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Two Decades After McMartin: A Follow-up of 22 Convicted Day Care Employees

MARY DEYOUNG
Grand Valley State University
Department of Sociology

It has been more than two decades since the notorious McMartin Preschool case came to public attention. At the "Nightmare Nursery," as the Manhattan Beach, California preschool was quickly tagged by the popular press (Green, 1984), more than 350 past and present enrollees accused their providers of sexually abusing them in rituals that included such acts as blood-drinking, cannibalism and infant sacrifice.

The appalling nature of the allegations in the McMartin Preschool case not only contributed to that era's rising social anxiety about the sexual abuse of children (Best, 1990), but...
necessitated the coinage of a new term for talking about it. "Ritual abuse" was that term, and although there has never been a consensus definition of it, generally it is understood to refer to sexual abuse that is systematic, stylized and terrorizing, and that is carried out in the context of satanic, occult or magical rituals (APSAC, 1996).

Just as the earlier "discovery" of incest had created what Davis (2005, p. 28) describes as a "socially recognized story of victimization" that led to a "massive outpouring of victim testimonies," so the McMartin Preschool case created an "archetypically familiar plot," or master-narrative, of day care ritual abuse that led to aggressive case-finding by child protectionists, many of whom were social workers (deYoung, 2004, p. 25). As bizarre, improbable and wholly unsubstantiated as that master-narrative was, it was repeated over the ensuing decade in the investigations of as many as 100 day care centers in large cities and small towns across the country.

From its creation in the McMartin Preschool case, the master-narrative was a profoundly moral story. The alleged offender was depicted not just as a person who intends harm, but as evil; the alleged victim was seen not just as naïve, but as innocent and thoroughly traumatized, and thus worthy of more than just sympathy and support, but of rescue and protection. This moral framing ideologically and materially recruited many social workers, that is, it influenced them to think and to act in ways that reified the narrative and constructed day care ritual abuse into an urgent social problem (deYoung, 2000; Victor, 1988).

It is important to emphasize that not all social workers were persuaded by this narrative. The profession was, and remains to this day, deeply divided over whether the allegations in these cases are credible accounts of ritual abuse, symbolic representations of some other form of abuse or trauma, or imaginative stories formed in conversational partnership with zealous interviewers and investigators. Those who were persuaded, however, often became involved in local case-finding, investigation, interviewing and/or advocacy. Thus, their recruitment had legal consequences for those day care employees who came under suspicion as ritual abusers.

In 1990, after the longest and most expensive criminal trial
Two Decades After McMartin

in U.S. history, Peggy McMartin Buckey was acquitted of all charges in the McMartin Preschool case. Her son, Raymond Buckey, was acquitted of all but 13 charges against him; retried on 8 of those charges, a mistrial was declared when the jury deadlocked, and all charges against him then were dismissed (Butler, Fukurai, Dimitrius, & Krooth, 2001). By the time the two McMartin Preschool providers had finally come to trial, professional, public and media skepticism about the day care ritual abuse cases and the roles that social workers played in them had swelled. So did scientific skepticism, as well-designed and controlled empirical studies revealed just how easily young children can be led to make outrageously false allegations (Ceci & Bruck, 1995; Garven, Wood, Malpass, & Shaw, 1998; Poole & Lindsay, 1995), and sociological studies anatomized the cultural, ideological and professional forces that constructed an imaginary threat to children and then made acting on that threat not only possible, but exigent (deYoung, 2004; Frankfurter, 2006; Murray, 2001).

In the face of this “escalating chorus of criticism” (Myers, 1994, p. 17), often referred to as “the backlash,” social workers’ interest in day care ritual abuse waned. While the recent comment that they “ran for cover and stopped talking about it” after the last case was prosecuted in 1992 (Ross, 2003) is certainly hyperbolic, the fact remains that currently the cases are rarely the topic of discussion or analysis in the conferences, workshops and professional journals that link social workers across the country.

Analytic Strategy

This article seeks to redress the silence about the day care ritual abuse cases. The purpose of the article is threefold. First, given the fact that not all of these cases were the subjects of national news and therefore are not widely known, it introduces a sample of 22 employees who were criminally convicted in day care ritual abuse cases. Second, because much of the legal activity on behalf of these convicted day care employees postdates the interest and involvement of social workers in these cases, it updates the current legal status of each of the sample employees. Third, the article discusses the relevance of these
cases to social workers who are currently being recruited by today's new narratives about extrafamilial sexual threats to children, whether from neighborhood pedophiles, child pornographers, parish priests or internet predators.

For the purposes of this article, a day care employee was included in the sample if all of the following criteria were met: (1) she or he was employed by, or otherwise affiliated with, a public or private day care center, nursery or preschool; (2) she or he was publicly accused of sexually abusing any or all of the young children in care during the performance of stylized and terrorizing rituals; (3) she or he was convicted in a court of law by a jury or judge; (4) her or his arrest, trial and sentencing occurred between 1984 and 1992; and (5) there are sufficient archival materials in the form of published legal decisions, interview and court transcripts, investigative reports, and local news articles to track her or his case from its beginning to the present.

Sample of 22 Convicted Day Care Employees

Table 1 presents the sample of 22 convicted day care employees. They ranged in age at the time of arrest from 19 to 62 years old; 18 are White, 3 are Hispanic, and 1 is African-American. All of the employees who were convicted in the Fells Acres and the Gallup Christian case are family members; the two convicted in the Fran's day care case are spouses.

As Table 1 reveals, the role responsibilities of the 22 convicted day care employees varied along gender lines. The women who owned their day care centers combined administrative work with the direct care of young children; the men who owned their centers, on the other hand, usually had other primary employment and therefore were not in daily contact with the young enrollees. In response to the "Baby Boom" generation's unprecedented need for childcare outside of the home (Waites, 2000), all of the employees in the sample, with the exception of the Amirault and Gallup families, had been in the day care business less than five years before arrest.

The settings in which the day care employees worked varied as well. Seven of them worked in or were affiliated with private home-based centers that enrolled from 3 to 12
children at any one time; 13 worked in or were affiliated with larger public day care centers, and the remaining two, Ballard and Rohde, worked in church-affiliated centers. With the

Table 1. Sample of 22 Criminally Convicted Day Care Employees

<table>
<thead>
<tr>
<th>EMPLOYEE</th>
<th>AGE</th>
<th>RACE</th>
<th>ROLE</th>
<th>CENTER</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank Fuster</td>
<td>35</td>
<td>Hispanic</td>
<td>Owner</td>
<td>Country Walk, Miami, FL</td>
<td>1984</td>
</tr>
<tr>
<td>Violet Amirault</td>
<td>60</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Fells Acres, Malden, MA</td>
<td>1984</td>
</tr>
<tr>
<td>Cheryl LeFave</td>
<td>29</td>
<td>White</td>
<td>Provider</td>
<td></td>
<td>1984</td>
</tr>
<tr>
<td>Gerald Amirault</td>
<td>31</td>
<td>White</td>
<td>Provider</td>
<td></td>
<td>1984</td>
</tr>
<tr>
<td>Richard Barkman</td>
<td>27</td>
<td>White</td>
<td>Provider</td>
<td>Small World, Niles, MI</td>
<td>1984</td>
</tr>
<tr>
<td>Frances Ballard</td>
<td>56</td>
<td>White</td>
<td>Provider</td>
<td>Georgian Hills Baptist, Memphis, TN</td>
<td>1984</td>
</tr>
<tr>
<td>Sandra Craig</td>
<td>39</td>
<td>African-American</td>
<td>Owner/Provider</td>
<td>Craig's Country, Clarksville, MD</td>
<td>1985</td>
</tr>
<tr>
<td>Kelly Michaels</td>
<td>23</td>
<td>White</td>
<td>Provider</td>
<td>Wee Care, Maplewood, NJ</td>
<td>1985</td>
</tr>
<tr>
<td>Martha Felix</td>
<td>37</td>
<td>Hispanic</td>
<td>Owner/Provider</td>
<td>Felix's, Carson City, NV</td>
<td>1985</td>
</tr>
<tr>
<td>Francisco Ontiveros</td>
<td>33</td>
<td>Hispanic</td>
<td>Owner/Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Michelle Noble</td>
<td>36</td>
<td>White</td>
<td>Provider</td>
<td>East Valley YMCA, El Paso, TX</td>
<td>1985</td>
</tr>
<tr>
<td>Gayle Dove</td>
<td>41</td>
<td>White</td>
<td>Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mary Lou Gallup</td>
<td>61</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Gallup Christian, Roseburg, OR</td>
<td>1987</td>
</tr>
<tr>
<td>Ed Gallup Sr.</td>
<td>62</td>
<td>White</td>
<td>Owner/Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ed Gallup Jr.</td>
<td>28</td>
<td>White</td>
<td>Owner/Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marilyn Malcom</td>
<td>40</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Rainbow Christian, Vancouver, WA</td>
<td>1987</td>
</tr>
<tr>
<td>Michael Schildmeyer</td>
<td>22</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Sunshine, Edgewood, IA</td>
<td>1988</td>
</tr>
<tr>
<td>Robert Kelly</td>
<td>41</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Little Rascals, Edenton, NC</td>
<td>1989</td>
</tr>
<tr>
<td>Dawn Wilson</td>
<td>23</td>
<td>White</td>
<td>Cook/Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lawrence Rohde</td>
<td>19</td>
<td>White</td>
<td>Provider</td>
<td>1st Presbyterian, Mansfield, OH</td>
<td>1991</td>
</tr>
<tr>
<td>Fran Keller</td>
<td>44</td>
<td>White</td>
<td>Owner/Provider</td>
<td>Fran's, Austin, TX</td>
<td>1991</td>
</tr>
<tr>
<td>Dan Keller</td>
<td>50</td>
<td>White</td>
<td>Owner</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
exception of those church-affiliated centers that were exempt from state licensing and the unlicensed home-based centers run by Fuster, Felix and her nephew, Ontiveros, and Schildmeyer, all of the centers were state-licensed at the time of the employees’ arrests.

Finally, Table 1 also reveals that the 22 convicted day care employees lived and worked in diverse communities. While the Country Walk, Georgian Hills, East Valley and Fran’s day care cases occurred in major metropolitan areas with populations near or over 500,000, the majority of the cases occurred in much smaller cities with populations nearer to 50,000. Four of the cases—Craig’s Country, Gallup Christian, Sunshine and Little Rascals—happened in small towns with populations of around 5,000.

Regardless of city size, however, the local impact of each of the cases was considerable. In some communities, property values decreased (Adams, 1996; Sanchez v. Guerrero, 1994), and the rumors and fears that always surrounded these cases took their tolls in friendships, sociability and daily commerce (Hobbs, 1992; Leeson, 1985; Leonnig, 1995; Taylor, 1986). Other costs were calculable. Insurance rates for day care centers in the communities where the alleged ritual abuse cases occurred skyrocketed an average of 1500%, forcing many centers to close and many others to raise their rates, thus making local affordable day care even more difficult to find (Wickenden, 1985). The costs of investigating the day care employees strained local and state budgets, and their resulting criminal trials were often the longest and most expensive in the history of the respective community, or even the state (Granberry, 1983; Morrow, 1988; Rosenthal, 1985; Thompson, 1991).

Legal Update

Table 2 updates the current legal status of each of the 22 convicted day care employees in the sample. As it indicates, three of those employees—Frank Fuster and Fran and Dan Keller—remain incarcerated; an additional 6 served at least their minimum prison sentences and were paroled into their communities. The remaining 13 day care employees
Successfully appealed their convictions.

Table 2. Verdict, Sentence, Legal Update and Bases for Affirmed Appeals for the Sample of 22 Day Care Employees (continues next page)

<table>
<thead>
<tr>
<th>EMPLOYEE</th>
<th>SENTENCE</th>
<th>LEGAL UPDATE</th>
<th>BASES FOR AFFIRMED APPEAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank Fuster</td>
<td>6 life terms + 65 years</td>
<td>Incarcerated</td>
<td></td>
</tr>
<tr>
<td>Violet Amirault</td>
<td>8-20 years</td>
<td>Conviction overturned 2x; sentence reinstated 1x; charges posthumously dismissed</td>
<td>Violation of 6th Amendment Confrontation Clause</td>
</tr>
<tr>
<td>Cheryl LeFave</td>
<td>8-20 years</td>
<td>Conviction overturned 2x; sentence reinstated 2x; credit for 8 years served; probation</td>
<td>Violation of 6th Amendment Confrontation Clause</td>
</tr>
<tr>
<td>Gerald Amirault</td>
<td>30-40 years</td>
<td>Served 19 years; paroled</td>
<td></td>
</tr>
<tr>
<td>Richard Barkman</td>
<td>50-75 years</td>
<td>Conviction overturned; pled guilty to 1 charge in lieu of re-trial; probation</td>
<td>Erroneous exclusion of exculpatory evidence</td>
</tr>
<tr>
<td>Frances Ballard</td>
<td>5-35 years</td>
<td>Conviction overturned; charges dismissed; record expunged</td>
<td>Violation of Discovery Statute</td>
</tr>
<tr>
<td>Sandra Craig</td>
<td>10 years</td>
<td>Conviction overturned; charges dismissed</td>
<td>Violation of 6th Amendment Confrontation Clause</td>
</tr>
<tr>
<td>Kelly Michaels</td>
<td>47 years</td>
<td>Conviction overturned; charges dismissed</td>
<td>Violation of 6th Amendment Confrontation Clause; misuse of expert testimony</td>
</tr>
<tr>
<td>Martha Felix</td>
<td>3 life terms</td>
<td>Conviction overturned; charges dismissed</td>
<td>Violation of 6th Amendment Confrontation Clause; improper admission of hearsay testimony; improper admission of expert opinion</td>
</tr>
<tr>
<td>Francisco Ontiveros</td>
<td>Life</td>
<td>Conviction overturned; charges dismissed</td>
<td>Violation of 6th Amendment Confrontation Clause; improper admission of hearsay testimony; improper admission of expert opinion</td>
</tr>
</tbody>
</table>
Before the bases for the successful appeals of those 13 day care employees are analyzed, it is important to note what Table 2 cannot convey, and that is the legal complexity of so many of these cases. Not only were the criminal trials of all of the day
Two Decades After McMartin

care employees spectacles with “the crowds and the cameras, the scandalous revelations of unseemly private behavior, inevitably made into fodder for moralists; the legal maneuvering and posturing and the ensuing public skepticism of the law’s ability to do justice” (Umphrey, 1999, p. 393), but for some, the trial that resulted in conviction was not their first trial. For others it was not their last trial, and for others still, their overturned convictions were reinstated as their cases made their way through the complicated appellate system.

A couple of examples will illustrate this point. Edward Gallup, Jr. was convicted in his first trial, but two subsequent trials in two different venues resulted in acquittals. The first trial of his mother, Mary Lou Gallup, who was accused of inserting a carrot into the vagina of a child and slitting the throat of a pet rabbit to secure her silence, resulted in a mistrial, but her second trial in a different venue resulted in her conviction. The convictions of both Gayle Dove and Michelle Noble were overturned in the East Valley YMCA case, but each provider was retried. Dove was once again convicted and that conviction, once again, was overturned; Noble, however, was acquitted of all charges. Arguably, the most legally complicated of the sample cases was that of Gerald and Violet Amirault and Cheryl LeFave in the Fells Acres case. After serving eight years in prison, the mother and daughter were involved in legal actions that resulted in their convictions being overturned and then reinstated twice over the ensuing decade. Amirault died before the case finally was closed, and all charges against her were posthumously dismissed. Her bid for a new trial once again rejected, LeFave successfully petitioned the court to have her sentence reduced to time served and was paroled into the community as a convicted sex offender.

The cases of Amirault and LeFave are illustrative not only of legal complexity, but of the unevenness of media attention to the day care ritual abuse cases. Their case garnered not only local media attention, but national and international interest due to a series of Wall Street Journal commentaries that excoriated the legal system that convicted them (Rabinowitz, 1995), a plethora of advocatory web sites that declared their innocence (D’Entremont, n.d.; Harris, n.d.), prime time television news coverage (Collins, 1999) and internationally syndicated
newscasts (CNN Live, 2004). Only the cases of Kelly Michaels in the Wee Care case, and Robert Kelly and Dawn Wilson in the Little Rascals case attracted as much sustained media attention.

The Kellers were convicted and sentenced in 1992, and their case acts as a marker, of sorts, of the end of day care ritual abuse. While investigations of day care centers occurred sporadically over the next few years, none resulted in a criminal trial of a day care employee. Yet long after this last case, and long after social workers' interest and involvement in ritual abuse cases had waned, significant legal decisions were being rendered that not only overturned the convictions of 13 of the sample day care employees, but that impacted the social work profession, as well.

Successful Appeals

As Table 2 indicates, the convictions of three of the day care employees in the sample were overturned on legal technicalities. In Richard Barkman's case, the trial judge had erroneously excluded evidence that the only testifying child may have fabricated his allegations (Michigan v. Barkman, 1990). In Frances Ballard's case, the audiotapes of the children's early interviews in which they accused her of flying them by helicopter into the mountains to be sexually assaulted by robed and hooded adults, had been reused by social workers and investigators and therefore were not available for discovery by the defense (Tennessee v. Ballard, 1993). And in Mary Lou Gallup's case, the judge had erroneously ruled that the prosecutor's notes on his personal interviews with the accusing children were exempt from pretrial discovery by the defense (Oregon v. Gallup, 1991).

Shielding and the 6th Amendment

As Table 2 also indicates, the violation of the 6th Amendment Confrontation Clause was the basis for the successful appeals of seven of the day care employees in the sample. The Clause states that in all criminal prosecutions the accused have the right to confront the witnesses against them, a right that
historically has implied face-to-face confrontation in a court of law. In each of the successful appeals based on the Confrontation Clause, however, the testifying children had been shielded, that is, allowed to testify outside the presence of the accused day care employee.

The recent history of shielding is intertwined with the claims and activities of social workers. For much of American jurisprudence, children generally were considered too fanciful and forgetful to be competent witnesses, and were therefore deemed testimonially incompetent on the basis of age alone (Goodman, 2006). But with the “discovery” of incest, social workers advocated for a reexamination of this tradition that denied children access to justice and for new legislation that would make the courtroom friendlier to children. These new pieces of legislation allowed children to testify from pint-sized chairs rather than from witness stands, or from witness stands while holding testimonial aids such as stuffed animals, or even while sitting on the lap of a support person. In some states children were exempted from having to testify at grand jury proceedings, and in others the trial process was accelerated to reduce the stresses inherent with lengthy trials (Bulkley, 1988).

Social workers also advocated for additional prosecutorial innovations that would protect testifying children from the putative trauma of face-to-face confrontations with their alleged abusers (Berliner & Barbieri, 1984; Conte & Berliner, 1981). Considered necessary for the prosecution of “ordinary” cases of incest, shielding was deemed essential for prosecuting extraordinary cases of day care ritual abuse in which the testifying children were very young and had to face in court the day care employees they had accused not only of sexual abuse, but of terrorization and even torture. Thus many states passed shielding statutes that allowed children to testify outside of the presence of the accused.

Table 3 displays the methods of shielding used in the trials of the seven day care employees whose convictions were overturned on 6th Amendment grounds. As the Table indicates, both the type of testimony shielded and the method of shielding varied from one criminal trial to another.
Table 3. Shielding Method in the Criminal Trials of 7 Day Care Employees Whose Convictions Were Overturned on 6th Amendment Grounds

<table>
<thead>
<tr>
<th>DAY CARE EMPLOYEE</th>
<th>DAY CARE CENTER</th>
<th>SHIELDING METHOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violet Amirault</td>
<td>Fells Acres</td>
<td>Small table facing jury; backs angled to defendants.</td>
</tr>
<tr>
<td>Cheryl LeFave</td>
<td>Fells Acres</td>
<td>Small table facing jury; backs angled to defendants.</td>
</tr>
<tr>
<td>Sandra Craig</td>
<td>Craig's Country</td>
<td>Closed-Circuit television</td>
</tr>
<tr>
<td>Kelly Michaels</td>
<td>Wee Care</td>
<td>Closed-Circuit television</td>
</tr>
<tr>
<td>Martha Felix</td>
<td>Felix's</td>
<td>Videotaped preliminary hearing testimony, and open court</td>
</tr>
<tr>
<td>Francisco Ontiveros</td>
<td>Felix's</td>
<td>Videotaped preliminary hearing testimony, and open court</td>
</tr>
<tr>
<td>Michelle Noble</td>
<td>East Valley YMCA</td>
<td>Videotaped investigative interviews</td>
</tr>
</tbody>
</table>

One of those successful appeals on 6th Amendment grounds deserves comment because it resulted in a landmark legal decision. In the Craig case, the accusing children's testimony that included allegations that the day care employee had sexually assaulted them after tying them to trees in the woods behind the day care center, was offered before a judge in a separate room and contemporaneously shown to Craig and the jury on closed-circuit television. Craig appealed her conviction on the ground that shielding had violated her 6th Amendment right to confront her accusers in court. Her conviction was overturned. Prosecutors immediately appealed that decision to the U.S. Supreme Court, attaching a brief from the American Psychological Association that asserts that sexually abused children often experience such emotional trauma as witnesses in courts of law that they cannot give reliable testimony, thus vitiating the very truth-finding intent of the 6th Amendment Confrontation Clause (American Psychological Association, 1990). In a controversial 5-4 decision, the U.S. Supreme Court agreed. It ruled that if the trial court makes "an adequate showing of necessity," testifying children can be shielded from
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face-to-face confrontation with the defendant (*Maryland v. Craig*, 1990). It then directed the state appellate court to determine whether the trial court indeed had made that "adequate showing of necessity." The court ruled it had not, and Craig's conviction once again was overturned. Although she was remanded for a new trial, all charges against her were dismissed six years after her arrest.

As in the Craig trial, the shielding of the testifying children in the conjoined Amirault/LeFave trial (*Commonwealth v. Amirault*, 1997), as well as the Michaels' trial (*State v. Michaels*, 1994), resulted in their convictions being overturned on 6th Amendment grounds. But it was the type of testimony that was shielded that was at issue in the other successful appeals. In the conjoined Felix/Ontiveros trial, the accusing children testified in open court but, after being dismissed as witnesses, their preliminary hearing testimony, videotaped a year before and outside of the presence of the defendants, was shown to the jury. Upon appeal, the Nevada Supreme Court ruled that because the children had made allegations about sexual abuse in the context of rituals that involved blood-drinking and cannibalism in their videotaped testimony that they did not make in open court before being dismissed as witnesses, the day care employees' 6th Amendment right had been violated (*Felix v. State*, 1993). In Noble's first trial, on the other hand, none of the accusing children testified. Rather, videotapes of the children answering questions put to them by investigating detectives and state social workers were shown to the jury in lieu of testimony. Noble appealed her conviction on the ground that her 6th Amendment right to confront her accusers had been violated. The higher court agreed, overturned her conviction, and remanded her for a new trial in which the accusing children were required to testify in open court. Noble was acquitted in that trial of all charges (*Nathan*, 1987).

Hearsay Testimony

"Excited utterance or outcry hearsay testimony" was admitted in the trials of all of the day care employees in the sample, but was one of the grounds for the successful appeals of four of them. Simply defined, hearsay is secondhand
testimony which usually is inadmissible in court because it is considered less reliable than in-court testimony, and it jeopardizes the defendants' 14th Amendment right to due process and 6th Amendment right to confront accusers (Myers, 1992).

Exceptions to the hearsay rule, however, always have been recognized by the law, but it was not until the 1980s that the excited utterance or outcry hearsay exception was codified in the Federal Rules of Evidence. Rule 803(2) states that the hearsay rule does not exclude statements made about a startling event by a person who was under stress caused by the event. The assumption here is that such statements, made in the excitement of the moment, are likely to be true and not the product of fabrication or fantasy. This exception has three requirements: there must be a discernible exciting event, the statement must be related to the event, and must be made while the person is under the stress caused by the event (Myers, Cordon, Ghetti, & Goodman, 2002). If all three requirements are met, then testimony by the person to whom the statement was made is admissible in court.

The legal reasoning of that era determined that if there is little question that incest is just that kind of "exciting event" that triggers the hearsay exception, there is even less question that day care ritual abuse is also. The allegations made in these cases of sexual abuse in the context of bizarre rituals certainly exceed the threshold of an "exciting event," and the alleged terror, threats and torture that contextualize them certainly would create the requisite stress. Thus, excited utterance or outcry hearsay testimony was admitted into the trials of all of the 22 day care employees in the sample.

It was this hearsay exception that allowed parents to testify on behalf of their children. In many states this type of hearsay testimony is admitted only when the children also testify. Jurors, therefore, heard the parents expand and elaborate upon their children's often inconsistent and sometimes even incomprehensible testimony, rather than simply repeat it. In the Kelly trial, in which children described sexual abuse in rituals that included infant sacrifice and prayers to the devil, the testifying parents wove into their very personal testimony references to the vast "body of knowledge" about ritual abuse that was being put together and circulated by social workers. They used symptom lists to explain any changes in their children's
behavior as sequelae of abuse; they used the clinical language of the master-narrative—"repression," "accommodation," "dissociation," "mind control"—to explain why their children did not spontaneously disclose the alleged abuse. In doing so, the testifying parents assumed a role newly minted for the day care ritual abuse trials. This parent-expert role required that they testify with "the passion of a parent and the equanimity of an authority" (deYoung, 2004, p. 205), but in Kelly's appeal in the Little Rascals case, the higher court ruled that this type of hearsay testimony was, in fact, inadmissible, and overturned his conviction (*State v. Kelly*, 1995).

The improper admission of hearsay testimony was also the basis for Dove's successful appeal in the East Valley YMCA case. After her conviction in her first trial was voided because of juror misconduct, the day care employee was retried on a single charge of sexual abuse that involved inserting a pencil into a child's anus. The child did not testify, however the hearsay exception allowed his parents, three other children enrolled in the day care center and their parents to testify to this alleged act of abuse. When Dove took the stand in her own defense, she denied the charge against her, but was forced to also dispute the extraneous allegations about uncharged sexual acts with children who had not been identified as victims that had been made by the testifying parents and children. She was convicted and sentenced to 20 years. Upon appeal, however, the higher court ruled that the admission of hearsay testimony about acts of sexual abuse for which she was not currently standing trial was inflammatory and prejudicial (*Dove v. Texas*, 1989). Her conviction was overturned and all charges against her were subsequently dismissed.

One of the requirements for the admission of hearsay testimony is that statements must be made while the person is under the stress caused by the event. Spontaneously made statements, therefore, best fit the legal definition of excited utterance or outcry (Myers, Cordon, Ghetti, & Goodman, 2002). In the case of ritual abuse, courts often admitted hearsay testimony about statements made after considerable lapses of time because it was successfully argued that the very terrorizing, threatening and bewildering nature of day care ritual abuse worked not only to secure the silence of children, but to generate fear that disclosure would bring harm to the very people
they were most likely to tell.

That was the posture taken in the conjoined Felix/Ontiveros trial. They were convicted on charges involving three children, one of whom did not testify in either the preliminary hearing or the trial because her therapist had insisted that she would be irreparably psychologically traumatized if she were to do so. The child, who had never disclosed to her parents and had consistently told investigators she had never been abused by the day care employees, finally disclosed to her therapist after 98 separate interviews conducted over a year's period of time. Thus the therapist's hearsay testimony was admitted into the trial. Upon appeal, the higher court ruled that in light of the fact that the child had never testified in any legal hearing, the admission of hearsay statements made after such a considerable length of time constituted reversible error (Felix v. State, 1993).

Post-Script on Disclosure Interviewing

The most visible, albeit controversial, role social workers played in the cases of the 22 day care employees in the sample was that of interviewer. The interviews conducted with the children in these cases were a hybrid of therapy and investigation (Ceci & Bruck, 1995). The typical "disclosure interview," as this hybrid came to be called, was directed not only at the therapeutic goal of assisting the children in resolving the trauma of the alleged ritual abuse, but the forensic goal of collecting details from them about the perpetrators, other possible victims, and the nature of the ritual abuse, itself.

Disclosure interviewing is rooted in the child sexual-abuse-accommodation syndrome which states that because children "never ask and never tell," abuse has to be discovered (Summitt, 1983, p. 181). Interviewing social workers, then, must be persistent in that quest, leading and suggestive in their questioning, and accepting of the fact that the "more illogical and incredible" the disclosure, and the more often it is retracted, the more likely it is true (p. 183). Rated as a particularly influential theory in the field (Oates & Donnelly, 1993), despite the fact that it lacks empirical support (London, Bruck, Ceci, & Schuman, 2005), the syndrome and the style
of disclosure interviewing it encouraged, were hardly endorsed by social workers who were actively involved in ritual abuse case-finding, interviewing, investigation and advocacy (Abbott, 1994; Bybee & Mowbray, 1993; Kelley, Brandt, & Waterman, 1993; MacFarlane & Krebs, 1986; Waterman, Kelley, Oliveri, & McCord, 1993).

Although disclosure interviews were not the bases for any of the successful appeals of the 13 day care employees in the sample whose convictions were overturned, they were singled out for harsh criticism by the higher courts in four cases. In overturning the conviction of Felix and Ontiveros, who had been accused of sexually abusing children in rituals that included animal and human sacrifices, the higher court cited the leading, suggestive and sometimes coercive interviewing that had coaxed the master-narrative from the children as reason to question the reliability of both the children’s testimony and the adults’ hearsay testimony (Felix v. State, 1993).

In overturning Michael’s conviction in the Wee Care case, the appellate court also determined that the interviews conducted by social workers were so leading and suggestive as to diminish the credibility of the children’s testimony. It took a further step of ruling that if the trial court were to retry Michaels, it first would have to hold a pretrial taint hearing to assess the reliability of the children’s disclosures. That requirement was upheld upon further appeal by the New Jersey Supreme Court that ruled that the “State must prove by clear and convincing evidence that the statements and testimony elicited by the improper interview techniques nonetheless retain a sufficient degree of reliability to warrant admission in trial” (State v. Michaels, 1994). Prosecutors declined to retry Michaels under this condition, and all charges against her were dismissed.

The issue of taint, however, was reiterated in the Amirault/LeFave case after their convictions were overturned and they were remanded for a new trial. Because prosecutors were determined to retry the day care employees, their attorney filed a motion for a pretrial hearing to introduce empirical evidence that the children in this case had been improperly interviewed. After taking extensive testimony from researchers, the court ruled in favor of the motion. Because Amirault had died before
the completion of the hearing, the court ordered a new trial for LeFave, stating that "Overzealous and inadequately trained investigators, perhaps unaware of the grave dangers of using improper interviewing and investigative techniques, questioned these children and parents in a climate of panic, if not hysteria, creating a highly prejudicial and irreparable set of mistakes. These grave errors led to the testimony of the children being forever tainted" (Commonwealth v. LeFave, 1999, pp. 6-7). The decision to grant LeFave a new trial was appealed, once again overturned, and she was remanded to prison to serve the remainder of her sentence. By this time, however, the tide of both public and legal opinion about day care ritual abuse and the role of social workers in these cases had taken a skeptical turn. In the face of mounting criticism, prosecutors granted LeFave credit for the eight years she had already served. She returned to the community under the agreement that she would not contact her alleged victims, have unsupervised contact with any children, profit from her notoriety, give television interviews, or engage in any legal challenges to clear her name (Rakowsky, 1999).

Relevance to Social Workers

It has been more than two decades since the notorious McMartin Preschool case created a ritual abuse master-narrative that recruited many social workers into case-finding, investigation, interviewing and/or advocacy. This article has focused on a sample of 22 day care employees who were criminally convicted of sexual crimes against young children. The convictions of many of them have recently been overturned, although in each case the reversal occurred after social workers' interest and involvement in these controversial cases already had waned. For that reason, it may be tempting to treat these cases as little more than footnotes in the history of the social work profession. This article's analysis of them, however, reveals two broad areas of relevance to social workers who currently are being recruited by today's new master-narratives about extra-familial sexual threats to children, whether from neighborhood pedophiles, child pornographers, parish priests
or internet predators.

First, given the fact that today’s master-narratives about extrafamilial sexual threats to children are as compelling in their moral clarity as the ritual abuse master-narrative was two decades ago (deYoung, 1996; Miller, 2002, Ost, 2002), social workers’ allegiance to the highest standards of practice is critical. This admonition is particularly important in regard to interviewing, a task for which social workers are routinely, and quite appropriately, recruited. Research shows that even interviewers who are familiar with best practice standards often drift from them when they seek to confirm their bias that abuse indeed has occurred in a particular case, or when they are pressured to determine if abuse has occurred (Warren, Woodall, Hunt, & Perry, 1996). The drift is usually in the direction dictated by the familiar, but empirically unsupported, child sexual-abuse-accommodation syndrome that encourages persistent, leading and suggestive questioning—the kind of questioning that made the disclosure interviews in the cases of the 22 day care employees in the sample so controversial (Lamb, et al., 2003; London, Bruck, Ceci, & Schuman, 2005).

That drift toward the familiar very well may be consequential. As Wood and Garven (2000) point out, the kind of improperly zealous interviewing that occurred in so many of the day care cases in the sample increases the risk that children will be falsely identified as victims and adults falsely identified as perpetrators. Yet even “clumsy interviewing” (p. 100), as they refer to interviewing that lacks some of the requisite skills identified by the profession, risks legal challenges in taint hearing, reduces the credibility of testifying children, wastes the time and resources of the justice system, and fuels the backlash against social workers that fomented as a reaction to the day care ritual abuse cases.

Second, given the fact that today’s master-narratives about extrafamilial sexual threats to children are as exigent as the day care ritual abuse master-narrative was two decades ago (Potter & Potter, 2001; Zgoba, 2004), social workers’ pacing of advocacy and action with research findings, systematic data collection, controlled clinical observations, and reflexive theory-building is critical. The trial innovations in the cases of the 22 day care employees in the sample are instructive on this point.
Vigorously advocated for by social workers on the basis of a “clinical intuition” that children will be so traumatized by in-court testimony as to render their testimony unreliable (Myers, Cordon, Ghetti, & Goodman, 2002, p. 3), the innovations have mixed empirical support. Shielding is shown to slightly increase the reliability of children’s testimony and does not significantly bias jurors against defendants (Goodman et al., 1998; Nightingale, 1993; Saywitz & Nathanson, 1993); excited utterance or outcry hearsay testimony, on the other hand, is consistently shown to be unreliable, although jurors tend to assess it as more credible than in-court testimony by children (Bruck, Ceci, & Francoeur, 1999; Warren, Nunez, Keeney, Buck, & Smith, 2002; Warren & Woodall, 1999). Based as they are on mock trial scenarios in which children testify to rather innocuous “sexual” contacts, such as touches on bare skin, these studies do not, and ethically cannot, replicate the threatening, predatory and sometimes bizarre types of sexual abuse that not only were constitutive of the ritual abuse master-narrative but also are constitutive of today’s new master-narratives about extrafamilial sexual threats to children. They leave unanswered the direction that social workers’ advocacy for child witnesses should take in these cases.

Conclusion

Much of social workers’ activity and advocacy on behalf of sexually abused children is being carried out in a climate of skepticism and criticism that began fomenting more than two decades ago as the day care ritual abuse cases became more controversial. This “backlash” has called into question the social work profession’s stock of knowledge, ideological underpinnings and ethical foundation (Ceci & Bruck, 1995; Fisher, 1995; Nathan & Snedeker, 1995; Rabinowitz, 2003). While some of that criticism clearly is unwarranted in that it holds social workers, as well as the profession, solely responsible for complicated criminal investigations, trials and legal decisions, Myers (1994) concludes that a large part of it is warranted, that is, it is a “self-inflicted wound” (p. 23) that is the result of untested claims, zealous interventions, and uncritical advocacy.

The cases of the 22 convicted day care employees in this
article's sample can inform social workers who currently are being recruited to approach today's new master-narratives about extrafamilial sexual threats to children, whether by neighborhood pedophiles, child pornographers, parish priests or internet predators. Social workers certainly must be receptive to these new master-narratives, but as the day care ritual abuse cases reveal, that reception is best when it is critical and reflexive, and the response is most efficacious when it adheres to the highest standards of practice informed by research.

References
Maryland v. Craig, 497 U.S. 836 (1990)


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This article explores how social work as a discipline has helped to negotiate professional agency in decision-making within the restructured child protection system. The narratives of child protection workers affirm that a restrictive climate does exist in child protection agencies and that it indeed shapes the way they make their decisions. This study uses institutional ethnography as the methodology for exploring the decision-making practices of child protection workers. Three forms of data collection were used: experience as data, documentation reviews and in-depth interviews.

Keywords: child protection, social work, decision-making, institutional ethnography

Introduction

The massive child welfare system restructuring and resultant standardized Ontario Risk Assessment Model (ORAM) that have emerged in recent years in Ontario have had profound impacts upon the ways in which social workers within...
the system practice. Loss of professional autonomy due to the proceduralization and standardization of practices has been of particular concern to social workers as they struggle to adjust to a system that does not trust them to make sound decisions and that, in many respects, moreover, puts procedures in place in an attempt to restrict their freedom (Powell, 1998).

In this article, we explore how social work as a discipline has helped to negotiate professional agency in decision-making within the restructured child protection system. We use the term 'professional agency' when we talk about the capacity child protection social workers have to exercise their social work knowledge, skills and clinical judgement when making decisions in the context of their everyday child protection practices. The narratives of child protection social workers affirm that a restrictive climate does exist in child protection organization and that it indeed shapes the way decisions are made. The restructured system has been designed specifically in an attempt to remove the professional agency previously awarded to social workers. However, our research shows that within that structure, child protection workers continue to exercise considerable professional agency in their complex decision-making processes.

Research findings reveal that social workers within the restructured child protection system continue to be active subjects in the processes of decision-making, contrary to the notions of worker disempowerment that currently prevail in this area.

Decision-making in Child Protection Practice

Decision-making in child protection is a complex activity that is always fraught with uncertainty. One of the issues that complicates decision-making is the dilemma that social workers face of trying to balance the child’s safety and best interests with the desire to support the family and uphold their right to privacy and freedom from intrusion. Further complicating decision-making is the fact that child abuse is not a static concept but one that has been variously defined across time and context (Cradock, 2004; Gold et al., 2001). Additionally, child protection social workers also experience considerable
pressure as their decisions have come under intense scrutiny by the public, particularly the media (Mennen and O'Keefe, 2005; Smith and Donovan, 2003). They have been accused of being neglectful on the one hand, and overzealous in their interventions on the other (Corby, 2003). Such allegations are more than simply media panic, however. The existence of these two extremes in workers' interventions has been confirmed in research (Platt, 2006).

Several studies document the origins and nature of decision-making errors (i.e., failure to protect children from harm) in child protection practice. Most authors tend to concur that errors often arise as a result of workers' utilization of various mental shortcuts and rules-of-thumb to simplify the complex and varied information they are confronted with in their practice (Gambrill, 2005; Munro, 1999). Others highlight how group-based cognitive biases lead to unfortunate decisions and outcomes in group conferences (Prince, Gear, Jones and Read, 2005). Some also caution that the use of professional judgments drawn on intuition or common sense must be curtailed because they are often prone to error (Schwalbe, 2004). Despite some evidence that individual workers' judgments are internally consistent and do not reflect a haphazard approach (Daniel, 2000), numerous studies find a lack of consistency in decision-making among professionals (Britner and Mossler, 2002; Rossi et al., 1999). This reality provides some justification for the widespread perception that standardized assessment tools are necessary to assist workers' processes of decision-making. However, a worthy counter-perspective is that some degree of error is inevitable and that workers must instead be assisted to consider an increasingly complex host of factors in order to improve their decision-making (Daniel, 2000; Holland, 1999).

Processes of decision-making in child protection have changed considerably since the introduction of system reforms in several countries. Predominantly, these reforms have involved the institutionalization of risk assessment tools. Such tools have been imposed as a way of reducing the uncertainty and fallibility of child protection work through bringing so-called scientific order and consistency to the decision-making practices of social workers (Cradock, 2004; Schwalbe, 2004). To
date, however, there is no agreement on whether the standardization of the system actually results in better decisions. While some authors believe that decision-making tools can facilitate a more efficient, consistent, and timely child protection system (Corby, 2003; Leslie and O’Connor, 2002), others comment on the lack of empirical support for the tools and the paucity of evidence that they actually lead to better outcomes for families (Leschied, Chiodo, Whitehead, Hurley and Marshall, 2003; Schwartz and Kaufman, 2004). Indeed, another perspective in the literature is that errors can actually arise from the very reforms that were introduced to improve decision-making in child protection. The new systems have been criticized for their tendency to construct clients in narrow and forensic ways (Khoo et al., 2003), which may then allow some to escape the attention of the system (Jones and Gupta, 1998). The systems have also been criticized for lacking the capacity to address the complexity of clients’ lives, which end up being reduced to numbers (Cradock, 2004; Holland, 1999). Moreover, the new systems’ focus on acute incidents and events can lead to a failure to detect chronic problems in families such as neglect (Daniel, 2000; Platt, 2006).

Some authors claim that the drastic overhauls of child welfare systems have constrained the professional autonomy and discretion of social workers practicing in child protection (Khoo et al., 2003; Munro, 1999, 2005). In particular, because system reforms have led to the proceduralization and routinization of practice, child protection workers are restricted in their ability to work in ways other than those that have been prescribed for them (De Montigny, 2003; Parada, 2004; Swift, 2001). Additionally, workers may experience lost autonomy with regard to decision-making because many system reforms introduced in contexts of mistrust, fear and scrutiny resulting from the deaths of children, encourage them to follow procedures even when their professional judgments dictate other solutions. Doing so may mean overlooking important contextual factors (Munro, 2005).

Other researchers are confident that workers are able to retain their professional autonomy in decision-making in spite of the proceduralization of practice (Leslie and O’Connor, 2002; Smith and White, 1997). Still, there is no literature that explores
precisely how workers are able to exercise their autonomy in relation to their everyday decision-making. While there is literature that advocates the need to focus on the everyday decision-making processes of workers as opposed to institutional protocols and policies, this has not been done specifically with regard to their negotiation of professional agency. The research presented here aims to address this latter gap in the literature. Further, it should be noted that while literature exists regarding similar experiences of the restructuring of child welfare and other social services in other Canadian provinces and in Britain as well as other international jurisdictions the focus here is exclusively on the Ontario experience (Dominelli, 2004; Kinjerski and Herbert, 2000; Parton, 1998).

Method

This study uses institutional ethnography as the method for exploring the decision-making practices of child protection workers. This method of inquiry investigates the links among different levels of interaction, namely the everyday experience of people placed in particular settings, the organization of those settings, and the processes that are expressed in governance and administrative protocols (Campbell and Gregor, 2002; Smith, 1987). The exploration does not start from theoretical positions, but with the identification of an area of everyday practice that constitutes the experience to be explored. The study concentrates on two areas of child welfare practice: 1) screening processes and 2) the investigative (i.e., intake) process in child protection.

Three forms of data collection acceptable to institutional ethnography were employed. First, following Campbell’s (1998) recommendation regarding the use of experience as data, Parada, the first author, reflected on his years of experience within the child welfare system as a front-line social worker and as a supervisor. This reflexive work involved examining the disjunction between what the institutional protocols and statements have stated are the practices of social work in the restructured child protection system, and the local everyday realities of child protection workers. As an institutional insider, Parada was able to investigate the everyday world as
it is put together in the practices and activities of actual [social workers] (Smith, 1990).

Second, two kinds of documents were reviewed by the authors as data sources for this study. The first category consisted of print materials that provided context and background for child welfare reform in Ontario. Documents from the [Ontario] Ministry of Community and Social Services included the *Ontario Child Mortality Task Force Final Report* (Ontario Association of Children’s Aid Societies, 1997), the *Child Welfare Accountability Review* (ARA Consulting Group, 1998), and the Provincial Protection Standards (Ontario Ministry of Community and Social Services, 1999a). Three reports from the Ontario Ministry of the Solicitor General on inquests into the deaths of children receiving services from Children’s Aid Societies were also reviewed (Acheson, 1998; Bennet, 1998; Porter, 1998), as well as the new *Child and Family Services Act* (Ontario Ministry of Community and Social Services, 1999b). The second set of documents reviewed included those introduced to guide the practice of the child protection system. The Ontario Risk Assessment Model (Ontario Ministry of Community and Social Services, 1999a) and the new funding formula (Ontario Ministry of Community and Social Services, 1998) were analyzed in depth for an understanding of the restructured regime of practices. Even more important for the purposes of the study was an effort to recognize how these documents shape the activities of social workers (Parada, 2002).

Third, in-depth interviews were undertaken with a small sample of child protection workers (eight social workers and two supervisors) who spoke as individuals, not as representatives of the agencies for which they were working at the time of the interviews. A semi-structured interview schedule, geared to elicit answers related to actual practices was developed. The first few participants were recruited through professional networks. Following this, the remaining participants were recruited through a snowball sampling process, wherein each interviewed social worker recommended other colleagues as possible participants (Neuman, 2003). In total, twenty-five social workers in the Greater Toronto Area were contacted and ten responded. There were eight women front line social
workers with experiences ranging from two to seven years and there were two male child protection supervisors each with approximately ten years of experience in the system. The interviews were audiotaped and transcribed for analysis. Themes and sub-themes were developed through a process of immersion in the data, as the authors engaged in repeated cycles of reading and rereading the interviews to reach a point of saturation (Borkan, 1999). A research assistant also coded all the interviews using the qualitative software package NVIVO. The authors then identified and discussed themes suggested by the social workers in relation to the decision-making processes.

There are limitations to this study. First, most of the experience on which the authors reflect in the analysis and writing of this article has been taken from urban agencies in Ontario. No attempt was made to reach rural and Northern and Aboriginal child protection agencies that may be undergoing a restructuring process quite different from the one analyzed here. Moreover, because the sample of social workers and supervisors who were interviewed is small, we are not able to generalize from these data. As with any qualitative study however generalization is not the goal.

Screening and Intake Decision-making
Processes under ORAM

The practices of social workers in the child protection system in Ontario are required to adhere to the Child and Family Services Act (CFSA), provincial legislation that outlines the legal definitions of child abuse and neglect and determines the grounds for child protection intervention. The decision of whether the child protection system will become involved with a case is therefore based entirely on the dictates of the law. Additionally, there are specific decision-making tools that child protection workers are required to use in their work that define the limits within which decisions are made. These tools are the Eligibility Spectrum, the Safety Assessment document, and the Risk Assessment document.

When someone who is concerned about a child calls a child protection agency, a screening social worker is responsible for using the Eligibility Spectrum to assign the call an eligibility
code that directly determines whether the call falls within the legal child protection mandate. The Eligibility Spectrum also prescribes what actions, if any, must be taken in response. The Eligibility Spectrum is an expansive manual that outlines every possible scenario of child abuse or neglect that could be described by a caller. For example, if the caller reports that a child has a bruise on her back that she has said her caregiver gave her the previous night, the screening worker consults the manual, finds the specific situation, and applies both the corresponding numeric code referring to the nature of the harm (e.g., physical harm by commission) and the alphabetical code referring to the severity of the harm (i.e., from A to F). The Eligibility Spectrum outlines all actions for the screening worker, including what circumstances qualify as severe enough to warrant opening a case, and the amount of time (i.e., 12 hours or 7 days) within which an intake worker must investigate the case.

Once the screening worker assigns an eligibility code, he or she must consult with a supervisor who will either approve the code or assign a different one based on the referral information. Depending on the code ultimately assigned, the referral will result in either a Report Received Full Investigation Required (RRFIR), whereupon an investigation will ensue, or a Report Received Full Investigation Not Required (RRFINR), whereupon a service note will be made with no subsequent investigation.

When a case has been opened, an intake social worker investigates the concerns by visiting the family, typically in their home, and interviewing the children and their caregivers. The worker's decision-making process at this point revolves around the immediate safety of the children if they are to remain in the home. The Safety Assessment, a decision-making tool that with 12 categories of possible concern is used to directly guide the questions the intake worker asks the family members. Based on the answers to these previously determined questions, the tool then guides the intake worker's decision-making in terms of whether or not the child is 'safe' or 'unsafe' to remain in their home for that night. The worker must complete the Safety Assessment document within 24 hours of seeing the family and must also consult with his or her supervisor to gain approval on decision they have made.
If an intake worker decides that the child is safe to stay in the home based on the Safety Assessment, but also believes there are still ongoing protection concerns that the family may need support with, the case is transferred to the Family Services department for ongoing support. The intake social worker must fill out the Risk Assessment document, which is used as a longer-term predictor of risk to the children, within 30 days of the initial referral. The Risk Assessment is a lengthy document, one that goes into a deeper analysis of the family’s circumstances than the Safety Assessment document. For example, the Risk Assessment contains categories pertaining specifically to the caregiver, to the child, and to the family dynamics. Issues such as the caregiver’s mental health as well as their own experiences of abuse must be assessed by the intake social worker.

If the worker decides in the initial interview that the child is safe and the protection concerns have not been verified, she will close the case in consultation with her supervisor. If in the initial interview with the family however, the worker’s Safety Assessment decision is that the child is not safe to remain in the home, she must consult with her supervisor and begin the process of apprehending the child. At this point, court proceedings become involved and the worker is required to fill out a number of court documents.

The Role of 'Professional Agency' in Child Welfare Workers’ Decision-making Processes

As stated earlier, we use the term “professional agency” to mean the extent to which child protection workers bring their own knowledge, skills and clinical judgement into their decision-making processes. We further conceptualize the notion of social worker’s ‘professional agency’ as including those creative and productive actions that influence how social workers react when faced with complexity. We recognize that social workers may respond to their particular case situations in unanticipated and innovative ways, some of which may hinder and others which may reinforce or encourage change and support to clients’ needs. Although we are aware that an analysis of power relations reminds that any understanding of
professional agency must be placed in the context of structural, institutional, and/or intersubjective constraints, we agree with Butler’s notion of agency that recognizes that subjects are not merely passive “ciphers of power” (Lloyd, 2005, p. 91).

When we interviewed child protection workers, the most striking quality of their narratives was that they seemed to have two distinctly different ways of speaking about their acts of decision-making. The first, which was predominantly employed at the beginning of interviews, was characterized by a focus on textbook definitions and rote learning of protocols, such as those connected to the legislation and documents described above. The second speaking style, which did not tend to emerge until later in most interviews, was representative of a more fluid and holistic process. The type of decision-making reflected in the first instance is governed by strict protocols with apparently little professional agency involved. In the second instance, however, decision-making is much discretionary nature.

We discovered that social workers have learned the child protection system very well “by the book,” but this knowledge also allows them to adapt the system’s tools to bring in additional decision-making factors. As a result, their decision-making processes are more complex than what is implied in the child protection manuals. Workers actually exercise greater professional agency in their work than the rhetoric surrounding the restructured Ontario system would suggest. It is important, however, not to place too great an emphasis on the separateness between the theory and the practice of decision-making, as both of these seem to be intertwined for the workers who participated in our study. These findings demonstrate that workers base their decisions very much on established protocols but they also draw upon their own social work skills and practice wisdom to adapt the tools they are required to use.

The capacity to use social work skills in decision-making

Contrary to what is often cited in the literature about the stolen professional judgment of social workers in the restructured system, the narratives of the workers we interviewed reflect an enduring determination to continue utilizing their social work assessment skills when it comes to processes of
Negotiating Professional Agency

decision-making. These workers carefully consider the system’s guidelines when making decisions, but their own judgment often takes precedence as long as they believe it can be supported by a “rational” argument. In certain situations, the rules are placed aside, adapted, or contested by the individual worker. For example, one worker commented on the freedom he experiences to present arguments against following eligibility guidelines, based on his own assessment of a situation:

If the ORAM is saying one thing, that’s when the worker has to justify it should be another. So if the ORAM is saying [the information in the call] is just below the intervention line, that is where the worker’s “assessments” have to come in. And they have to justify why they think we should turn this into a case, or turn it into an urgent case when the ORAM says it shouldn’t be. And that is based on your conversation with the referral source, the history you gather, that type of thing. (Interview 8, Intake worker)

Another worker commented on the interplay between the rules and the worker’s ability to use their assessment skills, given the constraints of the system:

You are somewhat boxed in [in the child protection system]. You have to follow certain guidelines. I think the one that has the greatest of impact, I would believe, is the Safety Assessment because you are using that to determine whether a child stays in the home or whether a child leaves the home. The forms do not give you a lot of opportunity to move away from it. They ask a certain question you have to answer within. [However], the form that really allows you to use your social work skills is the Risk Assessment because it does a lot more about assessing the family. It allows you to use your brain more. (Interview 5, Intake worker)

The value that this worker places on being able to “use your brain” in child protection is one demonstration of how despite all of the changes in the system, workers are still active agents who make their own decisions regardless of the structure imposed upon them. In response to a question of whether
social workers are actually able to make decisions based on their social work knowledge, a supervisor said the following:

I don’t think decision-making here [in a particular child protection agency] is routine. But, I think that we have worked extremely hard to create that culture of “Let’s really think about what we are doing. Let’s critically examine why we open a case versus why we don’t open a case.” You have to use [the system’s tools] as a framework and then look at the family and then think of everything you learned in social work and then come to a decision. Domestic violence is a great example. A mother and a father are involved in a domestic [dispute] and the child is present. So we believe that the child is at risk of emotional harm. So we open a case because of that. However, when you start thinking about social work, then you start thinking, okay, [the woman] just got assaulted by her husband. She did everything she could to prevent the assault. However, now, as a victim of domestic violence, we are blaming her for being a bad mother because she got assaulted. Do we re-victimize somebody? So there is huge analysis that goes into all those types of decision-making processes. (Interview 3, Supervisor)

One of the most striking manifestations of the workers’ capacity to continue using their social work skills concerns the understanding they have developed about decision-making tools such as the Risk Assessment. Participants’ interviews reveal that workers have discovered ways of simultaneously using decision-making tools—which have typically been constructed as entirely prescriptive toward practice—and maintaining their professional agency in relation to clinical decision-making. As one participant said, “As professionals who have a very difficult and very responsible job to do, we can’t blindly do things because a book tells us to” (Interview 3, Supervisor). Indeed, it is clear by the workers’ narratives that they do not mindlessly or mechanistically fill out forms but rather use considerable clinical judgment in their decision-making processes. Significantly, they often tend to use the decision-making tools to corroborate the decisions they have already made:
I think that the worker makes their decisions before they use that tool. I think the purpose of the tool is [just] a guideline of things you should be looking at. (Interview 8, Intake worker)

We fill [the Risk Assessment] out. The tool helps to clarify. It helps to articulate the issues and concerns. But it is not a tool that is used very often to make that decision. (Interview 4, Supervisor)

One of the participants we interviewed offered an explanation as to why workers consistently use the decision-making tools, particularly the Risk Assessment, in this after-the-fact way:

The ability to use the Risk Assessment for its intended purposes is very difficult. I think that the purpose of the Risk Assessment is that it is a decision-making tool. So, you have a problem. You need to make a decision. So, before you get to the decision, you complete the Risk Assessment to help you decide something. [But] that’s a very difficult thing to do because as you are getting this information, you are going to start to make a decision over here. And then after you get this information, now you have to go back and fill out this document. Instead of helping you make the decision, maybe what the document does is it verifies your decision for you. (Interview 3, Supervisor)

Participants demonstrated their commitment to “keeping the social work” in child protection decision-making in another way as well. They spoke in different ways about going beyond the limits of the ORAM documents and procedures when faced with the need to make a decision, in order to reflect on social work issues. As one worker said, “You often go well beyond the questions that are listed [on the documents] for your own perception of what is happening in the family” (Interview 8, Intake worker). Another participant spoke about the fact that she uses social work theory to guide her actions when intervening with families:

I know this may sound kind of geeky, but I have some
of the theory in my head that I like to use. I don’t know whether other workers go through it or not, but I do. I process in my head “How was my approach?” And “How could it have been different?” If the parent was out of control and I walk out of there I think to myself, “What could I have done that would have made it different?” You know, if they are going through certain things, I use theory. I use a lot of the concept of the cycle of violence. (Interview 2, Intake worker)

Other participants talked about the importance of understanding client families in their social, political, economic and cultural contexts, an approach which can mean maintaining a structural analysis of their struggles and problems, in spite of the more individualistic focus of the prescribed tools:

[Interviewing families] becomes a matter of style. And I think that the kind of information you get will depend on your style and your ability to understand the social conditions, for example, in which people live, the oppressive nature of their existence for example, [or] the horrific nature of the referral information. I mean, all of these things will influence, or you need to be aware that they can influence, your intervention. And that creates a style that you investigate with. (Interview 7, Intake worker)

Considering the context of family life in decision-making also includes the cultural background of the family, an aspect of social work assessment that critics have argued is missing entirely from the current child protection system:

People bring with them very different cultural backgrounds and that is what part of the assessment is. You find out what background they are from, how do they raise this kid. That gives you an idea of why they are raising the kids the way they are. (Interview 2, Intake worker)
Practice Wisdom as an Important Aspect of Decision-making

The second main theme that emerged from these interviews is the participants' descriptions of their level of experience in the child protection system as highly determinant of how they make decisions. For example, some spoke candidly about how nervous they were about making decisions when they were new to the job, and how they followed each protocol to the letter out of fear of making mistakes. They contrasted that behaviour with how they operate on the job today, as workers with experience and an in-depth understanding of the workings of the child protection system. One participant described how that process can unfold:

[Workers] are supposed to be a very A, B, C, D. But in real life, it just doesn’t happen that way. We have a flowchart that says: call comes to the agency; eligibility worker takes the information; eligibility worker consults on the case; eligibility worker documents the information. So there is a very step-by-step process. What happens, however, is that as people become more experienced, and as they become more comfortable, they develop their own style of working. Nobody is going to work according to some sort of rigid structure once you are very familiar with the job. (Interview 3, Supervisor)

Once workers have experience with the system, they start to make decisions based on their practice wisdom, rather than simply blindly following the dictates of the institutional protocols.

Some participants talked about using their intuition or gut instinct to guide decisions. One worker explained the gut factor as a sensory experience of “viewing how [the family] interacts, listening to how somebody talks, and listening to tone of voice” (Interview 6). These types of sensory observations provide information the worker subsequently uses to make decisions. This approach seems to be an ability that develops as the worker becomes more experienced in the child protection system:
I guess the longer you work here the more you can assess these things more quickly. So if I am out there and looking around and hearing what the kids say, you sort of get in the back of your mind [the feeling that] this [case] can be closed or this can be transferred. (Interview 6, Intake worker)

Another worker echoed this sentiment when asked about the factors guide their decisions making. The gravity of the decisions workers make in the field is quite evident in her response:

When you are out there, you are doing the investigation, you are seeing what’s going on. And again, “gut,” meaning, if you feel that the mom or the dad is going to allow the alleged perpetrator back into the house, right there, you know you either have to find an alternative caregiver for this child, or the child has to come into foster care. So in terms of the decision of whether a child is removed, that determines it. (Interview 5, Intake worker)

Another key issue related to experience in the child protection system is the participants’ description of consultation with supervisors as an activity that is adapted to the needs of the particular worker, depending on their level of familiarity with the system procedures. Interestingly, participants generally reported either having or being a supervisor who trusts the judgment of workers and permits them to exercise professional agency in their decision-making processes. Thus, although in theory consultation is used as a site of surveillance of workers’ decisions, in practice this aspect is not prominent. The participants recognize the need to have official consultations in order to meet system guidelines, but they do not generally “buy into” the monitoring purpose of the consultations, as illustrated by the following participant:

I have workers that work quite autonomously. For them, the consultation isn’t so much about getting approval as it is about just making sure that the accountability piece is taken care of. Some of them were coming from the previous system and were autonomous and have
been able to adapt to some level because there has been a certain trust within that supervisory relationship that they can go out, they can do their work, they can still call in and inform the supervisor of what they are doing. And they still tend to be able to make decisions. (Interview 4, Supervisor)

Apart from treating consultation as a formality that must be completed in order to comply with system regulations, workers and supervisors also appear to be actively using consultation in the same collaborative way that it was used before the system restructuring took place, as shown by the following exchange:

Participant: [My supervisor and I] occasionally have disagreements about transferring a case.
Interviewer: Oh, so what happens when you have a disagreement?
Participant: More discussion, more information gathering, and those sorts of things, so that you make a more informed decision, or so that one person can prove that their opinion was right or better or whatever. So, yes, there is the freedom to argue about it, with my supervisor at least. (Interview 6, Intake worker)

The degree of freedom a worker has with his or her supervisor is closely related to the worker’s level of experience in child protection. Below a supervisor and an intake worker describe the differences in the decision-making processes among workers and supervisors, depending on the individual worker’s experience in the field:

Decisions are, ideally, jointly made. I think, if we were to be honest, it would vary. I think there are workers who have confidence and experience, who have been here for a long time, who will go out, who will do their assessment, will make a judgment and call me. And so in that sense, I think they make their own decisions. At the end of the day though, I need to sign off and say, “Yes, I agree.” There are other workers who call, who may not be as clear. They may have a sense, and they may have some idea about what they think, and they
need me to guide them a bit. And I think that is the function of experience. (Interview 4, Supervisor)

I think the longer you have been in it gives you more autonomy as well. You know, if you have only been working here for nine months or something like that, your supervisor is not going to give you the autonomy you would have at three years, [so] that I'll go in and check and say this is what I saw. You know, if the child is safe, okay, fine. Whereas if you are a newer worker, the supervisor is going to sit down with you and go over the factors, I think, more closely. (Interview 6, Intake worker)

Discussion and Implications

Social work practice in child protection is not a science or an exact practice, despite many recent attempts to engage in so-called outcome and evidence-based practice (Leslie and O'Connor, 2002). Social workers in this study were able to exercise their autonomy, professional agency, through their use of intuition, but that common sense approach was also likely grounded in internalized institutional assumptions of practice.

There is an interaction between a structured system that attempts to curtail the non-standardized practices and active social workers with agency to make decisions based on their own social work knowledge (Parada, 2002). The context in which social workers act is not simply an external horizon. Their actions also affect the social context. Social workers describe feeling safe in knowing there is a structure while at the same time some room to make their own autonomous decisions. As one participant noted:

Social workers will always make decisions regardless of the structure. You fit the structure into your thinking, you don’t fit your thinking into the structure. Now we can just explain it better. (Interview 3, Supervisor)

Workers also described feeling a sense of freedom in how they approached the system. They were able to maximize the
usefulness of having a rigid structure, while also working to humanize that structure and keep the social work element in child protection. Perhaps one of the most important decisions social workers deal with then, is not the decision to open a case or to apprehend a child, but the decision of how to approach the system itself to ensure it can be used in the most compassionate and flexible way possible to assist and meet the needs of families.

I feel very, very happy that I have a system in place where I can pass on liability. You are checking things with the supervisor. But more than that, it is kind of a reflector for you. They challenge your decisions. But at the same time, that check and balance frees you to make decisions so that you don't just make decisions with no check and balance. It creates a sense of freedom for me in the field. But, yes, I think there is fair autonomy. (Interview 7, Intake worker)

Conclusion

The Ontario child welfare system is under a new transformation agenda which aims at bringing a certain level of flexibility to the system. Differential response models, alternative practices to court orders, admission prevention, kinship care, and customary care are among the new changes being introduced into the system. Concomitantly, new forms of decision-making processes will be introduced into the system that will allow families, child protection workers, and others to be involved in deciding what is best for the child. Perhaps the acknowledgment of the implications of a blind following of standards in itself is not a measure of better protection of children and better service to their families. As an Ontario Ministry of Children and Youth Services document notes, "A high standard compliance rate however does not mean that children are better protected or their well being...improved" (Ontario Ministry of Children and Youth Services, 2005).

Social worker professional agency in decision-making which includes lessons learned from social work education will remain an important component in the functioning of the system. Worker participation in the new community-based
service model will require active actors with knowledge beyond a simply forensic and narrowly conceived practice. The system is once again bringing social work knowledge to the practice of child protection. Once again social work as a discipline will be required to engage in new forms of negotiation within the newly ‘transformed’ system.

References


A Critique of the Global Trafficking Discourse and U.S. Policy

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This article examines the dominant discourse on trafficking in persons and the implementation of international and U.S. policy to address trafficking globally. Features of the United Nations Protocol and the Trafficking in Victims Protection Act demonstrate how trafficking frameworks currently in place contain underlying fears of migration and female sexuality. The implications of policy on the construction of third world women as “victims to be saved” through governments, National Government Organizations, feminists and the media will show how these misrepresentations only reinforce racism and dualistic simplifications of a complex issue. An emphasis is placed on the importance of women’s agency and the possibility of multiple realities. An alternative way of thinking about human trafficking and related policy through a labor rights, migration and human rights framework is proposed.

Keywords: feminist debates, sex trafficking, sex work, social policy, transnational migration

A critical analysis of the discourse on trafficking in persons requires an understanding of the discursive history behind it, the feminists’ debates surrounding it, and the international and U.S. policy designed to address it. Trafficking in persons is considered to be the forced, illegal movement of people across national and international borders and enslavement of those individuals in their destination country. While forced labor migration is a violation of human rights, not every case of illegal...
movement across borders is forced.

I will argue for a view of trafficking "as the trade and exploitation of labor under conditions of coercion and force" (Kempadoo, Sanghera, Pattanaik, 2005b, p. viii). This perspective addresses trafficking as transnational migration for labor with a focus on the unsafe working conditions of migrants and their rights as humans. I will argue that the current trafficking framework, and the resulting policy, harm both migrants and sex workers. The latter part of this analysis will critique the U.S. policy designed to 'combat' trafficking, the Trafficking of Victim Protection Act (TVPA) of 2000, and its re-authoriza- tion (TVPRA) of 2003, in order to explore the complex effects of this policy on migrants, sex workers, and other marginalized groups. This critique will demonstrate how those countries holding power and privilege have domineering policies and imperialistic frameworks and ideologies that are imposed upon the rest of the world.

This analysis utilizes a third world feminist theoretical framework along with post-modern feminist theory to critique the trafficking in persons discourse. I use the term discourse, inspired by Michel Foucault (1972), to describe the set of accepted and relevant concepts related to trafficking which have become socially legitimized as knowledge and truth within society. I challenge this understanding of truth around trafficking since it oppresses and omits the voices of migrants from the global south and sex workers. A global feminist lens that focuses on the issues of race, ethnicity and culture as they intersect with class, gender and global economics and politics will be used. Third world feminist theory examines how global economic inequalities, including colonialism and imperialism, affect the experiences of women, taking into account the intersectionalities of sex, race, ethnicity and class (Parpart, Connelly, Barritteau, 2000, p. 65). Postmodern feminism is concerned with discourse and language, in particular with "previously silenced voices, for the specificity and power of language and its relation to knowledge, context and locality" (Parpart, et. al, 2000, p. 68). It is the hegemonic position of the global North that has dominated the construction of the definition of trafficking and its subsequent policy. I will demonstrate how underlying western fears of migration and the sexuality of women have
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contributed to the construction of sex trafficking as a social problem that is equated with prostitution. International and U.S. policies with underlying motivations may generate more harm to migrants and others working in the sex industry and targeted under the trafficking framework.

Feminist Debates

Historically, "trafficking in persons has been equated with prostitution" (Ditmore, 2005, p. 108). The definitions of trafficking and prostitution have been informed by opposing feminists' perspectives and theoretical frameworks. The abolitionist approach asserts that prostitution is a violation of human rights, analogous to (sexual) slavery (Bindman & Doezema, 1997) and "an extreme expression of sexual violence" (Outshoorn, 2005, p. 145). The belief is that no person can truly consent to prostitution, no woman would choose to prostitute herself by free will, and a woman who engages in prostitution is a victim who requires help to escape sexual slavery (Outshoorn, 2005). This point of view applied to trafficking always involves a victim of force, coercion and/or deception. Outshoorn (2005, p. 146) asserts that from this lens the "trafficking of migrant women is always seen as against their will; they are by definition victims of trafficking. According to abolitionists, trafficking is seen to be caused by prostitution, making the best way to fight trafficking the abolition of prostitution." While the abolitionist view of prostitution, informed by radical feminist theory, is driving the current trafficking discourse and influencing U.S. policy, it is only one side of the debate.

The other major trafficking discourse is the sex workers' rights approach, which views prostitution as a viable option and a choice that women make in order to survive that should be respected, not stigmatized (Outshoorn, 2005; Chapkis, 1997). The pro-rights or sex worker perspective is supported by the belief that women have the "right to sexual determination," the right to work in safe labor conditions, and the right to migrate for sex work wherever they choose (Outshoorn, 2005, p. 145). For this group, "it is not the work as such that violates women's human rights, but the conditions of deceit, violence, debt-bondage, blackmail, deprivation of freedom of
movement, etc. be it in prostitution, in domestic labor, or in the commercial marriage market" (Wijers & Van Doorninck, 2005, p.2). Some assert that women who are in these violating conditions "can be victims of trafficking, but not all women sex workers crossing borders are victims of forced prostitution" (Outshoorn, 2005, p. 147).

Defining Trafficking

Trafficking has been nationally and internationally defined through the use of ethnocentric language and western assumptions. Scholars use "trafficking" interchangeably with diverse concepts, such as: illegal immigration, modern slavery, prostitution, and the sexual exploitation of women. Trafficking definitions often fail to distinguish clearly between trafficking and voluntary consensual migration, often combining women's migratory movement with trafficking (Kapur, 2005). Furthermore, Piper (2005) asserts that trafficking has to be seen as part of the reality of migration patterns, mainly undocumented flows. Taking into account economic globalization, O'Neill (2001, p. 156) presents trafficking as "the total commoditization of human beings traded across borders, as is the case with any other good." Definitions of trafficking are highly contested among scholars, National Government Organizations (NGOs), feminists, and governments, thus posing challenges in conducting research studies, reporting statistics and making generalizations.

Historical Fears of Sexuality and Migration

The issue of trafficking came up within the international human rights discourse and took on a moral framework. The document that set the standard for the United Nations (UN) to continue further resolutions on trafficking and prostitution was the 1949 UN Convention for the Suppression of the Traffic in Persons and Exploitation of Prostitution of Others (Saunders & Soderlund, 2003), the first international instrument that dealt with trafficking as forced prostitution. Even though this was not ratified by all countries, it still served as a model for future legislation (Doezema, 2002a). The 1949 UN Convention represented an abolitionist notion of prostitution
as exploitation and as being "incompatible with the dignity and worth of the human person" (Ditmore & Wijers, 2003; Saunders, 2005).

Historical patterns in the levels of public concern in the U.S. over the trafficking of women and children are linked to periods of increased immigration (Saunders & Soderlund, 2003). The historical discourse on immigration and its links to trafficking is emphasized by Pattanaik (2002, p. 218) who states that "the term which was used to describe the ensuing abuses in the process of migration was 'trafficking.'" The U.S. immigration policies in the past are known for their racist, discriminatory, and exclusionary stances, out of fear for the "other," the unwelcome foreigner.

Racism, as it relates to sex trafficking, is raised as an issue for analysis by various feminists who critique the dominant sex trafficking framework. In response to the fear of 'white slavery,' Congress passed the White Slave Traffic Act in 1910, also known as the Mann Act. This act prohibited unmarried women from crossing state lines for immoral purposes and it criminalized interracial couples (Saunders & Soderlund, 2003, pp. 3-18). Under the Mann Act, in 1914 more than 70% of the convictions of women were related to the voluntarily transportation of women for prostitution or other immoral purposes (Saunders, 2005). Racist immigration laws passed in the 1920s, Immigration Act of 1924 and the Temporary Quota Act of 1921, led to strengthening U.S. borders and the restriction of migrants from Eastern and Southern Europe and Asia. The period afterward did not see trafficking on the U.S. and international agenda to such an extent or urgency as it was seen to resurface again in the 1990s (Saunders & Soderlund, 2003).

Doezema (1998, p. 44) describes how the 19th century sex slave was "a white woman, victim of the animal lusts of the dark races" and in the 21st century, the racism changed its focus to exaggerate the new sex slaves as "passive, un-emancipated women from the developing world." In the 1800s Chinese women and other women of color were viewed as overly sexual, deviant and promiscuous, as were Mexican women at the turn of the century. It was at this time that migration was on the rise so the government felt the need to create a moral fear and panic over 'the other.'
A historical context of socio-political, religious, and economic perspectives in the U.S. situates the current U.S. policy within a racist, heterosexist, hegemonic framework that harms women through so-called 'protection' and continues to colonize. The different feminist perspectives of prostitution throughout history have also influenced policy and public ideas about trafficking and the need to 'protect victims.'

The Influence of NGOs on Trafficking Policy

In November of 2000, NGOs played a major role in the development of the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children. The presence of two different NGO-lobbying groups, with opposing feminist views on sex work and trafficking in persons, had the greatest influence on the UN Protocol.

One of the lobbying groups was the Human Rights Caucus, which consisted of the union of human rights groups, anti-trafficking organizations and sex worker's rights activists. This group consisted of the Global Alliance against Traffic in Women (GAATW), founded in Thailand, and the Network for Sex Work Projects (NSWP) who distinguished between forced and voluntary prostitution, in support for sex work safe labor conditions (Saunders, 2005; Outshoorn, 2005). The work of the Human Rights Caucus and other anti-abolitionist NGOs challenged the trafficking framework and succeeded in pushing for a broader definition of trafficking into the UN Protocol. These NGOs were successful in advocating for the inclusion of men, women and children, as well as for labor and human rights for those working in other industries, such as domestic work, and agriculture (Saunders, 2005).

The opposing side consisted of feminist NGOs and feminist abolitionists such as the American-based Coalition Against Trafficking in Persons (CATW), the European Women's Lobby (EWL) and the International Abolitionist Federation (IAF). This group maintained the primary view of prostitution as violence and sexual slavery. The victim stance taken by the abolitionist group was in contrast to the sex workers rights perspective that was concerned with women's agency. In this context, women's agency relates to "whether or not women can actually choose to work in the sex industry... and whether trafficking should
be defined by the nature of the work involved or by the use of deceit and coercion” (Ditmore & Wijers, 2003, p. 82).

The UN Protocol’s trafficking definition was finally agreed upon even though it allowed a certain degree of flexibility in its interpretation by the nations that signed it. The final definition of trafficking, as stated in the UN Protocol to Prevent, Suppress, and Punish Trafficking on Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime, is stated as follows:

“Trafficking in persons” shall mean the recruitment, transportation, transfer or harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of giving or receiving payments or benefits to achieve the consent of a person having control over another person, for the purposes of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs. (UN Protocol 2000, p. 2)

In this framing of trafficking, there is a distinction between forced and voluntary prostitution. The inclusion of force or deception as being essential to the UN Protocol trafficking definition marked an important departure from the abolitionist perspective of the 1949 Convention. The UN Protocol definition also included trafficking for the purposes other than prostitution, and the focus shifted from morality and women’s sexuality to addressing working conditions and crime (Ditmore & Wijers, 2003).

Some of the language written into the UN Protocol still allowed for the transformation of rights into privileges that governments could interpret either to work for or against migrants. The ambiguous language present in the international document and the lack of strong human rights protection language was not ultimately included by government delegates (Ditmore & Wijers, 2003). The interpretation of the UN Protocol
by individual nations did not prevent a nation from using a moral lens to focus on women’s sexuality, playing a major role in how U.S. trafficking policy was developed.

Doezema (2002b) points out that the exclusion of prostitution from the definitions of trafficking, and broadening the focus to include other types of labor, still created the problem of categorizing migrants into “guilty” versus “innocent.” Critical analysis points to the danger of distinguishing between ‘innocent victims’ (who are forced and coerced as deserving pity and the criminalization of those who have abused her) versus the willing “‘whore’ who has sacrificed her right to social protection through her degraded behavior” (Bindman & Doezema, 1997, p. 6; Doezema, 1998). There is a dichotomizing of good versus bad: between innocent women who deserve protection and guilty women who deserve the circumstances they may get into.

Shah (2004) takes this concept further by applying it to women globally. This analysis looks at how ‘forced’ sex workers are represented and portrayed as living in the global South, having been coerced or abducted, or having no other option but to work in the sex industry because of their dire economic conditions. Shah (2004) contrasts this image to the ‘Western’ sex workers of the ‘global North’ who symbolize privilege, immorality, and free choice to enter into the sex industry. These contrasting images serve to construct third world women as powerless victims, without agency and bound by their circumstances. This duality of guilty sex worker versus deserving migrant, along with the construction of the third-world victim, is evidenced in the development of U.S. Policy to addressing trafficking.

U.S. Trafficking Policy

Trafficking policy in the U.S. was formed and supported by religious leaders, neoconservatives, abolitionist feminists and NGOs. Michael Horowitz, a neoconservative from the Washington, D.C.-based think tank, the Hudson Institute, formed a coalition with powerful evangelicals who pressed for legislation that would become the Trafficking Victims Protection Act (TVPA) (Block, 2004). On November 6, 1999, Representative Chris Smith drafted a bill that exclusively
focused on the sexual exploitation of women and girls, excluding males and trafficking for labor (Block, 2004). The TVPA (HR 3244) was passed October 6, 2000 by a 371-1 vote. The bill passed the Senate with a 95-0 vote on October 11, 2000, and signed into Public Law (106-386) by President Bill Clinton on October 28, 2000 (State Legislatures, 2005).

The U.S. Congress enacted the TVPA of 2000 with the purpose of preventing human trafficking overseas, protecting victims of trafficking, and prosecuting traffickers. The title, alone, of this U.S. policy demonstrates how the government depicts women as ‘victims’ to be ‘rescued’ and ‘protected.’ Mohanty (1991) affirms that media images of third world women, in this case constructed by the U.S. government, perpetuate the stereotypes of third world women as being weak and needing to be cared for. Kempadoo & Doezema (1998, p. 42) assert that the construction of a victim “perpetuates stereotypes of sex workers as passive and exploitative victims.”

The TVPA has been presented in the media as a policy that ‘combats’ sex trafficking. The use of the word ‘combat’ perpetuates a language of violence and war, bringing in the necessity of masculinity to “save” the innocent, female, childlike victims from “the barbaric crime of trafficking,” as stated by President George Bush in a keynote address at the First National Human Trafficking Conference in July of 2004 (U.S. Department of Justice, 2004). The use of the word ‘barbaric’ serves to construct the idea of the uncivilized, dark-skinned trafficker abroad who manipulates innocent women into sex trafficking.

A definition of sex trafficking, as defined by the U.S., can be found in the annual “Victims of Trafficking and Violence Protection Act of 2000: Trafficking in Persons Report” issued by the U.S. Department of State. The U.S. definition of “severe forms of trafficking in persons” is as follows:

(a) sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
(b) the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud or coercion for the purposes of subjection to involuntary servitude, peonage, debt
Although not identical in their wording, the unifying elements of both the TVPA and the UN Protocol definitions of trafficking involve the illegal transportation and the sexual slavery of persons by threat or use of force or coercion. The distinction being made between 'voluntary versus forced' creates a dichotomous framework from which to look at trafficking that is limiting and simplistic. For instance, a woman may knowing agree to work in the sex industry, thus being defined as 'voluntary', but she may not know the extreme abuse she may be faced with, that may include 'forced' acts under abusive working conditions. Binary oppositions perpetuate silent biases and assumptions, without looking at the complexity of the issue. Mohanty (1991, p. 64) asserts that dualities are ineffective when "designing strategies to combat oppressions." Only 'severe forms' of trafficking cause the enforcement provisions of the TVPA to be implemented, with "victims" bearing the burden of proof that they were coerced.

Policy Links to U.S. Imperialism

The TVPA of 2000 is composed of features that emphasize prevention, protection and prosecution. One aspect of the TVPA's prevention component includes the U.S.'s demands on other countries to take preventative measures to end sex trafficking. The U.S. has written into policy its responsibility to make yearly assessments of other countries' anti-trafficking efforts and to rank each country according to the procedures a country takes in order to 'combat' trafficking. The Office to Monitor and Combat Trafficking in Persons with the State Department has a mandate from Congress to issue annual Trafficking in Persons (TIP) reports that rates each country's progress on eliminating trafficking. Each country is judged on a 'Tier' system, and the U.S., along with a few other western European countries, has awarded itself Tier 1 status, which represents 'sufficient' efforts at combating trafficking. However, those countries that do not demonstrate adequate means and efforts to end trafficking, as judged appropriate by the U.S., are ranked on either Tier 2 or Tier 3. Those countries judged as
being on Tier 3 are then subject to sanctions by the U.S. (except for sanctions on humanitarian aid).

Mezler (2005) has called to attention the interesting parallel between those countries that are ranked as Tier 3 countries and their poor political relations with the U.S., such as Cuba, North Korea, and Venezuela. Venezuela’s Tier 3 ranking may be more about the country’s refusal to acknowledge the U.S. program than with its efforts to eliminate trafficking (Mezler, 2005). Not only does the Tier system reinforce imperialist and hegemonic relations between those in power and those not in power, but it also raises additional issues related to the U.S. role within the world. Additional countries that were placed in Tier 3 and defined as sanctionable by the U.S. State Department consisted of countries who oppose U.S. imperialism, such as Iran, and countries made up of Arab or Muslim populations, such as Indonesia, United Arab Emirates, Afghanistan, Bahrain, Lebanon, Sudan, Qatar, Turkey, and Saudi Arabia (Kempadoo, 2005, p. xxi). Enloe (2000, p. xvi) highlights the unique position of the U.S. as a nation that offers itself up as “a model to be emulated” while playing the role of a term she coins as “global policeman.”

Problems With the Criminalization Approach

Another large part of the U.S. law’s effort aimed at prevention, includes aspects of protection and prosecution: which appear to be addressed in conjunction with one another, rather than independent of one another. This can create undesired consequences for women. The TVPA was developed to provide a means for “non-citizen victims” of trafficking found in the U.S. to apply for a special T-visa, along with other benefits and services so that they could be “protected” and offered a chance to rebuild their lives (U.S. Department of Health & Human Services, 2004). The T-visa allows “victims of severe forms of trafficking” to remain in the U.S. provided that they cooperate with law enforcement and assist federal authorities in the investigation and prosecution of human trafficking cases. While this law seeks to ‘protect’ and ‘prosecute,’ it places the burden of proof on the migrant to ‘prove her innocence’ and ‘coercion,’ as well as information about the organized criminal network that is assumed to be responsible for human
trafficking. This stipulation appears to be counterintuitive to what this policy supposedly stands for, to primarily “protect victims,” as stated in its title. Undocumented immigrants may still be very vulnerable due to their fear of deportation and being involved within the sex industry in a country where prostitution is illegal. Kempadoo (2005, p. 29) states that “women in prostitution are subjects of criminalizing policies, laws and ideologies.” According to Chapkis (2003), the T-visa appears to be designed, not so much to meet the needs of migrants who have been sex trafficked, but as a device to assist prosecutors in closing down trafficking networks. This is evidenced in the various obstacles that migrants have to go through in order to obtain a visa.

Victim protection programs are validated behind the belief that all trafficking cases are caused by organized criminal trafficking networks. These intricate criminal networks are described in research studies (Hughes, 2002; 2001b) as composed of large organized groups with roots in villages that extend to the country of destination. Corrupt political and government officials are often linked as participants in the trafficking scheme (Raymond, Hughes, & Gomez, 2001). Agustin (2005, p. 101) notes the automatic, “hypothetical” link between trafficking and large-scale criminal organizations that are “dedicated to enslaving migrants.” She points out that even though governments support policy under the assumption that organized crime is behind trafficking, the UN Crime Commission’s own report found limited evidence of such activity (Agustin, 2005; CICP, 2003).

Kempadoo & Doezema (1998) assert that many rely on the assumption that ‘evil’ traffickers are behind trafficking because it is easier to gain support for arguing to help ‘victims’ rather than challenge the existing framework. This also makes it easier for the ‘helpers’ (made up of abolitionist feminist, anti-prostitution NGOs, and governments) to take “center stage” (Agustin, 2005, p. 107). Trafficking policy “…sets up a need for feminists, NGOs and even governments to “save” every woman migrating to work...The best policy is to put on a victimized façade—which may be partially true-allowing NGO helpers to believe they are indispensable” (Agustin, 2005, p. 107). In an effort to ‘save’ every migrant, the experiences of
individuals are generalized without consideration that the work of ‘organized criminal networks’ may be the combined effort of family, friends, agents, entrepreneurs and small-time delinquents who make up these ‘traffickers’ (Agustin, 2001, p. 3). This knowledge slightly changes the constructed, popular idea of “traffickers” and organized crime.

Using a criminal justice response to fight organized crime, combined with border control, uses “sexual harm as a justification for restraining women’s movement” (Miller, 2004, p. 34). Some migrants are being punished and sent back to their countries of origin where the economic situation in the global South may be dire and insufficient for survival. In addition, a law and order model pushes illegal migration and undocumented work further underground perpetuating unsafe labor standards for migrants. Kempadoo (2001, p. 33) emphasizes the notion that “criminalization and stigmatization ensure poor working conditions,” and only if prostitution can be defined as work, and sex trafficking can be thought of as labor migration, can women in the sex industry claim labor rights and insist on safe working conditions (Kempadoo & Doezema, 1998). This labor rights perspective would not only require decriminalizing prostitution, but working towards the legalization of sex work in order to ensure safer working conditions. By implementing anti-trafficking measures, governments can justify the isolation, social exclusion, stigmatization, marginalization and criminalization of sex workers and migrants (Wijers & Van Doorninck, 2005; Wijers, 2001).

Reauthorization of a Moral Agenda

On March 12, 2004, President George W. Bush spoke of a ‘new enemy’: sex slavery. During this speech, he introduced Sharon Cohn, director of Anti-trafficking Operations for the International Justice Mission, a Christian organization fighting to end the practice of sex slavery (Block, 2004). The Trafficking of Victims Protection Reauthorization Act (TVPRA) was signed into Public Law (108-193) by President Bush on December 19, 2003, to include enhancements related to prevention, protection and prosecution. Currently being considered is another reauthorization of the policy; the TVPRA 2005 (HR 972).
In 2003, more than $200 million was authorized by the Bush Administration through the Trafficking Victims Protection Reauthorization Act of 2003 (TVPRA), Public Law 108-193, to “combat trafficking” (U.S. Department of Health and Human Services, 2004). This “renewed and enhanced” policy also allows the U.S. Government to fund public awareness campaigns for foreign countries and to provide funding for research on international and domestic trafficking. However, the TVPRA refuses the granting of funds to any organization that promotes, supports, or advocates the legalization or practice of prostitution. Any organizations or NGO who advocate prostitution as an employment choice are not funded, while grantees are now being asked to state their position on prostitution in writing (Block, 2004; Melzer, 2005; Ditmore, 2003). Saunders & Soderlund (2003, p. 21) describe how those programs that utilize the term “sex work” are now considered “inappropriate partners for USAID anti-trafficking grants or contracts” since they accept prostitution as employment choice. NGOs that forcibly removed women from prostitution in order to ‘save’ them, have been among those given funding preferences (Melzer, 2005). This demonstrates a continued lack of attention to trafficking in other industries, such as sweatshops, construction, agriculture and domestic labor.

Not only is the focus of the U.S. policy primarily on sex trafficking, but funding is also closely linked to religious ideologies allied with conservative views on prostitution. The International Justice Mission (IJM), a Christian NGO, has received millions of dollars in federal funds to work on trafficking (Mezler, 2005). This organization is known to raid brothels in India and Thailand, placing sex workers into homes and re-education programs (Mezler, 2005). Reports about IJM from other NGOs are in the form of complaints, such as IJM operates “...‘like a bull in a china shop’ without regard for the mess it leaves behind” (Block, 2005). On the other hand, organizations such as the Sonagachi Project in India, who were recognized by the UN as a model program for addressing the problems faced by sex workers, such as the spread of HIV and protection of rights, are denied funding by the U.S. (Melzer, 2005; Ditmore, 2003). U.S. sex trafficking policy overtly discriminates against humanitarian organizations that don’t fit the
abolitionist model. The privilege and power that the U.S. has and utilizes over other countries acts to reinforce the power hierarchy and control that maintains the inequalities and neo-colonial relationships between nations, between western and third world feminists, and among poor migrants. It is crucial that western policy makers, western feminists, and others in positions of privilege decenter their western power.

Colonizing Views of Third World Women

The media play a major role in the reproduction of racial stereotypes and in the construction of images that reinforce power hierarchies. Kempadoo (2001b) describes how the media portray the global sex trade as one-dimensional, where women are just "victims" of male violence, even though the issue of migratory sex work is more complex. In western culture, the dominant image of the victimized sex worker is of a "young, brown, Asian or Black woman" (Kempadoo, 2001b, p. 169). This illustration plays into the discourse by "othering women" to justify the current U.S. policy that objectifies women, by turning them into oppressed, dependent victims in need of rescue. A critical analysis of why this occurs is presented by Kempadoo (1998), who explains that the "bad girl" illustration "threatens male control and domination." This simultaneously distorts the real lived experiences of migrants (Long, 2004), assumes homogeneity and denies women their agency.

The terminology being used shows a culturally imperialistic discourse on prostitution and trafficking. The speech delivered by U.S. President Bush in July of 2004 included this perpetuation of what Mohanty (1991, p. 57) calls "the construction of third world women as a homogenous powerless group often located as implicit victims of particular socio-economic systems." To a group of law enforcement officers and human services providers, President Bush declared, "The lives of tens of thousands of innocent women and children depend on your compassion, they depend on your determination, and they depend on your daily efforts to rescue them from misery and servitude. You are in a fight against evil, and the American people are grateful for your dedication and services." These women of the global South are also presented as victims of dire
socio-economic conditions who need to be rescued by those of the global North. However, no responsibility is taken by the global North in the perpetuation of this poverty in third world countries through their imposed SAP and transnational corporations.

bell hooks (2000) maintains that discounting women’s agency and constructing non-western women as needing to be rescued perpetuates the idea of the weak “other” and the powerful westerner, further colonizing through the use of a hegemonic framework. Western NGOs construct the ‘third world woman’ as a ‘damaged other’ to justify their “own interventionist impulses” (Doezema, 2001, p. 1). Women are infantilized in the name of protecting and ‘saving’ them (Agustin, 2003b, p. 8), which takes away their power and agency. Also, requiring women to participate in a criminal justice model aimed at ‘catching the bad guy’ traffickers calls into question whether this policy is another way of regulating and possessing control over a woman’s body through the withholding of services unless women can assist in the ‘war against trafficking.’

The re-inscription of western imperialism and colonialism is evidenced through the creation and implementation of trafficking policies. A more inclusive and constructive discourse is one that takes into account the variety of conditions and agency of men and transgender individuals, as well the perspectives of sex workers who do not have rights as sex workers due to the illegal nature of their work. It is also crucial to hear the diverse experiences of migrants who are in a more threatened position due to their illegal status. The focus will have to shift away from associating trafficking primarily with sexual slavery and the sex industry. Agustin (2003b, p. 8) asserts, “when the subject is not a minority of women who are duped, sequestered and enslaved, we should be able to give credit where it is due to women and transsexuals, as well as men, who dare to make decisions to better their lives by leaving their homes to work abroad, no matter what kind of work they have to do.”

The current U.S. government prefers repressive strategies because they are simple and in accordance with other agendas, such as immigration control, ending organized crime, imposing ideologies onto other countries, and maintaining women’s morality and sexuality. By accepting the current abolitionist
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framework on trafficking, the multiple realities of migrants, sex workers and other groups are ignored, agency is denied, and all experiences are assumed to be the same. When western policy makers and feminists homogenize experiences and ignore contextual differences, this leads to a disregard of the historical, cultural and socio-political background of migrants.

An Alternative Framework

A more inclusive perspective that takes into account other types of work is crucial for addressing all types of oppressive working conditions. It is important to move away from a moral lens that stigmatizes and marginalizes people, and to move toward protecting migrant workers from unsafe labor conditions. Media images and reports that focus on (sex) trafficking need to be questioned and a shift in focus away from sex work will ensure that all types of unsafe working conditions are addressed. A labor rights perspective, which focuses on the human rights of workers, incorporates all of these elements to broaden the approach to trafficking. By including all forms of labor, and by defining sex work as an economic activity that is often used in combination with other types of work (Mellon, 1999), migrants and sex workers will not be stigmatized and marginalized due to the associations of being labeled as a prostitute.

In addition to a labor rights framework, a migration perspective of trafficking will also be a more constructive alternative to the current trafficking framework. It will allow for the participation of migrants in the trafficking discourse and it will take into consideration the diverse experiences and circumstances of people’s lives without the necessity of labeling and identifying a person with a particular group, such as sex worker or domestic laborer (Agustin, 2002). This framework would acknowledge that labor rights of migrants are non-existent if migrants have entered into a country illegally. A migratory lens would also address immigration laws that are less punitive and more equitable to migrants. Legal restrictions on migration for labor need to be reduced so that illegal immigration isn’t pushed further underground (O’Neill, 2001, p. 162).

Overall, it is important to address migrants within the
framework of U.S. and international human rights law so that policies, practices and actions towards assisting persons who are trafficked and other groups who are affected, such as sex workers, can be critically examined and evaluated. It is imperative that a forum and a space exist for multiple voices and perspectives to be heard from migrants of the global South. “Transnational movements require a transnational response and analysis” (Kapur, 2005, p. 38). Western trafficking discourse and anti-trafficking policies are “binaries and stereotypes of the third world” (Kapur, 2005: Kempadoo, 2005a, p. 30). The current western trafficking discourse and related policies that reinforce colonialistic and imperialist global inequalities and power relations need to be deconstructed and challenged in order to work toward social justice and change.

A more inclusive perspective is advocated by Kempadoo (2001, p. 43) and other feminists who support “culturally specific constructions and expressions of sexuality for and by women of color.” As Kempadoo (1998, p. 14) states,

Yet in an era when women can no longer be defined exclusively as victims, where Third World women speak for themselves in various forums, where increasingly analyses have shifted focus from simple hierarchies and dichotomies to the problematization of multiple spaces, seemingly contradictory social locations and plural sites of power, it would seem that experiences, identities and struggles of women in the global sex industry cannot be neglected.

Marginalized groups have the right to speak for themselves, and as Mohanty (1991) states, the right to set their own agendas and their own experiences. She demonstrates how people in the west are setting the agenda for the rest of the world, as evidenced in the TVPRA that consists of the Tier system for monitoring international progress to prevent trafficking. A conceptual shift needs to occur to examine the multitude of experiences of migrants, so that generalizations and sensationalist depictions of women of color and sex workers that reinforce gender, culture and power structures do not drive U.S. and international policy.
Implications for Social Work

The effects of the implementation of the TVPA on social work practice and service provision and development have not yet been explored. The implementation of this policy through social service agency policies and procedures may have effects on migrants and sex workers that are unknown. The consequences of this policy on migrants who have worked in the sex industry and others who are seeking social services have also not been investigated. With the increase in social work's involvement in national efforts to assist "victims of trafficking," it is necessary to understand the effects of this policy and the manner in which it is being implemented.

Culturally competent research and evaluation studies are needed nationally and internationally to understand the implications and effects of this policy on the welfare of those individuals who have experienced unsafe working conditions and dangerous situations. Policy and practice strategies to benefit the well-being and safety of these individuals need to be shared globally to find the best methods in which to view the phenomenon of trafficking. Collaboration on ideas and strategies for assuring safe working conditions for migrants, sex workers and all marginalized groups working in unrecognized industries are of equal importance, while cross-cultural awareness is imperative.

Since the TVPA and its re-authorization have only been in effect for a few years, there have been no studies on the implementation and effectiveness of this policy. The proposed TVPRA of 2005 will allocate more funds to support a morally driven policy that does not take into account the individuals it claims to serve. In their pursuit of social justice, social work researchers can contribute to the understanding of the effects of this policy on those most vulnerable in society.

Presenting the ambiguous definition of trafficking and its related terms provide a foundation for the varied meanings associated with the concept of trafficking. The social and historical background of the phenomenon and the feminist debates surrounding the trafficking discourse have all contributed to shaping national and international policy to address trafficking as a global problem. The trafficking discourse serves the interests of abolitionists, feminists, religious leaders and
governments driven by morality and fearful of immigration. It is crucial to examine the impact of policy. This policy might not address the safety of migrants in various types of work and individuals in the sex industry, since it appears to have been created to serve the interests and problems of the state, as well as the agenda of conservative feminists. In order to examine whether the operationalization of current policy will improve the conditions of individuals, these marginalized voices need to be heard. A new framework for understanding trafficking and for addressing issues of migration, labor rights and human rights needs to be provided so that feminists, NGOs, governments and individuals directly affected by policy change can engage in productive dialogue towards change.

References


A Critique of the Trafficking Discourse


A Qualitative Study of Letters to President Kennedy from Persons with Mental Illness and Their Families: Using the Research Poem in Policy Oriented Research

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Using the research poem as a tool of data representation, this paper presents findings from an analysis of letters sent to President John F. Kennedy regarding the formulation of mental health policy during the early 1960s. The article presents the experiences of consumers of mental health services and their families—shapers and receivers of mental health provisions that are infrequently given voice. Traditional thematic analysis was conducted, and data subsequently were represented in three poetic forms: free verse, the pantoum, and the tanka.

Keywords: research poem, mental health policy, John F. Kennedy

Introduction

While it is true that statistical representations of social problems do influence policy development, it is equally true that affective data and more humanistic presentations may be
as influential as “facts” (Smit, 2003). Prevailing social perceptions regarding a problem have been shown to be essential to how social policy decisions are shaped (Appelbaum, 2001). Policy decisions are also based heavily upon personal and socially constructed values. Values lie at the heart of differing political and social ideologies, and often underlie differences between political parties and social movements. Policy makers often make decisions based upon their own personal, moral and religious values (Caputo, 2005).

Emotions are heavily implicated in the formations of values (Gordon, 1965; Linzer, 1992). Emotional pleas from key constituents often do have an effect on various levels of the policy development process. Yet, too often policy research is disconnected from the voices of vulnerable populations that are affected by social policies. Giving voice to those without the power and/or privilege to express their experiences in public or professional forums is a growing objective of social research, and represents an important practice domain of social work advocates and researchers.

Numerous researchers have commented on the importance of presenting the lived experience of clients as fully and powerfully as possible (Reason, 1988; Richardson, 1992). However, studies that use thick, narrative descriptions to present these voices may often be too dense or long for easy consumption by key policy constituents. In order to have increased emotional impact on social policy formation, it is important that researchers develop methods that present the experiences of key constituents in a concise, consumable, and emotionally expressive manner.

Fortunately, post-modern researchers working on the boundary between the social sciences and the humanities have developed just such a tool: the research poem. Through various social science and literary tools, researchers have used the research poem to faithfully and consistently present data on international development (Furman, 2004a), the impact of cancer (Furman, 2004b), the experience of HIV care providers (Poindexter, 2002), oppression and discrimination (Langer and Furman, 2004) and many other topics.

Using the research poem as a tool of data representation, this paper presents an analysis of letters sent to President John
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F. Kennedy regarding the formulation of mental health policy during the early 1960s. The article seeks to present the experiences of mental health consumers and their families—shapers and receivers of mental health services that are infrequently given voice. It should be noted that this article is less about social policy than it is about the presentation of the lived experience of those who are the targets and beneficiaries of social policy. It is the hope of this researcher that others will be encouraged to use similar methods in current social policy research.

Several key areas will be addressed. First, the research poem as a tool in qualitative social research will be explored. Second, the method used in this study will be explicated. Third, data will be presented in the form of three types of research poems: free verse, the pantoum, and tanka. Finally, implications for social and policy research will be presented.

The Research Poem

In order to present the voices of various constituencies, research methods must be adopted that preserve their lived experiences. Traditional research guided by a positivist epistemology attempts to quantify and categorize the opinions and beliefs of those being researched. Contrasted to the positivist approach is the research tradition developed by various postmodern scholars in multiple disciplines (Freedman & Combs, 1996; Gilgun, 1994). These scholars observed that reducing human experience to numerical representation often strips the meaning from these experiences (Janesick, 1994; Lincoln & Guba, 1985). For instance, one can say that a certain percentage of people support one policy over another. Yet numerical presentations lose the important affective and contextual data that can help policy analysts and human service practitioners understand the interplay of human value and desire in the policy making process. Also, numerical data may not stimulate the type of empathic reactions that more evocative methods may produce in the consumers of research.

As a means of preserving the fullness of human experience, various researchers have drawn upon the expressive and creative arts in the research process (Allen 1995;
Blumenfeld-Jones 1995; Barone & Eisner 1997; Eisner 1981 & 1991; Finley & Knowles 1995; McNiff 1998; Prosser 1998; Stein 2003; Willis, Smith & Collins 2000; Wong 1999). Creative and expressive arts research methods may be used throughout the research process. They can be integrated with well-articulated methodologies that help researchers to become increasingly engaged with their data, thereby allowing them to “transfer cognitive and affective knowledge from artist/researcher to reader” (Prendergast, 2004, p. 75). Willis (2002) explores how arts and humanities-based research is congruent with the expressive research agenda. This approach is contrasted with the analytical tradition of research, in which human phenomena are reduced into statistical forms, which often strip the life and practical utility from data. Expressive research:

does not grasp an object to analyze and subdue it. It attempts to hold it in consciousness, to allow its reality and texture to become etched on the mind. It holds back from closure and returns again and again to behold the object, allowing words and images to emerge from the contemplative engagement (Willis, 2002, p. 4).

This notion is congruent with Denzin’s (1997) advocacy for the use of alternative forms of data to evoke intense and meaningful emotional reactions in the consumer of research.

Poetry is one of the creative/expressive arts that has been applied increasingly in the research endeavor. Using poetry allows researchers to preserve the richness and complexity found within data sources, yet encourages compression and data reduction that allows consumers of research to more fully grasp the essence of text. When applied as a method of data reduction, it helps researchers move from “thick descriptions” (Geertz, 1973), to data that is powerful yet easy to consume (Szto, Furman, & Langer, 2005).

Research poetry has been used in studies of a variety of social problems from multiple research paradigms. Many scholars integrate traditional social science methods in the process of creating research poems. Richardson (1992, 1993) has been an important voice in the development of poetry as a tool in presenting qualitative research. She notes that compressing
qualitative data into poetic forms helps convey the complexities of paradoxical and often conflicting emotions. Her research powerfully describes the complexity of marital relationships, yet does so in a more concise manner than traditional qualitative narratives. Langer and Furman (2004) used research poetry as a means of presenting data regarding the identity formation of a bi-racial Native woman. In their research, they crafted research poems from passages taken directly from ethnographic interviews. They utilized traditional thematic analysis as a means of explicating salient themes, and crafted research poems as a means of reducing the data into a consumable form. They also sought to maintain the depth and integrity of the original data.

Furman (2006) used a similar methodology to represent data about his experience as a patient in an emergency room. In this work, the researcher analyzed his data through thematic analysis, and then re-mined data for passages that represent the discovered themes. The researcher then used three poetic forms to condense, contain and focus the data. The new research poems demonstrate how different methods of data representation can impact the emotional tone and quality of the data. For instance, he found that the French/Malaysian poetic form of the pantoum was particularly useful in portraying intense, powerful emotions.

Poindexter (2002) used methods from narrative and linguistic analysis to preserve the vocal patterns that are often lost in the translation between oral and written form. Her research poems use symbols and signs to designate various changes in speech patterns in order to “honor the strengths and uniqueness of each individual and to preserve their inspirational stories” (Poindexter, 1998, p. 22).

Other studies have relied even less upon methods of social science research and have developed techniques more in adherence with the humanities. Piirto (2002) showed how poetry originally written for expressive purposes can also serve as research text. She presents poems written from journals and field notes in various states of aesthetic development to explore education in India and racism in Georgia. By writing aesthetically-based poems from empirically-based notes, she deviates from research poems and delves into the realm of the literary and the interpretative. Prendergast (2004) created what she refers to
as literature-voiced poetry as a means to "help me synthesize, process and make meaning" (p. 75) of a literary text. For her, the literature-voiced poem is both a means and an end—a process of coming to grips with the nature of text, as well as a means of data representation.

Method

Data were collected for this study at the John F. Kennedy Library in Boston, Massachusetts. For five days, the researcher explored numerous files containing thousands of pages of documents relevant to mental health policy from 1960-1963. Some of the most powerful qualitative materials consisted of letters written to the president. These letters were written in response to proposed mental health legislation, many of which were discussed in newspapers and in the media.

Sample and Sampling Issues

Files consisted of one hundred and seventeen letters to President Kennedy. Of these letters, over fifty percent were written by family members dealing with mental illness. Nearly thirty percent were written by persons with mental illness themselves, and twenty percent were from citizens who did not identify either their mental health status or their relationship to persons with mental illness. However, it appears that the majority of these were written by mental health service consumers themselves. About half of the letters were hand written, the other half were typed. Many letters expressed anger at a lack of services, and some were personal appeals for specific services. Some letters included brochures from programs that people wished received more funding. Some were notes of thanks.

Letters were chosen if they met the following criteria: 1) they were legible; 2) they contained the authors' perspective about mental illness vis-à-vis social policy 3) they were written by a mental health consumer or a family member of a consumer; 4) the documents contained enough material to be suitable for the creation of a research poem; and 5) they contained enough affective materials to present the lived experience of the author. A total of 20 letters met these criteria. From these letters, a subset of six was chosen to be analyzed and presented via poetic
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re-representation.

The following methods were used in the creation of research poems. The author analyzed the data for themes using traditional open and axial coding methods. A five step method was used in the data analysis phase. During the first round of coding, the researcher read the letters without the intent to develop codes or themes. The goal was to familiarize himself with the text. During the second round, general impressions were noted and written in the margins of the text. The third round of coding consisted of a line-by-line analysis of the text. During the fourth round of coding, general themes were induced from the identified codes. A fifth round of coding was conducted two weeks later, using the same method with the intent to discover any uncovered themes and to insure accurate and adequate representation of the themes.

Once themes were identified, the researcher undertook the process of representing some of the observed themes in different poetic forms. No hard and fast rules were strictly followed in deciding how to present a letter in one form versus another; the researcher relied upon his sense of the data and the media. Yet, several principles have guided this researcher in his work. First, letters that followed a more narrative or historical structure lent themselves well to being presented in free verse. For letters in which a narrative or story was less evident, yet were characterized by powerful emotions and evocative language, the pantoum seemed to be the best means of data presentation. Tanka were used to represent letters and themes that were less dense and complex, and lent themselves to compression and parsimony.

With origins tracing back to eighth-century Japan, the tanka is one of the oldest forms of poetry still widely being used (Waley, 1976). The tanka is far older and, in many ways, of more historical significance than its cousin the haiku. Traditionally, the tanka was written in one long line of 31‘onji’, or sound units (Ueda, 1996). The rhythmic pattern of onji consisted of units of 5-7-5-7-7 sound and meaning units (Strand & Boland, 2000). The onji in Japanese is a different unit of sound than is the English syllable, yet the American tanka has come to use the same pattern, corresponding to syllables instead of onji. In writing American tankas, it is considered permissible
to use syllabic counts as a guide; strict adherence to the form itself is less important than conveying the meaning that the researcher intends. The following tankas were crafted mostly using lines from the original letter, with some minor restructuring to help the poem fit close to the traditional form of the American tanka.

The pantoum is a powerful form that can create a haunting effect through the repetition of lines throughout the poem. The pantoum is a French poem based on an ancient Malaysian form of poetry (Unst, 2002). It was introduced to the West by the French poet Victor Hugo and gained popularity in the United States throughout the 20th century (Blackmore & Blackmore, 2004). Colorado poet Jack Martin (personal communication, 2003) referred to the pantoum as the poetry machine, in that the repetition of lines and energy of the poem can be almost contagious. It should be noted that because each of the following research poems are of a condensed nature, all of the identified themes are not contained in each poem.

Free verse poems are those that do not follow structured syllabic patterns or other traditional literary conventions. Free verse originated in the early part of the twentieth century as poets attempted to break the free of the rules and constants of formal verse (Kirby-Smith, 1996). However, free verse does not imply that anything can be a poem. In free verse poetry, compression, cadence, tone, metaphor, line breaks, and other literary devices are used to create a sense of music and meaning. The exact nature of free verse poetry can be extensively debated; such debates are beyond the scope of this paper. For the purposes of this discussion, research free verse poems follow the basic structure of the letters, yet are far more condensed, and use line breaks to focus the data. These poems are presented first.

The Poems

_Free Verse Poem One_

On behalf of the forgotten people
A personal thanks and tribute
For your legislation for the mentally ill.
After World War II
I spent months in the VA hospital
Depressed.
Since, I have worked in mental hospitals
And what you have done
I assure you
A place at the hand of God.

**Free Verse Poem Two**

The house committee cut more than half the money
To the mentally ill, a surprising and stunning blow
But then I read, of 8.2 billion in "Pork"

Why so upset?
We have a twenty year old son
A patient in a private mental hospital
And unless we put him in
A state institution
We will slowly go broke

We always drew comfort from your efforts
President Kennedy.
I admire so much
Your mental Health Program
I am writing my congressmen and senators
Can you suggest to me
What else I might do?

**Pantoum One**

We have twenty years of heartache
A sister who is mentally defective
The institution tries hard, but with eighty in each cottage?
She was placed there permanently.

A sister who is mentally defective
She gave birth to a boy we idolize.
She was placed there permanently.
He too turned out to be emotionally disturbed.
She gave birth to a boy we idolize
Thanks you Mr. President, for your proposed bill.
He too, turned out to be emotionally disturbed.
At the Kennedy Child Center, the right path to a better future.

Thanks you Mr. President, for your proposed bill.
The institution tries hard, but with eighty in each cottage?
At the Kennedy Child Center, the right path to a better future.
We have twenty years of heartache.

**Pantoum Two**

I see heartaches and suffering from our mentally ill
a human mind, meant to inspire
now unable to muster the wit and true vision
and we used to throw them away.

a human mind, meant to inspire
they were locked behind walls, how tragic
and we used to throw them away
and now, your plea to the nation, for change.

they were locked behind walls, how tragic
You stated: “We have neglected to meet our mentally ill”
and now, your plea to the nation, for change.
you are ready, and ask us, to sacrifice.
You stated: “We have neglected to meet our mentally ill”
now unable to muster the wit and true vision
you are ready, and ask us, to sacrifice.
I see heartaches and suffering from our mentally ill

**Tanka One**

my children, no mother,
we pray she comes home, to live,
not for rare weekends.
I pray congress hears your plea
community care, for Sarah.

Tanka Two
Normal children? Tough.
Raising the mentally ill? Help?
We need more support.

Must fund mental health centers
to bring my child back home.

Discussion
A reading of the poems shows that each form leads to different effects. The free verse poems, being more open in structure, allow for the presentation of data that are congruent with the original form, style and narrative flow of the original letter. In writing the free verse poems, the researcher was able to pay attention to the original narrative flow of each letter, and was able to take advantage of this as a guiding structure. Placing the data in this form allows for a compression whereby redundant or non-essential words are removed. The free verse poems are perhaps the less "cooked" and analyzed data, as they are closest to the original letter.

The pantoums were less effective in presenting narrative flow. Linear data are not best presented in this form. However, through the use of repeating lines, affective intensity is achieved. Similarly, creating new alignments of sentences creates exciting new contrasting meanings between different aspects of the data. The juxtapositioning created by these new alignments forces the researcher to understand the intricacies of the data, and to pay careful attention to the order in which data are presented. Similarly, the tanka forces the researcher to seek the essence of the data, yet perhaps leave out a great deal of information as well.

The inquiry presented here is situated at the boundary
between the humanities and the social sciences. Methods such as these encourage researchers to experiment with different means of data presentation, ranging from those informed mostly by the humanities, to those informed by the social and behavioral sciences, to many methods in between. These experiments may be valuable not only for researchers who seek to present their work in creative forms, but as a mechanism to help researchers understand and analyze their data.

How should these poetic forms be used in qualitative research? First, even for researchers who will not use these methods of data presentation, experimenting with data reduction techniques such as these helps researchers become more familiar with the tone, shape and nuances of their data. The decision making that goes into creating the research poems necessitates an intimate familiarity with one’s data. These methods may be particularly useful to those who have typically relied upon computer software for analyzing data; these methods may present new insights that reliance on computer programs may not provide.

Second, experiments with data representation applying poetic forms stress the importance of data presentation in qualitative research. Too often, this important step is seen as an afterthought to the research endeavor. Researchers may consider various means of presenting data, based upon the data itself, and the reason for dissemination.

Perhaps most importantly, these methods should be considered on their own merits. Poetic forms and structures are highly consumable means of presenting the lived experiences of research participants. These forms may help research consumers achieve the goal of an affective response to research.

It may be difficult for policy advocates to imagine themselves reading poetry in front of congress or other legislative bodies. However, there exists a tradition of using emotionally evocative data as testimony in support of policy aims (Dror, 1988; Miller, 1979; Poets Against War, 2007). Whether or not poetry, research or otherwise, is utilized, policy researchers and advocates may be encouraged to include direct expressions of individuals who have been affected by social policies in their testimonies. Including this type of data can bring a human presence to policy debates, allowing policy makers to
Using the Research Poem

understand the real impact of their decisions.

Policy makers are inundated with statistics that may have very little impact upon them. Such data are often quickly forgotten. A poem, however, may ring in someone's mind for many years after they hear or read it, and may influence their views for many years to come.

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References


How do nonprofit organizations use data and research? What challenges do they face in conducting research and managing data? In spring of 2004, 80 nonprofit organizations in Toledo, Ohio returned a survey on their research and data needs and practices. The survey found that nonprofits collect data on a wide variety of topics, but do not use much of the data that they collect, and do not collect much data that could be useful for other groups, particularly neighborhood organizations. The average nonprofit in the survey has five employees and four volunteers who, together, spend 56 hours per week collecting, managing, and reporting on data. Nearly half of the organizations have no staff or volunteers with formal research training. The others have only one or two people with formal research training. More than half indicated a need for training on how to conduct evaluations, how to use data management software, how to conduct research, and how to find funding.

Keywords: nonprofits, research methods, data management

Introduction

Of all the capacity issues facing nonprofit organizations
in the United States, perhaps none has been so neglected as their research data needs. There are numerous training and technical assistance resources for various programming areas, organizational development, and information technology. But, outside of evaluation research, the crucial area of collecting, managing, analyzing and using research data is neglected by the trainers and the researchers working with nonprofits. And that is a serious neglect. Grant proposals, evaluations, fiscal monitoring, resource allocation, and overall project planning are all dependent on tight research and solid information. The types of research data needed for those activities can range from census data to client case data to all varieties of specialty data for different nonprofits, making research data practice a highly complex and time-consuming part of nonprofit work.

What do I mean by “research data practice”? Basically, I am concerned with the systematic collection of information to inform nonprofit program development and evaluation. This includes typically-recognized research practices such as surveys. It also includes systematic collection of client or membership data that could be, though it is often not, analyzed for patterns or categories. Research data practice does not have to be informed by a theoretical or disciplinary-based question and, instead, may be informed by a practical need such as “what are the best practices in the area of youth programming” (Stoecker, 2005). This research focuses on what research data nonprofit organizations collect, how they use that data, and what challenges they face in collecting and using research data. It is important to understand that the concept of research data includes most of the information that nonprofits collect, including client-level data that may not be viewed as research data by the organization. Such information, however, can often be very informative in helping nonprofits understand trends in who they are serving and in supplying the sampling frame from which they can conduct evaluation research. That such data is often not seen as research data is part of the problem.

The lack of focus on nonprofits’ research data practice needs has real consequences. This research project began as an outgrowth of my experience conducting participatory evaluation research with a local neighborhood organization. As we attempted to collect outcome data for the organization, we
realized how little data there was, and how difficult it was to fill the data gaps. Consequently, a group of us concerned about this issue set out to determine the state of the art of nonprofit information management.

The Lack of Data on Nonprofit Research Needs and Practices

We know little about the research data needs, practices, and capacities of small and medium size nonprofit organizations. In fact, in the broad area of nonprofit research, research data practice is almost completely uncharted. That doesn't mean we lack knowledge about research and data management methods that nonprofits could use. Indeed, there are voluminous literatures on everything from needs assessments and asset assessments to evaluation and a wide variety of other data practices in between that are common to nonprofit organizations. But we simply have no knowledge of the extent to which nonprofits effectively deploy those methods to collect, manage, and use research data and other information. There is only one published case study of a nonprofit's information management strategies (Houchin, 2002), and one other published report on an attempt to build nonprofit research and data capacity (Dattalo, 1998).

We do have some research suggesting that nonprofits' needs in the area of research data practices are pronounced. Perception gaps between nonprofit service recipients and providers, for example, not only exist, but are often unrecognized, particularly for neighborhood organizations (Kissane & Gingerich, 2004). And it is in neighborhood organizations where the research data deficit may be most pronounced because most data in the nonprofit realm is not coded by neighborhood. Nonprofits engaged in policy battles also need to learn about and engage in policy research methods to have any hope of impacting social policy (Fox, 2001; Appleton, 2003). And nonprofit management experts (Letts, Ryan, & Grossman, 1999; Bryson, 1995) emphasize the importance of research for effective nonprofit mission accomplishment.

It is in the arena of evaluation where research and data management issues have been most discussed (Mancini, Marek,
Byrne, & Huebner, 2004). Without developing their own data and research capacity, nonprofits are at the mercy of outsiders who can impose performance measures in support of increasingly popular "pay for performance" schemes (Theuvsen, 2004). The antagonism generated by most funder-directed evaluation schemes leads nonprofits and funders to play a cat and mouse game with research data, with nonprofits often reduced to selectively sharing information, enlisting experts to massage information, or generating information that is only symbolic (Ebrahim, 2002).

There is continuous argument over how outsiders can measure nonprofit organization effectiveness (Sowa, Selden, & Sandfort, 2004; Wing, 2004). Social accounting is expanding in popularity as a way to measure the social and economic value of nonprofit and community organization activities (Mook, Richmond & Quarter, 2003). More common are attempts to measure the economic impact of nonprofit activities, particularly by community development organizations (Woller and Parsons, 2002). There is pressure, however, to shift from output evaluation to outcome and impact evaluation (McNamara, 1999; United Way of America, 2005), vastly expanding the thorny methodological issues facing nonprofits.

There is also an expanding debate over who should be doing evaluation. Wadsworth (1991) urges organizations to integrate evaluation research into their daily activities in order to become more self-directed. Others have promoted empowerment evaluation and participatory evaluation, which better protect organizations against admitting failure because the model actually helps organizations achieve greater success (Fetterman, 2002; Patton, 1997; Millett, 1996). But while there is plenty of urging going on, there is only one published case of an evaluation requested by a nonprofit organization to address a concern it had about one of its programs (Farmer & Walsh, 1999).

The broader model of participatory research is beginning to produce some literature on nonprofit research data practice. There are recent articles written on using participatory research with nonprofit organizations (Castelloe, Watson, & White, 2002) across a variety of research activities such as needs assessments (Balaswamy & Dabelko, 2002) and policy research (Padilla, Lein, & Cruz, 1999). But the emphasis of this literature
is more on the process of the research relationships than on the specific data collection and analysis methods.

This uncharted territory, then, leaves us with two crucial unanswered questions. How much research capacity do non-profit organizations have? How much do they need?

Methods

This research project set out to begin answering those questions for one metropolitan area. Toledo is a medium-sized Midwestern rustbelt city, with declining population in the central city and little to no growth in the metropolitan area. It has yet to make the transition to a post-industrial economy. Industrial, commercial, and housing abandonment is common in many parts of the city and its tax base has been stretched by the out-migration of the middle class. There are, as a consequence, many social needs. The overall project, of which the survey reported in the paper was one part, was designed to first diagnose nonprofit research data needs, and then to develop programming around those needs. It included a survey of nonprofits (reported in this paper), in-depth interviews with funders, and then subsequent programming that involved a research training series and a pilot neighborhood indicators database.

To find out whether my experience with the neighborhood evaluation project described above was common to the non-profit sector, I gathered a group of nonprofit organizations in fall of 2003 for a focus group to explore the question of nonprofit research needs. The focus group discussion, which was organized around very general questions of how organizations conducted research, for what reasons, and with what challenges, confirmed my suspicions. Organization staff felt as if they were at the mercy of funders' perceptions of needs, and funders' definitions of good evaluation. The staff had a lot of data, but didn't know what to do with it, in the case of city-wide nonprofits, or severely lacked data for smaller geographies such as neighborhoods, in the case of neighborhood organizations. Based on the results of this focus group, we organized a research project to gather detailed information on the depth and extent of Toledo area nonprofits' research and data needs.
This research was conducted using a modified participatory research process, following an initiator model where the researcher chooses the initial research idea and then uses the research process to build more and more control over the process by the target group (Stoecker, 2005). Ideally, in this model, the research participants will have increasing control over every stage of the research process: choosing the research question, designing the research methods, collecting the data, analyzing the data, and developing action plans based on the data. The first step was to establish a research core group representing a cross-section of Toledo community organizations. The focus group helped establish the outlines of the research project and provided its core group members.

This core group of seven members met monthly through the six months of the project. They participated at every stage of the research, shaping the questions we wanted to ask in the survey of nonprofits and the interviews of funders, recruiting nonprofits to complete the survey, going over the survey results and a rough draft of this report to contribute to the data analysis, and shaping the planning event growing out of this research. The core group members' ongoing discussions added to the existing data by providing an array of nonprofit interpretations of the data we were receiving through the surveys and interviews described below.

The core group decided early on to focus on small to medium size nonprofits—including large health and education nonprofits—believing that the smaller organizations would be most in need of resources to collect, manage, and analyze research data. Another goal of the overall project was to look for ways to better support the research data needs of organizations that serve distinct geographic areas such as neighborhoods—community development corporations or CDCs—since we had already learned that neighborhood-level research data is extremely difficult to collect and maintain. Neither government nor non-geographic social service agencies manage their data in such a way to make it easily analyzable for an individual neighborhood. In addition, neighborhoods are a crucial geographic unit. Healthy neighborhoods provide the immediate, necessary support for family systems, convenient services, and youth activities, and may be the single most important point
of intervention for improving safety, security, and happiness (Iannotta & Ross, 2004). Particularly when the neighborhoods are as well-defined as they are in Toledo, they also become a source of identity and, when they are healthy, pride.

The main focus of the research, then, was a survey of small to medium-size nonprofit organizations in the three-county Toledo metropolitan area. With the core group, I created a fairly detailed two page booklet-style survey with 18 questions, but 164 possible response categories, which took our core group members about 15-20 minutes to answer. Hager, Wilson, Pollak, and Rooney (2003) found that questionnaire complexity and incentives had little impact on return rates, but that form of invitation did. In their case, using Federal Express increased returns. I then compiled a population list from two existing lists of NPOs (both of which attempted to find the entire population of NPOs in the metropolitan area). After eliminating large nonprofits with 100 or more employees (which was the standard used by one of the two lists), and combining nonprofit programs managed under a single sponsor, we had a list of 432 nonprofit organizations. Five requested to be removed from the study, and eight could not be contacted, leaving the final survey pool of 419 organizations.

We used multiple methods to attempt to encourage response to the survey. For those organizations with e-mail addresses, we sent an e-mail invitation to participate in the survey, with a Microsoft Word version of the survey attached, as well as brief instructions for how to complete a web version of the survey. 153 organizations had listed e-mail addresses, but 27 of those addresses bounced, and three organizations requested to be removed from the study, leaving an e-mail accessible pool of 123 organizations. We contacted another 83 organizations by fax (including 22 organizations whose e-mail addresses had bounced), of which 62 were successfully sent. Of the 21 organizations not accessible by either means, 13 could be contacted by phone and were added to the postal survey. We used postal mail to send paper surveys with postage-paid reply envelopes to 234 organizations, also offering them the option to complete the survey on the web. We sent two follow-up e-mails to the e-mail pool, and two follow-up postal mailings to both the fax and the postal mail pools.
We suspect that questionnaire complexity may have held down response rates, and we also noticed variation in response rates that paralleled the form of invitation. We received 33 surveys via the web form, 8 via fax, 12 via e-mail, and 27 via postal mail. We suspect, but cannot be certain, that most if not all of the web and e-mail surveys were returned from organizations contacted via e-mail. So, in our case, we believe the best response came via the e-mail invitation. And while the different media showed different response rates, past research has shown that different media do not seem to produce different response distributions except around questions concerning information technology, where variation in media may increase the overall response by appealing to different respondent preferences (Parackal, 2000; Yun, 2000).

Table 1. Types of Nonprofits Responding

<table>
<thead>
<tr>
<th>Type of Nonprofit</th>
<th>Number Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth related (i.e. mentorship or skill development)</td>
<td>25</td>
</tr>
<tr>
<td>Neighborhood development or community building</td>
<td>18</td>
</tr>
<tr>
<td>Housing or homeless services</td>
<td>16</td>
</tr>
<tr>
<td>Education, including GED or ESL</td>
<td>15</td>
</tr>
<tr>
<td>Food storage or distribution</td>
<td>15</td>
</tr>
<tr>
<td>Mental health</td>
<td>12</td>
</tr>
<tr>
<td>Drug or alcohol addiction prevention and recovery</td>
<td>12</td>
</tr>
<tr>
<td>Social justice advocacy, political causes</td>
<td>12</td>
</tr>
<tr>
<td>Culture, race, or ethnicity specific</td>
<td>10</td>
</tr>
<tr>
<td>Arts, ballet, theater or music related</td>
<td>8</td>
</tr>
<tr>
<td>Family transitions (i.e. adoption, foster care or divorce)</td>
<td>7</td>
</tr>
<tr>
<td>Emergency relief services (i.e. crime victim support)</td>
<td>7</td>
</tr>
<tr>
<td>Seniors*</td>
<td>7</td>
</tr>
<tr>
<td>Disability services (i.e. home repairs or accessibility)</td>
<td>6</td>
</tr>
<tr>
<td>Legal services</td>
<td>6</td>
</tr>
<tr>
<td>Religious*</td>
<td>6</td>
</tr>
<tr>
<td>Medical or reproductive services</td>
<td>5</td>
</tr>
</tbody>
</table>

*indicates write-in responses not included in original categories
The total response was 80 organizations—a response rate of 19%. Low response rates are increasingly common in the survey industry (Sheehan, 2001). And while such a response rate may provide suspect data, Hager, Wilson, Pollak and Rooney (2003) argue that response rates as low as 15% should still provide accurate data when the demographic characteristics of the respondents are roughly representative of the population in general (Hikmet & Chen, 2003). Our survey included questions to judge the representativeness of our respondents' organizations, such as class level of clientele served and mission areas of the nonprofit. Table 1 shows the responses to the mission activities question. The core group members judged that, based on the mission area data, the responding organizations were proportionally representative of the industry overall in the Toledo area, with a slightly high response from youth organizations. We also appear to have obtained a 100% response from the community development organizations in the city, which we had hoped for.

Analysis

Types of Data Collected

Toledo area nonprofits collect data across many levels of analysis. It is interesting to note, however, that relatively few organizations collect data at the neighborhood level. In fact, organizations are more likely to collect data at the city and county level than at the neighborhood level, as Table 2 shows. Furthermore, 9 of the 23 organizations collecting research data at the neighborhood level are engaged in neighborhood development and community building activities. Both the nonprofit focus group participants and funders noted that neighborhood development requires comprehensive data from a variety of sources, including social service agencies who track some of the social ills associated with community underdevelopment. It may seem natural for agencies that do not operate at the neighborhood level to not collect such data, but those are also the very organizations that neighborhood groups would most like to get data from to assess needs and evaluate outcomes. In many cases it is also difficult to "objectively" determine neighborhood boundaries, but most neighborhood organizations
are more concerned with gathering data from their defined service areas. Given the lack of data collected at the neighborhood level, community development organizations and other neighborhood groups will suffer some of the greatest research data hardships.

Table 2. Level of Analysis at Which Nonprofits Collect Data

<table>
<thead>
<tr>
<th>Level of Analysis</th>
<th>Number reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual level, i.e. children, youth or adults</td>
<td>72</td>
</tr>
<tr>
<td>Family level</td>
<td>44</td>
</tr>
<tr>
<td>Neighborhood/community level</td>
<td>23</td>
</tr>
<tr>
<td>City level</td>
<td>29</td>
</tr>
<tr>
<td>County level</td>
<td>28</td>
</tr>
<tr>
<td>Regional level, i.e. Northwest Ohio</td>
<td>19</td>
</tr>
<tr>
<td>State level</td>
<td>14</td>
</tr>
<tr>
<td>National level</td>
<td>9</td>
</tr>
</tbody>
</table>

The lack of data collection at the neighborhood level is probably due to two factors. One is that client intake forms or membership forms generally do not ask for people to identify their neighborhood. The second is that many organizations may not realize that address-level data could be coded by neighborhood. Even if they did realize that possibility, however, doing such coding is a time consuming task outside of the capacity of most nonprofits. Instead, even neighborhood groups use census tract and zip code-level data that poorly approximates Toledo neighborhood boundaries.

Toledo area nonprofits also collect data on a wide variety of topics. Table 3 shows just how wide the topics are. Approximately three quarters of the organizations collect basic demographic data. In addition, over half collect some neighborhood level data, though we suspect that most of the respondents interpreted this question as asking whether they collected address information from clients and participants. Beyond that, however, there is no standard data collection pattern. This makes it difficult for organizations to share data and, as we will see, data sharing among the groups is in fact limited. The lack of organizations that collect data on leadership skill points to another research data gap for CDCs, who need such information to build strong resident participation in neighborhood development activities. This is, of course challenging
information for the average social service agency to collect. But if other organizations that routinely collect data on clients or members could also learn how to ask what leadership experiences individuals have had, they could refer skilled individuals to their respective neighborhood organizations.

Table 3. Topics on which Nonprofits Collect Data

<table>
<thead>
<tr>
<th>Topic</th>
<th>Number Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>61</td>
</tr>
<tr>
<td>Sex</td>
<td>59</td>
</tr>
<tr>
<td>Race/ethnicity</td>
<td>52</td>
</tr>
<tr>
<td>Street/neighborhood-level address data</td>
<td>45</td>
</tr>
<tr>
<td>Family characteristics</td>
<td>35</td>
</tr>
<tr>
<td>Previous program participant</td>
<td>35</td>
</tr>
<tr>
<td>Employment status</td>
<td>34</td>
</tr>
<tr>
<td>Physical health conditions or disabilities</td>
<td>33</td>
</tr>
<tr>
<td>Education level</td>
<td>32</td>
</tr>
<tr>
<td>Client contact with other organizations</td>
<td>28</td>
</tr>
<tr>
<td>Mental health conditions</td>
<td>26</td>
</tr>
<tr>
<td>Funding resources</td>
<td>25</td>
</tr>
<tr>
<td>Transportation needs</td>
<td>22</td>
</tr>
<tr>
<td>Native or non-native English speaker</td>
<td>21</td>
</tr>
<tr>
<td>Criminal record</td>
<td>19</td>
</tr>
<tr>
<td>School system for children</td>
<td>17</td>
</tr>
<tr>
<td>Religious affiliation</td>
<td>15</td>
</tr>
<tr>
<td>Drug/alcohol treatment</td>
<td>13</td>
</tr>
<tr>
<td>Leadership skill</td>
<td>6</td>
</tr>
</tbody>
</table>

There is also wide variation in the number of categories for which organizations collect data. Half of the organizations collected data in seven or fewer categories. The most common response was to collect data in only one category, which is true of 11 organizations.

Research Data Management

One of our main concerns in understanding nonprofit data and research needs is how they handle the data that they currently collect. The picture that emerged from the survey is that nonprofits spend enormous person-hours collecting data
that is seldom used. The average nonprofit organization has 5 employees and 4 volunteers who have some involvement with data collection, entry, and storage on a day-to-day basis. Combined, those 9 people spend 56 hours per week, over six hours per person, on data management. That is more than a full-time position just for data management. And while it may seem like a lot of time, remember all the possible kinds of data collection and management involved in nonprofit management, from logging phone calls to managing budgets to tracking client contact hours. So, given that most of the staff in a nonprofit are collecting data on clients or program participants, the lack of a standard system for data management could create information chaos.

Toledo nonprofits have piles and piles of data. Seventy-one of the 80 organizations store data more than three years. On average, 61% of the data is saved in paper files, likely creating both space and data recovery issues for many nonprofits. Data in paper form cannot be easily databased or analyzed. On the other hand, it’s a good thing all that paper is kept because only 30 percent of the organizations use any kind of backup for electronic data. Twenty-eight of the 80 responding organizations indicated they had lost data due to document misfiling or computer-related problems. That figure is not as high as we had feared, but higher than it should be.

One of the most interesting findings, reported in Table 4, is that Toledo area nonprofits do not make much use of all that data that they spend so much time collecting and managing. If we take the data presented earlier, in Table 3, and add a column showing how many organizations actually use the data they collect, we can see that, in most cases, less than two-thirds of the organizations use the data that they collect in any one category. It could be argued that two-thirds is actually pretty high usage, but if we go back to the finding that the organizations are spending an average of 56 hours a week managing data, then more than 18 hours a week is wasted effort, adding up to 970 wasted hours in a year. Given that the average organization has 5 staff members and 4 volunteers (and assuming that the volunteers are not full-time), that is a high proportion of wasted effort.

The original focus group that prompted this study, as well as the input of the nonprofit core group guiding the study, can
help us understand why there is so much wasted effort. One of the most vocal complaints coming from nonprofits has to do with funder-mandated data collection. Many organizations find that the things they are required to report on do not help them actually do their own work. The focus group and core group also noted they collect a large amount of information to meet legal requirements. Technically, we could say that, because such data collection results in further funding, or maintains organizational legal status, it is used. But our organizations seem to define "use" as actually taking the information and analyzing it to improve their practice. And, in this sense, much of the information they collect is not used. Finally, as we will see

Table 4. Topics for which Nonprofits Collect, Use, and Need Data

<table>
<thead>
<tr>
<th>Topic</th>
<th>Number Collecting data</th>
<th>Number Using data</th>
<th>Number Needing data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>61</td>
<td>41</td>
<td>10</td>
</tr>
<tr>
<td>Sex</td>
<td>59</td>
<td>39</td>
<td>8</td>
</tr>
<tr>
<td>Race/ethnicity</td>
<td>52</td>
<td>34</td>
<td>12</td>
</tr>
<tr>
<td>Street/neighborhood-level address data</td>
<td>45</td>
<td>30</td>
<td>10</td>
</tr>
<tr>
<td>Family characteristics</td>
<td>35</td>
<td>20</td>
<td>13</td>
</tr>
<tr>
<td>Previous program participant</td>
<td>35</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>Employment status</td>
<td>34</td>
<td>20 (26)*</td>
<td>9</td>
</tr>
<tr>
<td>Physical health conditions or disabilities</td>
<td>33</td>
<td>21 (24)*</td>
<td>9</td>
</tr>
<tr>
<td>Education level</td>
<td>32</td>
<td>19</td>
<td>7</td>
</tr>
<tr>
<td>Client contact with other organizations</td>
<td>28</td>
<td>17</td>
<td>11</td>
</tr>
<tr>
<td>Mental health conditions</td>
<td>26</td>
<td>14 (17)*</td>
<td>6</td>
</tr>
<tr>
<td>Funding resources</td>
<td>25</td>
<td>15 (18)*</td>
<td>19</td>
</tr>
<tr>
<td>Transportation needs</td>
<td>22</td>
<td>17</td>
<td>11</td>
</tr>
<tr>
<td>Native or non-native English speaker</td>
<td>21</td>
<td>12</td>
<td>8</td>
</tr>
<tr>
<td>Criminal record</td>
<td>19</td>
<td>10 (13)*</td>
<td>7</td>
</tr>
<tr>
<td>School system for children</td>
<td>17</td>
<td>14</td>
<td>10</td>
</tr>
<tr>
<td>Religious affiliation</td>
<td>15</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>Drug/alcohol treatment</td>
<td>13</td>
<td>7</td>
<td>10</td>
</tr>
<tr>
<td>Leadership skill</td>
<td>6</td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

*Numbers in parentheses indicate organizations that use data beyond those that also collect it
below, much of the information is not used because organization staff and volunteers do not have the skill or capacity to use it.

As some of the earlier survey results have intimated, not only do a lot of data go unused by the organizations themselves, data are not widely shared among organizations. Using just a raw average, any single nonprofit shares research data with only seven other organizations. But that figure is inflated by the inclusion of two organizations who said they shared data with more than 100 other groups. If we remove them from the calculation, the average falls to just four other groups that each organization shares data with. This may also be overstated if the groups interpreted the question as asking about receiving data from others as well as providing it. Eighteen organizations, nearly a quarter of the total, share data with no one. Thirty-nine organizations, nearly half of the total, share data with two or fewer organizations. This may be partly a consequence of limited collaborations among Toledo nonprofits. But it is probably also likely due to a lack of standard data collection that would make data sharing easy. The focus group participants noted that variations in funding often cause their data collection processes to be inconsistent, and realize that makes the data unreliable and thus less worth sharing.

Most puzzling are the results for the question asking nonprofits to indicate the categories in Table 4 for which they needed research data. The core group suspected that the question was interpreted differently than we meant it, as a number of organizations who indicated that they collect data in a category also said they needed data in that category, perhaps indicating that they collected it because they needed it. But if that was a common interpretation of the question, the results are more troubling, as very few organizations indicated a need for any category of research data. Fewer than a quarter of the organizations indicated a need for data in any category, with the greatest need being expressed for funding data (by 19 organizations). This finding is consistent with the data on lack of use. While collecting data may be required by funders and the law, using it is often a higher-order activity available only to those groups not already completely overstretched just doing their work.
The question is whether the lack of perceived need for data indicates that it is not important to the work of nonprofits or reveals a lack of knowledge about how data might be used in nonprofit work. The core group suspected it to be the latter. As we will see next, the nonprofits do indicate a need for increasing their research data capacity.

**Need for Increased Research Data Capacity**

The survey also focused on the nonprofits’ research data strategy needs. One of the ways to judge those needs is by the number of organizations who report that they are required to conduct evaluations for funders. Nearly half, 36, are required by funders to conduct evaluations of their programs to receive continued funding. But there is more going on here than simply meeting a funder requirement. In fact, 49 of the 80 respondents indicated that they conduct annual evaluations, and another 19 conduct semi-annual evaluations. However, 23 organizations indicated that they do not conduct formal evaluations, leading us to believe that, of the 68 organizations that say they evaluate their work, some likely do so in only a cursory fashion. On the other hand, 24 organizations use outside consultants in their evaluations—a surprisingly high number and an expensive proposition for a small to medium size nonprofit. We must keep in mind, however, that number may not reflect the Toledo area nonprofit industry in general, as we suspect that area nonprofits more attuned to responding to issues of data collection and analysis may have been more likely to respond to the survey. In fact, the funders interviewed as part of the larger project, both government and private, were generally dissatisfied with the research data that organizations provided both to justify grant proposals and to support evaluations.

If we move beyond evaluation to the overall research data skills of nonprofit staff, we see more clearly the capacity issues facing the organizations. We asked the organizations to tell us how many staff had training in research at the undergraduate, graduate, or professional level, as well as being self-taught. None of the averages even reached one staff person. Nearly half, 38 organizations, have no staff or volunteers with formal research methods training. Of the remainder, most indicate having one or two people with research training. And remember, the average nonprofit organization in this survey has 9
people spending a total of 56 hours per week on research data management. And a huge chunk of that time is for naught. One of the most important explanations for that wasted time may be that too few organizations have the in-house skill to make good decisions about what data to collect, how to manage it, and how to use it. Having such skill could allow nonprofits to make better choices about data collection and better use what they do collect.

The nonprofit focus group prepared us to find a strong need for research and data capacity enhancement, and the survey confirms what they told us. When asked about their research data needs wish list, at least one-third of the organizations responded affirmatively to every choice on the list. More than half indicated a need for training in program evaluation, funding, computer programs in general, spreadsheets, research methods, and a tracking database. Just under half indicated a need for training in statistical analysis, geographic information systems analysis, and accounting and budget management. There is important overlap between this list, and a list of research and training needs compiled through the nonprofit focus group and interviews with area funders.

Implications

This research has attempted to gain an initial understanding of the research data practices and needs of nonprofit organizations. We have seen that organizations collect voluminous data on a wide variety of topics. Yet, much of that data goes unused. Furthermore, nonprofit staff have a difficult time identifying research data needs. So meager is their research methods background that it is entirely possible they can't imagine what to do with their existing data, let alone imagine what other data they might use. The result is a highly inefficient research data management system in nonprofits that wastes time collecting research data that are never used and not collecting research data that might be used. Getting rid of the wasted time and using it to make the most of the existing data could help a lot in nonprofit's grant applications, evaluation practices, and program planning. There are four important implications of this research for funders, nonprofit managers,
and researchers.

1) **Providing better research methods training for nonprofit staff and volunteers.** The nonprofits clearly expressed their interest in research methods training. And it also seems clear that such training would allow nonprofits to both collect more useful data and put more data to use. As a consequence of this research, the Toledo Community Foundation funded a pilot research methods training sequence for a group of nonprofit organizations in the summer of 2005. We designed this particular research training series through a nonprofit core group process similar to what we used in the initial diagnostic research. This process created four modules of 2.5 hours each focusing on developing good research questions, using qualitative research, writing a good survey, and managing data using spreadsheet software. The first module, on developing good research questions, was targeted at helping nonprofits collect data that would be more usable. The module on qualitative research came from nonprofits' concerns that funders were only interested in quantitative changes, and most nonprofit programs were too small, too short, or too focused on quality of life issues to produce reliable quantitative findings. So while the nonprofit was not able to say that "x percent of children in the summer enrichment program experienced an improved home environment" in numbers, they were accumulating stories from parents talking about how their child seemed calmer or happier, and they wanted to know how to collect and present those stories in a convincing way. The survey module was motivated by their desire to get better at collecting quantitative data, and the spreadsheet module came from their desire to better at managing such data. The initial evaluations of the training were positive, but we do not know the extent to which the training resulted in actual changes to the participants' research data practices.

2) **Educating funders on the importance of supporting nonprofit research and data management capacity.** Even if we are able to improve the skills of nonprofit staff and volunteers in research design and data management and analysis, we still face the problem that there are so many hours in the day, and most nonprofit staff and volunteers are already running over their
capacity just producing programs. Having better skills will be of no consequence if they do not have the time to deploy those skills. And most funders still do not provide adequate funding for the data collection and management that is needed for effective needs and asset assessments on the front end of a project and evaluation on the back end of a project. Part of this is due to a lack of knowledge on the part of funders, as my interviews with them indicated that they also were not well-trained in research methods. They certainly were not satisfied with the data that nonprofits provided them at either the grant proposal stage or the end-of-project evaluation stage, but they did not have enough expertise to make any recommendations for how to improve the situation. The funders are actually quite sympathetic to the research and data challenges faced by the nonprofits. But in Toledo, most of the funders are themselves stretched thin, and increasing funding for the research portion of one program could mean not funding another program at all. Finally, given that so much of the current research practice of nonprofit organizations is funder-driven, a frank discussion needs to occur among funders and nonprofits about the importance of doing evaluation research, including who should control the scope and method of such research, the lack of resources for doing such research, and the fears among nonprofits of presenting research that may show weaknesses in their funded programs. In addition, there needs to be broader discussion about evaluation models, particularly empowerment evaluation and participatory evaluation as forms of research which puts program improvement ahead of du jour funder-driven fetishes such as logic models.

3) Provide better stock databases for nonprofits to easily use. Even if we educate nonprofits on how to do better data collection and management, and even if we educate funders on the need to better support those efforts, nonprofits are likely to still face capacity challenges in collecting and using good data. One suggestion from both funders and the nonprofit core group was the provision of databases that nonprofits could easily access and use. Part of the overall project of which this research was a part involved the creation of a pilot neighborhood data system that could be accessed by any nonprofit to see census statistics
on an individual neighborhood. Prior to this, neighborhood-based organizations had to compile their own census statistics, and most neighborhood boundaries varied significantly from both zip code boundaries and census tract-level boundaries. Most of the neighborhood-based organizations applying for annual City of Toledo funding used the database and found it useful for their proposals. Our pilot database was primitive compared to some of the other neighborhood data systems in other cities. There are many ways to build such databases, and they can include hand-collected data as well as government data provided by the census, the police department, and other government agencies. The important thing is involving end-users in the process of creating the dataset so that it can be of maximum use to maximum users (Stoecker, 2006).

4) Engage higher education students and faculty in nonprofit research data collection and management. The final way that we can begin addressing the capacity issues faced by nonprofit organizations in collecting and managing data is by better engaging higher education institutions in providing research and data support. As the service learning movement in higher education begins to support community-based research (Strand et al., 2003), the possibilities grow for directing the work of faculty and students to serving the research data needs of nonprofit organizations. While faculty may be necessary for careful research design, students who are appropriately screened and trained can do original data collection and data analysis. They can also convert paper records to electronic records, with appropriate privacy protections in place. This does not absolve nonprofits from seeking out education on research design and data management, as they will still have to hold faculty and students accountable for all the work they do. But it can dramatically expand the organization's capacity to collect and manage data.

Conclusion

This project has focused on the first layer of issues surrounding nonprofits' research data needs and management. We have found challenges in collecting, managing, and using
research data, along with specific training and capacity building needs, in one urban area. Thinking more deeply, we have found challenges in even conceptualizing the data that nonprofits collect as research data. How different it is to see all of the information a nonprofit collects as providing an information base that can help the organization better design and implement programming, then as drudgery that must be endured for funders and government bureaucrats. Ultimately, the change we are seeking involves as much a change in how nonprofit staff, volunteers, and supporters think about data in a nonprofit setting as a change in what nonprofits do.

But we need to know much more. How similar is this situation in Toledo to other places where there may be more nonprofit managers with graduate degrees and other kinds of advanced training? Furthermore, what are the consequences of inefficient and low skilled research data practices for program outcomes and funding?

If I am correct that good research practice makes a real difference in receiving grants and developing effective programs, then we also need to develop locally appropriate interventions. In each locale, we need to ask a set of questions. What databases would be frequently used across a variety of organizations? What needs and assets data would be most frequently used? What might be the role of universities in providing or leveraging resources to support the training, infrastructure building, database development, and other related activities necessary to meet the research data challenges and fill the research data needs of nonprofits? How in-depth should research methods training be? Should it be scheduled over a long or short period of time?

This research is only a suggestion of the possible research data capacity issues facing nonprofits. We are at the cusp of a minimally understood capacity issue for nonprofit organizations. Hopefully this research will help catalyze further research to help support this increasingly important area of nonprofit research data capacity.

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References


Public and Private Sources of Assistance for Low-Income Households

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This study examined the types and combinations of public and private assistance received by three types of low-income households, including those with children, without children, and elderly without children. Using data from the 1996 and 2001 panels of the Survey of Income and Program Participation (SIPP), the results indicate that a large percentage of low-income households rely on public assistance, and receipt of private assistance is much less common. Approximately 7% of the sample use both types of assistance. The findings highlight differences in combinations of public and private assistance used by different household types. We also found some significant differences in the factors that determine receipt of public and private assistance. Practice and policy implications are discussed.

Keywords: public assistance; private assistance; combination of assistance; poverty; TANF

Approximately 37 million people (12.6% of the United States population) live in poverty, an income level that the federal government estimates cannot provide the basic necessities of living (U.S. Census Bureau, 2006). Poverty rates among various population groups are not constant, but reflect social policy...
decisions and racial/ethnic, gender, and citizenship status dis-
visions that exist within this country. For example, the elderly
experience a relatively low rate of poverty (10.1%), compared
to children (17.1%). Only 8.3% of non-Hispanic white children
are poor, while 24.9% of Black and 21.8% of Hispanic children
live in poverty. Approximately 29% of single female heads of
households are poor, more than two times the poverty rate of
single male heads of households, and more than five times the
poverty rate of married couples. The percentage of non-citizens
who live in poverty (20.4%) is almost double that of citizens.

When income from earnings, assets, other transactions
in the market place, and social insurance programs does not
meet the needs of low-income individuals and families, they
rely on assistance from other public and private sources
(Danziger, Corcoran, Danziger, & Heflin, 2000; Edin & Lein,
Public sources include means-tested government benefits such
as welfare, food stamps, subsidized housing, and Medicaid.
Charitable and non-profit organizations, such as churches,
food emergency providers, and other community groups, and
social networks are the two main sources of private assistance.
Private sources provide a variety of assistance, including cash,
clothing, food, and child care.

As the literature review that follows demonstrates, recent
social policy changes have weakened the safety net for low-
income individuals and families. The federal government’s
reduced commitment to low-income households highlights
the importance of the current study, which identifies the types
and combinations of public and private assistance that low-
income households rely on to meet their basic needs.

Public Sources of Assistance

Since the 1970s, several major changes reflecting the con-
servative Reagan era, George Bush Sr.’s “thousand points
of light,” Bill Clinton’s “welfare reform,” and most recently
George W. Bush’s “faith-based and community initiatives”
have been made in federal social policy that affect the poor
and vulnerable (Brooks, 2004; Marwell, 2004). The changes
include cutting federal government funding for public ben-
efits, increasing reliance on volunteer and private activity,
shifting federal funds to the private sector (referred to as "privatization"), and shifting administrative decisions related to program participation, such as eligibility and benefit levels, from the federal government to lower levels of government (referred to as "devolution").

According to Hacker (2004), these post-1970s changes have not collapsed this country's welfare state, but they have eroded social protection for vulnerable households in at least three main ways. First, privatization and devolution have altered, sometimes radically, the administration of previously stable social policies. Second, social programs now cover fewer of the economic risks faced by many households as a result of recent changes in employment (e.g., increases in low-wage, part-time, and unstable employment) and family structure, including high rates of marital disruption and single-parent households. Finally, significant changes in welfare policy have occurred, with the most extensive changes occurring as a result of the passage of the 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA).

PRWORA replaced the Aid to Families with Dependent Children (AFDC) program with Temporary Assistance to Needy Families (TANF). Instead of providing an entitlement to cash benefits for poor families with children, TANF provides temporary, employment-based cash assistance. States have increased discretion in designing and implementing their TANF programs, resulting in variability in eligibility requirements, benefits, and services. PRWORA also reduced other program benefits for low-income households. Examples of these include restrictions on food stamp eligibility for able-bodied adults without dependents who fail to meet work requirements, more stringent rules to qualify for Supplemental Security Income (SSI) for individuals with disabilities, and further decreases in immigrants' eligibility for many federal program benefits (for an extensive review of these changes, see Greenberg et al., 2002).

The TANF program has resulted in dramatic declines in welfare caseloads and is related to increased employment, earnings, and economic well-being for low-income families (Cancian, Haveman, Meyer, & Wolfe, 2002; Danziger et al., 2000). Despite these positive outcomes, other families exiting
or declining to receive TANF benefits are poor, are worse off financially than under the previous AFDC program, secure short-term, low paying employment providing few or no benefits, and continue to receive some type of means-tested benefits (Cancian, Meyer, & Wu, 2005; Ozawa & Yoon, 2005). Receiving assistance from means-tested benefit programs is common among all low-income households (Mosley & Tiehen, 2004; Teitler et al., 2004).

With recent changes in government benefit programs, private sources of assistance, including charitable and other non-profit organizations and social networks, become increasingly important to the economic well-being of low-income households.

Private Sources of Assistance

Charitable/non-profit organizations. Since the 1980s, private, nonprofit social agencies and other community-based organizations have relied heavily on financial support from the federal government. Instead of providing direct material or income assistance to low-income households, these organizations primarily provide a range of supportive assistance such as child care, employment training, and community development activities, some of which can contribute to the economic well-being of low-income households (Lynn, 2002; Marwell, 2004). Other local non-profit and charitable groups have responded to the unmet needs of low-income households by providing clothing and limited cash assistance and by establishing shelters and food assistance programs (Daponte, 2000; Edwin, 1991).

Food emergency program use among low-income households is common, with approximately one-third of these households using a food pantry or soup kitchen within a year (Ahluwalia, Dodds, & Baligh, 1998; Daponte, 2000). Both current and former welfare recipients frequently access assistance, including shelter, food, and clothing, from churches, community groups, and private, nonprofit organizations (Danziger et al., 2000; Edin & Lein, 1996; Hollar, 2003). Assistance from private sources can be particularly critical to unemployed mothers, as Danziger et al. found that approximately 50% of them receive assistance from private community sources. For unauthorized
immigrants, who are ineligible to receive public benefits, assistance from private sources can be especially important (Moretti & Perloff, 2000).

Assistance from private community sources is important to low-income households. However, when low-income individuals and families cannot meet their basic needs through earnings and/or public benefits, they tend to seek assistance from community-based agencies only after assistance is not available from their social networks (Ahluwalia et al., 1998).

Social Networks. Social networks, referring to the personal connections individuals have with others, such as extended family, friends, co-workers, neighbors, and acquaintances, can provide a variety of assistance to low-income households (Ahluwalia et al., 1998). Scholars have defined types of social support received from social networks in various ways (e.g., Henly, Danziger, & Offer, 2005; Thoits, 1995). Common categories of social support include emotional (communicating reassurance, caring, and concern), informational (giving advice, opinions, and information), and instrumental (providing transportation, child care, and other economically-related assistance). This review focuses on instrumental assistance.

A recent study of former and current welfare recipients and a review of similar literature (Henly et al., 2005) suggest that receipt of cash assistance from low-income individuals’ social networks is uncommon; and when such financial assistance is received, it is small compared to income from welfare benefits or monthly earnings. Researchers, however, acknowledge that social networks are an important safety net for low-income households (Danziger et al., 2000; Edin & Lein, 1996; Hollar, 2003; Litt, Gaddis, Fletcher, & Winter, 2000). In addition to providing small amounts of cash, social networks provide food, housing, clothing, childcare, and transportation, support employment, and prevent hardships such as homelessness (Harknett, 2006; Henly et al., 2005; Passero, Zax, & Zozus, 1991).

Compared to more economically advantaged households, low-income households have the greatest needs and experience the highest number of chronic life and adverse financial events, yet they have the smallest and most economically disadvantaged social networks (Auslander & Litwin, 1988;
McLeod & Kessler, 1990). These life problems and network characteristics frequently result in the inability of low-income households to obtain the needed assistance from their social support networks, despite the culturally strong value placed on social support among many vulnerable groups (Jayakody, 1998; Mickelson & Kubzansky, 2003).

Combining Sources of Assistance

Historically, economically disadvantaged households have combined income from available earnings with multiple types of public and private assistance, a practice which Zippay (2002) refers to as "income packaging." In his own research, Zippay found that displaced steel workers combined earnings and public and private assistance in different ways over time, but they all drew on multiple sources of external assistance during the years immediately following the job losses. The sources included social insurance programs, means-tested benefits, and social networks. Other researchers have examined combinations of public and private assistance accessed by low-income single mothers, food pantry users, the homeless, and the elderly.

One of the four main themes of Litt et al.'s (2000) qualitative study of 7 former TANF recipients was their reliance on both public (e.g., food stamps, school meals, and Medicaid) and private (e.g., food pantries and family) sources of assistance. A study on a larger sample of current or former welfare recipients confirmed the importance of using both public and private assistance and also suggests that using particular types of assistance depends on the mother's work history (Danziger et al., 2000). For example, receiving TANF and food stamp benefits declined as work involvement increased during an approximately two-year period (74.6% and 82.1% of mothers not working, and 40% and 68% of mothers working in all months received TANF and food stamp benefits respectively). Receiving food, shelter, or clothing from charitable groups also was tied to mothers' work, ranging from 47.8% of unemployed women to 20.7% of women working in all months. However, receiving assistance from social networks was approximately 13%, regardless of whether the mothers worked in none or all of the months prior to the survey. Edin and Lein (1996)
reported similar findings on the relation between work and using public and private sources of assistance in their sample of low-income, single mothers.

Hollar (2003) found that the overwhelming majority (82%) of former TANF recipients received assistance from either a public or private source, but only 9% of the mothers received assistance from church or other community groups. The importance of public and private assistance after welfare reform also was confirmed in a sample of new, unwed mothers in 20 large cities (Teitler et al., 2004). Receiving assistance from public programs and social networks, including families, friends, and the child’s father, was almost universal (94% and 96% respectively). The majority of the mothers relied on a combination of public and private support.

Several studies surveying different types of low-income households have examined the relation between food pantry use and food stamps. Daponte (2000) found that approximately one-half of low-income households were using food stamps at the time of her 1993 survey, compared to one-third that had used a food pantry within the previous 30 days; only one-quarter of the households receiving food pantry assistance also used food stamps. Bartfeld (2003) found approximately the same percentage of single mothers who accessed food pantries were currently receiving food stamps. She concluded that the mothers used food pantries as an alternative, not as a supplement, to food stamps. A more recent study confirmed that the use of food pantries was low compared to the use of food stamps, as was the simultaneous use of both programs (Mosley & Tiehen, 2004). However, over a three-year period approximately 69% of food pantry users also received food stamps, and one-third of food stamp recipients also visited a food pantry, suggesting that low-income households access the two programs when they are needed.

In a sample of low-income individuals seeking or receiving assistance from private, non-profit agencies, approximately 82% had used at least one public or private assistance program within the previous 12 months (Ahluwalia et al., 1998). Participation in public assistance programs was as high as 72% for AFDC, with approximately one-third of the participants having used a food pantry/soup kitchen. The homeless
also rely on assistance from both public and private sources, as over one-half of the homeless in a Los Angeles study received a government benefit from a means-tested (e.g., AFDC, food stamps, and general relief) or social insurance (e.g., unemployment compensation) program. Approximately 33% recently had received cash assistance (average of $80) from family or friends, and social networks also provided housing and meals (Schoeni & Koegel, 1998).

Research on public and private sources of assistance for low-income elderly individuals is rare, but one national study (Krause & Shaw, 2002) found that 10.5% of elderly individuals received a means-tested benefit (e.g., SSI and food stamps), with women being much more likely to receive such assistance (27% were men; 73% were women). Older men, but not women, who used public assistance reported receiving less social support from family and friends, were less satisfied with the assistance they received, and experienced more negative interactions compared to older men not receiving such assistance.

As the previous review indicates, low-income households use different patterns and types of public and private assistance, and this use likely varies over time, depending on availability and need. The review also indicates that public sources of support tend to predominate, both before and after welfare reform.

The Current Study

We used data from the Survey of Income and Program Participation (SIPP) to examine the use of public and private assistance among low-income households. As the previous review indicates, past studies have examined these sources of support in specific populations such as current and former welfare recipients, food emergency program users, and the homeless. The current study analyzes three mutually exclusive groups of low-income individuals and families, including households with children (containing both elderly and non-elderly members), non-elderly households without children, and elderly households without children. We chose to examine these three types of low-income households for two main reasons. First, no or few studies have used national data
Public and Private Sources of Assistance

to determine the public and private assistance received by these three types of households. Second, particular public assistance benefits are available only to families with children (e.g., school meals and TANF), and the elderly are eligible for some social program benefits (e.g., Medicaid) based on their age. Compared to previous research, we also examine a broader range of public and two types of private sources of support, including nonprofit or charitable organizations and social networks.

We examined the following research questions: First, what types of public and private assistance do low-income households use and does the use of public and private assistance vary by household type? Second, what factors are associated with the receipt of any public and any private assistance? Third, do low-income households combine public and private assistance, and do the patterns vary by type of household?

Method

Data and Sample

In this analysis, we used data from the 1996 and 2001 panels of the SIPP, a longitudinal survey on nationally representative samples of noninstitutionalized U. S. households. The SIPP is conducted every four months within an approximately three- to four-year period for each panel. Interviews for the 1996 panel were conducted between January 1996 through February 2000, and the 2001 panel followed another group of respondents from February 2001 to January 2004. At each interview, a core questionnaire and various “topical modules” were administered. The core questionnaire contains information on labor force, income, assets, family composition, and program participation. The topical modules include information on a variety of subjects such as education, employment, earnings, immigration, child care, and welfare reform. Data for this analysis were taken from interviews conducted between August and November 1998 (1996 panel) and between June and September 2003 (2001 panel) when the wave 8 welfare reform data were collected. This allowed us to analyze the use of public and private assistance the year PROWA was implemented and six years later. The core questionnaire provided
information on the public assistance variables and most of the sample characteristics, and the topical modules on welfare reform and adult well-being were used to construct the private assistance variables.

Respondents who were at least 18 years old and whose family income at the month of the interview was less than 185% of the federal poverty line were included in the study. We included respondents with income less than 185% of poverty, because this is the upper limit of eligibility for receiving some means-tested benefits such as the Special Supplemental Program for Women, Infants, and Children (WIC) and school meals. We also restricted our analysis to respondents in each panel who had valid data on our independent and dependent variables, resulting in a sample of 23,168 respondents (12,311 in the 1996 panel; 10,857 in the 2001 panel).

**Measures**

**Dependent variables.** In our analysis, we defined two main dependent variables: the receipt of public and private assistance during the four months prior to the interview. We also examined combinations of these types of assistance. Our public assistance variable included three forms of cash benefits, including AFDC or TANF, general assistance, and SSI. In addition, we included receipt of non-cash benefits from the food stamp, school meals, Medicaid, and WIC programs, and child care, energy, and public housing assistance. The variable, receipt of public assistance, was coded 1 if the respondents reported receiving any cash or non-cash benefits; and coded 0, if they received no benefits.

We measured receipt of assistance from two private sources, including non-profit or charitable organizations and social networks (family, relatives, friends, and employers). The two private sources assisted with (1) transportation (e.g., gas vouchers, bus or subway tokens or passes, rides to medical appointments); (2) child care payments; (3) food (e.g., money, vouchers, or certificates to buy food; food or meals from a shelter, soup kitchen, or charity); (4) clothing; (5) housing expenses; and (6) short-term cash. We also used responses to questions related to whether the two sources of private support provided assistance for evictions, telephone line disconnections, gas,
oil, or electric bills, rent or mortgage, or seeing a dentist and a doctor. Because the percentage of the sample receiving either of the two types of private assistance was low (less than 5%), we combined the two categories in our multivariate analysis. Receipt of private assistance was coded 1, if respondents reported receipt of any private assistance, and 0 otherwise.

Independent variables. In our multivariate analyses, we examined multiple factors that previous research suggests influences receipt of private or public assistance among low-income households (e.g., Biggerstaff, Morris, & Nichols-Casebolt, 2002; Daponte, 2000; Martin, Cook, Rogers, & Joseph, 2003). The covariates included age, gender, marital status, education, race/ethnicity, citizenship status, number of respondent's children in the household less than age 18, assets (home and car ownership), region of country, living in a metropolitan area, history of welfare receipt, employment status, work disability, and level of poverty. Finally, we controlled for the year of the SIPP panel. Table 1 presents the variable descriptions and weighted frequency distributions of the characteristics by the three types of households: with children, non-elderly without children, and elderly without children. Although variations on the characteristics exist among the three types of households, none of the results are unexpected.

Data Analysis

Weighted frequency distributions were used to examine the use of public and private assistance, combinations of the two types of assistance, and whether the use of public and private assistance varied by household type. We used multivariate logistic regression to identify the factors associated with the receipt of any public and any private assistance. Multivariate logistic regression estimates the effects of each independent variable on the log odds of the relative likelihood of receiving any of the two types of assistance while controlling for the effects of the other independent variables (Allison, 1999).
Table 1. Characteristics of Low-Income Individuals by Household Type (Weighted Descriptive Statistics)

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>All sample (N=23,168)</th>
<th>Elderly and Non-elderly with Children (N=10,031)</th>
<th>Non-elderly without Children (N=7,670)</th>
<th>Elderly without Children (N=5,467)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-24</td>
<td>14.1%</td>
<td>19.1%</td>
<td>17.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>25-34</td>
<td>19.0%</td>
<td>32.9%</td>
<td>14.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>35-44</td>
<td>19.7%</td>
<td>31.2%</td>
<td>17.9%</td>
<td>0.0%</td>
</tr>
<tr>
<td>45-64</td>
<td>24.0%</td>
<td>14.4%</td>
<td>51.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>65 and older</td>
<td>23.2%</td>
<td>2.4%</td>
<td>0.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>40.5%</td>
<td>39.0%</td>
<td>48.2%</td>
<td>31.1%</td>
</tr>
<tr>
<td>Female</td>
<td>59.5%</td>
<td>61.0%</td>
<td>51.8%</td>
<td>68.9%</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>43.4%</td>
<td>58.3%</td>
<td>28.8%</td>
<td>37.5%</td>
</tr>
<tr>
<td>Widowed</td>
<td>12.9%</td>
<td>2.3%</td>
<td>5.5%</td>
<td>45.0%</td>
</tr>
<tr>
<td>Divorced/separated</td>
<td>17.2%</td>
<td>14.7%</td>
<td>23.8%</td>
<td>11.8%</td>
</tr>
<tr>
<td>Never Married</td>
<td>26.5%</td>
<td>24.7%</td>
<td>41.9%</td>
<td>5.7%</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; High School</td>
<td>33.7%</td>
<td>32.3%</td>
<td>27.4%</td>
<td>46.2%</td>
</tr>
<tr>
<td>High School</td>
<td>34.0%</td>
<td>34.5%</td>
<td>34.3%</td>
<td>32.7%</td>
</tr>
<tr>
<td>&gt; High School</td>
<td>32.3%</td>
<td>33.2%</td>
<td>38.3%</td>
<td>21.1%</td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>62.1%</td>
<td>49.9%</td>
<td>67.0%</td>
<td>78.0%</td>
</tr>
<tr>
<td>Black</td>
<td>16.6%</td>
<td>18.8%</td>
<td>16.9%</td>
<td>11.8%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>16.1%</td>
<td>24.7%</td>
<td>11.4%</td>
<td>6.9%</td>
</tr>
<tr>
<td>Other</td>
<td>5.2%</td>
<td>6.6%</td>
<td>4.7%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Citizenship Status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Citizen</td>
<td>89.1%</td>
<td>82.1%</td>
<td>92.5%</td>
<td>97.2%</td>
</tr>
<tr>
<td>Non-citizen</td>
<td>10.9%</td>
<td>17.9%</td>
<td>7.5%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Children &lt; 18 years old</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>57.1%</td>
<td>0.0%</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>1</td>
<td>13.8%</td>
<td>32.2%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>2</td>
<td>14.6%</td>
<td>33.9%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>&gt; 2</td>
<td>14.5%</td>
<td>33.8%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Owned a home</td>
<td>55.0%</td>
<td>49.6%</td>
<td>52.1%</td>
<td>69.9%</td>
</tr>
<tr>
<td>Owned a car</td>
<td>63.7%</td>
<td>65.4%</td>
<td>64.8%</td>
<td>58.9%</td>
</tr>
<tr>
<td>Region of Country</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midwest</td>
<td>20.9%</td>
<td>18.8%</td>
<td>22.6%</td>
<td>22.4%</td>
</tr>
<tr>
<td>South</td>
<td>40.6%</td>
<td>40.9%</td>
<td>40.2%</td>
<td>40.6%</td>
</tr>
<tr>
<td>Northeast</td>
<td>17.6%</td>
<td>16.0%</td>
<td>17.6%</td>
<td>20.8%</td>
</tr>
<tr>
<td>West</td>
<td>20.9%</td>
<td>24.3%</td>
<td>19.6%</td>
<td>16.2%</td>
</tr>
<tr>
<td>Metropolitan Status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metropolitan statistical area</td>
<td>53.0%</td>
<td>53.3%</td>
<td>52.2%</td>
<td>53.7%</td>
</tr>
<tr>
<td>Non-metropolitan</td>
<td>47.0%</td>
<td>46.7%</td>
<td>47.8%</td>
<td>46.3%</td>
</tr>
<tr>
<td>Welfare History (ever received)</td>
<td>4.7%</td>
<td>9.7%</td>
<td>1.5%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

(table continues next page)
Table 1. Characteristics of Low-Income Individuals by Household Type (Weighted Descriptive Statistics) [continued from previous page]

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>All sample (N=23,168)</th>
<th>Elderly and Non-elderly with Children (N=10,031)</th>
<th>Non-elderly without Children (N=7,670)</th>
<th>Elderly without Children (N=5,467)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time (35+ hours per week)</td>
<td>26.9%</td>
<td>39.6%</td>
<td>27.5%</td>
<td>1.1%</td>
</tr>
<tr>
<td>Part-time</td>
<td>18.0%</td>
<td>21.8%</td>
<td>22.1%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Retired</td>
<td>21.7%</td>
<td>2.3%</td>
<td>8.7%</td>
<td>79.7%</td>
</tr>
<tr>
<td>Unemployed</td>
<td>33.4%</td>
<td>36.3%</td>
<td>41.7%</td>
<td>14.9%</td>
</tr>
<tr>
<td>Work Disability</td>
<td>17.0%</td>
<td>11.7%</td>
<td>30.4%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Level of Poverty</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 50%</td>
<td>16.3%</td>
<td>17.3%</td>
<td>22.7%</td>
<td>4.2%</td>
</tr>
<tr>
<td>50-99%</td>
<td>25.2%</td>
<td>25.0%</td>
<td>25.4%</td>
<td>25.0%</td>
</tr>
<tr>
<td>100-149%</td>
<td>32.9%</td>
<td>33.0%</td>
<td>27.4%</td>
<td>41.4%</td>
</tr>
<tr>
<td>150-184%</td>
<td>25.6%</td>
<td>24.7%</td>
<td>24.5%</td>
<td>29.4%</td>
</tr>
<tr>
<td>Panel status</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1996</td>
<td>51.3%</td>
<td>53.1%</td>
<td>48.1%</td>
<td>52.8%</td>
</tr>
<tr>
<td>2001</td>
<td>48.7%</td>
<td>46.9%</td>
<td>51.9%</td>
<td>47.2%</td>
</tr>
</tbody>
</table>

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels

Results

Use of Public and Private Assistance

Table 2 shows the use of public and private assistance by household type. Although a low percentage of all households (approximately 12%) received cash benefits, households with children were much more likely to receive non-cash benefits (approximately 70%, compared to 28.6% of non-elderly and 25.9% of elderly without children). Not surprising, in contrast to other household types, households with children were more likely to receive AFDC/TANF (7.0%), food stamps (21.9%), WIC (10.9%), and school meals (58.4%). On the other hand, households without children were approximately twice as likely to receive SSI compared to households with children (5.2%). A smaller percentage of elderly households without children (9.0%) received food stamps, compared to households with children (21.9%) and other households without children (12.0%). Elderly households also were less likely (6.4%) than non-elderly households with and without children to receive any private assistance (11.1% and 9.5% respectively). An even larger difference exists in receiving assistance from social
networks between elderly households without children (1.6%) and other households with (6.0%) and without children (5.0%).

Table 2. Types of Public and Private Assistance (Weighted Descriptive Statistics)

<table>
<thead>
<tr>
<th>Sources of Assistance</th>
<th>All sample (N=23,168)</th>
<th>Elderly and Non-elderly with Children (N=10,031)</th>
<th>Non-elderly without Children (N=7,670)</th>
<th>Elderly without Children (N=5,467)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Assistance—Cash Benefit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFDC or TANF</td>
<td>3.2%</td>
<td>7.0%</td>
<td>0.6%</td>
<td>0.1%</td>
</tr>
<tr>
<td>General assistance</td>
<td>0.9%</td>
<td>1.4%</td>
<td>0.9%</td>
<td>0.2%</td>
</tr>
<tr>
<td>SSI</td>
<td>8.8%</td>
<td>5.2%</td>
<td>11.8%</td>
<td>11.0%</td>
</tr>
<tr>
<td>Non-Cash Benefit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Stamps</td>
<td>15.6%</td>
<td>21.9%</td>
<td>12.0%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>20.1%</td>
<td>21.8%</td>
<td>19.3%</td>
<td>18.3%</td>
</tr>
<tr>
<td>Child care assistance</td>
<td>0.6%</td>
<td>1.5%</td>
<td>0.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>WIC</td>
<td>5.0%</td>
<td>10.9%</td>
<td>0.9%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Energy assistance</td>
<td>2.9%</td>
<td>3.1%</td>
<td>2.3%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Public housing assistance</td>
<td>9.4%</td>
<td>10.2%</td>
<td>8.1%</td>
<td>9.9%</td>
</tr>
<tr>
<td>School meals</td>
<td>26.4%</td>
<td>58.4%</td>
<td>3.8%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Summary variable</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any cash benefit</td>
<td>11.9%</td>
<td>11.6%</td>
<td>12.8%</td>
<td>11.1%</td>
</tr>
<tr>
<td>Any non-cash benefit</td>
<td>45.9%</td>
<td>70.2%</td>
<td>28.6%</td>
<td>25.9%</td>
</tr>
<tr>
<td>Any public benefit</td>
<td>46.0%</td>
<td>70.3%</td>
<td>28.9%</td>
<td>26.1%</td>
</tr>
<tr>
<td>Private Assistancea</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Child care assistance</td>
<td>0.0%</td>
<td>0.1%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Food, groceries, meals</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.8%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Clothing</td>
<td>0.5%</td>
<td>0.8%</td>
<td>0.4%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Housing</td>
<td>2.8%</td>
<td>2.5%</td>
<td>2.5%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Short-term cash</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.2%</td>
<td>0.1%</td>
</tr>
<tr>
<td>For home eviction</td>
<td>0.1%</td>
<td>0.1%</td>
<td>0.2%</td>
<td>0.0%</td>
</tr>
<tr>
<td>For telephone disconnection</td>
<td>0.5%</td>
<td>0.6%</td>
<td>0.6%</td>
<td>0.1%</td>
</tr>
<tr>
<td>For paying utility bills</td>
<td>3.4%</td>
<td>4.6%</td>
<td>3.5%</td>
<td>1.1%</td>
</tr>
<tr>
<td>For paying rent or mortgage</td>
<td>2.8%</td>
<td>3.9%</td>
<td>3.0%</td>
<td>0.6%</td>
</tr>
<tr>
<td>For seeing a dentist</td>
<td>0.4%</td>
<td>0.3%</td>
<td>0.6%</td>
<td>0.2%</td>
</tr>
<tr>
<td>For seeing a doctor</td>
<td>0.8%</td>
<td>0.7%</td>
<td>1.2%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Summary variable</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any private assistance from social networks</td>
<td>4.7%</td>
<td>6.0%</td>
<td>5.0%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Any private assistance from charitable/non-profit organizations</td>
<td>4.8%</td>
<td>5.6%</td>
<td>4.5%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Any private assistance</td>
<td>9.5%</td>
<td>11.1%</td>
<td>9.5%</td>
<td>6.4%</td>
</tr>
</tbody>
</table>

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels

aPrivate assistance includes assistance from social networks and from non-profit or charity organizations.
With the exception of elderly households without children, receipt of private assistance from social networks was more common than assistance from non-profit organizations and charitable groups. Help with housing, paying utility bills, and paying rent or mortgage were the most common types of private assistance (ranging from 2.8% to 3.4%). However, the use of these three types of private assistance varied slightly by household type. In comparison to households with children and others without children (2.5%), elderly households were more likely to receive private housing assistance (3.8%). On the other hand, households with children were more likely to receive private assistance for paying electric bills (4.6%) and rent and mortgage (3.9%) than elderly households without children (about 1%). This pattern also is apparent for non-elderly households without children.

Factors Associated with Receipt of any Public and any Private Assistance

Table 3 presents the findings from the two logistic analyses examining the factors associated with the use of any public and any private assistance for low-income households. Female heads of households, Blacks and Hispanics, and respondents with more children, a welfare history, a work disability, and lower poverty ratios were more likely to receive both public and private assistance. For example, low-income households with one child (odds ratio=7.1), two children (odds ratio=14.8), and three or more children (odds ratio=25.2) were significantly more likely to receive public assistance than were those without children. On the other hand, we found that non-citizens and households owning assets (a home or vehicle) and living in a metropolitan area were less likely to receive any public or private assistance.

However, there are some differences in the factors that determine receipt of public or private assistance. First, elderly households were 2.3 times as likely to receive public assistance as those who were 18-24 years old after controlling for other factors, but no significant difference in the likelihood of receiving private assistance between these two groups was found. Second, the effect of marital status on receiving public and private assistance also varied. Married households (odds ratio=.5) and widowed households (odds ratio=.8) were less
Table 3. Multivariate Logistic Analysis of Receipt of Any Public and Private Assistance

<table>
<thead>
<tr>
<th>Variables</th>
<th>Model 1: Receipt of Any Public Assistance</th>
<th>Model 2: Receipt of Any Private Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Coeff.</td>
<td>S.E.</td>
</tr>
<tr>
<td>Age (18-24)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25-34</td>
<td>0.172 **</td>
<td>0.067</td>
</tr>
<tr>
<td>35-44</td>
<td>0.342 ***</td>
<td>0.068</td>
</tr>
<tr>
<td>45-64</td>
<td>0.175 *</td>
<td>0.073</td>
</tr>
<tr>
<td>65 and 65+</td>
<td>0.819 ***</td>
<td>0.093</td>
</tr>
<tr>
<td>Gender (male)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>0.242 ***</td>
<td>0.037</td>
</tr>
<tr>
<td>Marital Status (never married)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>-0.664 ***</td>
<td>0.056</td>
</tr>
<tr>
<td>Widowed</td>
<td>-0.244 ***</td>
<td>0.073</td>
</tr>
<tr>
<td>Divorced/</td>
<td>0.011</td>
<td>0.061</td>
</tr>
<tr>
<td>separated</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education (less than high school)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High School</td>
<td>-0.415 ***</td>
<td>0.042</td>
</tr>
<tr>
<td>More than high school</td>
<td>-0.815 ***</td>
<td>0.045</td>
</tr>
<tr>
<td>Race/Ethnicity (white)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>0.706 ***</td>
<td>0.048</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0.714 ***</td>
<td>0.058</td>
</tr>
<tr>
<td>Other</td>
<td>0.618 ***</td>
<td>0.079</td>
</tr>
<tr>
<td>Citizenship Status (citizen)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-citizen</td>
<td>-0.137 *</td>
<td>0.065</td>
</tr>
<tr>
<td>Number children &lt; 18 years old (none)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>1.957 ***</td>
<td>0.056</td>
</tr>
<tr>
<td>2</td>
<td>2.694 ***</td>
<td>0.063</td>
</tr>
<tr>
<td>&gt; 2</td>
<td>3.227 ***</td>
<td>0.068</td>
</tr>
<tr>
<td>Home Ownership (no)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owned</td>
<td>-0.902 ***</td>
<td>0.036</td>
</tr>
<tr>
<td>Vehicle Ownership (no)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Owned</td>
<td>-0.309 ***</td>
<td>0.037</td>
</tr>
<tr>
<td>Region of Country (south)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Midwest</td>
<td>0.071</td>
<td>0.046</td>
</tr>
<tr>
<td>Northeast</td>
<td>0.160 ***</td>
<td>0.050</td>
</tr>
<tr>
<td>West</td>
<td>0.013</td>
<td>0.049</td>
</tr>
<tr>
<td>Metropolitan Area (non-metropolitan)</td>
<td>-0.322 ***</td>
<td>0.036</td>
</tr>
<tr>
<td>Welfare History (no history)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ever Received</td>
<td>0.662 ***</td>
<td>0.095</td>
</tr>
</tbody>
</table>

(table continued next page)
Table 3. Multivariate Logistic Analysis of Receipt of Any Public and Private Assistance (continued from previous page)

<table>
<thead>
<tr>
<th>Variables</th>
<th>Model 1: Receipt of Any Public Assistance</th>
<th>Model 2: Receipt of Any Private Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Coeff.</td>
<td>S.E.</td>
</tr>
<tr>
<td>Employment status (no work)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time (35+ hours per week)</td>
<td>-0.574 ***</td>
<td>0.052</td>
</tr>
<tr>
<td>Part-time</td>
<td>-0.319 ***</td>
<td>0.052</td>
</tr>
<tr>
<td>Retired</td>
<td>-0.436 ***</td>
<td>0.067</td>
</tr>
<tr>
<td>Work Disability (no disability)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability</td>
<td>1.487 ***</td>
<td>0.055</td>
</tr>
<tr>
<td>Level of Poverty (150-184%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 50%</td>
<td>0.299 ***</td>
<td>0.058</td>
</tr>
<tr>
<td>50-99%</td>
<td>0.891 ***</td>
<td>0.048</td>
</tr>
<tr>
<td>100-149%</td>
<td>0.315 ***</td>
<td>0.044</td>
</tr>
<tr>
<td>Panel status (1996 panel)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2001</td>
<td>0.167 ***</td>
<td>0.035</td>
</tr>
<tr>
<td>Intercept</td>
<td>-0.890 ***</td>
<td>0.088</td>
</tr>
</tbody>
</table>

Sample: 23,168 adults (at least 18 years old) with family income below 185% of the federal poverty line in 1996 and 2001 SIPP panels.

Note: Reference categories are in parenthesis.

* p < .05 ** p < .01 *** p < .001

likely to receive public benefits, compared to those who were never married. However, widowed low-income households tended to rely on private assistance. Divorced/separated households were significantly more likely to receive private assistance, but they were no more likely to receive public assistance than were never married households. Third, education was an important predictor of receiving public assistance, but not an important determinant of private assistance. Fourth, living in the northeast increased the likelihood of receiving public assistance compared to residence in the south, but living in the west increased the odds of receiving private assistance (odds ratio=1.3). Fifth, those who were employed or retired were less likely to receive public assistance, but only working part-time was related to receipt of any private assistance with the odds ratio (1.1) indicating an increased risk. Sixth, households in the 2001 SIPP panel were 1.2 times as likely to receive any public benefits, compared to households in the 1996 panel.

Given that the number of families receiving cash assistance significantly dropped after PROWA, we conducted
additional analyses for cash and non-cash benefits. We found that households in the most recent SIPP panel were significantly less likely to receive cash benefits (odds ratio=0.8), but more likely to receive non-cash public assistance (odds ratio=1.2), compared to households in the 1996 panel when the PROWA was implemented. We found no difference between panels for receipt of private assistance.

Finally, compared with households with the largest incomes (between 150 and 184% of poverty), households in all other income categories were more likely to receive public assistance. These results were expected. Unexpectedly, the poorest households (< 50% of poverty) had the lowest odds ratio (1.4, compared to 2.4 for 50-99% of poverty). The results for receipt of private assistance (odds ratio=2.1) indicate the relative importance of private assistance to these most impoverished households.

**Combining Sources of Assistance**

How do low-income households combine private and public assistance? Figure 1 shows the distribution of combinations of private and public assistance among four mutually exclusive categories: neither public nor public assistance, public assistance only, private assistance only, and both public and private assistance. The first bar in Figure 1 (for the entire sample) indicates that during the four-month period nearly two-fifths of low-income households received public assistance only, and more than one-half of the households received neither type of assistance. Approximately 7% of the sample used both types of assistance, and an even smaller percentage (2.3%) of the households used only private assistance. These results indicate that a high percentage of low-income households use only public assistance, and relying exclusively on private assistance is uncommon.

Do combinations of private and public assistance vary by household type? Figure 1 indicates significant differences in the use of combined public and private assistance among different household types. About three-fifths of households with children received public assistance only, compared to approximately one-fifth of both types of households without children. The majority of low-income households without children received neither public nor private assistance (67.2% of
Public and Private Sources of Assistance

non-elderly households; 72.4% of elderly households), compared with 28.3% of households with children. Less than 2% of households with children and elderly households without children received private assistance only, compared to approximately 4% of non-elderly households without children.

We further examined the relation between public and private assistance. The result of the cross-tabulation indicates that 15.6% of those receiving public assistance also received private support ($\chi^2 [1, N = 23,168] = 908.6, p < .0001$) in the four-month period. This suggests that low-income households that receive public assistance are more likely to receive private assistance. This result was confirmed by a multivariate analysis, indicating that households receiving public assistance were 3.0 times as likely to receive private assistance compared to those not receiving public assistance.

Figure 1. Combined Public and Private Assistance

Discussion

The main purpose of this study was to examine the types and combinations of public and private assistance that three types of low-income households—those with children and
non-elderly and elderly households without children—use to meet their basic needs. We also examined factors associated with receiving public and private assistance.

Public Assistance

Our analysis highlights the importance of public assistance programs for low-income households, a finding that is consistent with previous research (e.g., Danziger et al., 2000; Hollar, 2003; Litt et al., 2000; Teitler et al., 2004). Receiving public assistance, predominately in the form of non-cash benefits, is particularly important for low-income households with children, as approximately 70% of these households receive some type of public benefit during a four-month period. Public assistance also is important for both types of households without children, as more than a quarter of these households receive some type of public benefit.

Despite the importance of public benefits for low-income individuals and families, many households fail to receive assistance from public sources such food stamps, SSI, TANF, government insurance programs, rental assistance, and WIC, even when they appear to qualify (Bitler, Currie, & Scholz, 2003; Daponte, Sanders, & Taylor, 1998; Remler & Glied, 2003; Zedlewski & Rader, 2005). Of course some low-income households might not need particular types of assistance. For example, the elderly receive food stamps at about one-half the rate of younger age groups, which appears to be the result of their decreased need for food assistance (Haider, Jacknowitz, & Schoeni, 2003). The low percentage of elderly households receiving food stamps compared to other households also is evident in our study.

Other reasons for the lack of participation in public benefit programs include strict eligibility criteria and transaction costs, including the number of required visits and completing multiple application forms. Inaccurate or lack of information on benefit availability and eligibility requirements, social stigma, and disqualifications because of program rule violations also can deter participation (Daponte et al., 1998; Remler & Glied, 2003). For immigrants, lack of policy knowledge is further compounded by their language barriers and concerns about their citizenship status (Greenberg et al., 2002).
Our multivariate results indicate that a number of household characteristics are related to the probability of receiving public assistance. The results generally are consistent with results from the few studies that have examined similar factors in multivariate analyses (e.g., Biggerstaff et al., 2002; Daponte, 2000; Hao, 2003; Moretti & Perloff, 2001; Zedlewski & Rader, 2005). The findings for two of the significant coefficients—the relatively low odds ratio for the most economically disadvantaged households and the positive coefficient for the most recent SIPP panel—warrant a brief discussion.

Compared to the most financially advantaged low-income households, the odds ratio for households with income less than 50% of poverty is almost identical to the third category (100-149% of poverty) and close to one-half the odds of households in the mid-poverty category. These findings are consistent with other studies examining food stamp use of people using private food programs, which indicate that individuals with the greatest need are less likely to participate in public food assistance programs (Biggerstaff et al., 2002; Martin et al., 2003). Our results suggest that households with the greatest financial need might be denied public benefits because of a sanction or face other barriers to accessing public programs.

Although we expected that low-income households surveyed in the 2001 SIPP panel, after welfare reform had been implemented for six years, would be less likely to receive public benefits than those in the 1996 panel, the opposite is evident. Additional analysis, however, indicates that households surveyed in the 2001 panel are less likely to receive cash benefits, but more likely to receive non-cash benefits. This suggests that TANF reform is successful in reducing welfare caseloads, but appears to increase the need for other forms of public assistance.

Private Assistance

In contrast to receiving public assistance, a low percentage of all households receive private assistance from non-profit agencies, charitable groups, and social networks (ranging from 6.4% for elderly households without children to 11.1% for households with children). Although this finding is consistent with previous research, some studies have found higher rates
of receiving private assistance among low-income households (e.g., Ahluwalia et al., 1998; Danziger et al., 2000; Teitler et al., 2004). These discrepancies might be the result of examining longer time periods, which indicates that private assistance is received more sporadically than public assistance. Type of sample (e.g., welfare recipients) and including assistance such as child support payments from the child’s absent father also might account for these differences.

Other reasons might account for the low level of assistance that low-income households receive from private sources. As discussed previously, most nonprofit social agencies do not provide cash or other instrumental types of assistance, and social networks of low-income households tend to be ill prepared to provide such assistance because they also lack economic resources. In addition, social networks typically involve norms of reciprocity; thus being the recipient of assistance frequently results in incurring a debt to the provider. If members of a recipient’s social network are more impoverished or demanding than the recipient, the exchanges could have an overall negative economic impact for the recipient (Harknett, 2006). Because poor elderly individuals have few opportunities to improve their financial situation, indicating the need for long-term assistance and less ability to reciprocate, they might have increased difficulty accessing assistance from their social networks (Krause & Shaw, 2002). This latter hypothesis is supported by our descriptive findings, which suggest that elderly households have more difficulties accessing assistance from their social networks than other types of low-income households. Seeking assistance and relying on others also can extract psychological costs such as feelings of stress and helplessness (Ahluwalia et al., 1998); social networks are not universal, not always geographically close (Schoeni & Koegel, 1998), and frequently provide assistance that is more temporary and unreliable than public benefits (Henly & Lyons, 2000; Litt et al., 2000).

Many of the same characteristics are associated with the probability of receiving any public and any private assistance. Female gender, Blacks and Hispanics, higher numbers of children, welfare history, work disability, and being more economically disadvantaged increase the odds of receiving
both types of assistance. Two of these findings merit a brief discussion. Previous multivariate analyses examining the relation between race/ethnicity and receiving public benefits, such as food stamps, and accessing private assistance have produced mixed results (e.g., Biggerstaff et al., 2002; Daponte, 2000; Zedlewski & Rader, 2005). Other research suggests that Latinos and African Americans are less likely to receive financial support from their social networks, but more likely to receive other types of support such as co-residence and child care (Hogan, Hao, & Parish, 1990; Lee & Aytac, 1998). Comparisons of the odds ratios among the various categories of poverty suggest that private sources of assistance are particularly important for the most economically disadvantaged households (<50% of poverty).

Our results indicate that owning assets, non-citizenship, and residing in a metropolitan area are associated with a lower probability of receiving any private and any public assistance. Asset ownership might be an indication that the household has additional resources on which draw, or the assets might be a barrier (e.g., asset tests for public benefits) to receiving assistance that is needed. The non-citizenship findings are consistent with past research (Hao, 2003; Moretti & Perloff, 2000). Unfortunately, private assistance does not appear to substitute for the decreased eligibility of non-citizens for public benefits since welfare reform.

Although our findings for urban residence are consistent with some research (e.g., Bitler et al., 2003), other scholars have suggested that urban residence might increase, not decrease, receipt of public and private assistance. In urban areas, cultural or psychological factors might increase the acceptability of participation in public programs, and urban areas are more likely than rural areas to have public transportation. Rural areas also have fewer non-profit organizations, and rural agencies, such as those operating food assistance programs, tend to be less structured and cooperate less frequently with larger churches and other agencies (Krueger, Rogers, Ridao-Cano, & Hummer, 2004; Molnar, Duffy, Claxton, & Bailey, 2001).

Unlike the results for receipt of public assistance, age, education, employment status, and the SIPP panel year have little or no relation to receiving private assistance. The latter finding
suggests that private sources of assistance are not used to substitute or supplement reductions in public cash benefits as a result of welfare reform. Finally, compared to never married households, widows are less likely to receive public assistance, but more likely to receive private assistance; divorced/separated individuals also are more likely to receive private assistance. Perhaps widowed and divorced/separated low-income households have assets that disqualify them from public benefits, yet they are able draw on private sources of assistance.

**Combined Public and Private Assistance**

Our examination of the exclusive use of public, private, and both types of assistance during a four-month period confirms the importance of public versus private assistance for all households, but particularly for households with children (approximately 61% use public assistance only). Although reliance only on private assistance is more important for non-elderly households without children, the exclusive use of private assistance is uncommon. A low percentage of low-income households also access both public and private assistance, with the largest percentage (9.7%) found for households with children. Although other research has reported higher percentages of low-income households receiving both types of assistance (e.g., Bartfeld, 2003; Daponte, 2000; Mosley & Tiehen, 2004; Teitler et al., 2004), these discrepancies might be due to the length of the time period examined, the type of sample, and including different measures of private and public assistance.

We were unable to examine the simultaneous use of both public and private assistance, but our analysis determined that 15.6% of households that receive public assistance also receive private assistance some time during a four-month period. The results are consistent with the conclusions reached by other researchers: low-income households tend to use private sources as an alternative, not as a supplement, to public assistance. However, as Mosely and Tiehen’s (2004) study suggests, over time higher percentages of low-income households use both public and private sources of assistance.
Limitations and Practice and Policy Implications

This study has several limitations. We were unable to evaluate the simultaneous use of public and private assistance, and our time period of four months was limited. Although the data were rich in social-demographic characteristics, information was lacking on barriers to seeking the different types of assistance, such as characteristics of social networks and availability of assistance. Despite these limitations, our findings suggest implications for practitioners and social policy.

Because different household types use various types and patterns of assistance, policy makers and social workers need to take into consideration these different needs. Despite these variations, policy makers and practitioners also must be aware of the importance of public assistance programs for all three types of low-income households. Furthermore, the outside assistance on which low-income households currently use are frequently insufficient to protect them from the consequences of their precarious financial situations, which include eviction, homelessness, food shortages or insecurity, and lack of medical care (Ahluwalia et al., 1998; Danziger et al., 2000; Rank & Hirschl, 2005; Schoeni & Koegel, 1998). Welfare reform also provides no guarantee that employment will increase the economic and social well-being of families with children (Danziger et al., 2000; Litt et al., 2000; Teitler et al., 2004). These findings all suggest the need for social policies that increase, not decrease, public benefit levels.

As previously discussed, increasing public awareness of government programs and reducing transaction costs, including developing universal public benefits such as child allowances and national health insurance (Remler & Glied, 2003), should increase access to public sources of assistance. Practitioners can educate their clients on various public programs and engage in outreach work, paying particular attention to the needs of non-citizens and the most economically disadvantaged. Social workers also can assist clients in assessing and accessing social networks. For example, social network mapping can be used to identify and evaluate appropriate sources of support and potential problems and barriers to using social networks. The latter issues include perceptions of seeking assistance, reciprocity, and the social skills needed
for requesting assistance (Tracy & Bell, 1994).

Although private assistance, when available, can enhance the day-to-day survival of low-income individuals and families, such assistance is unlikely to be sufficient to fulfill the instrumental needs of low-income households. Policy makers, unfortunately, believe that increases in public benefits will decrease altruistic behavior among social networks, private agencies, and charitable groups. However, little research evidence supports this belief (Chambré, 1989; Cox & Jakubson, 1995; Rosenzweig & Wolpin, 1994). Instead, our current study, as well as other research, suggests that cuts in government program benefits likely will result only in additional economic hardships, particularly among households with children.

Perhaps one of the best ways to demonstrate that public sources of assistance can be beneficial to their recipients is to examine the effects of public program participation. Some research has been conducted in this area and has produced positive results. For example, pregnant women who participate in WIC have healthier infants (Bitler et al., 2003), and the use of food stamps can protect the health of individuals most likely to use them (Krueger et al., 2004). Future research efforts also might focus on examining the effects of public versus private assistance on other measures of economic and social well-being, such as work, earnings, economic hardship, and satisfaction with home and neighborhoods, among different types of low-income households.

References


Social Functioning: A Sociological
Common Base for Social
Work Practice

THOMAS J. BLAKELY
GREGORY M. DZIADOSZ
Touchstone innovaré

This article describes the experience of a social work mental
health agency with Social Role Theory (SRT), that is an organizing
concept for the delivery of its assessment and treatment pro-
gram. SRT has been called the process variable of the program,
meaning how services are delivered. Social functioning, a con-
cept taken from SRT, is a treatment outcome. The overall pur-
poses of the article are to describe the contribution of sociology
to social work practice, and to advance the argument that social
functioning is a common base for social work practice generally.

Keywords: social functioning; sociology; social work practice

Introduction

The purpose of this article is twofold: to describe the con-
tribution of sociology to social work practice, and to renew
the argument for social functioning as a common base for
social work practice as proposed by Bartlett (1970). The social
work program referenced herein, for which social functioning
is a treatment outcome, is titled Community Treatment and
Rehabilitation (CT&R) (Blakely & Dziadosz, 2003).
Sociology, Social Role Theory, and Social Work

Social Role Theory (SRT) has a history in the literature of sociology similar to that of social functioning in social work practice. Social functioning, a concept in SRT, has enabled CT&R clinicians to focus on the here and now of a client’s social role behaviors in social positions, with a view toward changing behavior to a normative status that produces acceptance and/or positive feedback from observers. The results have been an increase in a client’s self-esteem, and the psychiatric condition not being a major factor in how the client lives her/his life.

The social science of sociology has made a significant contribution to social work practice. The application of Social Role Theory (SRT) from sociology, and the major concept of social functioning taken from that theory, may further the significance of these contributions to social work practice. Social Role Theory is the process variable for CT&R, meaning that it is the theory base for the delivery of a program that leads to adaptation and social functioning. Adaptation is defined as successful management of the symptoms of the psychiatric condition and appropriate responses to the expectations of others in the social environment. Social functioning is defined as normative behavior in a social situation. The designation of behaviors that are characteristic of adaptation or appropriate social functioning are not imposed on clients by clinicians. Rather, clinical interventions are designed to help clients discover these behaviors for themselves.

Literature Review

It is recognized that CT&R may not be the only program for which SRT and social functioning are employed. However, an Internet search did not produce any results that indicated other agencies are using SRT as an organizing principle for an assessment and treatment program. Social Role Theory is the title of a section in Turner (1996) but it mainly concerned social positions and social role behaviors as major concepts with no reference to adaptation and social functioning. Other theories were described such as psycho-dynamic, ecological, problem solving, feminist, psychoanalytic, object relations, strengths based, and psychosocial, although these were viewed as
approaches to assessment and treatment and not as organizing principles. No information was located about the use of adaptation or social functioning as major concepts for a program. A strengths-based approach and psychosocial theory share some characteristics similar to the way SRT has been used in CT&R. Turner's work on psychosocial therapy (1978) has content theoretically related to our application of SRT.

The particular way the concepts of adaptation and social functioning have been used within CT&R may be of interest to administrators and planners at other social work agencies as their use in CT&R has been successful in helping persons with a psychiatric condition achieve a measure of recovery.

An article by Cornell (2006) that traced the theory of the person-in-situation paradigm and pointed to new directions for social work practice is helpful in clarifying the use of SRT in CT&R. She identified Jane Addams and Mary Richmond, early leaders in the development of social work as a profession, as proposing the dual focus of the person and the environment as a major social work practice concept.

Environment as a factor was diminished by the introduction of Freud's psychoanalytic theory. Hamilton (1951), a major contributor to social work literature, aligned with the diagnostic school of practice at first but later reaffirmed the significance of the environment. She was the first to use the phrase "person-in-situation" (p. 3), an idea that fits nicely with the way SRT has been implemented in CT&R as successful adaptation and positive social functioning may be achieved through finding the best "fit" between the person and the environment.

Three branches of sociology and the views of each on social role theory are considered for CT&R: functional and structural functional, symbolic interaction, and social cognitive (Biddle, 1986). Functionalists view roles as behavioral expectations placed on individuals by the society in which they live. People are socialized into its basic values and norms and know by unspoken consensus the distinction between appropriate and inappropriate behaviors for various roles. Structural functionalism places emphasis on social structures as meeting the basic needs of the society. Interactions among these structures constrain individual response and social role behaviors. The similarity in the functionalist and structural functionalist views
has brought most sociologists to refer to themselves simply as functionalists (Wallace & Wolf, 1999).

Parsons (1951), a leading functionalist, viewed status and role as structural elements of the social system. Status, or social position, is considered a structure in the system and role behaviors are what the individual does in a position.

Symbolic interaction is a different view of role behavior. Rather than being socialized into a set of shared values and norms, the view is that role behavior is a response to interactions with others thereby contributing to the construction of the social world rather than being formed by it (Blumer, 1969). Symbolic interaction theory proposes that a person’s view of her/himself is based on observations of others. “People see themselves through the eyes of others” (Cook & Douglas, 1998). It follows that social role behavior in social positions is a response to others’ expectations.

Long ago Cooley (1922), a major contributor to symbolic interaction theory, developed his “looking glass self” through the observation that individuals behave in response to other’s expectations. CT&R clinicians try to impart this concept to clients by helping them become aware of the behavior expectations of others, and how normative behavior that conforms to those expectations contributes to internalizing a more positive self that reinforces further normative behavior.

George Herbert Mead (1934), another contributor to symbolic interaction theory, viewed the person of the self as an “I” and a “me.” The “I” is the active part of the person, a response to the attitudes of others. The “me” is the attitudes of others incorporated into the self that gives direction to the behavior of the “I.” The “I” is the novel answer to the attitudes of others. The “I” and the “me” constitute the personality in social experience.

This thinking has a direct impact on the concepts of adaptation and social functioning. The “me” of the self is the sum of the incorporated attitudes of others as perceived in social intercourse. This is the core of successful adaptation. The “I” acts out social role behaviors on the basis of the adaptation which, when successful, leads to positive social functioning that is incorporated into the “me” that becomes the foundation for additional behaviors of the “I.” This forms a positive
feedback loop that strengthens adaptation and positive social functioning.

The continued training of the CT&R clinicians will incorporate this thinking as it is a summation of the clinical experience, especially in the context of transference, as the clinician is very responsible for the interpretation of social reality to clients who have a serious psychiatric condition.

Lundgren's (2004) review of research on the association between the judgments of others and the self-appraisal of individuals, and the expression or rejection of feedback, suggested that knowledge of relationships and the emotions of the participants in the interaction also are important variables in the analysis of role behaviors. The significance of the relationship between the clinician and the client is continuously emphasized during clinical training and supervision.

Bandura (1986) contributed significantly to social cognitive theory. He thought that people are proactive in their behaviors rather than reactive, proposing that social functioning depends on individuals interpreting the results of their behaviors and altering them to fit the interpretation.

Functionalism, symbolic interaction, and social cognitive theory contributed to CT&R. The synthesis of the functional view that people are socialized into the values and norms of a society with the views of symbolic interaction theory and social cognitive theory was helpful in gaining a better understanding of the adaptation and social functioning patterns of clients and in formulating interventions.

Individuals have many social positions, or statuses, with accompanying norms for associated social role behaviors. Thomas and Feldman (1964) defined position or status as a category of individuals, and role as a set of expectations about how the rights and duties of a position should be carried out. People acculturated in the same culture learn the social role behavior expectations of most social positions and understand the rules and norms that govern these behaviors. It is on this basis that people notice non-normative behaviors and often react negatively to them, such as is the case with some people who have a psychiatric condition. CT&R clinicians are expected to help clients understand this idea so the clients' adaptation to the challenges of the psychiatric condition, and the
expectations of others, can be increased. Improving adaptation leads to improving social functioning.

Social functioning is generally considered to be a subset of social role theory. It also is a social work practice concept. Boehm (1958) first proposed social functioning as a central focus for social work practice, viewing it in terms of role performance. Bartlett (1970) furthered the proposal. She viewed social functioning as having an overarching concern in all social work fields and methods as well as agency service systems. She pointed out that most social workers would emphasize two central ideas if asked to describe their profession: “1) it is a helping profession and, 2) it is concerned with the social functioning of people” (p. 86). This view is a central point in advancing the argument that social functioning is a common base for social work practice. Hollis (1972) recommended more focus on the “social” in the psychosocial paradigm. These significant contributions to social work have remained constant throughout the history of the profession.

Hyundi (1976) described social functioning as a contemporary application of social role theory. Newbrough (1976) defined social functioning as “the ability of a person to do what is appropriate in any social setting” (p. 19). These ideas were used in the agency’s definition of social functioning as normative behavior in a social situation.

The National Association of Social Workers (NASW) Commission on Practice (1958) included in the “Working Definition of Practice” that the social work method is carried out through the relationship with a client that facilitates change in the reciprocal relationship of the client to the environment. This also is social functioning. NASW (1973) defined social work as “the professional activity of helping individuals, groups, or communities to enhance or restore their capacity for social functioning and to create societal conditions favorable to these goals.” These references underscore the designation of social functioning as an outcome for a social agency’s service delivery system, and also underscore the link between sociology and social work practice. The practice definition infers the concept of social functioning while the definition of social work states it directly.

Davis’ (1996) ideas, presented in a major social work text
Social Functioning and Social Work Practice

(Turner, 1996), were part of the beginning training of agency clinicians in the application of Social Role Theory. Davis discussed achieved and ascribed social positions and the social role behaviors related to these positions. The distinction between social position and social role as a set of behaviors associated with a position has been essential to the definition of normative social functioning as an outcome of CT&R.

The assessment of social functioning has become a significant feature of the Diagnostic and Statistical Manual (2000). Axis V, the Global Assessment of Functioning (GAF) Scale, requires clinicians to rate the level of social functioning of mental health clients. The DSM IV has significantly broadened the consideration of social functioning as a variable in social work and other helping professions. This implies a strong supportive link with sociology as a theory base for clinical assessment and diagnosis.

Bartlett's (1970) ideas have contributed significantly to the development of CT&R in which adaptation is defined as managing the psychiatric condition and social functioning is defined as normative behavior in social situations. She identified "coping" as a "relative mastery of tasks," and "task" as a response to a life situation (p. 96). Helping clients with adaptation to inner impulses and instincts and to the demands of the environment is coping. The client's achievement of treatment objectives demonstrates mastery of a task that also is appropriate social functioning.

The combination of the words social and functioning suggests a meaning of the words as successfully carrying out social role behaviors related to individual desired or preferred social positions.

Clinician Training

Initially, CT&R clinicians were trained on Social Role Theory with a focus on social positions and related social roles. This turned out to be too abstract and not sufficiently related to the social position in our society of mental patient and the general negative perception of this social position and related social role behaviors.

The training is being modified. There is a shift from a
principal focus on social positions and social role behaviors to adaptation and social functioning. The expected outcome is that clients will change social role behaviors from non-normative, characteristic of the social position of mental patient, to normative social role behaviors characteristic of positive social positions. It is important for clinicians to develop and implement an integrated knowledge base of the functional, symbolic interaction, and social cognitive theories that concern social positions and social roles. They can then help clients to gain self-awareness about learned behavioral responses and modify them so adaptation and social functioning are improved.

Recovery is conceptualized as achieving a level of adaptation and social functioning at which the psychiatric condition is not a major factor in how a client lives. This conceptualization has a base in sociology as it involves clients adapting to the psychiatric condition in a way that observers see more normative social role behaviors that are less disruptive to social intercourse.

The Social Role Theory approach with clients who are long-term chronically ill and stabilized at a lower level of social functioning is sometimes not as successful. However, the focus on behavior change to achieve adaptation and social functioning is one that lends itself to suggestion and direction about appropriate and/or inappropriate social role behaviors. This often is more successful considering the cognitive deficits of chronic mental illness. It also is easy to teach to both clients and clinicians.

Improvements in psychotropic medications have helped many clients by diminishing symptoms and clarifying thinking so that through the clinical relationship clients can learn normative behaviors and deal more effectively with the psychiatric condition and its social consequences. Helping clients understand that they are persons who have a psychiatric condition and are not "mental patients" helps them gain an awareness of controlling non-normative behaviors. Normative social role behaviors in their various social positions produces more positive acceptance and feedback from others that reinforces appropriate role behaviors and restores self-esteem.

The integrated social role theory training clinicians receive is that social role behaviors relate to the values and norms
of the society, the observations of others, and the accurate interpretation of the effects of behaviors on others. Agency clinical staff use this knowledge in developing interventions that assist clients with improving adaptation and social functioning. Meeting the behavioral expectations of others helps clients to live more comfortably within the system of their interpersonal relationships. This also is consonant with the agency’s definition of social functioning.

Social Role Theory and Client Assessment and Treatment

CT&R, as an assessment and treatment program, is concerned with persons whose adaptation and normative social functioning are affected by a serious psychiatric condition. The Psychosocial Assessment of each client, using Social Role Theory, is based on the strengths and weaknesses in the client’s adaptation and social functioning in designated social role behaviors. The strengths are used to encourage the client’s change in behaviors and the weaknesses become targets for behavioral change. The latter are incorporated into an Achievement Plan that is a guide for treatment that includes a behavioral objective, necessary behavior changes, and client and clinician tasks. Examples of this process may be clarifying.

Therese has a diagnosis of schizoaffective disorder. She is a 37-year-old, single mother of one child, who works with her fiancee in home maintenance repair. Her stepsister is the guardian for her son. Adaptation to her psychiatric condition is difficult as she is ashamed about it, ruminates on it, and blames ineffective behaviors on it. She is easily stressed, decompensates as a result, and her social functioning deteriorates. Her strengths are her relationship with her son and her stepsister. She accepts her mother’s disability as age-related and frequently visits her in a nursing home. Since her stepsister became her son’s guardian, she has been relieved of the stress of providing for her son. She accepts her psychiatric condition and is medication compliant. Her stability has increased with her new relationship with her fiancee and sharing in his business. Her weaknesses are a negative sense of self, periodic instability related to a lack of understanding of the symptoms
of her psychiatric condition, and ineffective coping strategies when symptoms interfere with her social functioning.

Therese's treatment and rehabilitation objective is to form stable relationships that are personally valued and advance social functioning. Targets for behavioral change are to develop a more positive and assertive sense of self, take steps to recognize symptoms and how they affect her relationships, and to continue to develop ways of coping with her symptoms so her social functioning improves. Therese is meeting regularly with her clinician and has made progress in achieving these targets. She also is meeting with her psychiatrist regarding medication to improve the level of her adaptation.

Gail has a diagnosis of bipolar disorder with hypomaniac episodes. She is a 54-year-old, single, female. Her developmental history was difficult. For example, she was psychologically abused by her parents who punished her for inappropriate behavior by abandoning her in some woods in the country. She also was taunted once by classmates who threw burrs at her during a class field trip. She experienced her first psychiatric breakdown at age 18 and has been hospitalized several times since.

Her strengths are loyalty and support for her parents and her friends, successful management of her anxiousness, positive social interaction, and friendship with her sister, acceptance of her psychiatric condition, and medication compliance. Her weaknesses are low self-esteem, fear of abandonment by her parents, rumination about their death, feelings of disapproval by others, a history of self-harm, and apprehension about her sister's real feelings about her.

Her treatment and rehabilitation objective is to utilize her free time in ways that are personally valued and advance social functioning. Her targets for behavioral change are to develop a greater sense of self-esteem based on real accomplishments, to recognize patterns of behavior that tend to exacerbate symptoms, to gain further understanding of her psychiatric condition and healthier coping mechanisms for managing symptoms, and to seek volunteer activities through the agency's club house program. Gail has kept regular appointments with her clinician and has made excellent progress toward achieving her behavior change targets and her treatment and
Outcome Measurement

Outcome measurement of social functioning, as related to the achievement of targets for behavioral change and reaching a state of psychiatric well-being, occurs with every client. A state of psychiatric well-being exists when the client has met the treatment and rehabilitation objectives. This pre-established list of 21 objectives also forms a measuring instrument called the Psychiatric Well-Being scale (PWB). (See Appendix A for examples of PWB scale items.)

Treatment and rehabilitation objectives are selected from the established list and included in an Achievement Plan (AP) that is a guide for treatment. The selection of an objective is based on the client's statement of a personally valued outcome and the clinician's judgment about which objective will most likely lead to a state of psychiatric well being. At the beginning of the treatment program the clinician also rates the client's ability to perform the behavior of the objective on a one to seven scale, with seven high. There is a rating scale that is specific and integral to each item. The rating on each item measures an extent to which the psychiatric condition affects social functioning.

Continued ratings occur at reviews of the AP. The differences in ratings indicate the level of improvement in the behavior of an objective. These numbers are accumulated and used to evaluate the client's progress, the clinician's performance, the performance of a treatment team, and the overall quality of the agency's service delivery.

Table 1 contains an example of the rating results of clinicians' pre- and post-test rating for all the clients of a single team of clinicians for the sixth treatment and rehabilitation objective on the list. This objective appears in the Appendix. Similar data are collected for all treatment and rehabilitation objectives and may be broken down to reflect the performance of a single clinician, a team, or the total agency as an evaluation of service delivery.

The rating scores of the 21 scale items for a group of 386 clients also were totaled. The average score improved by 7.8%
over a three month period, from an average of 108.6 to 117.0 (p<.001). These data support the existence of improvement for the entire client group over the period of the measurement. The differences between the pre- and post-test scores are not large numerically but all the clients have a serious psychiatric condition so even a small positive incremental change is significant.

Figure 1. Pre-Post Frequency of Clients for Scale 6

A Critical Issue

There is a critical social issue that relates to the social position of mental patient. Eligibility rules to obtain and continue treatment set by the mental health system frequently require people in this position to be disabled. For example, in order to afford medication that is necessary in maintaining Psychiatric Well Being, positive social functioning, or recovery, as outcomes of CT&R, a client usually will be required to maintain eligibility to receive Medicaid. This eligibility requires the client to be both poor and disabled. This means recovery from a serious psychiatric condition, in the sense of a normative lifestyle including employment, family, home ownership, etc. may be thwarted just because of a policy decision.
If a person were to recover sufficiently to maintain employment or otherwise obtain enough resources to be ineligible for Medicaid, it could mean that mental health services, especially medication and short-term counseling that are important in recovery, might no longer be available. This is a critical issue as most serious psychiatric conditions are chronic and may require medication and some psychosocial services for a lifetime. Changes in some mental health policies have to be made if real recovery is to be sustainable.

The potential for recovery will increase for those clients who achieve normative social functioning and escape the social position of mental patient. This is the primary reason for establishing social functioning as an organizing concept for Community Treatment and Rehabilitation.

Conclusion

Evidence of the contribution of sociology theory to social work practice, particularly social role and social functioning, at one mental health agency has been described. Social role theory has been an organizing concept, and social functioning an operational variable, for Community Treatment and Rehabilitation (CT&R). Focusing on adaptation and social functioning to achieve normative social role behavior has been helpful to persons with a serious psychiatric condition in achieving a level of recovery, meaning that the condition is not a major factor in clients’ lives.

This combination of sociological concepts has contributed to the development of a clinically cohesive organization of the social work assessment and treatment program. It has provided structure for the agency’s service delivery system. It also has become a shared set of concepts about clinical services that clinicians are able to use to communicate with each other about how to improve the delivery system. It also has been a helpful construct in generating a measurement of effectiveness, in the performance evaluation of clinicians and teams, and in determining program deficits and successes.

It also is on the basis of these factors that the administrative staff of this one agency concurs with Bartlett that social functioning, as a concept in Social Role Theory, is a good candidate for the selection of a common base for social work practice.
References


Appendix A

There are 21 items in this list of treatment and rehabilitation objectives. Objectives are selected serially for each Achievement Plan. The clinician rates the client’s level of performance of the objective using the numbered scale of each at the beginning of the implementation of the Achievement Plan and at each of the Plan’s reviews.

Examples of Scale Items

1. Symptoms are at a level that does not affect social functioning.

A person with a serious mental illness is not likely to be totally symptom free all of the time. What is important is that symptoms interfere as little as possible with a person’s life. Whether symptoms have an impact may vary considerably from person to person. Some people may have what some would consider serious and ongoing symptoms but are little bothered by them. Others may have nearly no tolerance for symptoms. This means that interventions intended to increase tolerance of symptoms may be as effective as those intended to directly reduce symptoms. This scale is meant to assess the
impact of symptoms, not the symptoms themselves.

1) Symptoms interfere to the extent that they are the dominant feature and determinant in the client's life.
2) Symptoms interfere with social functioning on an ongoing and significant basis. This is serious but not debilitating.
3) Symptoms interfere with desired social functioning; interference may be episodic and serious or ongoing and moderate, requiring intervention at the time in either case.
4) Symptoms sometimes interfere with desired social functioning. Interference is episodic and moderate or ongoing and tolerable but unpleasant. Additional intervention may be indicated with episodic occurrence.
5) Symptoms occasionally interfere with desired social functioning and the interference is either episodic at widely spaced intervals or ongoing but well tolerated.
6) Symptoms' interference with desired social functioning and other aspects of a person's life are exceptional events of short duration not requiring additional intervention.
7) Symptoms never interfere with desired social functioning or other aspects of a person's life.

2. The frequency and duration of periods of symptom exacerbation are at a level that does not affect social functioning.
   Relapse and remission are typical of a serious, chronic illness and are to be expected with a mental illness as well. Symptom exacerbation may occur for a variety of reasons some of which may become known and anticipated, and some of which may remain unknown. Symptom exacerbation may sometimes be cyclical, and so may be predictable even if the cause remains unknown. The objective is to minimize the occurrence of relapses that interfere with functioning that is related to a desired social position.

1) Symptoms return regularly and frequently and seriously limit social functioning.
2) Symptoms return regularly, possibly frequently, and always at least moderately affect social functioning when they do recur. Symptoms have a debilitating
impact less than half the time.
3) Symptoms return periodically, they may be frequent, but they usually have only a small impact on functioning. Debilitating symptoms are infrequent.
4) Symptoms return sometimes. They are not regular or frequent, and when they occur they almost always have only a minimal impact on social functioning. Debilitating symptoms are rare.
5) Symptoms return sometimes, but when they do they almost always have little or no impact on social functioning. Occasionally they will have a moderate impact.
6) Symptoms may reoccur but they never have more than a minimal impact on social functioning.
7) Symptom exacerbation has no impact on social functioning.

6. Recognizes stressors that affect symptoms and responds in a manner that advances social functioning.

A client who understands how stressors may increase symptoms, and who also knows what type of events or situations have that effect, can learn to proactively manage his or her illness by avoiding stressors, preparing for them ahead of time, or being prepared if a stressor takes him or her off guard. This scale is not a measure of the frequency or severity of stressors. It is intended to measure the client’s management of his or her environment and response to it so as to effectively manage the illness.

1) The client sees no relationship between psychosocial stressors and the development of symptoms.
2) The client has some recognition that psychosocial stressors may increase symptoms but takes no action to do anything to either minimize stressors or learn adaptive strategies. This inaction may be for a variety of reasons including hopelessness, resistance, or powerlessness over the situation.
3) The client generally understands that there are some things that can make is or her discomfort or symptoms worse and is interested in learning what to do about it. He or she does not usually anticipate a problem, but will, sometimes, attempt to use adaptive skills when stress does occur.
4) The client generally knows what situations or events can exacerbate symptoms. He or she has willingly learned adaptive strategies. He or she will sometimes anticipate stressors and will either avoid them or make an effort to prepare an adaptive strategy. More often than not, he or she will use adaptive strategies when stressed.

5) The client knows the stressors that exacerbate symptoms and usually recognizes them when they occur. He or she will usually anticipate a stressor and either avoid it or will actively work to prepare an adaptive strategy. He or she will routinely use adaptive skills when stressed.

6) The client knows the stressors that exacerbate symptoms and what to do about them. He or she usually will successfully minimize stressors or their impact and uses adaptive strategies when stressors do occur.

7) The client knows the stressors that exacerbate symptoms and what to do about them. He or she successfully minimizes stressors and routinely and effectively uses adaptive strategies with the stressors that do occur.
International research methods for the social sciences are usually discussed in the context of cross cultural research in disciplines such as Psychology and Anthropology. Social work research methods texts address cross cultural research but generally do not include international social work research. A book that addresses this gap is eagerly anticipated. This book begins with an overview of international social work: organizations, activities, publications, and definitions of globalization and international social work. A definition of social work research is then offered which lists methodologies and roles and gives a definition of social work research "...a compassionate, problem-solving, and practical endeavor..." (p. 13) and a list of knowledge objectives that mostly reflect the positivist paradigm: concept development, operationalization and description; hypothesis formation; and hypothesis testing.

After a brief discussion of social work research trends in a few selected countries, a typology of international social work research is given. This is the heart of the book. The typology offers three kinds of international social work research: supranational research with native-born populations using a literature review from beyond that country and forming "implications" beyond that country; intranational research with immigrants using the literature from the country of origin and the host country and forming "implications" for both countries; and transnational comparative research that includes literature and compares populations from two or more countries.
countries and forms "implications" about the countries included in the study.

The rest of the book expands on these definitions giving brief descriptions of methodologies for each approach and examples of studies from around the world that can be classified according to this typology. The section on supranational research discusses methods for problem formulation, instrument construction, research design, sampling and then data collection, data analysis, conclusions and implications. Five sample studies are described from Israel, China, India, Cyprus and England. The intranational research methods section discusses basic concepts in international migration, social work problems with immigrants and refugees, and the same methodological topics as in the supranational section. Of the five examples of intranational research, two come from the United States and the rest came from Canada, Nicaragua, and Israel.

The transnational research section of the book has a similar structure to the other two sections with additional discussions of qualitative and quantitative comparisons. The first example study in this section was carried out in the Ukraine but was considered transnational because there was collaboration between U.S. and Ukrainian researchers. The other studies compared: a U.S. sample and a Romanian sample; a New Zealand sample with normative data from Canada and Australia; unemployment programs in 80 countries; and samples from 10 countries. Interesting issues are raised about carrying out research in different countries and a framework for comparing studies is a helpful critiquing tool.

The strength of this book is its discussion of international social work research methods and the conceptual tools it offers for thinking about methodological issues and critiquing research. However, there are two main problems with this book. The first is with the conceptualization and application of the typology and the second is with the book's basic premise. Regarding the typology, both supranational and intranational research projects apparently can "generalize implications" (page 59 and page 106) to a population that was not sampled. The author is clearly skirting problems with violations of the principles of sampling theory. There is some discussion of a broader definition of generalization and of controlling threats to external validity but the basic problem remains. With
these approaches to research it would be legitimate to study poverty in California and "imply" something about poverty in Mexico because the literature review included references from Mexico. Similarly, researchers studying Mexican immigrants in California could claim that their findings imply something about Mexican immigrants in Mexico. This would violate most of the premises underlying positivist research, the paradigm guiding this book.

The second problem with the book is broader and more problematic. The premise of this book is that the definition of social work methods accepted by some social work researchers in the United States is accepted by the rest of the world. Imagine social workers in Chiapas wanting to carry out a critical theory study of the impact of NAFTA on services for poor families and communities. Imagine social workers in Darfur wanting to use a constructivist approach to developing and evaluating NGO sponsored community intervention programs for children who have been demobilized from a military fighting a war that crossed national boundaries. Imagine social workers in China wanting to build a post positivist theory of domestic violence in a country that is both a dictatorship and capitalist and both traditional and modern. This book offers such researchers: concept development, operationalization and description; hypothesis formation; and, hypothesis testing. There is no discussion of various world views or, for example, action research. The implicit assumption is that the experimental design is the gold standard of social work research. It assumes that all questions are causal or at least correlational. When discussing qualitative approaches to research it suggests that these are used to formulate theories and hypothesis that will later be tested by quantitative research. This would be challenged by grounded theorists who use qualitative data to build theory, not just to formulate it. This book begins the discussion of international social work research methods, and for that alone it is most welcome. Unfortunately, it does not acknowledge the infinite variety of world views and appropriate methodologies accepted around the world.

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The key sign of an original book is that the author asks questions that scholars should have previously asked but did not. The fundamental questions that Peter Frumkin raises in this book are important, very timely, and crucial for any student of philanthropy. Frumkin suggests that,

"Philanthropy translates the private desires of donors into public action aims at meeting needs. It has both public and private functions, enabling communities to solve problems and allowing individuals to express and enact their values. What makes philanthropy at once exciting and perplexing is the strange and at times jarring interaction of public needs and private choices that giving promotes" (p. 21).

To understand this complexity, one can ask the following two simple questions: First, why there is not enough money in the richest country in the world, the United States of America, to offer free national medical care to all people? Then, add the following question: Why can very rich people, like Bill Gates and Warren Buffet, dedicate billions of tax deductible dollars to causes that they unilaterally assess as worthy? In Frumkin’s words, “The budgetary squeeze of entitlement programs has increased philanthropy’s market share of domestic discretionary spending” (p. 74).

At the dawn of the 21st century, this is indeed an interesting case of crowding out that can challenge the democratic foundations of our society. But most importantly, Frumkin asks if this is indeed serving the democratic ideal of society and, given that we can accept these donor-society relationships, how can donors maximize their charitable impact? In fact, what Frumkin suggests is that, in a democratic society like the United States, the elected officials are opting out of many areas of care and philanthropists are setting policies with their various foundations and wealth that may or may not be what society as a whole needs and desires. Frumkin sees this reality
as a great opportunity and seeks to chart how big donors and large foundations can maximize their impact.

Frumkin noted that, given the tax deduction aspect of philanthropy and the power of donors, the philanthropic community is challenged to show effectiveness, accountability, and legitimacy. Frumkin suggests that the quest for these three ideals is far from actualization but brought about by the professionalization of philanthropy through foundations, professional staff, academic training, research, and codes-of-ethics. Frumkin, however, is unsympathetic to this new cadre of professionals and prefers a group of enlightened donors who assess their values and potential to make an impact in society. A large part of the book goes into advising such donors how to be strategic and, as such, effective. Frumkin wisely distinguishes between charity that is often small scale, local, and unplanned, and philanthropy that is large scale, planned, and can have major impact on society. The latter leads big donors and foundations to strategic giving, which is large scale giving that impacts society at large.

Frumkin acknowledges that many donors have egoistic motives, ranging from quest for positive publicity to tax deduction, and still he regards individual private donors highly. Frumkin looks at philanthropy as a desired component of our society which offers innovative and diverse responses that neither government nor the public sector can offer. To assure donors' generosity, Frumkin seeks a balance between society's many needs and donors who are often unsatisfied with how their money is used. He rightly suggests that the efficacy of philanthropy is rarely studied, and donors are dissatisfied with the social return for their money. He also points out the tension that exists between donors and nonprofit organizations. While donors want their money to be earmarked to a specific cause of their choice and want control over the designated use of the money, nonprofit organizations see donors as a necessary burden but not as sufficient. Nonprofit organizations want to make independent professional and rational decisions regarding the use of the money once received and, as such, tension may arise.

There are many ways one can answer the questions raised by Frumkin. However, his treatment of the tension between
democratic principles and donors' control and power is incomplete. In an ideal world, Frumkin could have suggested a progressive income tax, which, for example, would tax 70 or 80 percent of all annual income above one million dollars. Such a progressive tax system would be more distributive and would not leave social interventions to the whims of the mega-rich. Such a tax system might be sufficient to afford national health care.

But, Frumkin is a believer in the benevolence of the rich and the importance of making philanthropy work. He raises interesting and provoking questions, but he does not cross the line of his belief in philanthropy and his unquestioned sympathy for big donors. As such, the challenge is not fully met and the focus of the book is on how to make philanthropy more effective without really advancing the democratic challenge. At many times, Frumkin dismisses his own challenges without evidence to be able to advocate for philanthropy, yet, he opens the door for public discourse on the role of philanthropy in our society. Regardless of Frumkin's personal preferences, when the next congressional committee to study the role of philanthropy in the American society convenes, Strategic Giving: The Art and Science of Philanthropy will be its first and foremost source of guidance. This book is a must for all students of the nonprofit sector and philanthropy, as it covers new territories and opens a plethora of new intellectual challenges.

Ram Cnaan


Sanford F. Schram, a professor in the Graduate School of Social Work and Social Research at Bryn Mawr College, critiques current trends in welfare policy and argues for using new approaches in studying welfare policy and governance. The new approach features a compassionate emphasis on
reducing harm in order to allow for diversity while building community in an era of globalization. Through essays he is able to address current debates of welfare, including issues resulting from globalization, race, gender, and strategies for policy improvement.

Schram begins by describing the entrenchment of welfare in the United States that began in the mid-70s due to globalization discourse until the passage of welfare reform in 1996 of the Personal Responsibility and Work Opportunity Reconciliation Act. Schram argues that this welfare reform became a model for other countries. He emphasizes "that different countries will choose differently based on their history, culture, political economy, and welfare state traditions (p. 27)." He describes the U.S. reform as the most punitive. For example, the U.S. does not provide substantial social supports or paid family leave whereas countries such as Denmark provide both. However, more European countries have followed the U.S. example in using work requirements and sanctions to encourage work for those accessing the welfare system moving towards an active welfare state.

Schram further describes how welfare continues to be biased towards the necessity of a two parent household in fulfilling personal responsibility. He relies on numerous feminist scholars, such as Martha Fineman and Nancy Fraser, to highlight gender biases in the globalizing dependency discourse. Suggestions on how to better promote gender justice are provided.

Schram explains how neutral discourse regarding U.S. welfare policy upholds racial disadvantages. "Welfare reform is therefore an ostensibly neutral public policy that is part of a vicious cycle of race bias: it is a policy that grows out of and reinforces racially biased institutions and practices in the broader society, concerning education, jobs, housing, and other factors affecting life chances (p. 77)." This is occurring in Europe as race and ethnic differences become more of a problem due to migration and immigration. As nonwhite recipients' reliance on welfare becomes disproportionate, it becomes "its own self-fulfilling justification that the problem must be with recipients and their behavior, not with the structure of society, the economy, or its labor markets (p. 104)."
The limits of asset building approaches to combating poverty are offered, including promoting poor families to imitate middle class families. Schram ends the book promoting compassionate liberalism for welfare policy with harm reduction as a postmodern ethic for the welfare state. This approach moves from the "tough love" approach of encouraging people to take more personal responsibility to a "practice designed to resist judging others so as to help them live their lives better on their own terms (p. xvii)."

There seem to be at least two paradigms to engage in scholarship about social welfare policy. The first can be called "scholar for social welfare," while the second is "scholar of social welfare." The first one focuses on how the state does not provide enough for everyone who needs it and how to change that. The second paradigm, on the other hand, calls for a balance between equity (call it welfare) and efficiency (call it market activities) that make welfare possible. The second paradigm focuses more on dealing with the unintended consequences of social welfare, and less on the intended. The professionals in social work usually support the first paradigm as they advocate for more services for their clients.

The intended consequences of social welfare are increased services and meeting the needs of more people. However, the unintended consequences are: chronic welfare dependency, cost overrun, unemployment (Philips curve), increased bureaucracy and diminished capacity for productivity in the market. Schram's book pursues the intended consequences, by promoting compassionate liberalism, but does not address the issue of its unintended consequences. His work rates a "high" on advocacy and a "low" in capacity. This is classic, party-line, social work advocacy: high on entitlements and advocacy, and low on capacity.

Because Schram does not address the issues within the second paradigm, we are unable to gain more knowledge on how to deal with the reality that not all states have the surplus to support a welfare system. And for those states that do have a surplus, it is not in unlimited supply. We need to learn how to evaluate the capacity to provide welfare, and based on that capacity, critically discuss how to ration who should benefit from that surplus. Schram's book falls short on answering
these latter issues. Consequently, Schram’s book turns out to be another work on liberal redistribution (or pro-Fabian redistribution, as the British used to call it) that supports the party line in social work. In so doing, it fails to educate us about how to build and maintain a surplus that makes the continuity of a safety net possible.

Pranab Chatterjee
Kathleen M. Alman
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This is an interesting text on an important aspect of social work education which is complex. Human behavior and the social environment currently has an extremely large number of texts. This text by Wendy Haight and Edward Taylor draws upon knowledge about human behavior and places it in the context of social work practice, a different orientation.

The authors explore the complex relationship between human behavior and social work practice. They present a developmental-ecological framework as the conceptual orientation for the rest of the text. They use this framework in the context of social work with individuals through the life span. For example, they illustrate social work with infants and young children, children and middle-childhood, adolescents, young adults, mid-life adults in a mental health context, and medical social work with older adults. The developmental-ecological framework is used as a conceptual framework for social work practice with these groups of people, and it is also applicable to other populations.

They suggest that their text be used in conjunction with readings selected by an instructor, primarily to present the relationship between human behavior and social work practice. It should be noted that they provide a very nice list of references and web-based resources and they sprinkle their
chapters with case vignettes designed to illustrate the points they are making. These authors are to be commended for struggling with the relationship between an individual's development and his or her response to social, economic and political issues over their life span.

This interaction is the dynamic of human growth and development which is what social workers address with clients and for which there are no easy answers, if answers exist at all. Social workers are always helping individuals develop at different stages in a life-span and responding to environmental pressures. For example, individuals may be doing quite well and then their life is changed completely when they get a pink slip. There is then a reaction to that life situation which must be addressed by individuals and the people in their environment, such as spouses, children, in-laws and friends. This is an example of a significant struggle that social workers have to face with clients over the life span.

One must recognize that an individual responses to situations will differ. We may not easily understand the complex personal factors which result in different outcomes, which is where the developmental-ecological framework is likely to help. Throughout the text, these authors present this sense of reality to social work students. In their words, "the processes through which culture is acquired and elaborated by new generations are complex", (p.15). Their developmental-ecological framework constantly reminds us that these processes occur throughout the life-span. There is then also a reminder that one needs to consider and look at behavior from the client's point of view. Its focus is on how clients interpret experiences and behaviors in the context of their station in life. It is the search for the client's meaning of their own life situation which differs from trying to place behavior in the context of theory.

This shift to understanding how clients see life situations is very much needed. For example, it requires workers to put themselves in the shoes of their clients and to understand the various forces acting on them. This is more than a subtle shift in social work practice, for it requires workers to understand not only the context of the situation, but also the emotional response to events. How would a young worker understand the struggle of a poor, relatively uneducated mother of three who
is in her 30's, particularly if that worker has never experienced poverty, children, and the culture in which that client lives? How would a sighted worker understand the complexity of a client who is middle-aged, and newly blind? The authors' conceptual developmental-ecological framework provides an important backdrop for workers when facing these situations. While there are no easy answers, the framework provides guidelines for intervention and effective practice with clients which remind one, again, to see the individual in the sea of complexity and faced with a myriad of problems. The worker needs to understand how clients manage and think about handling such problems. The authors' framework forces practitioners to focus on the individual rather than viewing them as members of groups.

In conclusion, this is a very helpful and useful text in preparing practitioners to work toward achieving a better understanding of the complexity between human behavior and social work practice. It offers guidelines for dealing with individuals: it doesn’t provide easy answers, but it offers direction for helping clients. I would recommend this text in order to better understand how practitioners can work more effectively with individuals by putting themselves in the shoes of a client and understanding the world from their perspective. In this way we would be much closer to understanding the many cultural and social pressures which exist for these clients. We may not resolve these complexities, but we are more likely to better understand them.

Marvin D. Feit
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The United States and Somalia stand as the only two nations in the world that refuse to sign the United Nations Convention on the Rights of the Child, a document that lays down the basic rights and moral standing of children. Nor
has the U.S. attempted to adopt the comprehensive legislation passed in many countries, such as England's The Children Act, which focuses on all matters pertaining to children, with the child's welfare squarely defining all legal actions.

James Dwyer, in his complexly argued book, The Relationship Rights of Children, believes that, while the United States goes far in protecting parents' rights, it is often at the expense of the welfare of children. He does not offer why the United States leans so far in favor of parents (there are complicated historical and cultural reasons for our "difference"), but instead makes a strong case, based on two centuries of philosophical reasoning, for why children deserve the same moral and legal consideration as adults, even when this consideration steps on the rights of adults.

The debate about children's rights, when it takes place at all in this country, is usually carried on by legal scholars, with the occasional contribution of social scientists who either study child development or who offer measures of children's economic and psychological well-being. With Dwyer, we are offered extensive arguments from the philosopher giants, John Stuart Mill, Immanuel Kant, John Rawls and others on the value of the moral autonomy of the individual. These philosophers, he admits, focus their arguments on adults, not children. In fact, he notes, John Stuart Mill, in his theory of liberty, specifically states: "[this] is meant to apply only to human beings in the maturity of their faculties." Not so for Dwyer. He makes a compelling case that the same moral rights apply to children.

"Critically then, each of us competent adults has rights of self-determination because it is generally assumed as a moral matter that our interests matter, and matter equally regardless of our status in society. This empirical assumption certainly applies to children as well, and if we are to respect children as equals, we must extend the moral assumption to them also —that is, that their interests matter as much as do adults' interests in state decision making."

But how do children know what their interests are, and if they did, how can they assert them? Children are, of course, dependent upon adults to do so for them. But which adults? Here Dwyer argues forcefully that although the law
professes to promote "the best interests of children," in fact it is far more protective of parental rights, and that these rights are often based on a purely biological claim, not any test of parental ability. Dwyer promotes a view of parents as caretakers, not automatic owners of children. He focuses his criticism on laws creating parental rights at birth, and protecting them in events of abuse and neglect after birth. His solution is to drastically re-formulate the law so that, among other requirements, a birth mother must sign a "Parental Vow" promising love and support within two days after birth in order to become a legal parent, but the state may file a petition within seven days to determine in a court proceeding whether the mother is, in fact, unsuitable for one of many reasons, including age, mental incapacity, past conduct of violence against family members, etc. Fathers achieve legal parenthood only if the birth mother consents and they are married. Fathers not married to the mother can only be deemed legal parents if the mother consents and the father petitions the court, passing all the tests of adequate parenting. Non-biological adults may also petition the court within 30 days and their claim will be determined by the court. Following birth, similar strict tests are applied in cases of abuse or neglect of children, allowing the court to more easily terminate parental rights than is now the case.

His view of children's rights privileges birth mothers but gives little other advantage to biological ties. Unwed fathers still have an obligation to support but not to access unless they have passed all the above tests. Adults who have acted like parents, or have firm attached relationships to children, like stepfathers, have rights over non-involved biological fathers, and a child may have more than two significant adults in his life. From this perspective, attachment trumps biology and a parent must earn the right to become and to continue as a parent.

This concept of parents as caretakers or trustees rather than the owners of children who have independent rights is much more in keeping with the UN Convention on the Rights of the Child and with most European efforts at establishing a code of children's rights. Some of its obvious consequences would be a move toward no corporal punishment and ultimately the right of children themselves, as they grow older, to petition to
“divorce” their parents—the course taken in Europe.

Grounded in a strong tradition of moral philosophy, this child-centered approach adds valuable support to some American legal scholars and others who have been moving more timidly in this direction, most notably with a new revision of the influential American Law Institutes’ treatise on Parent and Child where “de facto” parents (such as stepparents) without biological ties would be given greater access rights.

A limitation of this book is that Dwyer limits himself to the “protective” rights of young children and does not wander into the thornier “choice rights” of maturing adolescents. For instance: does the protective state have the right to insist on drug testing for children before they may join any after-school activity, as the Supreme Court recently ruled? or, are the rights of children served when in one courtroom a 13-year-old who steals a candy bar may be given a lawyer and nearly all the due process rights of a criminal defendant while down the hall a 13-year-old whose physical custody is being determined following divorce may have no voice or representation at all? Perhaps this philosopher will tackle maturing children’s rights in his next book.

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With the ascendancy of market liberal ideas over the last two decades, widely held assumptions about the role of government in social welfare have been undermined by market liberals and their traditionalist allies who claim that state welfare collectivism fosters economic stagnation, dependency, moral decline and other ills. In addition to producing domestic empirical evidence to support their case, opponents of welfare statism have often used comparative data to argue for
the retrenchment of the public social services. European countries have featured prominently in accounts of the deleterious effects of government intervention. Europe’s high level of unemployment, slow rate of economic growth, excessive red tape and many other problems are regularly cited as examples of the negative consequences of government intervention in social affairs. On the other hand, the low level of unemployment, steady economic growth and affluence of the United States is said to exemplify the benefits of limited state welfare intervention.

Alesina and Gianvassi offer a provocative and lively exposition of these arguments in their extremely readable indictment of European welfare statism and government intervention in economic and social affairs. The European nations, they assert, are undergoing steady economic and social decline. Evidence of this decline is revealed in high levels of unemployment, slow rates of economic growth, a lack of innovation, complacency and labor market rigidities. Unless reversed, European countries will experience further economic stagnation, relative social deprivation and relegation to the margins of world affairs.

The authors argue that the immediate causes of this situation are high rates of taxation and public spending, generous social welfare programs and excessive regulation of business enterprise. However, these problems are symptomatic of deeper cultural attitudes and beliefs that legitimate government intervention. Europe, the authors contend, has inherited a Marxist tradition that persists even though it is of little relevance to current global realities. Because of this tradition, Europeans are culturally wedded to egalitarian ideas which have a dampening affect on entrepreneurship and economic growth. In addition, because of their postwar prosperity, Europeans became complacent and dependent on generous social welfare programs, job security and extensive leave and other employee benefits. Instead of calling for a change of attitude and sacrifices to restore economic growth and prosperity, European politicians pandered to public opinion and failed to take tough decisions. Another reason for Europe’s decline is a failure to develop new technologies and to reward innovation. Europeans have also been resistant to immigration, failing to
realize that immigrants bring new ideas and energy. By contrast, the United States is open to immigrants, rewards hard work and entrepreneurship, maintains low levels of regulation, taxation and social expenditure and offers a diametrically opposite and highly successful economic and social model which, the authors believe, Europeans should emulate.

The book's 14 chapters cover these and other issues in what the authors recognize is a polemical and provocative style. These chapters cover topics as divergent as employment and unemployment, job regulation, vacations and maternity leave, immigration, the role of universities in research and technology, competition and innovation, judicial involvement in business regulation, financial markets, currency issues and the question of whether the Euro and a united Europe can reverse the region's decline. The book ends with a wakeup call for Europeans to free themselves from the oppressive system of taxation, regulation and welfare spending which their political elites and governments continue to impose on them.

The authors succeed admirably in reinforcing an image of European stagnation that is currently popular in media and political circles in the United States. However, the evidence they use to support their case is questionable. Many examples can be given of how their imagery caricatures rather than represents reality. This is not to deny that there are significant cultural differences between Europeans and Americans and between their political, economic and social systems. But these differences are complex and cannot be reduced to simple, rhetorical accounts. To be fair, the authors state at the outset that theirs is not an academic book and that they are not shy in taking sides, yet they liberally cite statistical information to present an ostensibly scientific case. They also caution readers to beware of oversimplifications, yet they merrily proceed to reduce exceedingly complex issues to gross oversimplifications.

For example, they point out that they are not writing about Europe as such but about a particular part of Europe—the old Europe of Rumsfeldian notoriety—which is experiencing decline as a result of state interventionism. They note that Britain is not a part of this Europe largely because of the market reforms adopted during the Thatcher era. Yet, their own statistics show that Britain's economic performance since the 1980s
has hardly been spectacular. Similarly, while they claim that Europe has far higher rates of unemployment than the United States, their own statistics also show that unemployment in several European countries is lower than in the United States. In fact, when these nations are disaggregated, their divergent economic performance undermines the book’s central thesis.

Equally problematic is the fact, as an editorial in the *Economist* (April 14, 2007) pointed out, that the United States is itself experiencing economic difficulties symptomatic of its decline in comparison with China, Japan and several European countries. It also notes that the U.S. continues to top the league tables with regard to imprisonment, greenhouse gas emissions, inequality and gun violence. As the editorial reveals, it is possible to present quite different normative images of the same reality and to use different data to bolster arguments. As such, the book is a good example of how comparative scholarship can use imagery for partisan purposes. It is also an entertaining read.

James Midgley
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Book Notes


Academic scholarship into social welfare issues has long been criticized for its lack of engagement with theory. Drawing on the 19th-century pragmatist and empiricist traditions, social policy research for much of the 20th century was concerned with the collection of "facts" and the evaluation of interventions designed to improve social conditions. It was only in the 1970s that British scholars began to utilize the insights of sociological theory to analyze social policy and to explicate the normative bases of social welfare approaches.

Since then, theory has played a much more important role in social welfare scholarship, but few would claim that it has attained the sophistication that characterizes theoretical endeavors in disciplines such as sociology and political science. It is in this regard that John Scott’s new book will be of particular value to social policy academics. Although intended as an introduction to the field, the book is astonishingly broad in its scope ranging in an encyclopedic way over the work of almost anyone who has contributed to social thought in the last three or four centuries. All the major classical thinkers are discussed, but the author finds room to cover the work of many others who are not frequently referenced in the literature. The author uses a broad interdisciplinary perspective to include the work of anthropologists, economists, philosophers and political scientists all within a book of relatively modest length. The material is organized chronologically and an attempt is made to identify key themes that characterize different periods of theoretical endeavor. While this is a valiant approach, it is challenging and inevitably, there is some repetition. However, the later chapters of the book are particularly impressive for providing an up-to-date and accessible account of leading contributions to current social thought. Anyone who has struggled with the
writings of contemporary social thinkers will be grateful for the author’s ability to summarize and explain their complex ideas in a straightforward way.

Although this book is intended primarily for students of sociology and does not deal explicitly with the policy implications of social thought, it will be a major resource for anyone interested in the theoretical dimensions of social policy. The theorists whose work is described have almost invariably had an effect on the real world of policy and politics, and anyone concerned with social policy issues should be familiar with their ideas. The book’s encyclopedic scope is a major strength, as is the author’s ability to condense this material into an interesting and readable format. It makes a major contribution to the literature and should be widely consulted.


Natural disasters and armed conflict exact an enormous toll on human welfare, disrupting physical and social systems. For this reason, international humanitarian aid provided by non-governmental organizations (NGOs) has become increasingly important. Reconstruction efforts span a spectrum of interventions designed to meet the physical needs of survivors and refugees to the psychological toll of trauma, and the necessity of rebuilding the social fabric by dealing with the past, from criminal trials to truth and reconciliation commissions.

Seeking to bridge the professional, academic and cultural divides between the Global North and South, Beristain marshals an impressive array of data and field experiences from across the world on the topic of humanitarian aid work. In the first five chapters of his book, the author mobilizes a field of psychological and sociological theories elucidating the human response to complex, collective disasters, both natural and human-made. He offers a stage model of human reaction to complex and collective disasters, emphasizing the social
impact of these tragedies. He also makes an excellent cultural critique of post-traumatic stress disorder (PTSD), exploring non-Western reactions to trauma and indigenous modes of healing from traumatic experiences. Beristain’s cultural model integrates the cultural grief resulting from the loss of social order, institutions, social structures, social identity and values.

Chapters 6 and 7 investigate the impact of these disasters from the perspective of humanitarian aid workers in NGOs. Beristain details the aspects of aid work, including duties of NGOs and the common problems faced by aid workers, such as stress and issues encountered upon returning home. He offers recommendations for aid-workers, and he outlines guidelines for culturally competent humanitarian aid. The final chapter discusses psychosocial repair, including the importance of dignity, economic compensation, and the need to rebuild collective memory. The author argues that to improve the conditions of survivors, interventions should alleviate the damage through both economic and moral compensation. Beristain highlights the need to restore justice in the process of reconstruction.

Beristain’s text is an important contribution to the field of humanitarian aid, which will encourage policymakers and practitioners to attend to cultural competency in aid projects. His attention on how aid impacts victims’ social, cultural, legal realities underscores his main point that humanitarian aid is more complex than simple helping. Increased focus to these psychosocial dimensions will improve and change aid-giving. This approach moves psychological practice, theory, and research from an individual clinical focus to a culturally competent community that compliments coping strategies of the affected population. Above all, this text contributes the optimism that aid can be made better to meet the needs of people affected by complex disasters.

David K. Androff, University of California, Berkeley

Although the terms “deserving” and “undeserving” the poor are not frequently used today, they continue to resonate in American culture. Originally, the undeserving poor were able-bodied, unemployed men who, it was believed, should be compelled to work. Those who were deserving of compassion and public aid included the disabled, frail elderly and widows with children. During the early 20th century efforts to expand services and income benefits to these groups resulted in several state initiatives which provided means tested old-age and widows pensions. Subsequently, these programs were nationalized and the federal government assumed primary responsibility for providing cash benefits to these groups of needy people.

However, during the latter half of the 20th century, a new definition of the undeserving poor emerged. It focused on single women with children, particularly on those who had never married. The payment of income benefits to these women was frequently challenged and they were increasingly demonized in the political arena and in the media. In time, public opinion towards single mothers changed. As Ruth Sidel shows, old prejudices against illegitimacy and promiscuity were resurrected and, as larger numbers of minority women sought financial aid, racist sentiments played an increasingly important role in defining single mothers as deviants who scrounged off hard-working taxpayers and enjoyed a comfortable if not lavish lifestyle. The so-called welfare reform initiatives of the 1980s and 1990s translated these views into public policy.

Sidel directly attacks the myths underpinning current public policies towards single mothers and argues instead that these women are “unsung heroines” who seek to raise their children and make ends meet in the face of enormous challenges. Her argument is based on in-depth interviews with no less than 50 women who have been single mothers at some point in their lives. The interviews were conducted between 2001 and 2003 in New York and the women came from a variety of
ethnic, class, and age backgrounds. The ethnographic portrait that Sidel presents is a moving one which provides valuable, powerful insights into the experiences of these women, their backgrounds, the difficulties they encountered, their resilience and their achievements.

In addition to reporting on her interviews in great detail, Sidel quotes extensively from the literature to support her case. She does not dismiss the role of marriage or of the need to avoid teen pregnancies but she rejects the simplistic theologies on which current public policies towards single women are based. She argues convincingly that efforts to reduce teen pregnancy and promote marriage must be linked to policies that address the fundamental problems of low income and material need that, she contends, present the greatest barrier to the realization of the American dream for these women and their children. The book offers a powerful alternative to the current orthodoxies that shaped government policy. Hopefully, its alternative imagery will influence public opinion and ultimately promote policies and programs that support rather than demonized single mothers. Sidel’s extremely important book deserves to be widely read.


Much of the social science literature on globalization has focused narrowly on economic aspects and on the way international trade, the flow of finance capital, the activities of multinational corporations and currency speculation have fostered far more frequent exchanges and a growing interdependence between the world’s nation states. Although this focus predominates, social science literature has been criticized for neglecting the other dimensions of globalization such as communications, population movements and the diffusion of culture. Fortunately, a more comprehensive approach to globalization has emerged and many facets of the processes accompanying globalization have now been explored.
One of these concerns the way globalization has affected individual attitudes, beliefs and behaviors. Some writers have emphasized the way a global consciousness has emerged among people all over the world and how their everyday lives are affected and changed by international events. Lemert and Elliott develop this theme by examining the links between globalization and individualism. They point out that the term individualism was popularized by de Tocqueville in the 1840s to characterize popular lifestyles in the United States. Since then, individualism has featured prominently in social science analysis and, as the authors point out, three different interpretations of individualism have emerged. The first reflects the idea that individual identity has been shaped and manipulated by capitalism, consumerism and the media. The second emphasizes the alienated and isolated dimensions of individual existence, while the third views individualism in a more proactive, reflexive way, stressing the role of individual agency in negotiating the uncertainties and risks of contemporary life. It is this latter view of individualism that is most closely associated with globalization discourse. The forces of globalization are volatile, contingent and ambiguous and it is only through reflexively negotiating this deadly world that individuals can survive. The book draws on case studies to illustrate the way that the new individualism is finding expression in the contemporary world. The authors end the book by suggesting that the insights of psychoanalytic theory can nurture and support effective individual reflexivity and foster an ability to cope with globalization's challenges.

Although the book’s thesis will no doubt be disputed, the authors have drawn together and synthesized a huge body of social science literature that has accumulated on the subject of individualism over last two centuries and they offer an extremely scholarly analysis of recent trends. The book is an enjoyable and informative read which provides powerful insights into the way that human beings today are responding to the complexities and challenges of a globalizing world. Although specialized and somewhat challenging for undergraduates, it is highly recommended.
Health care in the United States has received varying amounts of attention since the beginning of the 20th century. With a presidential election looming, a winning candidate will almost certainly have to offer a feasible plan to control the health care system, whose costs are rising while millions of Americans still lack insurance. Almost 16% of the population of the United States, or almost 47 million individuals, lack insurance. Health care accounts for about 16% of gross domestic product, but, as is well known, the United States is the only western nation that does not have a comprehensive plan that provides health care to all citizens.

Interest group opposition, especially representing the medical field, is commonly cited as one of the main differences between the United States and other nations, and as the reason the United States does not have a comprehensive health care plan. As Behan explains, however, other nations have also faced opposition from interest groups in the development of national health insurance, but they have overcome that opposition to implement a health care plan.

Behan's book explores the history of Australia, Canada, and the United States, and she explains how governmental infrastructure is the true culprit in the lack of national health insurance in the United States. Canada and Australia have similar interest groups that opposed national health insurance before its formation to those in the United States, but the United States legislative process is set up in such a way that interest groups, which usually represent small but powerful and wealthy minorities, wield disproportionate power in the legislative process. Wealthy interest groups opposed to national health insurance are in a unique position to influence policy in the United States in that they can contribute substantially to politicians', usually Republicans', campaigns, and in return, they can expect policy that favors their interests when their candidate is elected. Groups lacking insurance and those favoring a national health care plan are not in a similar
position to donate, and their interests are therefore not considered. Behan asserts that there is a need for a class-based political party representing the voice of working class Americans, who are disproportionately uninsured. Other nations have an active political party representing Labor, which has traditionally been the party that advances the national health insurance agenda. Labor in the United States, on the other hand, has relied primarily on the Democratic Party, which also has traditionally represented southern White elites, who have frequently been opposed to national health insurance.

Solving the Health Care Problem uses a systematic analysis to compare three nations, demonstrating that lack of national health insurance in the United States is far from simple or straightforward. Behan’s book offers no suggestions for how to provide insurance to more Americans quickly, but instead points to major system changes as necessary for change; for national health insurance to become a reality, there must be either significant Labor party power or a lack of veto points, meaning there must be a reduced number of places where proposed legislation can be defeated. Currently, the United States does not satisfy either of these conditions so the likely successful approach to provide health insurance to more Americans will depend on expansion of existing programs.

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The 20th Century has seen profound changes in the American family, generating considerable anxiety about the future of society. Expert and public opinion has vacillated between viewing such changes as completely disastrous or relatively benign. Social science evidence has been invoked on all sides, yet many questions stand unanswered and the debate remains largely ideological in tone. Students of family sociology and policy will appreciate the interdisciplinary and
historically informed approach to the analysis of modern day family issues offered by *American Families: Past and Present*. This collection reminds us that understanding contemporary families requires sophisticated and multifaceted methodologies that take into account the socially constructed meanings of "family" over time, as well as acknowledge the enduring diversity of family structures and experiences.

Part I, “Family Transformations in Social-Historical Perspective,” establishes the framework for analyzing notions of family. A variety of relevant topics are examined, including the changing nature of fatherhood, the “invention” of adolescence and the pathologizing of teenage pregnancy, the emergence of grandparenthood, women’s control of their own fertility, the evolution of courtship rituals, and the idealization and commercialization of family celebrations. Real changes in family demographics are reviewed while the historical reality of family diversity is emphasized. Part II, “The Interplay of Social Institutions with Family Formations,” takes a look at the bigger picture, focusing on the influence of legal, economic, governmental, and technological factors on families throughout American history. Contemporary concerns such as same-sex marriage, family leave, and child care are also addressed. Each reading is prefaced by an introduction by the editor and followed by suggested questions for classroom discussion.

Ross’ anthology brings together some of the most interesting, seminal work from prominent thinkers in the field. These are the kinds of articles that truly open students’ eyes to critical perspectives they may not before have encountered. Part I is particularly strong and just plain fun to read—this is American family “myth busting” at its finest. Part II also contains a number of compelling readings but feels a little less coherent than Part I. For example, although the influences of various social institutions such as the law, medicine and science, and war on family life are all fascinating topics in their own right, the rationale for grouping them together is not immediately apparent. Likewise, the last section on social policy seems somewhat disconnected from the rest of the collection. Although the readings themselves are notable selections from the literature on family policy, it is unclear how they are related to the material presented in Part I. Of course, identifying
thematic linkages and coming up with meaningful groupings is a particular challenge for the interdisciplinary scholar. Perhaps the chapter introductions and discussion questions could have been better utilized to highlight such interconnections. Despite this weakness, the material presented in *American Families: Past and Present* represents a valuable resource and would be quite useful in the classroom setting—as well as genuinely enjoyed by students.

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