume of scientific research into these questions, much of the research is controversial and inconclusive. For example, Hacsi reports that a major GAO review of some 600 published research studies into Head Start found that only 22 could be considered reliable in terms of criteria that Hacsi describes as ‘...not very strict.’ Not surprisingly, the GAO concluded that the evidence for Head Start’s effectiveness did not permit final conclusions to be drawn.

Hacsi’s book is not only directed at politicians, the media and others who declaim on educational issues with apparent authority, but at the scientific community which has failed to agree criteria, standards and procedures for rigorous investigation. The ineffective way that findings are communicated, and the lack of routine replication designed to test research claims, also impede the development of policies based on scientific research. Hopefully Hacsi’s excellent book will not only promote more rigorous research into educational issues but pave the way for the more systematic incorporation of research findings into the policy process.


Universities are widely regarded as centers where independent, rigorous research is undertaken free of bias and external influence. However, there has always been a tension between the pursuit of objective knowledge and the desire of external sponsors to fund research designed to promote their own agendas. In recent years, research funding by pharmaceutical and bio-technology firms has resulted in several well publicized cases in which concerns about autonomy and potential conflicts of interest involving university researchers have been expressed. These developments echo earlier concerns about the funding of research perceived to have military implications.

The issue is particular pertinent to social policy research where it is widely recognized that values and beliefs permeate
the field and where it is not always possible to pursue 'pure' investigation. Scholars have grappled with this issue for many years but it has not been fully resolved. Some believe that the problem can best be addressed by a declaration of values so that consumers of social policy research can have no doubt as to preferences and persuasions. Others believe that applied research with political implications should not be conducted at universities. Independent think tanks, they argue, is where this type of research rightly belongs.

These issues take on a dramatic character when viewed in the light of William Tucker's interesting and important book. A professor of psychology at Rutgers, Tucker has previously published on the subject of 'racial research', which may be described as the use of scientific procedures to examine a variety of phenomena associated with ethnicity and race. Originating in theories of race superiority and fueled by the eugenics movement in the early decades of the last century, racial research lost popularity as its true purpose was better understood, and as its association with Nazism and other racist ideologies was exposed. But, as Tucker reveals, racial research is by no means a thing of the past. Indeed, the book opens with a striking reference to Herrnstein and Murray's *The Bell Curve* which was published in 1994. Tucker shows how research of this kind has been supported by organizations with clear ideological agendas. One of these is the Pioneer Fund which was founded in the 1930s by Wicliffe Preston Draper, a wealthy businessman. The Pioneer Fund's sponsorship of racial research continues today. Although Herrnstein and Murray were not supported by the Pioneer Fund, the Fund distributed their work and it has sponsored numerous studies by academics including William Schockley and Arthur Jensen whose accounts of the links between race and intelligence attracted widespread and controversial attention.

This is an extremely detailed and thoroughly researched book. Although some may view the topic as esoteric, it makes for fascinating reading. It should certainly be consulted by scholars working in the field of social welfare where race and ethnic issues are of perennial relevance. The increasing trend towards the biomedicalization of social problems and the growing impact of genetic research on the social and behavioral sciences requires
a better understanding of the issues. Tucker’s account of the Pioneer Fund, and the history of race research in the United States makes an important contribution and should be of interest to anyone engaged in social policy research today.


The introduction and subsequent expansion of professional social work education in the United States is undoubtedly a success story. When compared to many other professions, and to trends in other countries, American social work educators have been able to establish professional education for social work within many of the nation’s universities, including its most prestigious universities. Often, schools of social work at these universities are autonomous academic units represented by deans who are in a position to control budgets and represent the profession at the highest levels. Several other professions such as town planning, architecture, clinical psychology and vocational rehabilitation are not represented by deans. Student interest in social work is buoyant and enrollments have soared. In addition, the professional education of social workers in directed by a single, well recognized organization, the Council on Social Work Education which establishes educational policy and accredits professional social work programs. Accordingly, uniform curricula have been introduced and social work education is now highly standardized.

In her latest book, Katherine Kendall traces the history of social work education in the United States from the vantage point of the struggles and conflicts that attended the creation of the Council on Social Work Education in 1952. Kendall was the founder Executive Director of the Council and she has, for many years, continued to play a decisive leadership role in promoting social work education not only in the United States but internationally as well. Her experience, wisdom and commitment to the field give her unique insights into the historical evolution of social work education during the 20th century. Her personal knowledge of the events which led up to the creation of the Council, and her links with many of the professional leaders give this book a
distinct poignancy which makes it essential reading for all social work educators.

However, the book provides little ground for the profession to engage in self-congratulation. It is to Kendall's credit that she does not offer a romanticized view of the history of social work education. Instead, she presents a verismo account showing how different factions struggled around a number of key issues. The most serious struggle concerned the issue of graduate versus undergraduate education but other issues, such as curriculum content, the nature of social work practice and the relationship with the practice community consumed an enormous amount of time and emotional energy. One cannot help thinking that these inward focused struggles deflected the profession from being an effective agent for social change and social justice. Unfortunately, these struggles continue today. While has been made progress in recognizing the value of undergraduate education, the tendency to be exclusionary still characterizes contemporary debates on social work education. For example, the latest revision of the accreditation standards discriminate and excludes from leadership positions in social work education those who do not have an MSW degree. Those with an undergraduate social work qualification, immigrants and non-social workers who have worked for many years in schools of social work are not permitted to serve as deans or directors. Kendall's excellent history should give pause for thought. Her discussion of the role of the universities and their impatience with intrusive accreditation is salutary. The profession needs to learn from its past and hopefully, by transcending internal squabbles and struggles, it will play a more positive role in the far more critical struggle for social justice facing our society today.


People's welfare has historically been closely associated with their ability to engage in activities that may be described as 'work'. For millennia, families, clans and tribes met their needs by using their skills, knowledge and physical capacities to hunt and gather food. Subsequently, skills, physical resources and knowl-
edge were applied to agricultural tasks and even today, agriculture sustains hundreds of millions of people around the world. In the 19th century, mass employment in industrial occupations emerged as a new and important way by which a substantial proportion of the world’s population secured their livelihood. Although industrial employment was regarded by many as the best means of raising standards of living, the emergence of post-industrial economies in Europe, North America and elsewhere has created new uncertainties and insecurities.

It is in this context that Guy Standing of the International Labour Office discusses diverse aspects of work, security and the role of government in human welfare. The key to the book lies in its last sentence which states: “Dignified work can only exist when it is done for intrinsic reasons, and not because a landlord, a boss or the state says shall be so (p. 277).” Although Standing believes that work is central to the human experience, work must be organized and linked to just, humane and satisfying social arrangements if it is to contribute positively to the creation of a Good Society. And this requires the rejection of paternalism by the state, corporation and other social institutions.

This premise paves the way for a lengthy and discursive review of many different aspects of work in modern society. The book begins by discussing what the author calls ‘the century of the laboring man’—in other words, the period of mass industrial employment when creativity and self-fulfillment were shaped by machines and when governments of quite different ideological hues introduced extensive social policies and programs designed to regulate labor. This era has now been replaced by an era of market regulation characterized by employment insecurity and uncertainty and a new trend towards individualization in work, social relationships and attitudes. However, the author contends that this new era is already facing the prospect of fragmentation and collapse. In this situation, there is an opportunity to introduce a new set of values and policies that will promote ‘dignified work’ and authentic opportunities for the full realization of human welfare.

The book contains much that is of interest and relevance to social policy scholars but it is discursive and ranges of a great variety of complex issues. It also contains a huge amount of
information. At times, the reader feels that the book loses its focus as the author digresses into numerous tangential issues. On the other hand, some of the topics the author addresses are highly pertinent to the book's central theme. Perhaps the most important of these is the issue of basic income or 'basic security', as the author calls it. One very useful chapter is devoted to the topic and its history, dimensions and implications are examined in some depth. Other related topics of importance include profit sharing, stakeholding in firms and the issue of the right to work. Other useful chapters deal with workfare, unemployment benefits and retirement pensions. The book will certainly be of interest to anyone concerned with the link between work, employment and human well-being.


Although religious congregations have historically been engaged in social welfare, their charitable activities have now been politicized. Influenced by Christian conservatives, the Republican Party has actively promoted the greater involvement of religious charities in social service delivery arguing that they are an effective alternative to public provisions. Supporters of faith based services claim that religious charities are far more responsive to the poor and needy, and that their programs are less costly, more efficient and delivered with greater compassion than those of government bureaucracies. They urge the government to fund religious charities and permit them to use public revenues to promote their sectarian agenda.

Following the election of President George W. Bush, some of these proposals have been implemented. For the first time, an office responsible for faith based initiatives was established in the White House, and the provisions of the 1996 welfare reform legislation that permitted religious charities to provide social services, without separating their charitable and religious missions, was given greater impetus. The President made it clear that he favored the greater involvement of the churches in social welfare
and, to the delight of religious conservatives, he promised that his administration would actively promote faith based provisions.

It is in this context that Cnaan and his co-authors have sought to assess the contribution that religious congregations make to social welfare. Their book reports on a study of no less than 215 of these congregations in different parts of the United States and Canada. Each congregation was visited and detailed interviews were undertaken to determine the nature and extent of their engagement in social welfare. In addition to providing conventional charitable services such as food pantries and clothing closets, many of the congregations were involved in community based activities including recreational and educational programs, support for neighborhood associations, artistic performances and community fairs.

Cnaan and his co-authors reveal that religious congregations make a very significant contribution to social welfare not only in terms of the goods and services they deliver but in terms of their wider educational and advocacy role. In financial terms, they found that the amount of cash resources the congregations allocated to social service provision was quite small but, when volunteer time and other non-cash resources were taken into account, their contribution is more substantial. Nevertheless, the authors conclude that religious charity cannot replace government provision. Even if the government were to allocate sizable resources to religious organizations for welfare purposes, these organizations do not have the infrastructure or expertise to assume a major role. Consequently, the authors propose that a closer partnership between government and religious organizations be forged. In addition, the contribution of faith based organizations to fostering a pluralistic conception of social welfare should be emphasized.

Cnaan and his colleagues have produced a thoughtful and significant book. It is well written, fully documented and based on a prodigious amount of research. Dedicated investigators traveled around the country to interview the leaders and members of diverse congregations and a large amount of valuable information was collected. The book makes a major contribution to our understanding of how religious congregations engage in the social welfare field and how their role can be enhanced. It is an
invaluable resource for anyone interested in the issues attending faith based social welfare today.


Welfare reform has dominated social policy debates in the United States over the last decade. Since the late 1980s, when the Reagan administration passed the Family Support Act, political leaders, federal officials, state governments, private think tanks, academics and journalists have devoted a great deal of time and effort to this issue. With the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, which introduced the Temporary Assistance for Needy Families or TANF program, welfare reform has become even more prominent particularly in view of the program’s apparent success. By the end of the decade, the numbers of people receiving cash benefits through the TANF program had fallen dramatically and politicians of different political persuasions claimed that the problem of welfare dependency had finally been solved.

This book provides a compendium of valuable information about welfare reform. Based on a conference hosted at the University of Michigan in 2002, the book is compiled by Rebecca Blank and Ron Haskins—two leading experts on the subject with rather different views. Haskins was a key policy Congressional maker who assisted the Republican majority craft the 1996 legislation while Black served as a member of the Clinton Council of Economic Advisors. While Haskins approaches the subject from an approach that some might describe as ‘compassionately conservative’, Blank’s perspective is grounded in a more conventional, welfare statist tradition. In the book’s opening chapter, the two editors summarize the key issues attending welfare reform, presenting their own views and supporting them with plausible arguments.

In addition, the book contains no less than 18 chapters dealing with a wide range of topics related to welfare reform and most of them are written by the luminaries working in the field. Charles Murray addresses the issue of family formation focusing on illegitimacy and single family life while Lawrence Mead summarizes what is described as a conservative approach to welfare.
Bob Greenstein and Jocelyn Guyer address the role of Medicaid and food stamps while Irv Garfinkel writes about child support. LaDonna Pavetti and Dan Bloom discuss sanctions while Doug Besharov and Nazanin Samari address the issue of child care. Wade Horn and Isabel Sawhill write about the importance of marriage and Hugh Heclo traces the political history of welfare reform debates. Commentaries are provided by Glen Lourie, Eloisie Anderson, Wendal Primus and many other leading figures in the field.

The book is undoubtedly one of the most comprehensive and informative accounts of welfare reform currently available. Although it will soon be dated, it offers a rich amount of detail and it should be an important resource for scholars working in the field for many years to come. However, its focus on statistical, historical, legislative, administrative and other factual aspects fails to address in sufficient depth the ideological nature of the issue. While welfare reform is ostensibly about poverty and social need, a more critical account would show how it has provided both political parties with a convenient electoral tool, how it has coded racism and sexism, and how it has exploited human misery for ulterior purposes. The book does not address these issues nor does it give voice to those who are the recipients (or, some would argue, victims) of welfare policy making. Despite its valuable contribution, this book focuses on the 'facts' of welfare reform and one cannot help thinking that has somehow missed or down played the whole point of the welfare 'reform' project.
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