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BOOK REVIEWS


Jim Midgley Retires as Book Review Editor

For the last dozen years our Book Review section has been piloted by James Midgley, now Dean Emeritus at the University of California–Berkeley. We didn’t always have book reviews. Our first Book Review Editor was Paul Adams, who began in 1983, a full ten years after our founding. He served for two years and was succeeded by Shimon Gottshalk in collaboration with Bruce Thyer until late 1987. Shimon carried on alone until 1992. Soliciting books to review, persuading scholars to review them, and riding herd on the reviewers is hard work. Neither the book review editors nor the reviewers get much of any reward from their departments for their efforts. We were grateful for their efforts and did not expect a prodigious output. Some issues had reviews, many went by without any.

Somehow, Jim changed all that. Undertaking the job while he was otherwise engaged as Dean and Asst. Vice President for Research at Louisiana State University and Dean at UC–Berkeley, Jim courted publishers, corralled reviewers, got them to report on time, and sent tear sheets back to the publishers to show them that it was worth their while to send us their books. We suddenly had half a dozen reviews per issue.

If that wasn’t enough, we also had Book Notes, brief reports on books that deserved notice but couldn’t be fit into the schedule for a full-scale review. Many of these Jim wrote himself. The contribution of our Book Review section to the popularity and scholarly reputation of JSSW is incalculable.

To carry on this weighty legacy, and in appreciation of the work load it involves, we are fortunate to have two new Book Review Editors, Marguerite Rosenthal, Professor Emerita at Salem State College and Jennifer Zelnick, also at Salem State. They have already produced their first issue. If you are interested in reviewing books, and can deliver the reviews on time, I’m sure they would be happy to hear from you.
On behalf of Fritz, Melinda, the Editorial Board, and the subscribers and readers of *JSSW*, thanks, Jim, for all your hard work.

*Bob Leighninger*
Editor
Parental culpability for juvenile delinquency has permeated social welfare thought and practice throughout U.S. history. This article presents a case study of one Midwestern municipality's efforts to create a training school for parents as a remedy for delinquency in the 1940s. The case study illustrates how city leaders attempted to put theory about delinquency causation into practice by forging a collaborative intervention strategy among various community partners including public schools, social welfare agencies, and law enforcement. In light of the case study, this article examines historical and contemporary efforts to punish parents of juvenile delinquents.

Key words: juvenile delinquency, social welfare history, parental responsibility

Throughout American social welfare history, theorists and practitioners have often attributed the source of delinquency to parents. Historically, several theories of delinquency have emphasized the role of the family environment, most recently Gottfredson and Hirschi's (1990) theory of low self-control (Unnever, Cullen, & Agnew, 2006). Interventions over time have reflected the theoretical underpinning of parental culpability for juvenile delinquency. In practice, nineteenth century interventions for delinquency focused largely on removal of children from their parents and placement in foster homes or juvenile institutions for the duration of their minority. Creators of the juvenile court in the late 1800s shifted the focus to diversionary and probationary methods of intervention while...
keeping families intact. Subsequently, laws were established allowing for the conviction and punishment of parents under the jurisdiction of the juvenile court in the early 1900s. A resurgence of parental responsibility laws in the 1990s demonstrates the continued popularity of such theories in practice (Arthur, 2005; Brank, Kucera, & Hays, 2005; Brank & Weisz, 2004; Tyler & Segady, 2000). All 50 states have enacted laws that punish parents for their children’s delinquency via mandatory parenting classes, fines, or imprisonment (Brank, Kucera, & Hays, 2005).

During World War II, this concept of parental culpability for delinquency took on particular salience as families experienced disruption due to the departure of fathers to war overseas and mothers to the workplace. Beginning in 1941, concern over increasing delinquency rates led to an adjunct rise in attention and intervention efforts aimed at addressing and preventing delinquency. This study examines how one municipality sought to implement a parental training program for the prevention and treatment of delinquency during the war period. Relatively little has been written on the history of juvenile corrections during the period between the Progressive Era (1890s-1920s) and the In re Gault decision in 1967. In addition, most studies to date have focused on the establishment and proliferation of the juvenile court system, correctional facilities and other institutional responses to delinquency. This study presents a case study of a community-based intervention from a time period with little coverage in the literature (1943-1949).

The inquiry is rooted in an examination of documents from the United Way of Minneapolis records from 1943-1949, which include committee discussions of the parental school concept as well as a paper describing the San Francisco Parental School, the pioneering model which other cities, including Minneapolis, sought to replicate. Documents used were selected based on their relevance to the planning and implementation of the parental school idea in Minneapolis between 1943 and 1949, the time period during which this prospect was developed. The documents used are primarily minutes from meetings of the Minneapolis Community Councils Coordinating Committee and its Executive Committee and related correspondence. Two additional documents from the records were also utilized, one
a research report compiled on delinquency in Minneapolis from 1940-1944 and the other a description of the San Francisco Parental School written by one of its founders. Documents were examined in chronological order and scanned for their connection to the parental school discussion. Some meeting minutes contain full transcripts of conversations while others offer summaries of the points discussed and decisions made. The case study was constructed by examining these meeting notes and supplementary documents.

As Schlossman (2005) notes, “continuity rather than change best characterizes American thinking of the subject of delinquency causation” when it comes to parental culpability (p. 69). Eric Schneider’s (1993) work on the treatment of juvenile delinquents and their families in Boston provides a comprehensive view of nineteenth century efforts on the part of social welfare institutions to address juvenile delinquency. Schneider argues that practitioners, having determined children to be reformable in spite of poor parenting, created various institutions and interventions in order to instill proper morals, cultural attitudes and behaviors in wayward youth. Throughout the 1800s, these interventions took on various forms, from family-style institutions to the placing-out movement spearheaded by Charles Loring Brace and his New York Children’s Aid Society. The latter model, mimicked in other Eastern cities, removed children from their urban homes and placed them with farm families in America’s West (Schneider, 1993). Despite changes in appearance, each of these efforts emphasized the family as the locus of both blame and remedy for juvenile delinquency. However, the idea that the family of origin, and the parents in particular, might be a target of intervention did not come about until the formation of the juvenile court system beginning in 1899. Instead, during the nineteenth century, efforts to address juvenile delinquency focused on child removal and reform outside of the family of origin.

Thus, prior to the establishment and proliferation of the juvenile court system, the assumption regarding causation of juvenile delinquency and its remedy can be summarized as follows: the parents have failed, therefore remove and reform the child. However, the juvenile court, as outlined in the Illinois Juvenile Court Act of 1899, defined the best interest of the child
as the family home, preferably the parents' if it appeared suitable (Hawes, 1971). This ideological shift resulted in the following change in logic: the parents have failed, therefore, remove, reform, and return the child, and reform the parents. The argument being, what good would it do to remove children from their homes, only to return them to the same familial environments that caused their delinquency in the first place?

Schlossman (2005) observes that, due to the juvenile court’s emphasis on probation, “the possibility of teaching inept parents to mend their ways was seriously entertained” (p. 70). In 1925, Augusta Bronner, who worked with William Healy in Boston’s well-known child guidance clinic, wrote that children found delinquent by the court should be removed from the home “… until sufficient time has elapsed to make over unworthy or stupid parents, to teach them the principles of child psychology, to alter in very fundamental ways a considerable share of mankind” (Mennel, 1973, p. 167). In addition, several jurisdictions adopted laws directly punishing parents for the delinquent acts of their children, beginning with Denver in 1903 (Sutton, 1988). A Kansas law allowed for parents to be fined up to $1,000 and sentenced to up to one year if found guilty of contributing to the delinquency of their children (Mennel, 1973, p. 145). In this way, the juvenile court exercised some jurisdiction over the parents of delinquents for the first half of the twentieth century.

When U.S. participation in World War II drew fathers overseas and mothers to the workplace, public concern grew over the potential for a rise in juvenile delinquency due to disruption of the home environment. Gilbert (1986) argues that it was the anticipation of an increase in delinquency rather than actual evidence of such that led to this unease. National and local leaders alike made efforts to study and address juvenile delinquency in response. The U.S. Senate held hearings in 1943 to assess the issue, soliciting testimony from national leaders in juvenile corrections. Father E. J. Flanagan (1943), then the superintendent of Nebraska’s renowned Boys Town, testified that the most difficult thing to change in a child’s life is the home. According to Flanagan, parents “frequently are not amenable to outside suggestion” and “in most cases they have experienced absolutely no training for parenthood, the great
responsibilities of which they are expected to carry out in an intelligent and capable manner” (p. 69). Even more emphatically, Charles J. Hahn (1943), Executive Secretary of the National Sheriff’s Association, stated, “... there is more parental or adult delinquency than there is juvenile delinquency. Someone has failed” (p. 72). The general consensus among such leaders was that parents’ failure to properly rear their children was the leading cause for increased delinquency.

During this time, community leaders in San Francisco developed an intervention for delinquent parents referred to by subsequent commentators as a “fad” (Gilbert, 1986) and “futile effort” (Bloch & Flynn, 1956) in delinquency prevention: the parental school, comprised of mandatory training classes for parents of juvenile delinquents. While these later critics of the parental school program considered it ineffective in retrospect, its appeal during the 1940s is evidenced by attempts on the part of several other jurisdictions to replicate it. Indeed, Gilbert notes that despite criticism of the parental school by such entities as the Children’s Bureau, its spread to other localities reflected the appeal of such interventions to address anxiety about the family’s influence on delinquency that characterized the time. Minneapolis was one such jurisdiction.

The San Francisco Model

In order to contextualize the parental school discussions in Minneapolis, it is useful to first examine the San Francisco school, which other cities like Minneapolis sought to emulate. According to the school’s director Jay Minkler (1944), the program began on May 3, 1943 and was founded by George Jarrett, then Executive Secretary of the San Francisco Coordinating Council. Jarrett conceived the idea of a program for parents of delinquents similar to a successful driver retraining school for traffic offenses in San Francisco (Pearce, 1945). The stated purpose of the school was to improve the welfare of juveniles by addressing deficiencies the home environment (Minkler, 1944). Parents were referred to the San Francisco Parental School by the Juvenile Court, as well as by police agencies, the district attorney’s office, public schools, and social agencies (Minkler, 1944, p. 2). The school’s curriculum included
the following topics, each designated to one week of the eight-week program: "The Legal Responsibility of the Parent;" "The Parent's Responsibility for the Child's Health;" "The Parent's Responsibility for Maintaining an Adequate Recreational Program;" "What are the Community Facilities For?;" "Your Child's School Career;" "The Relationship of the Church to the Home;" "The Child's Emotional Life;" and "The Importance of a Job for Your Child." Each topic was led by a community expert in that area, such as the juvenile court district attorney, an official from the Department of Public Heath, a child psychiatrist, and so on. Group meetings typically lasted one hour and allowed for discussion from the parents. According to Minkler (1944), "Leaders do not lecture or talk down to the class, but speak informally and in a neighborly and democratic tone" (p. 1). The Parental School also offered individual counseling with Mr. Minkler or probation officers and case workers who were involved in follow-up with parents.

Founder George Jarrett likened delinquent parents to delinquent taxpayers. Just as the unpaid taxes are not delinquent, neither are children. Rather, it is the responsible party (taxpayer or parent) who is to blame. According to Jarrett, "How can a child be delinquent? The answer is that he isn't. But his father and mother are. Let's go after them" (Pearce, 1945. p. 161). The San Francisco Parental School was founded on two principles: (1) the parents have failed in their responsibilities to their children; and (2) parents do not know how to use available community resources to assist themselves and their children (Pearce, 1945, p. 162). Minkler (1944) further cites the Webster's dictionary definition of delinquency, which states that one who is delinquent "neglects or fails in a duty or obligation" (p. 1). According to this definition, says Minkler, it cannot be the child who has neglected his duty, but his parents. Minkler's reference to parents' neglect of duty toward their children is curious given the historical context. After all, parents were fulfilling their patriotic duty in the nation's war effort, with many fathers fighting overseas and mothers working outside the home during this time period. Nonetheless, the rationale for the San Francisco Parental School's existence was dereliction of parental duty. At the same time, Minkler (1944) notes that "a serious emergency exists in the American home" due to these
war-induced parental absences, suggesting that perhaps larger societal forces were at least partly responsible for children's delinquent behavior (p. 1).

Both Pearce (1945) and Minkler (1944) claimed great success for the school, citing such evidence as completion of the program by 300 parents, none of whom returned to the school following graduation, and agreement among public officials, judges, social workers, ministers, lawyers, educators and the parents involved that the program benefitted the community. As a result, Pearce (1945) concludes that the school has become “a proved weapon with which to combat the frightening increase in wayward youth” (p. 163).

Neither Minkler nor Pearce present particularly objective evidence to support their claims; though their enthusiasm for the program is clear. After citing the evidence above, Minkler (1944) states that accomplishments “in the field of prevention simply do not lend themselves to statistical treatment and many results have to be taken for granted” (p. 2). While this assessment would hardly meet contemporary standards for evidence-based practice in juvenile justice, the fact that others who heard of or visited the San Francisco Parental School regarded it as a model to emulate in the treatment and prevention of delinquency is evident by the attempts of several other jurisdictions to mimic it.

The Minneapolis Case

During the 1940s, community leaders in Minneapolis embarked on new efforts to address juvenile delinquency. In 1943, leaders raised concern about separate detention facilities for juveniles who were regularly housed in adult county or city jails. A mayoral committee was appointed in March of that year to investigate the conditions in adult jails and make recommendations for changes (Juvenile Delinquency, n.d.). Reports from this committee indicated that the state of detention facilities for youth was quite poor. These reports contain strong language, including the unanimous assessment by police and probation officers that the current state of things was a “disgrace to the city and the county” (Day, 1945). One report relayed how a boy housed in the adult section of the jail overnight was so terribly
bitten by bed bugs that he needed treatment at the General Hospital (Minutes, 1945).

In 1945, the Minneapolis Council of Social Agencies (later the United Way of Minneapolis) and the Hennepin County Juvenile Court and Probation Office produced a report on trends in juvenile delinquency in Minneapolis from 1940-1944 (Segner, 1945). In his final report, Research Consultant Peter Segner (1945) observed that much had been said of juvenile delinquency in the public square during the war years, citing commentary released by J. Edgar Hoover of the FBI and stories in the media regarding disorder in larger cities such as Detroit and Los Angeles. Gilbert (1986) also notes the effect that Hoover's warnings about rises in delinquency and disorder during wartime had on escalating public concern. Hoover's examples of delinquency were often highly sensationalized, his statements were morally charged, and they were often published in the popular press, giving the issue widespread attention. Further, Gilbert credits the 1943 "zoot suit" riots in Los Angeles and similar unrest in other cities, such as Detroit, with contributing to public fear of growing delinquency. The zoot suit riots highlighted the racial and ethnic tensions underlying the increased public anxiety about juvenile crime. During the week-long riots, white servicemen in Los Angeles attacked young Mexican-American men wearing zoot suits, which were emblematic to the public of a burgeoning culture of delinquency (Gilbert, 1986). Given that zoot suits were typically worn by Mexican-American and black youth, this incident tapped into latent racial tensions in the public discourse about delinquency during wartime.

Segner (1945) further notes that most homes in Minneapolis had family members either directly or indirectly involved in the war effort. In addition, he asserts that it was a "well-established fact" that delinquency increases during war and post-war periods but then declines during "more normal times" (p. 2). Segner remarks that adult anxiety about the war and mothers working outside the home were disruptive factors for children, reflecting similar concerns voiced in the San Francisco Parental School documents. However, Segner expresses a measure of skepticism concerning the level of attention that has been drawn to the problem. While the report reveals an increase in
the number of delinquents adjudicated by the juvenile court in Minneapolis between 1940-1944, from 860 cases in 1940 to 1,270 in 1944 (an increase of 47.7%), Segner stresses that delinquency is "one of the most easily detected symptoms of fundamental social disorganization" and notes that other social concerns also arise simultaneously (p. 3). Citing contemporary sociologists such as Gluek and Gluek (1930) and Shaw and McKay (1942), Segner concludes that, "Delinquency itself cannot be controlled unless and until some of these other factors in social breakdown are also controlled" (p. 13). Whether this report reflects the mindset of public officials in Minneapolis regarding the causes of delinquency is unclear. However, as an examination of the Minneapolis Community Councils Coordinating Committee's (hereafter the Committee) discussion of the parental school reveals, not all of the key stakeholders involved appeared willing to "go after" the parents in the manner described by Jarrett and Minkler of San Francisco.

The San Francisco Parental School first came to the attention of the Committee's leaders in January of 1946. One member, Tom Tallakson, presented the Minkler document to the Executive Committee and discussion began regarding whether a legal basis for such a program existed in Minneapolis. They referred the idea to a subcommittee for further study and a presentation at the next meeting of the whole Committee (Community Councils Executive Committee, 1946a). The decision to pursue the establishment of such a school in Minneapolis occurred on March 11, 1946 at a meeting of the entire Committee. It was reported that Judge Fred Wright of the juvenile court, Howard Hush and Lieutenant Magni Palm of the Hennepin County Probation Department, as well as Dr. Walter Anderson of the school board were all in favor of the idea. As a result, a resolution was passed authorizing the Committee to organize the school (Community Councils Coordinating Committee, 1946a).

Subsequent meeting minutes reveal what became the central tension among community leaders regarding the parental school. Committee members strongly disagreed about whether or not attendance at the school should be mandatory. On the one hand, some argued that without compulsory attendance, parents would not take part in the program. As one
member put it, "If you are going to impart any responsibility on the people you have to send those people to the school" (Community Councils Executive Committee, 1946b). Those of this opinion argued for putting "teeth into the law." On the other hand, some committee members cited reasons why compulsory attendance might be detrimental. Such reasons included the need to "sell" parents on the values of the program and ensure the "right attitude" for learning, both of which would be better accomplished through voluntary attendance (Community Councils Executive Committee, 1946b).

The Committee made substantial efforts to resolve the tension over compulsory attendance as well as garner broader community support for the school. A meeting attended by 40 community leaders from social service agencies, schools, and law enforcement to discuss the parental school proposal was held on March 20, 1946 (Community Councils Executive Committee, 1946d). The Committee also gathered information from other cities that had attempted parental schools like the San Francisco model, including Joliet, IL, Dearborn, MI, and Columbus, OH (Community Councils Executive Committee, 1946c). Most strikingly, the Committee brought Jay Minkler, Director of the San Francisco school, to Minneapolis to meet with community leaders and sent Ted Knudson to visit the San Francisco school (Community Councils Coordinating Committee, 1946b, 1946c). Such actions indicate that Committee leaders sought to ensure that a parental school, if established in Minneapolis, would have sufficient community backing.

The results of these efforts did not favor a centralized school for delinquent parents in Minneapolis. Following the initial meeting of 40 community leaders to discuss the parental school concept, one member of the Minneapolis Board of Education wrote a letter to the Committee expressing his wish that attendance for parents be voluntary and suggested that perhaps parents could be administered an examination to assess their need for such training (Community Councils Executive Committee, 1946d). In response, Tom Tallakson suggested that the Committee just get the program started and resolve the compulsory attendance issue later. His concern was to "get people there who need it" (Community Councils Executive Committee, 1946d). Committee members agreed
and Bess Knox was appointed Chairman of the Advisory Committee for the Parental School. Miss Knox, a principal at one of the Minneapolis public schools, was charged with being the “official hostess” of the parental school and creating a “friendly atmosphere” (Community Councils Executive Committee, 1946d).

After Jay Minkler’s visit to Minneapolis on May 10, 1946, Howard Hush of Hennepin County’s Probation Office “reversed his position” on establishing a central parental school (Community Councils Coordinating Committee, 1946a). Instead, Mr. Hush advocated that the school be voluntary, informal, and held at several school sites within the city. Evidently, the weight of Mr. Hush’s opinion mattered enough to hold a special Committee meeting for him to explain his changed point of view. In order for the parental school to be viable, the Committee needed the support of the public schools as well as the juvenile justice system. The public schools were important because, in addition to providing instructors and a place to meet, the Committee hoped that the schools might eventually take over full responsibility for the parental school. The juvenile court and probation system were needed in order to provide parent referrals (Community Councils Executive Committee, 1946b). Without support of key stakeholders in these arenas, it would be difficult for the Committee to create and sustain a parental school akin to the one in San Francisco.

Subsequent to Mr. Minkler’s visit to Minneapolis, Mr. Knudson of the Committee visited San Francisco to observe their parental school as well as their juvenile court system in general. At a meeting of the Committee on September 12, 1946, Mr. Knudson reported his findings (Community Councils Coordinating Committee, 1946c). A transcript of his comments shows that, in practice, the San Francisco model never successfully employed compulsion with parents, at least not in all cases. They found, as some Committee members suspected, that “outright compulsion results in resentment” (Community Councils Coordinating Committee, 1946c). During his visit, Mr. Knudson discovered that the National Probation Association had conducted a study asking San Francisco Parental School graduates what they had learned. The study showed that most parents said that they knew the material already and learned
nothing new. According to Mr. Knudson's conversations with parental school and juvenile court officials, parents were compelled to the school only if they were charged by the court with contributing to the delinquency of a minor, otherwise the judge simply met privately with the parents and attempted to convince them that the parental school would help prepare them for their child's return from the state training school (Community Councils Coordinating Committee, 1946c).

A subsequent meeting of the Executive Committee details the plans for the Minneapolis parental school in light of these events. Classes were to be implemented in a six week, rather than an eight week, session and held at two public school locations. Bess Knox advocated for the two location plan, citing the idea that one location might create the idea that "there is where the convicts are sent" (Community Councils Executive Committee, 1946e). Committee members felt that public support for the program was strong, given that 68% of parents who responded to a survey said they wanted it.

Minutes dated January 11, 1947 discuss the implementation of "Understanding Your Child" classes at two Minneapolis junior high schools, Bryant and Jordan. According to the notes, the Bryant school had already run one series of the class, while Jordan was about to begin its first (Community Councils Coordinating Committee, 1947). Topics for the upcoming six week session were to include radio programs, public health, delinquency in the community (panel discussion), mental health, religion, and recreation. Attendance numbers for the Bryant series were relatively low, with 21 being the highest at any one meeting and 13 the average. A total of nine parents had attended every session, none of whom had been referred by the juvenile court. Another mention of "Understanding Your Child" appeared in the Community Councils Executive Committee minutes in April, 1949. This discussion was brief and largely focused on paying the instructor's fee. However, it demonstrates that the classes were still underway after two years, although they had not expanded beyond the two original locations (Community Councils Executive Committee, 1949). Apparently, what had begun as a vision for a citywide, compulsory school for delinquent parents in Minneapolis ended as a small-scale, voluntary series of classes offered at two sites.
Discussion

This case study of how one municipality sought to replicate a community-based method for juvenile delinquency treatment and prevention provides a historical backdrop for contemporary debates surrounding parental culpability for juvenile crime. While this study is certainly limited by its small scope, a review of recent literature in criminology demonstrates that the idea of legally-mandated training for parents of delinquent youth is still salient.

As recently as 2004, a study by Brank and Weisz found that a majority (68.7%) of Americans believe that, after juveniles themselves, parents are most responsible for juvenile crime. However, this does not translate into strong support for punishment of parents. The authors outline three forms, which vary nationwide, of holding parents legally responsible for their children's actions: civil liability for crimes against property or person, criminal liability for contributing to the delinquency of a child, and obligation to be involved with criminal sanctions against the child. Despite the apparent low level of public support for punitive sanctions against parents of delinquents, this study illustrates the persistence of the perception that the home environment is a primary causal factor in the problem of juvenile delinquency.

Laskin (2000) also traces a reemergence since 1988 of parental liability laws in the U.S. Laskin argues that such laws unjustly stigmatize and criminalize minority mothers whose children are disproportionately represented in the juvenile justice system. Strikingly, Laskin advocates a system to address this problem that encompasses both the parents and the children by providing recreational diversion for children coupled with group sessions for parents facilitated by social workers or psychologists. Here, parents can communicate their common struggles and, through the facilitators, "be exposed to methods that effectively prevent children from becoming delinquent" (Laskin, 2000, p. 1204). Although Laskin differentiates these group sessions from parenting classes as being more discussion rather than expert-based, their general form remains remarkably familiar in light of the 1940s parental school movement outlined above.
Two additional studies of contemporary, mandatory parenting classes for parents of delinquent youth illustrate not only the persistence of the idea of parental culpability, but also practices notably similar to those of the San Francisco Parental School and Minneapolis’ “Understanding Your Child.” The first, conducted in 1991, randomly assigned 55 families of chronically offending delinquents to either a parenting training program or traditional services provided by the juvenile court and community agencies (Bank, Marlowe, Reid, Patterson, & Weinrott, 1991). The study found that both the treatment group (parent-training) and control group (traditional services) demonstrated reduced rates of offenses during the follow-up period, with the treatment group dropping more quickly, but not necessarily more significantly. The parent-training group also had one-third less the rate of re-incarceration (Bank et al., 1991). The second study, a qualitative analysis of a court-ordered parenting skills class for parents of juvenile offenders located in a Northern California juvenile detention facility, found that perspectives on the problem and parenting differed greatly between probation staff who led the sessions and parents who participated (Schaffner, 1997). Like the San Francisco Parental School model, parents are required to complete a set of ten sessions, each of which is led by a probation officer who invites guest speakers or presents videos on topics such as drug use, sexual abuse and school counseling (Schaffner, 1997, p. 414).

Conclusion

Given the evidence from contemporary criminological literature that both the attribution of delinquency to parental culpability and programs to train parents of delinquents are still in use, this historical case study of the parental school concept in 1940s Minneapolis provides an historical context for current thinking and intervention strategies. As such, Gilbert’s (1986) dismissal of the parental school as a “fad” is questionable. At least, as fads often do, this one has resurfaced in recent years as an appealing intervention strategy. However, Bloch and Flynn’s (1956) assessment of such interventions as “futile efforts” remains open to debate. The question is
whether or not the theoretical concept of parental culpability for delinquency can be successfully translated into intervention strategies with parents. For researchers and practitioners, the tensions faced by the Minneapolis Community Councils Coordinating Committee in contemplating and implementing “Understanding Your Child” may prove illustrative and suggest questions for study surrounding such issues as program effectiveness and the role of family environment in the causation and remediation of juvenile delinquency. Such questions might include the viability of collaboration between social welfare agencies, law enforcement, and schools, as well as the importance of parental motivation in rates of program success.

References


Community Councils Coordinating Committee. (1946b). [Meeting Minutes, April 24, 1946]. United Way of Minneapolis Records, box 82, folder 18, Social History Welfare Archives, University of Minnesota.


Community Councils Executive Committee. (1946d). [Meeting Minutes, April 18, 1946]. United Way of Minneapolis Records, box 82, folder 18, Social History Welfare Archives, University of Minnesota.

Community Councils Executive Committee. (1946e). [Meeting Minutes, October 2, 1946]. United Way of Minneapolis Records, box 82, folder 18, Social History Welfare Archives, University of Minnesota.


In re Gault, 387 U.S. 1 (1967).


Life History and Narrative Analysis: Feminist Methodologies Contextualizing Black Women’s Experiences with Severe Mental Illness

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This paper discusses a methodological approach to research that enhances critical analysis by contextualizing qualitative research findings within participants’ individual experiences. We demonstrate the combined use of life history methods and feminist narrative analysis to explore Black women’s everyday experiences with mental illness, from their perspectives. These interpretive methods reach beyond pathologized conceptions of identity and adjustment that often narrowly characterize mental illness among Black women. Instead, these methods holistically describe a participant’s experiences and strategies she uses to pursue goals and enhance her life. The use of the methods is illustrated with examples from the life narrative of “Maria,” a Black woman living with serious mental illness. Our findings underscore the need for rigorous, culturally appropriate methods and further research to evaluate participants’ standpoints and needs, and...
interventions to facilitate understanding and improved outcomes.

Key words: black women, mental illness, identity, feminist narrative analysis, life history methods

For Black women, the reality of living with mental illness is stark and complex. Psychological distress in Black populations has increased considerably over the last decade, with an eight percent increase between 1993 and 2001 (Zahran, Kobau, Moriarty, Zack, & Giles, 2004). Women experience higher rates of mental illness than men, and women of color face more mental health-related hardship than White women (Zahran, et al., 2004). Given the limited knowledge about the hardships faced by Black women living with severe mental illness and other aspects of their quality of life, there is a need for research that holistically represents their experiences and perspectives.

Life history methods and feminist narrative analysis techniques can be used to reach beyond pathologized conceptions of identity and adjustment that often narrowly characterize mental illness among Black women. These interpretive methods help to holistically describe the study participants’ experiences—both beneficial and harmful—and identify the strategies they use to pursue their goals and enhance their lives while living with severe mental illness. The results can then be translated into chronicles of the women’s lives. In the current study, life stories of Black women with severe mental illness were collected and analyzed in order to promote their use by other Black women also attempting to frame their own life stories. With such information, researchers can enhance our basic understanding to inform practice, policy, and future research. These strategies will help ensure that resources are available to women who combine the experience of living with a mental illness and the fulfillment of multiple roles as mothers, workers, and community members. This article provides a framework for research methods that delve into sensitive research questions with marginalized populations and present women’s life experiences through the use of life history and feminist narrative analysis.

First, we provide a brief literature review with insights into evolving perceptions of Black women’s experiences
Life History and Narrative Analysis

with severe mental illness and how these perceptions fit with emerging notions of recovery. We then describe our conception of feminist life history narrative methods, with a brief analysis of one major theme in a case study of “Maria” (a pseudonym) to illustrate. Maria is a Black woman living with severe mental illness, struggling with the effects of early childhood abuse, navigating welfare systems and work, and raising her family in a racially diverse and economically distressed social environment. With her life history narrative, Maria provides insights into her own experiences and suggestions for policy and practice. We conclude with lessons learned from the use of these methods, benefits garnered from analyzing life histories, and future studies of individuals from similar populations.

The “Problem”: Representing the Lives of Black Women with Mental Illness

Recovery from mental illness is a primary theme in mental health literature and research, but the notion of recovery has historically taken various forms and served multiple purposes. Jacobson (2004) describes the development of “recovery” as a fluid concept and demonstrates that over time ideas about recovery have shifted significantly. Early observers acknowledged that “real” or full recovery was rare and an impractical goal. Instead, the focus shifted to “‘practical’ or ‘social’ recovery” (Jacobson, 2004, p. 48), which focuses on minimizing the impact of symptoms and enhancing functioning in society despite the continued presence of the illness (Jacobson, 2004).

The idea of social recovery provides hope for many people. Increased functioning in terms of social participation is appealing to those living with mental illness, their families, and their communities. However, social recovery research often identifies mental illness as an individual affliction with recovery as a goal, rather than a process, and tends to neglect the influence of the environment or social structures as targets for change. These assumptions predictably lead to a focus on individual treatment and a somewhat narrow definition of success. This approach further presumes a medical model that prioritizes treatment and the eradication or stabilization of symptoms, rather than a functional assessment of strengths and strategies.
used to establish and maintain relationships in the absence of formal treatment (Raja, 1998). Both full recovery and social recovery perspectives imply that the person needs formal treatment to recover, and assume that individuals should change to fit into society, rather than considering how communities might change to accommodate people with mental illness. Such perceptions may emerge from generalizations about mental health consumers’ behavior, based on practitioners’ reports and agency-based data rather than first-person interpretations of the experiences of people living with chronic mental illness.

Other research has appropriately identified important roadblocks to mental healthcare access, such as stigma, improper diagnoses, problems associated with finding childcare, and economic barriers (Nicki, 2001; Nissim-Sabat, 2002; Rosen, Tolman, & Warner, 2004; Takeuchi & Kim, 2000; Wilson, 2001). However, such research often represents narrow slices of the women’s lives where “barriers” revolve around the women’s willingness, or lack thereof, to comply with treatment and professionals’ prescriptions for adaptation and assimilation. Implicit in these models is an assumption that addressing individual personal and health issues will result in improvement (e.g., overcoming barriers), if not full recovery (Jacobson, 2004). Social interventions are rarely emphasized and mental health consumers are infrequently consulted about their perceptions of quality of life (Bentley, 2005; Goh, 2005; Raja, 1998). Thus, beyond barriers to recovery, little is known of the diversity of experiences of Black women living with mental illness.

Even more structurally-focused mental health research in social work, psychology, and public health primarily considered whether people of color were accessing services, concluding that the solution was increasing access to culturally-appropriate treatment (Bentley, 2005; Rosen, Tolman, & Warner, 2004; Takeuchi & Kim, 2000; Wilson, 2001). Cultural competence models serve as an important starting point for addressing the needs of different groups, but emphasizing access to treatment that leads to “social recovery” tends to measure the efficacy of the process (e.g., accessing services) dependent on the result (e.g., functioning at higher levels), which returns the focus to
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change in the individual. Seeking individuals' interpretations of their own experiences is necessary for holistic treatment that addresses the diversity of cultural interpretations presented by intersecting race, gender, class, and mental health status. Notable exceptions in more recent research have increased our understanding of individuals' experiences with mental illness and treatment (Deegan, 2003; Jacobson, 2004), but the narratives are limited in terms of racial and gender diversity, and the type of mental illness represented.

In more recent research on disability, mental health researchers are emphasizing the importance of consumers' authentic voices: There is an "... attempt to re-author experiences that have historically been excluded ... and rearticulate fresh and flexible diasporic modes of subjectivity" (Roets & Goedgeluck, 1999, p. 86), and the roles of social environment and socio-economic status are becoming ever clearer. The needs of Black women, their families, and their communities are unique and may require alternative institutional and policy responses; thus, they must be studied with particular intention. For example, Black women with mental illness also face the same social pressures as women without mental illness (Mowbray, Oyserman, Bybee, MacFarlane, & Rueda-Riedle, 2001). In addition to these stressors, stereotypes about Black women with mental illness abound, with potentially serious consequences for individual women, the community, and the mental health field (Beauboeuf-Lafontant, 2005; Nissim-Sabat, 2002; Raja, 1998; Randolph, 1999; Wilson, 2001). Social connections are a primary source of support and are important for encouraging people of color to seek and remain in treatment (Takeuchi & Kim, 2000); yet, this also can present a significant obstacle for Black women, who may feel that seeking help conveys weakness and threatens personal and community relationships (Takeuchi & Kim, 2000). Intersections of sexism, racism, and stigma associated with mental illness have lasting negative effects on families (Nicki, 2001; Raja, 1998).

Black women living with mental illness are rarely consulted when policies and services are determined. Although more inquiry is needed to understand precisely why, the reason lies perhaps in the stigma related to certain
characteristics of clients or the choices they make. Despite their training and efforts to avoid bias, some researchers, policymakers, and practitioners may lack similar experiences and empathy that are most helpful when relating to women with mental health problems (Sallmann, 2005), resulting in less participation of Black people with mental illness (DHHS, 2001). In addition, nuanced depictions in popular culture, news, and research of high functioning Black women who live with mental illness are rare. As a result, the reality of severe and persistent mental health problems among Black women is hidden, as are the myriad ways in which these women successfully live and contribute to their families and communities (Wilson, 2001). It is difficult for Black women living with mental illness to find others like themselves in the news, literature, and scientific studies that truly describe their experiences. This is especially frustrating for women seeking models of health and accurate representations that reflect their own experiences. To authentically present their perspectives, we need research methods that use their language and expression (Roets & Goedgeluck, 1999), rather than re-presenting their stories from our own vantage points, for our own purposes (Cary, 1999).

Theory: Lifespan Research From a Feminist Perspective

There are few strict guidelines when undertaking life history research (Tierney, 1999); multiple incarnations of life histories are informative and compelling. As the experiences of Black women living with mental illness are unique in many ways (Gibbs & Fuery, 1994), examining women’s life histories from their own standpoints captures elements that may be distinctive, as well as variation among those experiences. We employed the method to examine mental illness as a flexible concept best understood as situated within the context of women’s broader life experiences.

The feminist life history model used in the current project, which will be referred to as the “Living Many Lives (LML) Project,” engages multiple definitions of recovery in Black women’s lives, as they define it for themselves. Jacobson (2004) notes that experiences of mental illness are frequently categorized using a medical model, articulating symptoms and assessing functioning relative to people’s social and
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occupational success. This focus on illness (ill/less-ill/not-ill) restricts the capacity of Black women living with chronic and unremitting mental illness to see themselves, or be perceived by others, as normal and fully-functioning. Life histories allow a spectrum of experiences to emerge—negative and positive—within the context of the person’s whole life. The results are not “victory narratives” that merely articulate successes, that is, stories of women’s “… triumph over adversity and redemption” (Cary, 1999, p. 413); nor do they simply talk of woe and failure. Instead, a complicated set of stories emerge that may be unexpected, even changing the nature of the research. These techniques transform gaps and misunderstandings in mainstream research created by the absence of the standpoints of marginalized people, such as Black women living with mental illness (Roets & Goedgeluck, 1999).

Examining significant events over the lifespan helps us uncover resiliency at different stages, across various developmental ages and events (Deegan, 2003; Sigelman & Shaffer, 1998), including both macro-history (e.g. societal-level events such as the attacks on the World Trade Center on September 11, 2001) and micro-history (e.g. individual-level events such as sexual assault) (Deegan, 2003; Simons & Thomas, 1983) to show how they converge and shape a person’s development. Anthony (as cited in Deegan, 2003) posits, “the lived experiences of people in recovery, their narratives and their creativity should also take a prominent position” (p. 374). Jacobson (2004) further notes that “… recovery is a way of being in and of the world that can only be known subjectively. … recovery becomes an existential phenomenon” (pp. 70-71). For Maria and for the Black women participating in the LML Project, life narratives are particularly important in presenting the daily experiences that give rise to personal understanding, highlighting individual differences and the social/contextual factors that influence their recovery process. Lysaker, Lysaker, and Lysaker (2001) describe personal narratives as connecting the multiple identities of our lives into a pattern that explains sense of self and ultimately “lends coherence to identity” (p. 55).

While there have been recent advances, the mental health system must better incorporate, respect, or understand the
unique experiences of women and also the diverse “histories, traditions, beliefs, languages and value systems of culturally diverse groups” (Ida, 2007, p. 50). At the same time, understanding the diversity of experiences within groups can prevent overgeneralizations about individuals’ needs. Key cultural, structural, and individual elements can be considered using a life history perspective, which allows the ownership and reclamation of self and women’s experiences with mental illness (White, 2008). The enhanced awareness of the impact of daily issues in the lives of women of color with severe mental illness can facilitate “culturally competent recovery-oriented services” [emphasis added] (Ida, 2007, p. 50), addressing the recovery needs of African American women who might be doubly disadvantaged because of their mental illness and the cultural stigma surrounding their illness.

Our conceptualization of life history is distinctively feminist, joining with marginalized women to contribute to a body of knowledge centered on their interpretations of their lives. The method explicitly acknowledges that the women in the LML Project are the true experts on their life experiences and express authentic subjectivity and agency (Roets & Goedgeluck, 1999). This methodology is grounded in a Black feminist epistemology, which recognizes the reality of women’s lives as informed by their socio-cultural histories and personal experiences related to unique intersections of race, gender, social class, and mental health status (Collins, 2000). The women in the LML Project—Black women, often poor, and with severe mental illness—have a “perspective advantage” (Ladson-Billings, 2000) because their reality is informed concomitantly by that of the dominant culture, Black culture, experiences of women, and experiences of those with severe mental illness. This multiple and layered consciousness results in a more accurate interpretation of their world and the world around them (Collins, 2000). Knowledge and knowledge production are situated within social relationships across groups and the collective histories and contemporary experiences of the multiple social groups within which one belongs (Collins, 2000; Harding, 1993). As such, Black women have a unique perspective, or standpoint, as a result of their multiple struggles in relation to gender, race, social class, and—
in this study—mental illness. Those who do not share these characteristics, histories, and experiences may not fully understand these realities (Collins, 2000). Without this insight, those who study their lives do so from the outside; as a result, interpretations are limited in depth and validity, more likely to be based on a pathology model (Krumer-Nevo, 2005).

Method: Combining Life History Techniques with Feminist Narrative Analysis

Life story techniques introduce the opportunity to collect rich data textured by the respondents' own interpretations of their experiences and the social circumstances in which their story has unfolded, and the ways in which they continue to be active agents (Atkinson, 1998; Gluck & Patai, 1991; Roets & Goedgeluck, 1999). Feminist life history methods serve a political purpose, to "... negotiate openness, expose hegemonic power arrangements and inherent silences, highlight secrets of oppression and resistance, and revalue knowledge that risks being disqualified in current social sciences" (Roets & Goedgeluck, 1999, p. 85). When combining methods, the techniques must be appropriate to the questions asked and transparent enough for others to interpret and evaluate them (Sosulski & Lawrence, 2008; Tierney, 1999). An important feature of combining life history techniques with feminist narrative analysis is that it provides a vehicle to reflect the women's standpoints, but it does not lead to particular findings or predetermine outcomes based on the researchers' frames of reference. This study privileges the narrators' (i.e., study participants) interpretations by examining their actual language and symbolic meaning, and presents an overview of the connections the narrators make as they weave their stories into the whole narrative construction. The following overview of the techniques demonstrates these aims.

Research question. In the present study, our research questions centered on women's self-representation, documenting noteworthy events identified by the women and contextualized within their whole life experiences. The primary research questions in the LML Project ask: (1) "How do Black women diagnosed with severe, chronic mental illness
conceptualize their life experiences and mental health challenges?” and (2) “What experiences stand out in the lives of Black women living with severe mental illness?” The question, “what stands out for you in your experiences?” is posed to the women, expressing the idea of prominence and framing the question in terms of events that first come to mind when they think about their lives. These events may or may not be directly related to experiences with mental illness.

Data and sampling. Case studies provide information about individuals in greater depth than other methodologies. Life narratives improve on this method by providing women’s analysis of their own situation rather than a chronology of events to be interpreted by others. Many cases may be included and aggregate coded data employed to determine trends and understand variation across and within cases, but a single case may provide abundant examples and fertile interpretive ground (Atkinson, 1998). The choice depends on the project goals, the nature of the sample, and—in the most pragmatic sense—the available data.

Nearly all of the women in the LML Project were referred to the project through mental health agencies and are either in active treatment or counseling programs or have access to such support, as a condition of participation in the study. The women self-report their diagnoses because the study focuses on the women’s descriptions of the long-term conditions of their illnesses rather than details of their clinical diagnoses or records. The center point of the study is the women’s interpretation of their experiences with mental illness, rather than professional perspectives on them. For the LML Project, data collection and analysis are part of an iterative process where data from new and continuing cases inform continually evolving conclusions; recruitment is ongoing. The women’s experiences are unique and dynamic, and there is no theoretical “saturation point.” However, available resources for recruitment and interviewing affect the rate of data collection.

Procedures and data gathering. Data collection is multi-method, and may include first-person narrative interviews, observations, writing and informal contacts with respondents, and ethnographic research (Roets & Goedgeluck, 1999; Tierney, 1999). The primary concern is that information contributes to
the overall picture or frame for the life history and provides insights into the individual’s standpoint. As data are introduced through new cases, follow-up interviews, or new data types, the methods of investigation and analysis may be altered to satisfy the research questions (Sosulski & Lawrence, 2008).

Full, informed consent to participate in the interviews and be audiotaped is essential. In the LML Project, consent includes a study overview, an explanation of benefits and compensation ($10 per hour of interview), an explanation that risks are minimal, and an explanation of how the data will be used. One half-hour screening meeting, one face-to-face interview, and one follow-up interview are the minimum standard for participation. The first interview usually lasts two to eight hours; the follow-up interview is usually one to four hours. Other forms of data include summaries of the narratives, timelines, and original creative works produced by respondents, such as stories, poems, or songs if participants offer them to more fully communicate personal stories.

**Interview techniques.** Questions in life history interviews can range from an initial, broadly posed request for respondents to describe their lives to specific follow-up questions or probes that structure the histories (Atkinson, 1998; Morse, 1998). In the LML Project, interviews are taped, transcribed, and analyzed as texts; field notes are summarized when recording is not feasible. Following the explanation of life history method and the purpose of the project, the women tell their “life stories” in whatever way they like and describe notable events that they believe define their experiences (Todres, 1998)—in this case, as Black women with mental illness. Probe questions inquire about the timing of specific events or asking them to speak to thematic categories that are significant in the extant literature, such as relationships with people or institutions. Timelines may be constructed to account for events in the women’s lives.

**Feminist narrative analysis.** Our method presents the respondents’ own perspectives, assuming that they are the authority on what has happened in their lives, what they need, and what solutions might assist them. We use a dialogic strategy from the data collection stage on, first through conversation with participants during the interviews and in later conversations with them if they choose. The analysis is also a dialogue
among the research team members, who discuss the texts on three levels: (1) the literal meaning of the women's speech as they describe events; (2) the symbolic meaning or why they believe certain events occurred or why they are particularly significant; and (3) the researchers' understanding of the socio-cultural environment that connects themes across interviews or in the literature. Data and themes are compared across cases or aggregated to demonstrate trends and variation; the data also provide examples of respondents' standpoints and political dimensions of their life stories (Collins, 2000; Krumer-Nevo, 2005). Finally, respondents may comment on the researchers' interpretations of their individual interviews, aggregated findings, and overall trends.

The LML Project research team conducts thematic analysis of the interview texts as a group. The current team includes two Black women and one White woman, all of whom identify as middle-class. One researcher is a clinical psychologist; another is a certified rehabilitation counselor and professional counselor; and two researchers are licensed social workers. As a group, the researchers have first- or second-hand experience with many of the prevalent themes in the interviews, such as growing up in a working-class family, experiencing discrimination, witnessing the effects of mental illness, and/or interfamilial abuse. The narrative analysis centers on the study participants' analysis of their personal, community, and institutional relationships as well as their suggestions for local and societal change. The participants indicate how their racialized and gendered experiences differ from conventional depictions of people living with mental illness (Gluck & Patai, 1991). The researchers understand that their own perspectives are marginal, but carefully reflect on how their interpretations are likely influenced by disciplinary training and personal standpoints. The research team has no expectations about what kinds of stories might emerge from the interviews (e.g., some women may talk about childhood trauma, but we do not assume that all of them will). Yet we draw on disciplinary theory to explain structural influences (e.g., services the women receive and interactions with institutions like welfare and schools) and psychological phenomena that may be related, and to highlight areas of divergence.
from the literature. Because one of the team members' training is in social policy research and the other two are skilled in individual counseling methods and interpretations, disagreements about the women's literal language and interpretations of their stories can be controversial. The team reasons through the points of disagreement toward explanations that contribute to a comprehensive final disposition. The results are related to respondents, who further add to the exposition. The circular, iterative process allows for working with the data several times and interrogating various potential interpretations, "... asking questions of it, proposing ideas about its meaning, considering what really stands out from the descriptions and pondering on what might be absent" (Mackey, 2004, p. 183).

Maria: Living Beyond Barriers

Overview of Maria's Story, in Her Words: An Example of Feminist Life History Methods

Maria is a 36-year-old African American woman living in a small Midwestern city. She is married, with four children and a steady, part-time job. Since childhood she has been "seeing visions" and hallucinating (which she describes as two distinct types of episodes). Maria said that events or others' actions could "trigger" her to be extremely sexually active or "fight people"; as a teenager she attempted suicide following a sexual assault. Despite these challenges, Maria earned a high school diploma, has taken some adult education courses, and hopes to attend college. Her early childhood before her diagnosis, her teenage years and early adulthood are marked by incidents of abuse, misunderstanding, and some self-destructive behavior. In her early twenties she was diagnosed variously with bipolar affective disorder, major depression, and multiple personality disorder. Of Maria's four children, three have been diagnosed with serious emotional disturbances. Because of her illness, Maria is sometimes unable to work and it takes all of her energy to stay as healthy as she can and patch together resources from social services programs (e.g., Food Stamps and welfare) to care for her family. As a result of finally understanding that she had actual clinical mental health issues, her
personal and socio-political awareness grew significantly; but her life has not improved materially.

Maria's life history narrative shows that despite her desire to fully participate in society, her disabilities disproportionately affect her ability to work and participate in other aspects of social life because social structures are not set up to accommodate her disability or support her attempts at recovery. Though she sees her mental illness as only one piece of her life, it seems to dominate others' perceptions of her, defining who she is to those around her. In addition, she continues to struggle with many of the same everyday issues that many African-American women without mental illness face—marriage, parenting, work, community and church relationships, and gender and racial discrimination. She says that she tries to be proactive, looking for information about her illness and ways other women have struggled and survived.

For Maria, one of the most frustrating aspects of recovery is the lack of accurate representations of Black women who are in her situation. Both academic and popular representations of “women like her” (Maria's words) lack a sense of women's whole lives and everyday experiences with their illnesses, families, communities, histories, and recoveries. She has unsuccessfully searched for answers about her illness that are specific to Black women; she has found little evidence of “women who look like her” living whole lives, coping with the challenges and benefits of living in her community—work, school, church, and her own family—in healthy ways. To her, participating in the LML Project is an attempt to help fill gaps in knowledge about the real experiences of Black women with potentially debilitating mental health diagnoses.

Maria was the first respondent to complete interviews in the study, and hers is by far the longest interview, with over 23 hours of dialogue. Her relationship to the project reaches back to 2001, through her participation in a study of poor women pursuing higher education. During the prior study, it became apparent that Maria's experiences with severe mental illness were primary, but among many facets of her history that intersected. She was disturbed that her diagnosis could determine her opportunities. From her standpoint, struggles with mental illness and recovery do not define her as a worker or parent;
yet they were integral to who she is. In fact, they provided her with insights and could help her uniquely contribute to the community and society.

Maria's interviews. Maria's life history was collected through confidential in-depth, face-to-face interviews at four time points, between 2001 and 2007. The interviews were conducted with the principal investigator, who is a married, childless, middle-class, White woman with a doctoral degree who is close in age to Maria. Preliminary consent for Maria's participation was based on the agreement that only the primary researcher would conduct the interviews: Maria noted that this preference resulted from the already-established relationship, rapport, and trust between her and the researcher during her participation in a previous study and her desire to contribute to understanding how racial identity and mental illness intersect. She completed all of the confidentiality and informed consent procedures. Maria also provided stories and poems that she wrote to describe her situation, with the hope that they would help the research team understand her narrative and someday other parents could see them and better understand the experiences of children with emotional disturbances. The following examples are excerpts from two days of interviews.

Maria began her narrative spontaneously after the interviewer explained that the results of the project could be written into journal articles or possibly a book:

I wish I could have got into that. Nobody ever told me that I could do certain things. So, I'm 34 years old, and I wish I could go back, knowing now what I know because I would've been successful. Especially like that ... books and stuff because my life is just too complicated. People don't believe that. But I have the proof (she laughs) ... in the medical records....

Maria went on to talk about why she wanted to participate in the LML Project:

I need relief. Believe it or not, from the family that I come from, this [mental illness] was not supposed to ever happen. And it's still not acknowledged. ... I did a lot of sinful things, which went unexplained;
so ... this is to be a testimony and help me get over some of the things that I've done ... now knowing and understanding why I've done it. 'Cause people and all the doctors, they look at me and they ask me for my history. And then when they find out ... they cannot believe the diagnosis. ... and it hurts my feelings a little bit. ... they mean it as a compliment, but I don't take it that way. ... In public, as long as I'm calm and no one sets me off, I'm typical. But (she laughs) ... people are harsh and they are unforgiving, too.

In this first set of interviews with Maria, an exemplary major theme directly related to the overarching research questions emerged: how she perceived the "origins of her mental illness" as they are situated within the context of the rest of her life experiences, from her standpoint. This theme helps tease apart the potential effects of intersections of gender, race, and mental illness on her well being. It provides clues to the roles that personal barriers, systems, and structural inequality play. Exploration of how Maria constructed the narrative provides insights into how she thinks about and represents her experiences.

Origins of mental illness. Throughout all of her interviews, Maria talked about her beliefs regarding the origins of her mental illness. She presents her mental illness as an inherent trait, with genetic explanations. Separately, she describes a "gift" that she believes was divinely instilled in her, through which she can see and communicate with God and the devil. Although these "visions" may be hallucinations, she describes them as distinct from and more "real" than her psychotic hallucinations, which she recognizes as part of her illness. Though frightening for her, she also understands the visions as protective, and a way for her to connect to her church community. For example, Maria says that the visions are often premonitions, and other people have witnessed her predictions coming to fruition. Throughout her narrative, Maria carefully distinguishes between these genetic causes of her mental illness and her "gift." Tracing the different ways that Maria talks about the hallucinations, visions, and incidents of violence in her past provides an opportunity to understand her standpoint and current situation. From a practice perspective, there may be
several interventions that could be considered at times when Maria experiences a mental health crisis: For issues that Maria relates to as mental illness, medical or psychiatric counseling may work best for her. For issues related to visions or spirituality, interventions such as pastoral counseling (perhaps in connection with professional therapy) or work with church elders or members who understand and are conversant with mental health issues may be the best route in her recovery process. Intervention may include helping Maria individually with her symptoms, but also intervening in the community to promote acceptance, support, and integration. These findings further reinforce the potential of broader measures to inform and educate mental health professionals about the importance of spirituality and religion in clients' lives, and also to inform spiritual leaders of all faiths about mental health issues, to draw connections among these institutions.

Furthermore, in this narrative, it is essential to understand that Maria sees what appear from the outside to be hallucinations very differently, depending on the context (i.e., visions vs. mental illness). One important aspect of reconceptualizing mental health and mental illness is that they are multi-faceted, from the standpoint of clients. While the client's experiences are often seated in culture and group affiliation (e.g., religion, race, gender, or class), Maria's interpretation of them is individual and unique. Thus, a method such as case narrative is necessary to understand what her interpretation is, and life history promotes further understanding of references and connections she makes, both factually and their relative importance to other events.

*Genetic causes.* Maria has thought a great deal about why she has mental illness and behaves the way she sometimes does. She is convinced that her illness is inborn. At the outset, she says:

> I'll take you through the beginning, 'cause maybe you'll understand. ... In my heart I believe I was born with this disorder, and I knew that there was something wrong with me, even as a child. ... as time went on, I was able to understand different things and see the differences within myself versus the other children.
The second day Maria talked more about this: "... [mental illness] had to get there some kind of way. I don't honestly believe that a person can just wake up one day and say something is wrong ... I just don't believe it is something you're not born with or there's not a genetic link." Maria believes that many other family members also lived with mental illness, in particular her grandmother, with whom she was very close: "There were a lot of conversations and actual events that would lead me to believe that my grandmother, and I loved her so dearly, had this disorder." At an earlier point, Maria described her grandmother as "... a strong Black woman, for real! You didn’t mess with her (she laughs). She did some things! I think that’s probably where I get some of ... that temperamental stuff from, because she ... (laughs again). God bless her, ... she was a good woman."

Maria demonstrates the closeness she feels, as she describes her grandmother’s behavior in similar terms as her own, including "wild," risky behaviors and sudden, violent outbursts:

[S]he did some wild things that I wasn’t even aware of until I became an adult. What I meant by wild is, ... she was very outspoken. She said it the way it was and if you made her angry or not, she’d actually do things physically to show you that she was going to be in charge. I mean, it’s not normal little stuff, you know.

Here, Maria refers to the idea that other people or events can serve as triggers for violent behavior. Maria said that in an angry outburst when she thought her own husband was cheating on her, she cut up his clothes and set them on fire. They also fought physically. Maria learned later that her grandmother had done similar things:

I remember hearing a story about her cutting up my grandfather’s clothes and he’s the pastor of a church. I heard about the angry episodes and the fights. And how she was very—she would be so sweet and calm and loving, ... But in a matter of seconds, change into something totally different. ... But, then it’s just like we knew that there were some things you just don’t talk about.
Maria was always calm, considerate, and engaging (i.e., "sweet") during the interviews, making the parallel to her grandmother’s behavior striking. She says she suspects that other family members also live with severe mental illness, including her father and second cousin:

I do believe that there is a genetic link, I really do. Because if I look at my grandmother and then I look at my father .... Now that I understand what is wrong with me for real. I know he had that. ... because my dad is crazy, ... so messed up. He’s so cruel, it’s just like he has no conscience of what he does.

She also says,

[I]t’s a coincidence how [her grandmother’s] sister’s daughter had some of the same genetic stuff [behaviors, now attributed to genetics] that I have. And then there were a couple of other [relatives] that ... should have probably been diagnosed with something too, because they had been hospitalized. As a child, you don’t know how to look for that. All I knew was something was wrong with how my brain worked.

Maria is convinced that she has passed on mental illness to three of her four children who have been diagnosed with learning disabilities and serious emotional disturbances (SED). She prays that her fourth child, a four-year-old girl, will not be diagnosed; she said that she does not see symptoms in her youngest daughter, so she is hopeful. However, her oldest daughter, at 13, has already experienced psychotic events, aggravated by stress. Maria attempts to help her cope: “And I tell my daughter, we’re just different, that’s all. ... And I talk to her on that. I tell her our brain just doesn’t work like other people’s, because that’s just the truth of it all.” To Maria, if her children cannot avoid symptoms, she wants to normalize their experiences by explaining that there is just something different—not wrong—about them.

The “gift.” There is a second way that Maria describes experiences that might appear to be symptoms of her mental illness. She said that according to people in the Pentecostal
church where she grew up and where her grandfather is the pastor and her father is a deacon, her visions are a special gift. From an early age, she said that she saw visions of angels and demons, and that some of the visions were premonitions: "I was what they were calling 'anointed.' Anointed means that you're kind of like ... you're special and when you speak and say things and do things ... it goes out and it really reaches somebody." Though the visions attracted attention, Maria says that she was mostly scared by them; she also believes that the visions could be triggered by outside stressors, but was not aware of how the stress affected her in childhood. An example of an early church experience illustrates:

My cousin did something that set me off. ... And I told her there was a black spirit standing right in the door. ... I saw it. I told her, you may not want to take your ass out there, I went off. ... Even the church women freaked. I freaked out so hard. And I was crying and jumping up and down because I told her you go out there and you, you goin' die, you goin' die. Because I saw it there. We ... okay, everything calmed down. Everything relaxed within myself. We go to the damn door and ..., lo and behold, this same black spirit that I had saw [was there] and I was screaming at the top of my lungs so everybody ... knew that I had saw something. That same spirit that I saw went to Mother Chapman [a pseudonym] ... and laid on top of her. I was standing and screaming and do you know, she collapsed? She collapsed, that's on record, you can verify that story. That woman had to leave on a stretcher, they had to call the paramedics, they revived her in that auditorium. And I'm watching the black thing lay on top of her...

Maria asserts that the congregation believed that she had seen the devil,

And from then on, it's just like, if I said anything or saw anything and said anything about it, nine times out of 10 people would somehow have a guard up 'cause that was not the only time I had said something and something had responded out of that ... so everybody kind of thought it was a religious thing with me, you know. God gives gifts to certain individuals.
Maria went on to explain that while she was not always sure that it was a “gift from God,” she is never quite sure how to feel about her “visions,” because “it kinda felt like it all tied into that religion part.”

The utility of the life history method is evident in this theme, because had the research question been focused solely on experiences of mental illness, Maria might not have discussed her visions, because she tends to think of them as separate, not part of the psychotic disorder. Maria may have also opted to maintain this separateness because of contradictory views of the Black church about mental illness. There exists a natural incongruence with “the church’s” view on mental illness, and mental health services’ conceptualization of the nature, course and treatment of psychiatric disorders (Blank, Mahmood, Fox, & Guterbock, 2002). This incongruence can often lead to conflicts between the values of the church and the person seeking treatment for mental illness, or may even pre-empt a church member from seeking treatment for mental illness. Given this divergence, the research team concluded that it is possible Maria has couched her visions as a separate, spiritual concept because that is a more acceptable reality for a member of the church body. This is reasonable, given Maria’s desire to return to her church someday.

Deconstructing the interview. The quotes presented here are examples of the literal language and symbolic meaning that Maria used to tell her story. She also constructed her story consciously to represent the meaning and the role that mental illness plays in her life. Through the analysis of her transcripts, it appears that her stories follow an intriguing pattern with respect to time. She began with her perspective on why she is participating in the LML Project. Then, she told a story from her early childhood. A story from her early adulthood followed, and another from her early childhood, followed by one from the present, and finally returning to early childhood. She ended the first day of the interview with a present-time story. Most stories centered on childhood, either her own or that of her children. It seems that she is conscious of both of these trends on some level, as she talked around the issue of whether she would have children if she had known that mental illness has a genetic component:
I: When we talked before ... you told me that you wouldn’t have had the kids ... at all?
Maria: I don’t think I would have. It’s just ... let me explain it. I am scared to cross that bridge, so I will weave around it a little bit.
I: Sure. We’ll come back to it.

She deferred, but then answered the question with a story of her own childhood experiences. She did weave her stories, consistently returning to stories of childhood every other story. In this case, she moved from a story about the present to one about her late childhood/early adolescence, when she was raped by an acquaintance and became pregnant. She never disclosed what happened to that pregnancy, because it was too painful, she said. The story of that pregnancy was the only story that she explicitly declined to tell, and apparently it is the only year of her life that is missing from her narrative.

It is unlikely that Maria structured her story in response to the interviewer’s questions, which throughout the interview were for clarification, such as “Can you tell me more about that?” or “Can you explain what you mean?” rather than leading to specific times in respondents’ history. Life history framework allows respondents to relate the stories in their own particular order. Thus, strategies for the narrative or unintentional patterns emerge. When strategies or patterns are noticed, they may be included in the analysis and/or discussed in follow-up interviews for further interpretation. There are several emerging patterns in the LML interviews, such as the roles of risks, protective factors, and access to opportunities (e.g., work and higher education) that warrant further investigation.

Discussion

Life history method assisted Maria in constructing her own narrative. She focused primarily on her childhood, including painful and joyous memories, developing consciousness about her mental illness through her stories about children and childhood. She related lessons she has learned about herself, her family, her community, and institutions that she relies on for
help and sustenance. She believes that mental illness is a part of "the way she is," and that there are many other people who were born like her. Her behavior is mediated both by her reactions to memories of stressful and traumatic events and by the importance she places on being calm and present for her children. Yet she also recognizes the responsibility of her family, community, and professionals as entities that should have seen her mental illness and helped her get treatment; should have told her that mental illness is genetic, so she could make an informed choice about whether to have children; and should have stopped her violent outbursts and protected her from the violence that was perpetrated against her. Yet at other times in her narrative, her family helped her find treatment, information, and even presented her with a potentially protective perception that some of her "visions" are a gift that she can appreciate and perhaps provide her with power and status within her church community. Most of all, the collection of stories and the way in which they are told help us formulate insights into Maria's standpoint and how mental illness fits into the complex chronicle of events in her life.

**Practice Implications.** There are significant practical benefits of using life history methods combined with feminist narrative analysis to uncover effective practice modalities. These methods highlight the women as subjects in their narratives. They are reflective in representing and interpreting stories, which account for whole-life, everyday experiences and paths of—rather than to—"recovery." When treatment is necessary, the women must be involved to the greatest extent possible. In some cases, traditional forms of mental health treatment may be altogether inappropriate, or may need to be modified according to the women's experiences and expectations. At other times, working with families, communities, and institutions to help include people living with mental illness and acceptance of their standpoints is the primary goal.

In Maria's case, the hallucinations belong to her mental illness and are symptoms from which she would like relief; on the other hand, her 'visions' provide a special place for her in her church, which she may not want to give up. Multiple solutions could include helping her find another way to contribute to her spiritual community that is valued, if the visions
somehow ceased. Alternatively, helping her and her community come to terms with all of her hallucinations may be another way for both Maria and her community to change and become more tolerant and inclusive. Furthermore, while the mental illness is an aspect of her life that can be troubling and has triggered behaviors that she has recently been able stop with treatment (e.g., occasional violence and sexually risky behaviors), the "genetic link" is also a way that she relates to her family members. Her relationship with her father is still problematic, as he continues to be violent and has excluded her from the family; however, Maria cherishes some memories of her grandmother and needs ways to connect to the positive aspects of their relationship and her childhood. To the extent that her visions and hallucinations do not trigger outbursts and that she feels as though she can work and parent effectively, individual intervention may be limited to maintaining her own functioning and community intervention expanded to working with her church community and family to maximize positive interactions. Finally, while Maria is afraid that her children's diagnoses with SED and expresses remorse for possibly passing mental illness on to them, she also recognizes that she will be able to help them cope with it, given her understanding and reflections on her own experiences. She counts this as a strength.

Policy Implications. The gaps in the literature regarding race, gender, and mental illness bear out Maria's observation that there is a dearth of information about what living with severe mental illness is like for Black women in America. The power of life history methods and feminist analysis is of the power that circulates in society, from Maria's and the other women's standpoints. Maria's narrative reaches beyond issues of "access to treatment" and medical models of mental illness that tend to consider women while they are in crisis. More recognition must be given to the ways in which women of color routinely juggle many roles and must assume multiple responsibilities, including work, family, and community involvement. Living with severe and persistent mental illness complicates these efforts; if not addressed quickly and competently, difficulties managing episodes of poor mental health can put women and their families at increased risk, especially when gaining access
Life History and Narrative Analysis

to essential services is delayed (Takeuchi & Kim, 2000; Wilson, 2001). These are crucial issues to address, but these questions may only speak to a small piece of the story of these women’s whole lives.

Applying Deegan’s concept of recovery as an “existential phenomenon” (Jacobson, 2004), Maria’s concept of ideal recovery does not embody a return to normalcy according to medical or social standards, but a kind of being in the world where she defines her own priorities in terms of her health and caring for her family. Her recovery involves working toward her own goals, maintaining employment and being a strong model for her children, even though she struggles economically as a result. Her ongoing participation in social programs (e.g. welfare) shows that she can navigate systems and institutions, but these programs are not user-friendly for people with mental illness. Throughout the life histories in this project, Maria and others resist conformity to social norms of mental health, and the idea that their priorities should be set by others, particularly authority figures within institutions such as churches and mental health systems.

Research Implications. For this study, the feminist life history methods fulfilled our expectations, and helped accomplish the goals of presenting Black women’s experiences with mental illness as a part of their whole lives. It is not a goal of the project to conclude whether Maria or the other women in the LML Project have succeeded or failed in their attempts at recovery. Instead, Maria’s multidimensional interpretation of her own stories facilitates understanding of how the events touched her personally and how they both affected and were influenced by her family and community, as well as ways that social norms frame the etiology of mental illness and shaped her experiences.

Feminist life history methods exemplify increasing trends toward collaborating with participants to amplify their subjectivity and agency (Sosulski, 2009). This method stands beside other multidimensional approaches in presenting holistic views of experiences, rather than small slices of decontextualized data; but it additionally integrates the women’s standpoints in the process. Using life history methods combined with feminist narrative analysis treats the texts of both
the women's narratives and the extant literature differently, in that it takes into account the history and social context of not only these individual women's lives, but also their group affiliations, communities, and social location. Thus, three central goals of the project are met: first, to represent the lives of Black women with mental illness holistically, capturing the nature and impact of the illnesses within the scope of their whole lives; second, to represent the women as people, rather than as problems to be solved; and third, to identify the illnesses and experiences as part of the women's stories, rather than as anomalous to their lives or as barriers that can be removed so they can "recover" and be "normal."

To improve service delivery and inform policy, more accounts of Black women's experiences with mental illness must be gathered to represent the complexity and richness of the women's lives. It is equally important to provide models for Black women that reflect ways in which they successfully navigate programs, services, and daily concerns along with difficulties they encounter living with serious illness and the risk of negative social and economic consequences. Future research must continue to answer basic questions regarding how Black women living with severe, chronic mental illness frame their experiences within the context of their whole lives. Of particular interest are the myriad influences on women's lives and well-being (e.g., family, community, education/work, trauma, recovery, spirituality), including institutional responses to individual strategies they use to maximize their life chances and power of social and political communities they form with the potential for changing how mental illness and recovery are conceived.

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References


Work Characteristics and Family Routines 
in Low-Wage Families

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The maintenance of routines is linked to positive outcomes in children and families. Role theory asserts that resources and constraints found in family and work environments will shape a parent's ability to successfully fulfill both roles. To date, there is scant research examining the maintenance of routines in low-income families whose work environments are often characterized by temporary work, non-traditional shifts, and irregular hours. This study seeks to understand the relationship between employment characteristics on the maintenance of family routines in a sample of low-wage families. The results of this study support the findings of other researchers that low-wage families face considerable work-family strain due to their jobs, but they succeed in maintaining routines despite adverse working conditions.

Key words: work, family routine, low-wage families, role strain

Routines are regularly performed activities that comprise the “familiar chains of events that make up people’s days and weeks” (Lowe, Weisner, & Huston, 2005). For families, these routines include eating meals together, watching TV, doing homework, completing household tasks and chores, going to church, and going to sleep (Huston, 2002; Johnson & Gais, 2001). Maintaining consistent routines in families is associated with positive family outcomes, including increased feelings of parental competence and parent-child harmony (Brody & Flor, 1997). Children in families that have regular routines have been found to have better physical health (Fiese et al., Journal of Sociology & Social Welfare, September 2010, Volume XXXVII, Number 3
higher social competence (Keltner, 1990), a lower likelihood of using illegal drugs (National Center on Addiction and Substance Abuse, 2007), and better overall well-being (Chase-Lansdale & Pittman, 2002). When former President Bill Clinton signed the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 into law, he stated that one way that working would benefit the families of welfare recipients is by encouraging them to establish and maintain family routines. In his words, “Work organizes life. It gives meaning and self-esteem to people who are parents. It gives a role model to children” (DeParle, 2005, p. 265).

Despite the importance of the maintenance of routines on children in families, there is little research examining the ways in which employment affects the ability of families to maintain routines, especially the low-income families targeted by welfare reform (Chase-Lansdale & Pittman, 2002; Crouter & McHale, 2003). This dearth of research is surprising given the fact that many aspects of the low-wage labor market may make it harder to maintain routines, including the prevalence of nontraditional work hours and job instability (Handler & Hasenfeld, 2007). In this paper, I seek to address this gap by examining the relationship between employment characteristics and the maintenance of routines in a sample of low-income working families.

Background

Role Theory

When parents work, they occupy multiple roles, including those of parent, employee, and spouse. Researchers studying the association between work and family seek to understand how these multiple roles affect both parent well-being and the quality of their family relationships (Perry-Jenkins, Repetti, & Crouter, 2000). This literature has yielded two different perspectives: role enhancement and role strain.

Advocates of the role enhancement perspective suggest that individuals participating in multiple roles have greater access to resources and opportunities, which they can use to promote growth and better functioning across all roles (Barnett, 1998; Grzywacz & Marks, 2000; Voydanoff, 2002). These resources and opportunities include “monetary income,
heightened self esteem, the power to delegate onerous role obligations, opportunities for social relationships, and challenge” (Barnett, 1999, p. 152). By contrast, adherents to the theory of role strain observe that each role that a person occupies comes with its own obligations and demands. These demands, and the actions that workers take to fulfill them, may not be harmonious. Workers may fail to meet their competing demands because they have limited time, energy and resources. This struggle creates a feeling of role strain (Grzywacz & Marks, 2000). Role strain may be exacerbated when the constraints imposed by adopting an additional role outweigh the benefits that it provides and when the parent feels “locked in” to a role that produces conflict (Barnett, 1998). Role strain may especially be a problem for low-wage workers who face an occupational environment that may yield fewer benefits and more constraints than that of higher income families. For example, low-wage occupations are associated with either longer work hours (Dunifon, Kalil, & Bajracharya, 2005) or too few work hours (Barnett, 1998) and higher job instability than higher wage occupations (Dodson & Bravo, 2005; Kaye & Nightingale, 2000). Furthermore, low-wage mothers are more likely than higher-wage mothers to work nonstandard shifts, including evening, night, and weekend hours. This makes the coordination of childcare and other activities more difficult (Presser & Cox, 1997). Overall, low-wage workers’ occupational environment may leave their families less able to maintain routines compared with higher income families (Brody & Flor, 1997; Chase-Lansdale & Pittman, 2002; Huston, 2002). While most research focuses on the impact of role strain on family life, the theory itself also asserts that strain may negatively impact parents’ employment.

Work Characteristics

Researchers have measured how workers’ ability to maintain family routines is affected by four kinds of work characteristics: wages; the number of work hours; the timing of work hours; and job stability. According to role enhancement theory, wages should be positively related to the maintenance of routines in families since caregivers can use additional income to purchase goods and services that will help them maintain
routines. Brody and Flor (1997) assess the relationship between wages and routines in a sample of rural, single-parent, African American families. To measure routines, they compile a 14-point scale based on the frequency with which caregivers perform various activities with their children, including doing homework, playing, and eating. The authors determine that increased wages stimulate an increase in maternal self-esteem, which is positively related to the maintenance of family routines.

The number of work hours may also be an important determinant of routines in low-wage families (Phillips, 2002; Presser & Cox, 1997). More work hours can be a resource for caregivers, since they lead to higher income, which is positively associated with consistent routines. However, working either too few or too many hours may hinder a working parent’s ability to carry out routines (Crouter & McHale, 2003). A longitudinal study of low-wage workers in the late 1990s found that most low-wage workers did not work full-time. About 66 percent of low-wage female workers in their sample had a full-time job, compared to 78 percent of all employed females (Schochet & Rangarajan, 2004). Part-time workers may have more time, but not enough financial resources to promote routines in their families. Alternately, parents may have to take up multiple part-time jobs in order to meet their families’ financial needs, which would make them less available to sustain family routines (Barnett, 1998).

Working long hours may also lead to parents having less time to devote to their families. In London, Scott, Edin, & Hunter’s (2004) ethnography of former welfare recipients transitioning to work, participants state that they constantly struggle to fulfill their familial obligations while working. In another study, Phillips (2002) examines the association between parents’ level of work and the maintenance of a reading routine among a nationally representative sample of low-income families. For children under the age of six, she tests if parents’ level of work is related to reading to their child at least 6 days per week. Her results reveal that fully-employed (≥ 35 hours per week), low-income single parents are less likely to have a reading routine with their child under six years old than low-income single parents who work only part-time (≤ 34 hours per week) after
adjusting for a variety of work, caregiver, and child characteristics. However, work hours were not a significant determinant of a reading routine in low-income households with married parents. This study suggests that after adjusting for wages, single-mothers who work less are better able to sustain routines than single-mothers working full-time.

The timing of work hours may also help or hinder a working parent’s ability to sustain routines (Crouter & McHale, 2003). Employed mothers with limited education are more likely to work evenings, nights, and weekends. As compared with women with greater levels of education, they are also more likely to have nonfixed work schedules (Presser & Cox, 1997). Working parents may adjust to working nontraditional hours by relying on spouses or other kin to maintain routines or by adjusting their routines around their work schedule (Roy, Tubbs, & Burton, 2004).

Researchers believe that job stability may also affect family routines. In general, low-wage workers have shorter job tenure than higher-wage workers. In one study, about 35 percent of low-wage workers had started their jobs within the previous year, compared to 20 percent of all workers (Schochet & Rangarajan, 2004). In their study, Roy et al. (2004) observe that job instability is one reason that poor mothers struggle to sustain consistent family routines. These mothers state that they are often “the last hired, first fired” in their jobs (p. 173). The process of finding and adjusting to new jobs alters routines in these families.

The Importance of Sustaining Routines in Low-Income Families

The studies above reveal that the jobs obtained by low-wage parents pose many significant barriers to maintaining routines. However, there are also a handful of qualitative studies that follow low-wage parents over time in order to understand the ways in which they maintain balance between their work and family lives (London, et al., 2004; Roy et al., 2004; Seefeldt, 2008; Tubbs, Roy, & Burton, 2005). The mothers in these studies often state that it is hard for them to simultaneously be a good mother and work a full-time job.
Women transitioning from welfare to work in one study report that working has offered them many benefits, but they struggle to find the time and energy to be with their children (London et al., 2004). To decrease feelings of strain, several studies find that mothers do not change the time that they spend with their children. Instead, mothers forgo job advancement opportunities that may interfere with their family time even if taking the job would lead to higher wages (Seefeldt, 2008, p. 14). Other studies find that mothers adjust to nontraditional hours by setting a fixed routine for their families, while completing chores and other activities at night after children are asleep. This allows them to work and maintain routines, but also leads to their feeling overwhelmed and exhausted (Roy et al., 2004; Tubbs, Roy, & Burton, 2005). These qualitative studies suggest that adverse working conditions may have detrimental effects on low-income families, but that parents act to protect the time that they spend with their children.

Based on the literature review, work conditions can affect the way parents balance their work and family roles in different ways. Role strain theory leads to the expectation that families will have a harder time maintaining routines when faced with jobs characterized by low wages, long hours, non-traditional work hours, and instability. This may reduce their ability to maintain routines in their families. However, ethnographic research of low-wage families finds that these employment characteristics lead to feelings of role strain among working caregivers, but they sacrifice their personal health and time to ensure that they have sufficient time with their families.

While previous studies start to uncover the determinants of sustaining routines in low-wage families, they have several limitations. First, researchers operationalize the notion of maintained routines differently. For example, Brody and Flor (1997) construct a scale based on 14 activities, while Phillips (2002) counted reading as a routine if it occurred at least 6 days per week. Second, prior research has examined the relationship between work and family routines primarily using samples of current or former welfare recipients (e.g. London et al., 2004; Seefeldt, 2008). However, using prior welfare recipients as a sampling frame may yield inaccurate findings of low-wage workers in general. This may be especially true for growing
numbers of low-wage earning immigrants (Borjas, 2006), whose ability to access welfare was dramatically reduced with the passage of welfare reform in 1996 (Lofstrom & Bean, 2002). As the size of the welfare population decreases, “it becomes increasingly important to shift some of the research focus away from studies of welfare leavers and onto studies of the larger population of low-income families” (Phillips, 2002, p. 1). Third, the samples of previous studies are also limited by the fact that they are mostly composed of white or African American families (e.g. Brody & Flor, 1997; Roy et al., 2004; Tubbs et al., 2005). This may be problematic since researchers find that family characteristics, including race/ethnicity, are also important determinants of caregivers’ ability to maintain routines (Flores, Tomany-Korman, & Olson, 2005; Phillips, 2002; Weisner, Matheson, Coots, & Bernheimer, 2005).

Methods

Sampling Method

The present study seeks to address these limitations using data from the Los Angeles Family and Neighborhood Survey (L.A.FANS), which is funded by a grant R01 HD35944 from the National Institute of Child Health and Human Development to RAND in Santa Monica, California. L.A.FANS is a survey conducted in 2002 in order to assess the lives of families living in both high- and low-income neighborhoods in Los Angeles. L.A.FANS is the ideal data source for this study because it allows for the examination of low-income working families that have not been on welfare and of Latino families.

L.A.FANS employed a multistage sampling design in order to examine the effects of neighborhoods on families and children. In the first stage, census tracts were chosen in a stratified random sample based on the percent of the census tract living below the federal poverty line. A total of 65 census tracts were selected for the study, with an over-sample of poor neighborhoods. Second, researchers randomly selected households within each census tract, with an over-sample of households with children under 18 years old. An average of 41 households were selected and interviewed in each neighborhood in the first wave of data collection, which occurred from 2000 to 2001.
After collecting a complete list of all adults and children living in the household, researchers randomly selected an adult to interview. If there was a child under the age of 18 in the household, researchers also interviewed the primary caregiver of the child, a randomly selected child (if at least nine years old), and in some instances, the sibling of the randomly selected child. Further information on L.A.FANS can be found at: http://www.lasurvey.rand.org.

To ensure that I was analyzing the employment characteristics of the caregiver, not those of another adult living in the household, my study considers only households in which the randomly selected adult was also the primary caregiver. Among these respondents, 91 percent completed the primary caregiver and parent questionnaires and 89 percent completed the household questionnaire (Peterson et al., 2004).

The sample for the current study consists of 235 low-wage households with children under the age of 17 with complete data for variables used in the analysis. I define a low-wage worker using a living wage ordinance passed by Los Angeles County in 1999. This ordinance sets wage requirements for specified contractors, requiring that employees must earn at least $8.36 per hour with health benefits, or $9.46 per hour without health benefits. Respondents who earned less than these requirements are considered low-wage workers. I choose this measure of poverty because it adjusts for: (a) health care costs, which are a primary expense for families (Wertheimer, Long, & Jager, 2002); and (b) regional specific costs of living, such as housing and childcare (Lichter & Jayakody, 2002).

*Measures*

*Maintained routines.* A maintained family routine is defined as an activity done at the same time per day at least five times per week. I created 4 dichotomous variables based on the number of times a week the primary caregiver reports that the family: (1) ate breakfast; (2) completed chores; (3) ate dinner; and (4) went to bed at the same time of day. Research demonstrates that routines only have positive effects on children if they are performed in a consistent and predictable way (Weisner, 1998). Therefore, it is not the number of times per week a family does an activity together that yields positive effects, but that they
carry out this activity multiple times per week at the same time. For this reason, a dichotomous variable is better grounded in theory than a continuous variable. I choose the cutoff of at least five time per week based on the ethnography conducted by Roy et al. (2004) in which families' time was structured by the traditional 9-to-5 Monday through Friday work schedule, regardless of when they worked. I considered combining the four routines into one scale of the number of maintained routines. However, the routines are not highly correlated with one another (analysis available upon request).

Work characteristics. I include four work characteristics in my specification: wages, weekly hours worked, job stability, and working multiple jobs. First, I construct the wage variable in this analysis by combining responses from two items. In the survey, respondents are asked how much they earned at their last job. Respondents could give their hourly, daily, weekly, monthly, or annual wage. To calculate an hourly wage for respondents, data are first recoded into weekly wages: daily wages are multiplied by 5; monthly wages are divided by 4; and yearly wages are divided by 52. These calculations assume that respondents worked 52 weeks a year, five days a week, and 8 hours per day. To compute an hourly wage, weekly wages were divided by the average number of hours worked per week. The second work characteristic, hours worked per week, was reported by the primary caregiver in the survey. Job stability is operationalized as the number of days the caregiver worked at her current job. Caregivers in the study also reported the number of jobs they currently have. Since only 27.4% of caregivers have more than one current job, I dichotomize this variable such that the respondent either works one job or more than one job.

Control variables. I include two sets of control variables in the analysis: family characteristics and caregiver characteristics. The family control variables included in the analysis are: marital status, number of children in the household, and the race/ethnicity of the caregiver and family. Marital status is included as a control variable in the analysis, since research suggests that two adults in the household can make it easier to maintain routines (Weisner, 1998). I code marital status into two categories: married and single-parent
households (neither married nor living with partner). Cohabitating couples (38 cases) are excluded from the analysis, since there is not enough research showing how caregiving responsibilities would be shared in these households (Phillips, 2002). I use single-parent households as the reference group in this analysis. I also control for the number of children currently living in the household, because having more children in the household can increase the conflict around a routine, making it harder to maintain (Lowe et al., 2005). The primary caregiver in the survey reports the number of children in the household. The analysis also controls for family race/ethnicity since some research shows that African American and Latino families are less likely to maintain routines than white families (Flores et al., 2005; Phillips, 2002). Race/ethnicity is considered a family characteristic in this analysis, since caregiver and child race/ethnicity are highly correlated. Given the limited number of white (22 respondents), African American (23 respondents), Asian Pacific Islander (2 respondents), Native American (1 respondent) and multiethnic (4 respondents) respondents, I collapse race/ethnicity into two categories: Latino and non-Latino. Non-Latino caregivers are the reference group in the analysis.

Maternal age and maternal education are the caregiver control variables in this analysis. I use ‘maternal’ interchangeably with ‘caregiver’ throughout the rest of the paper since 99.2% of caregivers are women in this sample. Their relationship to the maintenance of family routines has not been examined, but research establishes them as predictors of parenting behavior generally (Chase-Lansdale & Pittman, 2002; Dunifon, Kalil, & Danziger, 2003; Jackson, Brooks-Gunn, Huang, & Glassman, 2000). Maternal age is the respondent’s age in years. Maternal education is measured as the highest year of school completed.

Findings

L.A.FANS developed case weights that are used in this analysis to correct for the multistage sampling design and for household non-response. The descriptive and multivariate analyses use these case weights to adjust for over-sampling by
strata, for the household selection probabilities by tract, for the tract-specific rates of over-sampling of households with children and for household non-response (Peterson et al., 2004).

Table 1. Descriptive data for routines, employment characteristics, family control variables, and maternal control variables (N=235)

<table>
<thead>
<tr>
<th>Dependent variables</th>
<th>Mean/Proportion</th>
<th>SD</th>
<th>Min.</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast routine</td>
<td>64.5%</td>
<td>.041</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Chore routine</td>
<td>62.5%</td>
<td>.042</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Dinner routine</td>
<td>69.0%</td>
<td>.039</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Bed routine</td>
<td>85.5%</td>
<td>.028</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment characteristics</th>
<th>Mean/Proportion</th>
<th>SD</th>
<th>Min.</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hourly wage</td>
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<td>.099</td>
<td>1.25</td>
<td>9.20</td>
</tr>
<tr>
<td>Weekly work hours</td>
<td>34.11</td>
<td>1.128</td>
<td>2</td>
<td>70</td>
</tr>
<tr>
<td>Days at current job</td>
<td>817.32</td>
<td>104.271</td>
<td>13</td>
<td>9,053</td>
</tr>
<tr>
<td>Works &gt;1 job</td>
<td>27.4%</td>
<td>.038</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family control variables</th>
<th>Mean/Proportion</th>
<th>SD</th>
<th>Min.</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household composition</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single-parent</td>
<td>46.4%</td>
<td>.043</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Married</td>
<td>53.5%</td>
<td>.043</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Number of children</td>
<td>2.48</td>
<td>.167</td>
<td>1</td>
<td>10</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/ethnicity</th>
<th>Mean/Proportion</th>
<th>SD</th>
<th>Min.</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latino</td>
<td>73.4%</td>
<td>.039</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>26.6%</td>
<td>.039</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Maternal control variables</th>
<th>Mean/Proportion</th>
<th>SD</th>
<th>Min.</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>34.35</td>
<td>.795</td>
<td>19</td>
<td>69</td>
</tr>
<tr>
<td>Education</td>
<td>10.58</td>
<td>.381</td>
<td>0</td>
<td>19</td>
</tr>
</tbody>
</table>

Note: Data are weighted to adjust for over-sampling by strata, for the household selection probabilities by tract, and for the tract-specific rates of over-sampling of households with children and of household non-response.

Descriptive Findings

Table 1 presents descriptive statistics on the final sample of 235 low-wage mothers. In the table, we see that most low-income caregivers in this sample maintain breakfast (64.5%),
chore (62.5%), dinner (69.0%), and bed (85.5%) routines in their families. Overall, this sample seems to have many of the employment characteristics of the low-wage labor market that should influence their ability to maintain routines, including low wages and less than full-time employment. Specifically, the hourly wage of mothers is quite low ($6.76/hour), compared to the average hourly wage in the United States, which was $15.80 in 2001 (United States Bureau of Labor Statistics, 2002). The state-mandated minimum wage in 2001 was $6.25 per hour. Mothers in the sample work around 34 hours per week, which is considered part-time by the United States Bureau of Labor Statistics. In 2000, the average workweek in the United States for non-agricultural workers is 38.1 hours per week (United States Bureau of Labor Statistics, 2002). However, caregivers in the sample have stable jobs, as the average length of time at their current job is 2.24 years. Additionally, few mothers (27.4%) work more than one job. In terms of family characteristics, a little over half of mothers in the sample are married (53.5%). The average number of children in the household is 2.48. As mentioned above, the sample for this study is predominantly Latino. Specifically, 73.4% of mothers in the sample reported being Latino. In terms of caregiver characteristics, the average age of mothers in the sample is around 34 years old and the mean level of education completed is less than high school (10.58 years).

Multivariate Models

To examine the association between the maintenance of routines and employment characteristics, I run four logistic regression models, which are presented in Table 2 below. In these models, I regress each family routine (breakfast, chore, dinner, and bed) on the same set of employment, family, and maternal control characteristics. In all of the models, I control for the effects of family and maternal characteristics.

The results in Table 2 show that, overall, employment characteristics are not strongly related to the maintenance of routines in low-income families. The first model in Table 2 assesses the relationship between having a consistent breakfast routine and wages, work hours, employment stability, and working more than one job. In this model, employment characteristics,
Table 2. Binary logistic regression results examining the relationship between employment and family characteristics and the maintenance of routines among working caregivers (N=235, robust standard errors in parentheses)

<table>
<thead>
<tr>
<th></th>
<th>Breakfast</th>
<th>Chores</th>
<th>Dinner</th>
<th>Bedtime</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employment characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wages</td>
<td>-.141</td>
<td>-.257*</td>
<td>-.323**</td>
<td>-.462**</td>
</tr>
<tr>
<td></td>
<td>(.131)</td>
<td>(.151)</td>
<td>(.137)</td>
<td>(.199)</td>
</tr>
<tr>
<td>Weekly hours worked</td>
<td>.013</td>
<td>.006</td>
<td>-.024*</td>
<td>-.044**</td>
</tr>
<tr>
<td></td>
<td>(.016)</td>
<td>(.016)</td>
<td>(.014)</td>
<td>(.020)</td>
</tr>
<tr>
<td>Days at current job</td>
<td>.0003</td>
<td>.0003*</td>
<td>.0003**</td>
<td>.0002</td>
</tr>
<tr>
<td></td>
<td>(.0002)</td>
<td>(.0002)</td>
<td>(.0002)</td>
<td>(.0002)</td>
</tr>
<tr>
<td>Works &gt;1 job</td>
<td>-.069</td>
<td>.136</td>
<td>.006</td>
<td>-.256</td>
</tr>
<tr>
<td></td>
<td>(.405)</td>
<td>(.403)</td>
<td>(.412)</td>
<td>(.529)</td>
</tr>
<tr>
<td><strong>Family controls</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>.179</td>
<td>.365</td>
<td>.140</td>
<td>.794</td>
</tr>
<tr>
<td></td>
<td>(.365)</td>
<td>(.382)</td>
<td>(.391)</td>
<td>(.484)</td>
</tr>
<tr>
<td>Number of children</td>
<td>-.241**</td>
<td>.011</td>
<td>.166</td>
<td>.306</td>
</tr>
<tr>
<td></td>
<td>(.120)</td>
<td>(.129)</td>
<td>(.134)</td>
<td>(.193)</td>
</tr>
<tr>
<td>Latino</td>
<td>-.773</td>
<td>-.261</td>
<td>-.893*</td>
<td>-.322</td>
</tr>
<tr>
<td></td>
<td>(.534)</td>
<td>(.554)</td>
<td>(.524)</td>
<td>(.618)</td>
</tr>
<tr>
<td><strong>Maternal controls</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>-.020</td>
<td>.009</td>
<td>-.026</td>
<td>.007</td>
</tr>
<tr>
<td></td>
<td>(.020)</td>
<td>(.022)</td>
<td>(.021)</td>
<td>(.023)</td>
</tr>
<tr>
<td>Education</td>
<td>.015</td>
<td>-.013</td>
<td>-.066</td>
<td>-.039</td>
</tr>
<tr>
<td></td>
<td>(.050)</td>
<td>(.061)</td>
<td>(.054)</td>
<td>(.058)</td>
</tr>
<tr>
<td>Constant</td>
<td>2.555*</td>
<td>1.576</td>
<td>5.363**</td>
<td>5.864**</td>
</tr>
<tr>
<td></td>
<td>(1.530)</td>
<td>(1.781)</td>
<td>(1.563)</td>
<td>(2.025)</td>
</tr>
<tr>
<td>Wald $\chi^2$</td>
<td>9.94</td>
<td>6.64</td>
<td>15.25</td>
<td>21.01</td>
</tr>
<tr>
<td>p-value</td>
<td>.355</td>
<td>.674</td>
<td>.084</td>
<td>.013</td>
</tr>
<tr>
<td>Pseudo R$^2$</td>
<td>.054</td>
<td>.040</td>
<td>.075</td>
<td>.132</td>
</tr>
</tbody>
</table>

Note: Data are weighted to adjust for over-sampling by strata, for the household selection probabilities by tract, and for the tract-specific rates of over-sampling of households with children and of household non-response.

* $p < .10$
** $p < .05$

along with the control variables, only explain about 5% of the variance in having a breakfast routine. The same variables account for 4% of the variance in maintaining a chore routine,
7.5% of the variance in having a consistent dinner routine, and 13.2% of the variance in bedtime routines. The employment, family, and maternal characteristic variables only explain a significant percentage of the variance in the bedtime routine model. This means that the specified models for breakfast, chore, and dinner routines did not explain the dependent variables better than models without any predictor variables would.

Although the models predicting breakfast, chore, and dinner routines were not significant, examining the effects of employment characteristics across the models yields some interesting findings. Having higher wages decreased the odds of maintaining routines across all of the models, while job stability consistently increased the odds of having consistent routines. As seen in the fourth model, every dollar increase in hourly pay is associated with a .462 reduction in the log odds of maintaining a bedtime routine, after controlling for other variables in the model. Working more hours was not significantly related to maintaining breakfast and chore routines, but negatively associated with the nighttime routines of dinner and bedtime routines. Model 4 shows the log odds of having a bedtime routine increases by .04 points for every additional hour that mothers work. Last, the analysis reveals that caregivers with more than one job were not more likely to maintain any of the routines than caregivers with only one job.

Discussion and Conclusion

In this study, I examine the association between work characteristics and the maintenance of routines in a sample of low-wage predominantly Latino mothers. One of the main findings of this study is that most low-wage caregivers in this study successfully maintain breakfast (64.5%), chore (62.5%), dinner (69.0%) and bedtime (85.5%) routines, regardless of work characteristics. Days at current job and working more than one job were not associated with any of the routines investigated. However, working more hours and hourly wages are negatively and significantly related to the maintenance of a bedtime routine. The finding that caregivers who work more hours are less able to maintain a bedtime routine for their family supports role strain theory. Additionally, mothers in prior
ethnographic studies state that they alter their families' sleep schedules in order to have family time together (Roy et al., 2004; Seefeldt, 2008; Tubbs et al., 2005). In her study of low-income families, Phillips (2002) also found that full-time workers were less able to maintain reading routines with their children than part-time workers.

The negative relationship between wages and the maintenance of routines is more surprising since the role enhancement perspective suggests that mothers with higher incomes are able to purchase goods and services that should help them keep consistent routines. One explanation for this finding may be that there are also other unmeasured work characteristics associated with higher wages that hinder routine maintenance. For example, nonstandard shifts are associated with higher wages (Kostiuk, 1990). Mothers working these shifts would earn more, but be less physically available to put their children to bed at the same time every night. This difference would not be reflected in other work characteristics included in the model, such as the number of hours worked. Additionally, jobs in which caregivers have more responsibilities may also pay more. These jobs would place more strain on caregivers seeking to balance work and family life. Indeed, many mothers in Kristin Seefeldt’s (2008) study state that they passed up on higher paying jobs because they did not want to sacrifice time with their children. Both the timing of shifts and the responsibilities associated with employment are important variables that future studies should consider.

There are a number of study limitations that warrant discussion. First, the variables included in the regression analyses did not explain a lot of the variation in maintaining family routines. The bedtime routine model, which has the highest $R^2$, only had a score of .132. This means that many more factors need to be included in order to adequately explain the reasons that some families maintain routines and others do not. However, the fact that the work, family, and maternal characteristics previously found to influence feelings of role strain and parenting do not influence families' abilities to maintain routines is an important finding. Future studies should include other work characteristics to increase the ability to explain families' abilities to establish consistent routines, including
non-traditional hours and occupational prestige. Second, the generalizability of study results may be limited, given the fact that the sample is predominantly Latino and drawn from one specific geographic area. Since there are few studies to date examining the determinants of maintaining routines among Latino families (Loukas & Prelow, 2004), the study still makes an important contribution to the literature. Last, the cross-sectional nature of the study means that one cannot establish a causal relationship between the variables, but only discuss the association between them. Following families over time to see how their schedules change based on work characteristics will be an important topic for future researchers to explore.

The study finding that work characteristics are not significant determinants of family routines in this analysis may be interpreted as meaning that policymakers do not have to worry about improving the low-wage labor market for families. However, this interpretation ignores previous research showing that adverse work conditions can spill over into family life by increasing parental depression and anxiety, fostering parent-child conflict, and reducing parent acceptance of the child (Mcloyd, Toyokawa, & Kaplan, 2008, p. 2). The results of this study instead confirm ethnographic studies of low-income families showing that, despite facing significant barriers, parents find ways to carve out time to spend with their children. When work-family conflict becomes too great, parents act by sacrificing career advancement opportunities (Seefeldt, 2008) or by “endangering their own health through inadequate diet, sleep deprivation, and elevated depression and anxiety” (Tubbs et al., 2005, p. 88) to fulfill both roles. Policies should be crafted to support the high value that low-wage parents place on spending time with their families and to decrease the negative employment and mental health consequences related to doing so.

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References


"Everything has Changed": Narratives of the Vietnamese American community in Post-Katrina Mississippi

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BAO CHAU VAN

Smith College
School for Social Work

In this qualitative study of the Vietnamese American community of Biloxi, Mississippi, conducted three years after Katrina, we attended not only to individual experiences but to the relationship of individuals to their collective and social worlds. The interlocked relationship of individual and collective loss and recovery are clearly demonstrated in respondents’ narratives. The neighborhood and community of Little Saigon was significant not only as a symbolic source of identity but as a protected and familiar space of residence, livelihood, and social connections. The post-Katrina changes in the neighborhood are, in multiple ways, changing participants’ experience of and relationship to their community.

Key words: Vietnamese Americans, community, collective loss and recovery, social ecology, phenomenology, resilience, psychosocial capacity building, place

Much has been written about the devastating impact of Hurricane Katrina, the 2005 storm and the repercussions that
affected as many as 10 million people, and resulted in approximately 1,200 fatalities (Kao, 2006). Media and scholarly attention have not, however, been applied evenly across the storm-affected areas (Li et al., 2008); the differential impact of the storm in the various micro-communities within cities and townships has not been sufficiently examined. One significant gap is the lack of attention to immigrant populations affected by the storm. In the popular media, there was a near “complete absence of coverage and discussion of Hispanic and Asian American residents of the area, who are also disproportionately poor and many of whom lacked English skills to navigate the little help available to residents” (Kao, 2006, p. 223). Even among the proliferation of post-Katrina scholarship focused on the issues of race, inequality, and minority populations (Bates & Swan, 2007; Elliott & Pais, 2006; Frymer, Strolfovitch, & Warren, 2005; Henkel, Dovidio, & Gaertner, 2006; Sommers, Apfelbaum, Dukes, Toosi, & Wang, 2006; The Brookings Institution Metropolitan Policy Program, 2005), scant attention has been paid to the numerically small but vital immigrant communities affected by the storm. In this paper, we focus on one such population: the Vietnamese American community of Biloxi, Mississippi, centered in the Little Saigon neighborhood of East Biloxi. To our best knowledge, this study represents the first scholarly effort focused on this community.

Katrina struck Mississippi on the morning of August 29, with devastating results (Sloan, 2008). One of the hardest hit areas was Little Saigon, located in “The Point” section of Biloxi, a peninsula adjacent to the ocean and the Back Bay, a salt water lagoon. The largely residential neighborhood supported many Vietnamese-owned or -operated restaurants, groceries, nail salons and other such small businesses which served Vietnamese Americans and others living in the greater Biloxi metropolitan area.

The 2000 Census tallied 1,717 Vietnamese Americans (892 foreign born) in the city of Biloxi, comprising 3 percent of the total population of 50,644 (U.S. Census Bureau, 2000). Prior to Katrina, Little Saigon was a small but vibrant ethnic enclave, begun by a handful of refugees recruited by local seafood processing plants (Arden, 1981), and built over more than three decades of slow accretion of people and resources. It was a
small, linguistically and culturally contained, and therefore necessarily close-knit, island of co-ethnics carved out in the midst of a sometimes hostile environment (Arden, 1981). The community was comprised in large part of "boat people," whose flight from the war and the repressive communist regime were fraught with privations and dangers (Starr, 1981). They had endured long stays in refugee camps awaiting resettlement, and suffered longer years of separation from family left behind. In the scattered host communities in which they were originally settled throughout the U.S., Vietnamese Americans often experienced hostility, as well as cultural, social, and linguistic isolation, and economic hardship. Biloxi's Little Saigon developed, in large part, through the secondary and tertiary migration of refugees seeking a better place to settle.

There is great socio-economic diversity among Vietnamese Americans. But those in Biloxi were, overall, some of the poorest residents of the city, with a median household income of $25,903, compared to the median household income of $25,922 for African Americans, and a total city median of $34,106 (U.S. Census, 2000). East Biloxi, in which Little Saigon is located, had "lower levels of educational attainment and incomes, higher poverty rates, and a higher proportion of Biloxi's minority racial/ethnic groups, especially African American and Asian, primarily Vietnamese" (Kleiner, Green, & Nylander, III, 2007, p. 160). Sixty-five percent of Vietnamese Americans in the U.S. report that they do not speak English very well, and 44% are classified as linguistically isolated (VanLandingham, Norris, Vu, & Fu, 2007).

Methodology

Our study was guided by two frameworks that highlight "the dynamic relations between people and their surroundings" (Stokols, 2000, p. 129): the social ecology conceptualization of disaster and the philosophical approach to disaster recovery known as psychosocial capacity building (PCB). Viewed through the lens of social ecology, disasters, including those constructed as "natural" ones, occur within a complex socio-political terrain. A community's economic, political, social, and cultural profile determines not only the specific ways in which
a disaster affects it, but shape the ways in which its members make sense of, react to, and recover from the disaster (Park & Miller, 2006). A community’s profile is, moreover, history-specific. A disaster narrative cannot be separated from that of the larger history of the community and must, therefore, be considered from a wider temporal frame than traditional narratives which locate a disaster’s beginnings at the event itself.

A social ecology perspective is embedded in psychosocial capacity building (PCB) approaches to disaster recovery. PCB works in counterpoint to the dominant Western conceptualizations of disasters which focuses on the individual as the locus of investigation and intervention (Halpern & Tramontin, 2007; Ritchie, Watson, & Friedman, 2006; Rosenfeld, Caye, Ayalon, & Lahad, 2005). This symptomology-dependent model, sometimes referred to as “disaster mental health,” emphasizes stress and trauma reactions (Summerfield, 2004); talk therapy and counseling are its main intervention modalities. PCB emerged out of a growing critique of the disaster mental health approach (Ager, 1997; Kleinman & Cohen, 1997; Miller, In press; Strang & Ager, 2003; Summerfield, 1995, 2000; Wessells, 1999; Wessells & Monteiro, 2006; Weyerman, 2007; Wickramage, 2006) as an incomplete, culture-bound vision which assumes the universality of psychological reactions, meanings, and significance (Summerfield, 2004). PCB foregrounds the collective (e.g., social group, community) as well as the individual as the locus of investigation and intervention. While PCB acknowledges the importance of attending to individual psychological sequelae, it insists that the impact of disasters and recovery from disasters cannot be measured by calculating only individual loss and gain (Farwell & Cole, 2002; Kaniasty & Norris, 1999; Landau & Saul, 2004; Miller, In press). It locates individual experiences, in other words, within the context of social, economic, political, cultural, and historical forces and understands that there is a collective dimension to disasters and recovery within which individuals suffer and recoup.

In line with this framework, we used a phenomenological interview strategy (Seidman, 1991), a way of exploring respondents’ subjective experiences and the particular meaning that respondents made of their experiences. To acknowledge the importance of not only the event, but the socio-historical
context of the event, we framed the interviews to elicit responses about: (1) life before Katrina; (2) experiences during and immediately after Katrina; and (3) the impact and the meaning of Katrina in current life and on future aspirations. In our analysis, we attended not only to individual experiences but also to individuals’ perceptions of and relationships to their collective and social worlds.

The narrative data were collected through interviews conducted in Little Saigon in May, 2008. Twenty-five community members, aged 29–70 years, participated in the study: nine were interviewed individually (five males and four females), and sixteen in five groups (three male and two female groups). The participants were recruited through key community institutions: The Boat People SOS (BPSOS), Chau Van Duc Buddhist Temple, and the Catholic Church of the Vietnamese Martyrs. BPSOS, a private not-for-profit organization that administers domestic programs for Vietnamese refugees and immigrants in the U.S., established a Biloxi office in response to the storm. The Temple and the Church, which stand adjacent in the center of the neighborhood, were bulwarks of the community, serving not only as religious institutions but the social and civic centers of the Vietnamese American community in the Biloxi metropolitan area. Both functioned during the hurricane and the days immediately following as refuge for the displaced and as staging grounds for the distribution of aid and information.

We employed two recruitment strategies. First, we distributed recruitment flyers and informed consent forms through key contacts at the three organizations. Second, upon the advice of those contacts who advised that an informal, personal approach to recruitment was both necessary and appropriate for the community, we also recruited participants in person, at community gatherings. At the Temple, we were introduced to the community whom we joined for tea, lunch, and mediation sessions. We introduced and explained the study during these informal events. Interested community members were screened and interviewed in the following two days. A similar process occurred at the Catholic church. Participants opted for either individual or group interviews which took place in four locations: The BPSOS offices, the Temple, the Church, and the
nearby marina. The interviews were conducted in Vietnamese or English depending on the preference of the participant(s). All sessions were audio-recorded, transcribed, and translated into English if conducted in Vietnamese.

Before the Storm

"And, living here ... I feel that there is a sense of community."

Despite the common tendency to think of immigrants, particularly limited-English speakers, as perpetual new arrivals, many members of Little Saigon’s community had long roots in Biloxi.

I’ve been [in Biloxi] so long, I really like it here ... I go visit different places already. I go Texas, I go California. I like there but ... I don’t know why it seems like this is home. So I feel like that I grow up in USA more than in Vietnam ... Vietnam only 21 years and here almost 40 years.

As has been noted about New Orleans’ Vietnamese Americans, the community members’ “profound attachment to place” has “contributed to the strong community identity” (Airriess, Li, Leong, Chen, & Keith, 2007, p. 1344). As one participant explained:

People here tend to have a relationship with their community than other bigger states. This may be because they live quite far apart—not close—whereas we tend to huddle in one place here. So when there is trouble we are able to help and support each other. The people in this community live peacefully with one another.

Several respondents explained their attachment to their community as well as their initial attraction to it, by likening life in Biloxi to that in a remembered Vietnam: “Because it was easy to live here before [Katrina]. The life style here was very similar to that of Vietnam’s ... Life was simple here.” A woman who lived for a time in a northern state explained that she returned to Biloxi “because it was so cold I cannot live there ... I find that the climate here much more suitable. It is very similar
“Everything Has Changed”

to Vietnam’s climate. It’s not too hot or too cold and it is close to the sea. Everything is so much like Vietnam.”

Along with owning and operating small family businesses, many Vietnamese Americans in pre-Katrina Biloxi were employed in fisheries (Kao, 2006; Pham, Shull, Tranguyen, & Hoang, 2006). As one participant explained: “almost everyone worked at the shrimp factory when they first arrived.” The latest among a long line of immigrants working Biloxi’s fishing industry, they:

arrived during the late 1970s and early 80s and revived the languid industry by accepting jobs in the packing plants. They built their own boats, opened businesses, and have become a vibrant part of the Biloxi seafood and ethnic community. (Schmidt, 1995, p. 1)

Despite the less-than-enthusiastic welcome by some local residents (Starr, 1981), Vietnamese Americans have become an established part of the industry in many parts of the Gulf. The small numbers originally brought in to work in the industry, moreover, “established receiving communities for secondary migrants initially resettled in other parts of the country, typically for relatives and fellow villagers seeking a more pleasant and familiar climate” (Starr, 1981, p. 228).

Many of the refugees who settled in Biloxi had been fisherfolk in Vietnam: “I am also one of the people who crossed the ocean and succeed ... Originally, my job is fishing. That’s why I headed south for the fishing job. That’s why over here I work for the boat, shrimp boat.” The community worked as a buffer, an economic and socio-cultural enclave for the many who came, well-versed in life on the water but with little formal education and few marketable skills (Starr, 1981): “A lot of those that did not know English went out to sea.”

According to my knowledge, peers of my age or older brothers, we immigrated to this American nation at an older age. Therefore, unfortunately, we were not accepted [at school] and not able to learn much of the available courses. Thus, we chose this place to work in a profession that requires not much education, but still pays a salary that is enough to live on.
While the men went out to sea, some eventually buying their own boats and hiring crews of co-ethnics, many women worked in the processing plants, finding there not only employment, but a source of social connections:

Woman 1: You can still work in the shrimp factory if you don’t know English. There were a lot of people there.
Woman 2: The owners were American but the Vietnamese were, of course, workers.
Woman 1: And, we would understand each other as we talk back and forth during work.

During the Storm

“A lot of people got torn apart.”

While many evacuated before the storm, and others chose to ride out the storm in their homes or fishing boats, still others, for multiple reasons, were unable to leave. As a woman in her 60s recounted, evacuation required resources: “to be blunt, those who were well off had opportunities; they had cars, children, overall they had a family. And, no matter how the hurricane turns out they still have a car that they can quickly relocate with.” The language barrier was a factor:

You know, there was also this sense of like there were some people who live alone, you know, and they have limited English skill. They don’t know the ... umm ... how important it is to evacuate, you know. They don’t know the magnitude because no one to explain it to them ...

Others cited ill health:

My mom wanted to move too but my dad couldn’t because he was like the dialysis inspection ... is here and he goes four times a week so he couldn’t go anywhere for more than 2 days. So, that’s one reason why he didn’t evacuate. They didn’t leave.
Still another recounted workplace constraints:

We work in the Casino and if you’re off that day then you can take off. But if you’re working that day ... they wait until really mandatory. I mean like storm, really going hit then they shut down, they only give you 8 hours to get out. So by the time we get out and we get to interstate, that’s it. We stuck.

Whatever the reasons for remaining behind, the experience of the storm proved to be terrifying to all who did. Several participants related harrowing tales of survival: escaping the rising flood waters through broken windows, clinging to rooftops and tree branches through the hurricane for hours until the waters receded or rescuers finally reached them. Despite the appalling dangers, fortunately, the community lost no lives due directly to the storm, though as one interviewee recounted, the indirect effects of the storm are more difficult to ascertain:

I am not sure. My father had ... because the arrival of the hurricane and the power went out at the hospital and he was sick and there was a not sufficient resource and it was so hot. There was no oxygen and so he died. He was already ninety-something years old.

The storm and the ensuing floods destroyed or severely damaged many houses and businesses in Little Saigon. The streets were littered with wrecked cars, downed electric lines, and rotting debris and dead animals, creating a toxic brew of mud and stench. Entire streets had been reconfigured into unrecognizable tangles of broken and unmoored buildings: “Oh heavens, there was no way to find the street and the house. Finally, I was able to locate my house. My house was originally here, but I found it on the other block.” Food, water, and other basic necessities were scarce in the immediate aftermath: “After a few days, even those that had money could not buy food. I had to bring my granddaughter with me to the street and beg for food. I had to take her to beg for food in the street.”

Some participants spent brief periods in shelters run by the local government or organizations such as the American Red Cross, but left as soon as they could to find alternatives.
By the time we got to the camp all the space below was taken and we had to go upstairs by the bathroom. The water broke and everything was a mess. It was just not livable. I did not have anything at the time. There was this newspaper, so I dusted the sand away like this and lay on it. There I stayed for 20 something hours ... My son decided that we needed to move because of all the urine and waste by the bathroom. When morning came we came to the Temple.

Such alternatives were often found within the ethnic community. The Temple and the Church, which sustained comparatively little damage, became temporary shelter for many community members, and staging grounds for distributing food, water, and clothing, and equipment such as tarps and camping stoves. Along with NGOs, the local institutions, and family and friends across the country, the national networks of Vietnamese American organizations became important sources of support and aid: "Vietnamese communities from other places, such as California, Atlanta, Houston, rallied up truckloads of rice and food to churches here where the food were distributed." Even for those who evacuated, such ethnic networks functioned as resources:

Any Vietnamese that, who, went to Houston ... we gathered at the same place at the Hong Kong market. That, I guess, that’s the landmark out there for that time, you know, or the Vietnamese community. We get all the information there like sign up for FEMA or sign up for Red Cross, you know? We did everything there.

As Airriess and colleagues (2007) explain,

This particular relationship between the local and the co-ethnic regional and national institutions provides a different dimension to the concept of networks of social capital in the sense that ethnic media and the internet rescaled a wider sense of ethnic community identity in a unified space of networks. (p. 1338)
As useful as such local and extended community networks were, however, they were insufficient to meet the needs of the community. While many who had evacuated during the storm returned to Biloxi to begin their long road to recovery, others, rendered homeless and jobless by the storm, left for other parts of the country. Many participants characterized these displacements as difficult experiences of exile. Several respondents cried as they described their experience of separation and sense of isolation from family, friends, and the neighborhood itself. One man went to Houston with his school-age son and was overwhelmed by the scale of the city and his perceptions of the risks and dangers that they faced. A woman, relocated by her Casino employer to an area about a day’s drive from Little Saigon, recalled the months of separation from her family as a period of profound sadness and fear.

After the Storm

“So this is a sad scenario, but there are more devastating situations.”

The issue of PTSD and trauma have long been associated with refugee populations. There is some evidence that refugees may be at particularly high risk for retraumatization owing in part to their previous traumatic experiences (Chen et al., 2007, p. 325). Conversely, studies have also shown that repeated trauma exposure may function as a kind of immunization (Basoglu, Paker, Ozmen, Tasdemir, & Sahin, 1994; Basoglu, Paker, Paker, et al., 1994; Norris & Murrell, 1988). Overall, the impact of trauma on the mental health of refugees, particularly that of long resettled refugees such as our sample, “remains a contested area” (Silove, Steel, Bauman, Chey, & McFarlane, 2007, p. 467).

There are, doubtlessly, community members who have suffered psychological injury due to the storm. One respondent, a long-term community member who has worked for BPSOS since it opened a branch in post-hurricane Biloxi, lamented that among its clientele are significant numbers with stress and trauma reactions and no Vietnamese-speaking clinicians in the area to treat them. In our sample, however, only one respondent reported trauma-like symptoms:
For three to four months I did not dare to bathe. I would laugh when there is something funny and I would also laugh when there was nothing to laugh about ... It was not until six to seven months later that I slowly began to gain control of what should be said and what not to say ... My younger sibling did take me to the doctor and everything and the doctor would sit and talk with me. But it was hard, because they spoke English and my sibling had to sit there and interpret for me. So, it was like talking to my sibling. Slowly... it has been a few years, and I slowly got back to normal. But, sometimes when asked of [the hurricane] I cannot hold back my emotion, because I never thought I would still be standing here. That's the truth.

A handful of others also described ongoing emotional and psychological difficulties, including a continued struggle to make sense of the events:

It's been 3 years now. But, some experience I had ... I just want to say it, but I don't know what I'm going to say, what, who to say it to. Just like now ... it's like it's in the closet right now. There's some stuff I want to say but ... but anger ... You were stressed. You were freaking out ... all that stuff, anger and depression.

The narratives of the majority of our respondents appear, however, to support the "inoculation hypothesis" (Norris & Murrell, 1988); past experiences had prepared them to deal with this newest in a long line of disasters, had rendered them "more resilient to the effects of Katrina" (VanLandingham et al., 2007, p. 7). A man in his 60s explained that Vietnamese Americans like himself "know how to handle" danger, explaining, "I was in the battlefield for 3 years. So, I was familiar with the situation. I feel it's dangerous but was not so frightened. I don't feel so frightened." Others, including some who were visibly upset during interviews or described lingering emotional difficulties insisted, however terrible their experiences of the hurricane, "the hardship is incomparable to that in Vietnam. If you endured hardship in Vietnam, nothing in
"Everything Has Changed"

the U.S. is hard." Even the challenges of rebuilding a life post-Katrina was unmatched by the those of the initial resettlement experiences.

And it is still better than when we first emigrated from Vietnam to the refugees camp on the islands and finally to the U.S. We came with empty-hands, a few documents, and the clothes on our body, and we slowly started from there up. Now, the flood took almost everything away and whatever lost is lost. We just have to do it all over again. However, it is still better than when we first arrived here, because we still have whatever few things that were left.

Even the inefficient, inadequate, and culturally obtuse governmental aid (Park & Miller, 2007) was analyzed from this comparative perspective and made more palatable:

Whatever they can give is good. We still have to find a way to survive if they decided not to give us any. I mean, they’re nice enough to provide assistance here. If it was Vietnam, people would be so poor and suffer so much during the aftermath of the hurricane. We will be devastated and so horribly poor that we have no way to start over and turn our lives around. We are able to start over again with their supports.

It must be noted that the participants’ tendency to invoke the past to make sense of and mitigate the present was neither a naïve undertaking nor an immigrant’s reluctance to criticize American institutions. Most respondents appeared to have a complex and in-depth knowledge of the byzantine systems of government and non-governmental aid and offered clear analyses of the pros and cons of the workings of both insurance companies and relief programs. As the following response to a question about finding resources indicates, social networks moderated barriers such as language (Pham et al., 2006):

Woman 7: No, we just spread the words by mouth.
Woman 6: Dear heavens, we’re Vietnamese. If one of us is going, a dozen of us are right behind (laugh).
Woman 7: That is right. We like to have our friends with us (laugh).

While they expressed gratitude both for the aid they received and for their life in the U.S., theirs was a pragmatic analysis, derived in part from a broader knowledge and lived experience of the world outside Biloxi and the U.S.:

Not really a great place [USA], but a place with greater opportunities than Vietnam. But great? No, there’s nothing great about it. It gives the opportunity to do what you can, especially in the economics and monetary area. You don’t have the opportunity to improve your financial means in Vietnam. It’s so constrained, unlike over here. There are more opportunities here.

This pragmatic frame has been understood, and misunderstood, as a type of fatalism peculiar to Asians, a passive, and therefore problematic acquiescence to circumstances (Larsen, Kim-Goh, & Nguyen, 2008). This, in our view, is a reductionistic analysis, reflective of the universalizing tendencies of Western psychological models that view only specific kinds of reactions and narratives as positive and functional (Kienzler, 2008). It is also an exoticizing analysis, that relegates such non-western and thus non-normative behaviors to the black box of culture. As the anthropologist Renato Rosaldo (1993) puts it, “Social analysts commonly speak as if ‘we’ have psychology and ‘they’ have culture” (p. 202). In our analysis, respondents’ tendency to analyze their present circumstance through the comparative lens of their difficult past experiences can be understood, instead, as a utilitarian coping method. It is a functional use of past experiences as lens through which present difficulties can be mitigated; a transitional pathway to their past which increases their resilience in the present (Landau & Saul, 2004).

That our sample of refugees is resilient was not, in itself, surprising. The salient point in our analysis is that whereas, for instance, Leong and colleagues (2007) located the resilience of the Vietnamese American community in New Orleans in the “sense of strength derived from their experiences as war refugees or as recent immigrants” (Leong, Airriess, Li, Chen,
& Keith, 2007, p. 777), our analysis highlights that such social and cultural capital are not static possessions or essential cultural characteristics, but an active and current construction of meaning and identity performed by the community members. The narratives of this construction was, appropriately enough, most clearly articulated in group interviews. In their transformation of culturally alien, donated canned food from a storm-induced hardship into a new hybrid—a uniquely Vietnamese and American post-Katrina delicacy—the respondents enacted, through their social narrative alchemy, this resilience at work.

Woman 1: If I were to sit and think of Hurricane Katrina, it really was not a big deal.
Woman 2: It is a zero! (laugh)
Woman 1: This hurricane in the U.S., please excuse my word choice, is no less than heaven. We still have not finished the canned food that was given to us. For example, there are these canned peas that you can sauté with chopped garlic, scallion, and sesame seed oil. Yes. And, it turns out great. And there are canned beans. You can boil the beans and stir fry them with salt, sugar, MSG, and soy sauce. It is delicious.
Woman 2: Overall, they gave us a lot of canned food then.
Woman 1: If you know how to prepare them they are going to be delicious.

“Oh yes, we are a long way to recovery here.”

The National Congress of Vietnamese Americans described the Gulf Coast three months after Katrina:

Gone were the fishing boats and the shrimp trawlers along the Mississippi and Alabama coast. The heavily damaged casinos and seafood processing plants were shut down. The storms also flooded Vietnamese neighborhoods, many of which were located on low-lying land. Small businesses everywhere, whether they sustained damages or not, faced a sudden loss of customers and were unable to stay open. As a result, even three months after the storm, as much as 25 percent of the Vietnamese population of southern Mississippi had left to look for work elsewhere in the
country. Many smaller towns along the Gulf Coast still appeared in May 2006 as ghosts of themselves, with a landscape of rubble and few signs of life. (Pham et al., 2006, p. 9)

Three years after Katrina, we found Little Saigon still struggling to recover. The resilience of this population in the face of repeated adversity was notable. But their resilience did not cancel out the reality of continuing difficulties, just as the respondents’ good humored recounting of the services provided by organizations such as FEMA and the American Red Cross were not indications that the aid provided was adequate or effective.

A few participants who were able to return to their former jobs and homes felt that life had returned to normal, but for most, life in Little Saigon, for themselves and for the community as a whole, had significantly changed for the worse. As one former fisherman summarized:

This city has changed a lot after the hurricane ... There’s nothing about it that’s optimistic. This means, ever since the hurricane, life has been very depressing. There are a few people that have somewhat stabilized and there are those that remain a wreck like these boats, got washed on shore, pulled down, and now the motors don’t even work. Everything is wrecked; nothing is settled ... Hopefully it will be good in the future. As for now, it has yet to be ... There’s nothing about Biloxi that seems stable, from land to sea. It’s still very sad.

A critical change has been the out-migration of people: “If there were 100 people here back then, there are only about 20, 30 people here now.” The daily contact with family and friends, a defining characteristic of life in Little Saigon, seems to have become a permanent loss for many: “I do have friends before the hurricane. I had sisters, friends, relatives, and stuff. It was very happy. They all left ... they all left. Their houses were all destroyed ... Lost all connections.” Family configurations and interactions have been radically reshaped: “To be honest, my family came apart because my children were not able to reunite. They had to deal with all this and they became
depressed and ended up leaving. It was like they lost their wives and I lost my sons.” One woman encapsulated, “The truth is it changed the destiny of my family members not by a little but by a lot.”

It was, more often than not, the younger members of the community who left to find jobs and establish lives elsewhere: “the children are all scattered.” The same set of socio-cultural and economic constraints and attachments that tied many older and poorer community members to Little Saigon in the first place and had made evacuation difficult, also made relocation infeasible. One long-time fisherman explained his reason for staying: “the real reason is I am somewhat old, my English proficiency is not that great, and I do not have any degree or certification.” A woman in her 60s explained: “I do not know anyone out there to go to. And, I know all the streets and roads from living here. I can walk about. I know how to get from here to the grocery stores … I do not know English, but … if I have any trouble the people here will help me with their best.” A woman in her mid-50s summarized:

A lot of people here do not know English and they do not wish to relocate to the North. Many of the young people that were born here, such as my children, they are up there now but if they do not like it there they will move to another place. But for me and my husband, there is nothing else we can do.

In our analysis, an individual’s reaction to the storm as well as his or her orientation to the future was shaped in large part by the individual’s particular socioeconomic location before and after the storm. Those who entered the storm with capital—whether it was economic capital such as land, houses, money, or human capital such as education or English language facility—and had capital that survived the storm, tended to report a faster emotional and psychological recovery, and a more active orientation to the future. The outlook of younger, better employed, English-proficient participants is typified by the following: “Uh, probably stay busy … Yea, keeping busy … keep, you know, moving forward.” Such respondents typically reported that despite some sadness and frustrations, they
were getting on with their lives and trying to look towards the future: “like me and my husband said ... let’s look forward, we work. If the insurance pay, they pay, if not we see what’s gonna happen, we not gonna sit there waiting.”

The ability to look forward with a sense of hope seemed to be more difficult for older people, many with limited English and few alternative employment prospects, who had little to begin with and could not imagine recouping their losses in the near term. One woman explained, “there’s no miracle (laugh) ... you only get wishes in fairy tales.” One fisherman poignantly summarized:

I only pray for good health and that I will be able to work and put food on the table each day. That is all. I do not know. There is nothing for me to plan. I just sit here with my eyes shut and whatever will be will be. I do not have any plan right now. Honestly, I do not know what to expect. What am I to hope for? Those who had houses need to fix them because they are damaged and if they had insurance then they were compensated and if they did not then there is no other way. And, there are those that bought hurricane insurance but not flood insurance, therefore they have no other way either. And, since they bought only hurricane insurance and not flood insurance the insurance company will not compensate them. You see? There are so many situations. So many difficult situations that I cannot explain. All I can do now is close my eyes, let go of my hands, and whatever will be will be. I do not know what else to think of. How else am I going to think of this?

“Landmarks that were here are no longer there.”

Physical changes to the neighborhood, the destruction of houses and businesses and the subsequent encroachment of Casino developments were responsible in part for the out-migration which has so greatly altered not only the lives of individuals and families but the collective community itself.

Out of 10 houses, 7 to 8 of them were destroyed. Therefore, people did not have a place to stay. There are some that evacuated to other states and have not
yet returned. There are a lot of houses that got cleaned but not fixed. They are just vacantly sitting there.

Housing prices rose dramatically in the post-Katrina years in part because so much housing stock was destroyed and few replacements built: "Newly built three bedrooms homes were around $100,000 before the hurricane. After the hurricane, the cost of homes increased by 30% and they became $130,000." The lack of housing stock has also resulted in a shortage of rental units and a consequent rise in rental prices.

There's very limited few resource for renters here. And renters before the hurricane were a significant part of the population, the Vietnamese population. And because there's very little, nothing or very little for them to come back to, they evacuated and they may never return.

The temporary FEMA trailers have also had a role in the scattering the community:

Say a Vietnamese person was living ... a renter living in East Biloxi, he had a roommate, but then the house was destroyed or something and he was placed in a FEMA trailer. You know, maybe his roommate had some family or friends out of state and he moved away, right? That leaves just this person, right? And this person, because he doesn't own his own property, land or home, he's sent to a commercial site all the way, say like 30 miles from here or something ... You may say 'well I want to stay in East Biloxi' but if there's no site in East Biloxi then you have to go somewhere else.

While disaster devastates many, it can open up new possibilities for those eager to exploit the crisis (Klein, 2007). Once restricted to off-shore locations, post-Katrina changes to zoning laws now permit casinos on land; Little Saigon, abutting the original off-shore Casino district is a prime target for encroachment. As one woman explained "after the hurricane, the casinos were able to move closer inland, right? They were allowed without input, without a lot of community input, because people were displaced there. So how could people
give inputs when they’re displaced all over? Another woman noted, “you’re not going to see what you used to see ... before the storm, you know? You lose all like the motel Mom and Pop’s on the beach, you know? They’re all going to be casinos and condos now. Not like what it used to be.”

Given the multiple difficulties of insurance and financing community members faced in their quest to rebuild homes and businesses, the incentive to sell to Casinos were high. One former restaurant owner described her plight of being effectively priced-out of her own neighborhood:

The Casino is expanding ... like we try to build the place back after the hurricane. ... So, I spend some money and hire some people try to fix it up, to build the restaurant there. But we checked the insurance and they don’t sell to us ... too close to the water ... we cannot build everything in cash, so we have to get a loan ... and you cannot get insurance. So, really, your hands are tied. So you have to sell ... everything is so expensive now in Biloxi, land to build back the home ... even if you build your home here, the insurance is so high you cannot afford it.

Not only casinos, but upscale development projects for condos and resorts to serve casino clientele promise to further raise property prices. The changes have benefited some community members: “some people are richer [than] before Katrina. Yeah. They sell the lot to the casino ... their lot like about seven or eighty thousand dollars. But after Katrina, some people sell over two hundred thousand dollars. God bless! (laugh).” But not all property owners gained: “some of the neighborhoods’ values have gone up because they are close to the casinos, but there are neighborhoods that have no value” because they are not.

Like all changes, the casino developments have had complex effects, and the interviewees expressed ambivalence about their impact on the community and its people. Casinos have provided much needed jobs: “If not for the casinos a lot of people would be unemployed, right? Without the casino a lot of people would be out of jobs.” But while the jobs are beneficial, especially to “the young ones, the young couples,” they are not open to all members of the community: “a lot of
them were not able to work in the casino because they do not have much education and know very little English. They only know the sea and they live by working on the sea.” As some participants expressed, moreover, casinos are a double-edged resource: “the more casinos we have, the more the residents will suffer (laugh) … Yes, they bring us jobs but they also bring away our money (laugh).”

The community’s sources of livelihood have also been significantly affected. Along with the loss of multiple small businesses which were unable to rebuild, the fishing industry was crippled. Life in fisheries was never easy: “season from season ok. Sometimes good, sometimes ok. Not so bad.” But since Katrina, fishing has been virtually at a standstill: “I feel that the ocean has been more and more quiet each day, the fishing business seems harder to live off than it was before the hurricane.” Boats were severely damaged during the storm, and most fishermen, with no or inadequate insurance, have been unable to restore their boats back to full capacity. The near seas, to which the small boats typically operated by the community members are limited, were still full of “trees and shrubs that got blown from the forest or land … also refrigerators and cars that got washed into the sea,” and were hazardous to boats and nets. For many fishermen, a lifetime of work and investment have been rendered useless. Even for those with functioning equipment, the cost of oil was so high and the cost of shrimp so low at the time of the interviews, that it was economically infeasible to put out to sea.

Everything is priced high. After the hurricane, I have five people sitting around, spaced-out and do not want to do anything. The two boats have been sitting there. … Fishermen seem to be losing the battle. If they were to switch shrimps for oil they would not be equal.

The seafood processing plants have not been repaired, leaving many, particularly older women, without work: “before the hurricane I was working with shrimps. There’s nothing for me to do.”

As casinos encroach and the businesses and fisheries remain shuttered, Little Saigon was contracting, not only economically and demographically, but socially. Its disintegration
as a neighborhood was intimately tied to its attenuation as a community. Most respondents reported that community interactions had diminished. Little Saigon remained still the heart of the Vietnamese American community: “yes, my life still in Biloxi because I could go to church in Ocean Springs but I go over here as much as I can.” Many had moved to nearby towns, but “they still come back to East Biloxi because the church is there, the temple is there, some grocery stores, you know? So, they still come back to East Biloxi, you know?” But it was clear that “it’s never going to be the same.” As the neighborhood and its composition changed, the community and individuals’ connections to it, though not entirely lost, had become more tenuous:

You know, you used to go into the Vietnamese church for Mass or the Buddhist temple. And now you live 25, 30 miles away. You have no transportation or have transportation issues. You lose that connection to that community because you can’t go back there as readily anymore … See, it’s different when you lose one or two homes versus when you lose hundreds of homes at once. See, so there’s like a big humongous difference. Granted you know losing is tragic but when it’s on a big scale you lose your friends and your neighbors. That severs a connection you have to the community and you feel very lost.

Conclusion

Our findings were undoubtedly shaped by the composition of our sample, comprised entirely of first generation immigrants. This is a population more likely to maintain close ties to ethnic-specific institutions and the neighborhood than younger, U.S.-born populations. Our recruitment through community institutions likely increased the possibility of netting not only the first generation, but those among them who actively participate in community life. The sample consisted, moreover, of those who remained behind, a group whose very presence suggests a higher likelihood of having close attachments to the community than those who left.

We believe, nevertheless, that a compelling and often
haunting portrait of the community has emerged. The narratives support our social ecology perspective on disasters. The interlocking relationship between the individual and collective are clearly demonstrated in the narratives that show that the shifting shape and content of Little Saigon are, in multiple ways, changing the community members’ experiences as both individuals and as members of the collective. Despite their active resilience in the face of adversity, moreover, these changes are experienced by the community members as profound losses.

Perhaps most clearly, the narratives support our understanding of the concept of place as “an important aspect of the self that is simultaneously a physical setting outside of the person and a symbolic presence within the person” (Falk, Hunt, & Hunt, 2006, p. 116). In particular for the older and arguably the most vulnerable respondents, Little Saigon was significant not only as “a symbolic center of ethnic identity” (VanLandingham et al., 2007, p. 6), but as a physical location, a linguistic and cultural enclave which functioned as a protected and familiar space of residence, livelihood, and social connections. Strong social networks and community bonds have been identified as protective factors for communities and societies undergoing social and economic upheaval (Sztompka, 2004). But in the case of Biloxi’s Vietnamese American community, those social networks and bonds were embedded, to a significant degree, in the neighborhood itself: the neighborhood and the community were bound together as a place, of not only symbolic but material importance.

It seems unlikely that the neighborhood of Little Saigon will return to its former state. These narratives demonstrate that the loss and recovery for each individual community member is intimately tied to that individual’s particular social, economic, and political location in the world. The scale of losses and speed of recovery for the community and the neighborhood are similarly tied to such factors, constituted through multiple interdependent sociopolitical forces. Little Saigon, a racially, linguistically, culturally, and economically marginalized entity, was of profound importance to its community members but had little sociopolitical clout in the world at large. As the land developments in the post-storm years indicate, the larger recovery planning for the neighborhood appears to be
progressing without significant input of those who depend most on its outcomes. If “indeed, a person’s social and existential identity is, to some degree, a by-product of where they live” and individuals “are in part who they are because of where they are” (Falk et al., 2006, p. 117), how the individual community members will fare, and whether their collective bonds and social networks can be maintained, remains to be seen.

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References


Social Work and Civic Engagement: The Political Participation of Professional Social Workers

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This article examines the involvement of practicing social workers in one type of civic engagement: the use of political processes to promote the public good. Based on a survey of 1,274 randomly selected members of NASW, this is the largest study to date examining the involvement of social workers in political action and policy advocacy. Findings suggest that approximately half of social workers demonstrate high levels of participation in the policy process. The authors analyze the frequency with which respondents engage in specific political and policy-related activities, and compare these results to those of other studies. They also examine respondents' attitudes toward political participation and share recommendations for increasing this aspect of civic engagement within the profession.

Key words: Policy, advocacy, civic engagement

Despite its great promise, the new millennium has witnessed the continued erosion of benefits and services for populations at risk (Parrott, Cox, Tristi, & Rice, 2008). In addition we face war and alienation abroad, an economic crisis and new hazards for immigrants at home, and profound threats to our civil liberties. In the face of these challenges, scholars and
activists have decried America's low levels of civic engagement. Distrust of government runs high, with turnout at the polls hovering around 45% for non-Presidential federal elections (Day & Holder, 2004) and topping off at 60-64% in Presidential races (Holder, 2006). The 9/11 tragedy boosted trust in government temporarily (Putnam, 2002), but the gains were short-lived. Even at their height, positive attitudes failed to generate concomitant changes in behavior. The tide may be turning, however. The Presidential elections of 2004 and 2008 generated larger voter turnouts than at any time in the previous forty years (Wolf, 2008), with voters in 2008 representing unprecedented racial and ethnic diversity (Lopez & Taylor, 2008).

As social workers who value social justice and human rights, we have an ethical responsibility to participate in civic life by advocating for compassionate leaders and constructive social policies. This obligation appears explicitly in the NASW Code of Ethics:

Social workers should engage in social and political action that seeks to ensure that all people have equal access to the resources, employment, services, and opportunities they require to meet their basic human needs and to develop fully. Social workers should be aware of the impact of the political arena on practice and should advocate for changes in policy and legislation to improve social conditions in order to meet basic human needs and promote social justice. (1999, Sec. 6.04)

The Educational Policy and Accreditation Standards of the Council on Social Work Education (CSWE, 2008) and the International Federation of Social Workers’ mission statement (IFSW, 2005) similarly testify to the importance of political action. This emphasis is a natural outgrowth of social work’s long history of involvement in championing important social causes.

Commitment to social and political action has taken many forms within the social work community. Some choose public service. There are currently ten social workers who are members of the U.S. Congress and sixty-eight who hold statewide office (NASW, 2008). Social workers also serve as staff in national,
state, and local legislative offices. Others work as advocates or lobbyists. Meanwhile, policy practice has gained some currency in social work education with faculty teaching courses, requiring assignments, and providing practicum experiences in political and policy settings (Anderson & Harris, 2005; Hoefer, 1999; Sundet & Kelly, 2002; Wolk, Pray, Weismiller & Dempsey, 1996).

**Review of the Literature**

Most research examining the political participation of social workers has sought to identify whether or not social workers are politically active, what characteristics distinguish those who are highly active from those who are not, and how social workers express their political involvement. Several studies have concluded that social workers, as a group, are more politically active than the general population (Parker & Sherraden, 1991; Ritter, 2007; Wolk, 1981). A number have categorized respondents into those who are inactive, active, and highly active. Replicating an earlier study by Wolk (1981), Ezell (1993) found that the proportion of politically active social workers had increased by nearly 20% over the course of a decade, from 66% to 85.7%. In a more recent study using a different measurement scale, Ritter (2007) found only 46% of her national sample of social workers to be active or very active in political affairs.

The relationship between various demographic characteristics and level of political participation has been examined in a number of studies. Those found to be more active include African Americans (Ezell, 1993; Reeser & Epstein, 1990; Wolk, 1981), NASW members (Ezell, 1993; Hamilton & Fauri, 2001), macro practitioners (Ezell, 1993; Reeser & Epstein, 1990; Wolk, 1981), those with higher levels of education (Ezell, 1993; Parker & Sherraden, 1991; Wolk, 1981), those who are older (Wolk, 1981), those with higher salaries (Wolk, 1981), those who own their own homes (Parker & Sherraden, 1991), and those with more years of professional experience (Ezell, 1993).

Finally, researchers have attempted to identify the specific activities in which social workers are most likely to engage. Because different researchers have employed different subjects, scales, definitions, and time frames, readers should
exercise caution in comparing results across studies. Instead, the findings are useful in painting a picture of what seem to be common trends. Studies that have asked about “voting” (Hamilton & Fauri, 2001; Parker & Sherraden, 1991; Ritter, 2007) found it to be the single most common activity, even compared to other forms of electoral participation. “Contacting legislators” and “belonging to organizations that take a stand on political issues” were also among the most common (Ezell, 1993; Hamilton & Fauri, 2001; Ritter, 2007; Wolk, 1981). At the other end of the scale were “campaigning” and “testifying,” which consistently ranked last (Ezell, 1993; Hamilton & Fauri, 2001; Parker & Sherraden, 1991; Ritter, 2007; Wolk, 1981).

Despite its importance, there remains little scholarly literature on the topic of civic engagement among social work professionals. Increasing our understanding of whether, how, and why social workers use political processes to promote the public good is critical to identifying strategies for increasing social work’s influence in important policy debates affecting vulnerable client groups. The descriptive study presented in this article adds to the growing body of literature on this topic in several ways. First, it is one of the few to use a national sample. Most have relied upon subgroups of social workers: members of a single NASW chapter, licensed social workers within a single state, NASW chapter directors, etc. Second, this study features the largest sample size to date. With the exception of Reeser (1986), sample sizes have fallen in the 200-400 range, averaging about 350 respondents. This study is based on 1,274 valid responses. Third, the activity scale used here is more detailed than those used in other studies, addressing a larger number of activities and permitting finer distinctions in terms of frequency. Finally, this study includes a set of questions about social workers’ attitudes toward political participation that adds a new dimension to previous research findings.

Method

A self-administered, self-report questionnaire was developed by the authors in 2000, and pre-tested with social work colleagues and students. Final revisions were made, and the instrument—together with a cover letter and business-reply
envelope—was subsequently sent by first-class mail to a computer-generated list of 3,000 randomly-selected “regular” members of NASW. Four weeks later a follow-up mailing, including cover letter, duplicate survey instrument, and reply envelope, was sent to those who had failed to respond to the initial mailing. Surveys returned by the post office as “undeliverable” were excluded, as were surveys completed by respondents indicating they were not currently practicing social workers. A total of 1,274 valid responses were obtained, for a return rate of 43%.

The instrument is divided into three sections. The first contains a series of 20 statements representing various types of political activity. The activities were derived from two sources: some were based on those used in other studies; others were suggested by the direct experience of the researchers, both of whom are former registered lobbyists. Respondents were asked to signal how often they engage in each activity listed, using a Likert scale of “never,” “rarely,” “sometimes,” “often,” and “always.” The second section contains a list of 22 statements expressing attitudes or beliefs regarding political participation and social work. Respondents were asked to indicate their level of agreement with each statement by marking “strongly disagree,” “disagree,” “no opinion,” “agree,” or “strongly agree.” The final section asks for demographic information concerning educational background, practice background, age, sex, and political party affiliation. There is also an open-ended question soliciting additional thoughts regarding political participation and social work practice.

Frequencies and cross-tabulations were computed using SPSS, allowing for percentage comparisons. A content analysis was performed on the responses to the open-ended question using open-source coding and categorization to identify recurrent themes.

Characteristics of Respondents

The vast majority of respondents (93.8%) hold an MSW degree. The modal length of time in social work practice is 11-20 years. Approximately 78% identify as female and 22% as male. The largest age concentration (40.8%) is in the 46-55 year
old category. Slightly more than 70% of respondents identify themselves as Democrats. Independents (12.4%) outnumber Republicans (7.9%). Those reporting no political party affiliation represent 6.4%. In addition, several respondents identified themselves as having run for, having held, or currently holding elective office.

The largest cohort of respondents indicates working in nonprofit agencies (33.4%), followed in descending order by public agencies (25.9%), private clinical practice (23.8%), and for-profit settings (12.5%). Most (86.2%) work in urban or suburban areas. Nearly half (45.7%) are employed in health or mental health settings, including private/group practice, mental health facilities, and hospitals. Only 7% work for advocacy or membership organizations. Of the entire sample, 61.8% identify themselves as direct service providers. The clients served are largely lower and middle income (84.5%), with very few respondents primarily serving upper income clients.

**Results**

An overall rating of political participation was devised, based on the list of identified behaviors. Scores were divided into “high” and “low,” reflecting the frequency with which respondents engaged in each political activity. Slightly fewer than half (46.6%) of respondents fell in the “high” range, while slightly more than half (53.4%) fell in the “low” range.

Comparing rates of overall participation to various respondent characteristics yielded few significant differences. There was no discernable difference in level of activity related to issues of personal interest versus issues of professional interest. Respondents with a BSW degree were equally divided between the high and low categories, as were respondents with an MSW degree. Only doctoral level preparation showed a difference, with 75% of those with doctoral degrees falling in the “high” category compared with 25% in the “low” category.

Age and years of social work practice experience both were positively correlated with civic engagement. The older the respondent, the more likely to be highly involved in political activity; similarly, the more years of social work practice experience, the more likely to be highly involved. Respondents
employed in the public sector showed the highest percentages of political activity (equally divided between the "high" and "low" categories), followed in order by those in nonprofit agencies, those in private clinical practice, and those in for-profit agencies (one-third of whom were in the "high" category and two-thirds of whom were in the "low" category). In terms of employment setting, those with the strongest showing in the "high" category work in universities (86.3%) and advocacy/membership organizations (85.7%). Those with the lowest overall participation rates work in nursing homes (25% in the "high" category), correctional facilities (22.2%), and substance abuse programs (17.6%).

In addition to overall participation, frequencies were calculated for each individual behavior in order to get a clearer picture of how social workers participate in civic life (See Table 1). The most common activities, defined as those engaged in "often" or "always" by more than half the respondents, include: voting (95.0%), keeping up with the news (89.2%), knowing who represents them in state and national government (79.4% and 85.3% respectively), encouraging friends, neighbors, or colleagues to vote (67.0%), monitoring legislation of interest (58.0%), sharing political opinions with others (54.6%), and discussing current policy issues with others (53.6%). The least common activities include: participating in (7.8%), helping to organize (3.4%), or encouraging others to attend (9.5%) rallies, marches, or demonstrations; voicing opinions through the media (7.1%); attending or testifying at hearings (11.5% and 4.3% respectively); actively campaigning for a candidate (13.4%); contacting legislators (17.9%); participating in community groups that seek to influence policy (18.2%); and keeping track of how legislators vote (26.7%). Particularly noteworthy is that more than 40% of respondents report never having attended a rally, march, or demonstration; nearly half (48.2%) have never contacted the media; and more than two-thirds (68.3%) have never testified at a public hearing.

Respondents were also asked about their attitudes and opinions regarding participation in the political process. For ease of reporting, responses have been organized into three thematic categories: Professional Role, Perceived Influence, and Educational Preparation. In a few cases where statements
Table 1. Frequency of Participation in Specific Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>N (Valid Responses)</th>
<th>Never N (%)</th>
<th>Rarely N (%)</th>
<th>Sometimes N (%)</th>
<th>Often N (%)</th>
<th>Always N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I vote on election day</td>
<td>1269</td>
<td>10</td>
<td>11</td>
<td>43</td>
<td>264</td>
<td>941</td>
</tr>
<tr>
<td>I encourage others to vote on election day</td>
<td>1268</td>
<td>45</td>
<td>100</td>
<td>267</td>
<td>385</td>
<td>471</td>
</tr>
<tr>
<td>I share my political opinions with others</td>
<td>1264</td>
<td>25</td>
<td>86</td>
<td>463</td>
<td>463</td>
<td>227</td>
</tr>
<tr>
<td>I actively campaign for candidates of my choice</td>
<td>1266</td>
<td>384</td>
<td>411</td>
<td>302</td>
<td>105</td>
<td>64</td>
</tr>
<tr>
<td>I read, listen to, or watch the news</td>
<td>1271</td>
<td>9</td>
<td>23</td>
<td>105</td>
<td>348</td>
<td>786</td>
</tr>
<tr>
<td>I know who represents me in the state capital</td>
<td>1266</td>
<td>14</td>
<td>50</td>
<td>197</td>
<td>364</td>
<td>641</td>
</tr>
<tr>
<td>I know who represents me in Congress</td>
<td>1265</td>
<td>10</td>
<td>42</td>
<td>134</td>
<td>318</td>
<td>761</td>
</tr>
<tr>
<td>I follow the progress of legislation that interests me</td>
<td>1265</td>
<td>31</td>
<td>120</td>
<td>381</td>
<td>460</td>
<td>273</td>
</tr>
<tr>
<td>I discuss current policy issues with others</td>
<td>1269</td>
<td>35</td>
<td>114</td>
<td>440</td>
<td>489</td>
<td>191</td>
</tr>
<tr>
<td>I attend public hearings on issues that interest me</td>
<td>1269</td>
<td>402</td>
<td>418</td>
<td>304</td>
<td>105</td>
<td>40</td>
</tr>
<tr>
<td>I contact my legislators to share my opinion on policy issues</td>
<td>1266</td>
<td>209</td>
<td>397</td>
<td>434</td>
<td>177</td>
<td>49</td>
</tr>
<tr>
<td>I keep track of how my legislators vote on issues that interest me</td>
<td>1269</td>
<td>170</td>
<td>327</td>
<td>434</td>
<td>256</td>
<td>82</td>
</tr>
<tr>
<td>I participate in political rallies, marches, etc.</td>
<td>1264</td>
<td>513</td>
<td>396</td>
<td>257</td>
<td>64</td>
<td>34</td>
</tr>
<tr>
<td>I encourage others to participate in political rallies, marches, etc.</td>
<td>1265</td>
<td>513</td>
<td>379</td>
<td>254</td>
<td>78</td>
<td>41</td>
</tr>
<tr>
<td>I help organize political rallies, marches, etc.</td>
<td>1266</td>
<td>906</td>
<td>235</td>
<td>83</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>I testify at federal, state, or local hearings</td>
<td>1263</td>
<td>863</td>
<td>220</td>
<td>125</td>
<td>42</td>
<td>13</td>
</tr>
<tr>
<td>I participate in community groups that seek to influence policy</td>
<td>1265</td>
<td>355</td>
<td>342</td>
<td>338</td>
<td>166</td>
<td>64</td>
</tr>
<tr>
<td>I voice my opinions on policy issues to media outlets</td>
<td>1261</td>
<td>608</td>
<td>331</td>
<td>233</td>
<td>69</td>
<td>20</td>
</tr>
<tr>
<td>I take an active role in relation to issues that affect my clients</td>
<td>1242</td>
<td>137</td>
<td>314</td>
<td>455</td>
<td>267</td>
<td>69</td>
</tr>
<tr>
<td>I take an active role in relation to issues that affect me personally</td>
<td>1261</td>
<td>129</td>
<td>291</td>
<td>506</td>
<td>255</td>
<td>80</td>
</tr>
</tbody>
</table>
were phrased in the negative (to avoid acquiescent response set), they are re-phrased in the positive to allow for comparative analysis. The items comprising Professional Role are displayed in Table 2. A full 87.5% disagreed or strongly disagreed with the contention that it is unethical for social workers to be involved in politics, demonstrating that the vast majority find it ethically acceptable. Of the seven remaining statements, more than half the respondents agreed or strongly agreed with the first five, affirming the relevance of political action to their jobs and recognizing their professional obligation to stay informed, educate others, and advocate for constructive policies. The remaining two statements apparently were more problematic.

Table 2. Professional Role and Political Participation

<table>
<thead>
<tr>
<th></th>
<th>N (Valid Responses)</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is unethical for social</td>
<td>1238</td>
<td>651 (52.6)</td>
<td>432 (34.9)</td>
<td>115 (9.3)</td>
<td>29 (2.3)</td>
<td>11 (0.9)</td>
</tr>
<tr>
<td>workers to be involved in</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>politics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consider it my professional</td>
<td>1264</td>
<td>11 (0.9)</td>
<td>35 (2.8)</td>
<td>106 (8.4)</td>
<td>692 (54.8)</td>
<td>420 (33.2)</td>
</tr>
<tr>
<td>obligation to stay informed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>about changes in social policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Every social worker has an</td>
<td>1240</td>
<td>36 (2.9)</td>
<td>140 (11.3)</td>
<td>255 (20.6)</td>
<td>564 (45.5)</td>
<td>245 (19.8)</td>
</tr>
<tr>
<td>obligation to promote policies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>that benefit their clients</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I wish I had enough time to</td>
<td>1232</td>
<td>47 (3.8)</td>
<td>144 (11.7)</td>
<td>267 (21.7)</td>
<td>564 (45.8)</td>
<td>210 (17.0)</td>
</tr>
<tr>
<td>advocate for policy changes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>affecting my practice or my</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>clients</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increasing the general</td>
<td>1232</td>
<td>45 (3.7)</td>
<td>177 (14.4)</td>
<td>328 (26.6)</td>
<td>532 (43.2)</td>
<td>150 (12.2)</td>
</tr>
<tr>
<td>public's understanding of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>social policy is an integral</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>part of the social work role</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consider political action</td>
<td>1228</td>
<td>62 (5.0)</td>
<td>161 (13.1)</td>
<td>179 (14.6)</td>
<td>498 (40.6)</td>
<td>328 (26.7)</td>
</tr>
<tr>
<td>relevant to my job</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It is part of my mission to</td>
<td>1228</td>
<td>92 (7.5)</td>
<td>290 (23.6)</td>
<td>330 (26.9)</td>
<td>375 (30.5)</td>
<td>141 (11.5)</td>
</tr>
<tr>
<td>empower my clients politically</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>as well as personally</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I wish my agency would</td>
<td>1121</td>
<td>145 (12.9)</td>
<td>276 (24.6)</td>
<td>512 (45.7)</td>
<td>131 (11.7)</td>
<td>57 (5.1)</td>
</tr>
<tr>
<td>let me be more involved in</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>politics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SD= Strongly Disagree; D= Disagree; N= No Opinion; A= Agree; SA= Strongly Agree
The statement on politically empowering clients generated the most ambivalence, with approximately 42% agreeing that it is part of their mission, 31% disagreeing, and 27% expressing no opinion. Finally, the statement “I wish my agency would let me be more involved in politics” elicited stronger levels of disagreement (27.5%) than agreement (26.8%), with 45.7% expressing no opinion.

The second theme represented by the attitude/opinion questions concerns Perceived Influence. Responses are summarized in Table 3. These statements were designed to measure the degree to which social workers believe they have the power to influence policy outcomes. The vast majority of respondents (93.4%) agreed or strongly agreed that voting is important. Nearly 85% disagreed or strongly disagreed that influencing policy should be left to professional lobbyists, suggesting that they potentially see a role for social work practitioners in shaping policy outcomes. More than 65% indicated that they believe they could influence social policy if they tried.

<table>
<thead>
<tr>
<th>Table 3. Perceived Influence on Public Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>N (Valid Responses)</strong></td>
</tr>
<tr>
<td>Voting is an important tool for influencing social policy</td>
</tr>
<tr>
<td>Influencing policy should be left to professional lobbyists</td>
</tr>
<tr>
<td>It is unlikely that I would have much influence, even if I tried to affect social policy</td>
</tr>
</tbody>
</table>

SD= Strongly Disagree; D= Disagree; N= No Opinion; A= Agree; SA= Strongly Agree

Finally, several statements sought respondents’ opinions about the adequacy of their Educational Preparation for civic engagement. These appear in Table 4. The strongest level of agreement (78.1%) concerned the link between social work practice and social action. This compares favorably to the 36.2% who felt they’d had adequate guidance on integrating political action into their professional roles. A total of 41.7% said they wished they were more knowledgeable about how to impact the political process, and 47.5% expressed being satisfied with their level of political involvement.
Table 4. Educational Preparation for Political Participation

<table>
<thead>
<tr>
<th></th>
<th>N (Valid Responses)</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>My social work education emphasized the link between social work practice and social action</td>
<td>1251</td>
<td>25</td>
<td>121</td>
<td>129</td>
<td>665</td>
<td>311</td>
</tr>
<tr>
<td>I wish I were more knowledgeable about how to effectively impact the political process</td>
<td>1243</td>
<td>75</td>
<td>332</td>
<td>318</td>
<td>437</td>
<td>81</td>
</tr>
<tr>
<td>I believe I’ve had adequate guidance on how to integrate political action into my professional role</td>
<td>1243</td>
<td>102</td>
<td>431</td>
<td>259</td>
<td>346</td>
<td>103</td>
</tr>
<tr>
<td>I am satisfied with my level of political involvement</td>
<td>1251</td>
<td>52</td>
<td>419</td>
<td>186</td>
<td>505</td>
<td>89</td>
</tr>
</tbody>
</table>

SD= Strongly Disagree; D= Disagree; N= No Opinion; A= Agree; SA= Strongly Agree

Discussion

The nearly equal division of respondents between high and low overall levels of political participation is not surprising, given the breadth and diversity within the profession. It echoes the profession’s historical dual emphasis on casework and social action. The fact that nearly half of NASW members, nationally, are highly politically active is a positive sign, especially since some view NASW as a mainstream organization in which social work activists may be underrepresented. The levels of participation here are lower than those found (using a different index) by Wolk (1981) and Ezell (1993), but very similar to those found by Ritter (2007).

The effects of educational preparation (PhD), age, and number of years in social work practice are consistent with other findings. The fact that those with BSW and MSW degrees are equally active might be considered at odds with previous findings in which higher levels of education correlated with higher levels of civic engagement. The finding here may be a positive one, reflecting the attention paid to policy practice in BSW curricula, as required by the CSWE curriculum policy statement. Alternatively, it could be interpreted as negative, reflecting the sometimes narrower “clinical” focus of many
MSW social workers. It is not surprising that public sector and nonprofit agency employees show higher levels of involvement than those in private clinical practice or for-profit agencies. Nor is it surprising that those employed by universities and advocacy/membership organizations show the highest levels of participation. Of some concern, however, are the overall low levels of participation by social workers in nursing homes, correctional facilities, and substance abuse programs—settings beset by systemic problems and often in need of policy interventions.

Looking at the various ways in which social workers manifest their involvement in the political process, a clear pattern emerges. With the exception of voting, the activities engaged in most often are those that require the least amount of effort; they could be described as passive rather than active. These include: keeping up with the news, identifying one’s legislative representatives, following the progress of legislation, sharing political opinions with others, and discussing policy issues with friends and colleagues. At least half of the respondents indicated engaging in these activities “often” or “always.” By contrast, those activities requiring greater commitment scored lower. These include contacting legislators, actively campaigning for candidates, testifying at hearings, attending marches or rallies, contacting the media, and joining community groups that advocate for policy change. A similar preference for activities requiring lower, rather than higher, levels of commitment was identified by Parker and Sherraden (1991) in their study of electoral politics and social work participation.

Of the behaviors identified in the survey, perhaps the most widely studied is voting. The fact that 95% of respondents indicated they vote often or always is impressive. Even accounting for possible social desirability bias, this far outstrips the voting rate in the general population. It is, in fact, consistent with other studies all of which show more than 90% of social work respondents indicating they vote.

Findings on several other items were more surprising. Only 18.2% indicated that they “participate in community groups that seek to influence local, state, or federal policy.” First, this is at odds with the findings of previous studies that identify organizational membership as one of the more common
ways of expressing political involvement. Second, everyone in the sample is a member of NASW, an organization that has an active lobbying presence at both the national and chapter levels. The outcome here may be a function of how the item is worded: Perhaps most NASW members don’t view their membership as “participation”—or perhaps they don’t consider NASW to be a “community group.” Another possibility is that members are unaware of NASW’s role in political advocacy. This suggests that more aggressive outreach to NASW members around the Association’s policy efforts could be an important strategy for increasing overall levels of political participation within the profession.

The other finding that seems inconsistent with previous research is the small proportion of respondents who report contacting their legislators. The difference might be due to the ways in which the variable is measured across studies. For example, 60% of social workers may have contacted a legislator at least once during the past year (Hamilton & Fauri, 2001), but they might not characterize this in the present study as doing so “often” or “always.” This interpretation of the data is supported by the fact that 34.3% say they contact their legislators “sometimes” and an additional 31.4% do so “rarely.” Perhaps the findings are less inconsistent than they first appear.

Also rated surprisingly low was “participating in marches, rallies, or demonstrations.” Reeser and Epstein (1990) characterize this as one of a set of “non-institutionalized” social action behaviors. One of their key findings is that, between the 1960s and the 1980s, social workers increased their use of “institutionalized” methods of political participation and decreased their engagement in “non-institutionalized” behaviors. This finding is consistent with that pattern, yet it remains counter-intuitive. With so many causes sponsoring walks and runs and rallies (AIDS, breast cancer, genocide, suicide prevention, gun control, gay rights, etc.), one would expect more social workers to participate. Perhaps respondents weren’t thinking of the political agendas underlying these events, but only of their social or fundraising goals.

Consistent with other research findings, involvement in electoral campaigns (“I actively campaign for the candidates of my choice”) scored low. This may reflect the profession’s
lagging attention to the importance of electoral politics. Unlike policy advocacy, electoral politics does not appear in the NASW Code of Ethics, nor is it mentioned in the CSWE curriculum policy statement. Some social workers remain uncomfortable with partisan politics, believing it is unethical or "dirty"—or mistakenly viewing it as an incursion into others' self-determination. (Haynes & Mickelson, 2010) Others may be wary of publicly affiliating themselves with a specific party or candidate, lest they jeopardize government or foundation support for their agencies. Social workers and social work students should clarify their legal rights to engage in partisan politics. Where appropriate, they can then begin with small expressions of their own electoral convictions: by putting up a yard sign, making a monetary contribution, sporting a bumper sticker, etc. Though looked on as relatively minor, these behaviors are a vital part of campaigning and may lead to more ambitious activities.

Also consistent with previous research is the low ranking attributed to attending or testifying at public hearings. What is curious about this finding is that testifying is among the policy practice exercises most often incorporated into policy courses in schools of social work. The low numbers are likely due to lack of opportunity to attend hearings or to testify in the context of one's job. The work force might benefit from training that focuses on increasing social workers' comfort level with the art of testifying. Issues of great importance to human service agencies often are considered by state and local governing bodies. Increasing the visibility and input of professional social workers would be an invaluable asset in influencing budget and policy outcomes that can determine the survival of key programs and services.

Using the media is another low-scoring activity, and one that has rarely been studied. Its importance, however, is undeniable. Political scientists have long observed that public call-in shows on radio and television skew conservative; social work voices are rarely heard. Fortunately, several policy textbooks now incorporate material on working with the media; hopefully the next generation of practitioners will be more comfortable with that role and will voice their opinions on important policy issues through strategic use of broadcast, print,
Finally, although more than half of respondents indicated they often or always discuss current policy issues with friends, neighbors, or colleagues, this is a number that can and should be increased. This kind of discussion is critical to shaping public opinion, and public opinion is an important determinant of policy change. Amidei (2002) extols the virtues of talking about the issues in public: on the subway, in the elevator, etc. Social workers often are reticent about expressing their views. This will require a cultural shift that should begin with social work education. We have an obligation to be knowledgeable and to share that knowledge (and resulting convictions) with policy-makers and with the public.

Many social workers continue to harbor ambivalent feelings toward participation in the political process. Haynes and Mickelson attribute this reluctance to a “perceived conflict between political ideology and professional impartiality” (2010, p. 23). Students often express the mistaken belief that it is unethical for social workers to be involved in politics. The survey findings suggest, however, that among a strong majority of NASW members (87.5%), political participation is not viewed as ethically suspect. This comfort with political action on ethical grounds is essential; until we reach 100% agreement, we must continue to stress the integral relationship between political action, social work practice, and the quest for social and economic justice.

Respondents were asked to express their views regarding what functions are relevant to their jobs, what obligations they hold as social work professionals, and how they perceive the parameters of the social work role. The responses were impressive: 88% said they consider it their professional obligation to stay informed about changes in social policy, approximately 67% said they consider political action relevant to their job, and approximately 65% agreed that every social worker has an obligation to promote policies that benefit his or her clients. In regard to relevance, however, many of the clinical practitioners expressed a different opinion in response to the open-ended question. A typical comment was: “In my opinion, community action is far removed from clinical practice.” Another mental health professional wrote, “Politics is not much relevant to the
day-to-day issues in my practice.”

Comparing beliefs to action reveals some disparities; despite positive attitudes, fewer than half of the respondents demonstrated high overall levels of political participation. It is likely that lack of time is one explanation: 62.8% said they wished they had enough time to advocate for policy changes affecting their practice or their clients. Lack of time also emerged as a theme in the analysis of the responses to the open-ended question. The responsibilities of parenthood emerged as another. As one respondent wrote, “Since the birth of my baby, my time and energy are devoted to the politics at home! It feels impossible to march in D.C. like I did when I was in grad school. I suppose this is an area I will return to when my life changes again.” The effect of agency rules and expectations is less clear. While only 6.8% indicated that they wish their agency would let them be more involved in politics, this could reflect one of two things: either their agencies already do permit their political involvement, or they lack interest in becoming more politically involved. Greater levels of concern about agency constraints surfaced in response to the open-ended question, largely among public employees. In some cases the agency’s position seems to depend on the particular issues involved. For example:

I believe my state agency (public health) is quite paranoid about lawsuits and doesn’t encourage political action. An exception was when there was a threat to privatize all home health in the state. With agency leadership, we individual workers contacted fellows in other agencies and clients to write, call and testify at the state Congressional level.

Perhaps the most interesting responses were to the statement: “It is part of my mission to empower my clients politically as well as personally.” While 42% agreed, more than 30% disagreed and more than one-fourth expressed no opinion. The role of social workers in encouraging clients to be politically active—as distinct from advocating on their behalf—is an area that deserves further investigation. Although our profession subscribes to client empowerment as a fundamental practice goal, how we operationalize it remains unclear. This is an area
of enormous promise that could help give our clients a voice while promoting the public good and facilitating broad-based civic engagement (Rome, Hoechstetter, & Wolf-Branigin, In press).

Scholars have long taken an interest in identifying what factors might predict greater engagement in the political process. Political scientists, in particular, have defined a series of variables that comprise a measure of what they call “psychological engagement” (Verba, Schlozman & Brady, 1995). Among them is something similar to what social workers call “agency”—that is, the belief that one has the ability to affect outcomes. Hamilton and Fauri (2001) and Ritter (2007) have tested this notion with a social work audience. They found that those who believe they have the power to influence outcomes are indeed more likely to engage in the political process. Against this backdrop, the findings in the current study are encouraging: a strong majority of respondents believe that voting matters and disagree that influencing policy should be left to professional lobbyists. More than two-thirds believe that, if they tried, they would be likely to have some influence over social policy. One respondent wrote: “It continually amazes me how one or two or three people—plain citizens—can get legislation passed or killed, if they have a good case that doesn’t gore anyone’s ox, and they are persistent in their efforts.” On the other hand, a few responses suggest skepticism about the political process: “As someone who was very politically active in the 60s and 70s, I have become totally disillusioned with the political system and increasingly cynical about the political change process.”

Finally, respondents were asked about the adequacy of their preparation for policy practice. It appears that most respondents got the message about the interdependence of policy and practice, but many are having difficulty applying this conviction on the job. This suggests a need for continuing education that helps administrators, supervisors, and workers identify opportunities to incorporate political action into the work place as seamlessly as possible. Consider this comment: “Political involvement is an ‘extra’ when you have too few resources, too little time, and are generally doing more with less.” The goal is for policy and practice to exist as an
integrated whole, rather than as two separate pursuits. According to a few respondents, political participation can actually help relieve some of the stresses of the workplace: “I feel very strongly that it is our duty to become active in the political arena. Public policy impacts on our families in dramatic ways. I also feel it will help us to fight burn-out. I first became active as an advocate for child welfare when I was a CPS worker. When things felt hopeless I’d get involved in shaping policy.”

The study further suggests that another topic for continuing education should be skill development in policy practice. Over 40% of respondents said “I wish I were more knowledgeable about how to effectively impact the political process.” While not a majority, this constitutes a sizeable number of social workers who might well become more active with the confidence and comfort that stem from proper training.

Limitations

As mentioned previously, this study adds to a limited body of research on the topic of social workers’ political participation. Yet caution should be exercised in drawing direct comparisons across studies. Each has asked somewhat different questions, employed somewhat different samples, used somewhat different instruments, and applied somewhat different interpretations to the results. Taken together, however, they begin to create a picture of the status of the profession in relation to the political process.

Although this study draws on a large, national, random sample of social workers, all are members of NASW. Although NASW is the largest association of professional social workers in the world, NASW represents only a fraction of those practicing social work. Since the responses were self-reported, there is also a risk of social desirability bias. Answers may be inflated in an effort to “look good” to the researchers. This study measured engagement in specific activities using a Likert scale of “never,” “rarely,” “sometimes,” “often,” and “always.” These categories are imprecise, calling on respondents to interpret the labels and make judgments about the frequency of their various behaviors. Readers should consider this a relative, rather than an absolute, measure of participation. Finally, the
response rate of 43%, though respectable for a mailed questionnaire, suggests that findings should be generalized with caution. There is no way of knowing how those who didn’t respond might have answered the questions. It is possible that non-respondents, as a group, have less interest in political action than those who took the time to complete and return the survey instrument.

Conclusion

This study surveyed a randomly-selected national sample of 1,274 practicing social workers, seeking to describe their attitudes toward, and engagement in, political action. The results show that slightly fewer than half of the respondents are “highly” politically active, with doctorally-prepared social workers, older social workers, and social workers with more years of practice experience demonstrating greater involvement.

With the exception of voting, behaviors requiring lower levels of commitment were far more common than those requiring higher levels of commitment. Consistent with previous findings, testifying at hearings and campaigning for candidates were among those activities engaged in least frequently. Contrary to the conventional wisdom, the social workers surveyed express little ethical ambivalence about engaging in political action. Most expressed the belief that political action is relevant to their jobs, and that they have an obligation to stay informed about policy changes and to promote policies that benefit their clients. Lack of time may inhibit some social workers from acting on these beliefs. Their comfort with encouraging political activity on the part of their clients is less clear. Respondents were divided about whether they have a role in empowering their clients politically. This is an issue deserving of further discussion and investigation. On the other hand, strong majorities expressed confidence in social workers’ ability to influence policy outcomes. Other studies have found this “psychological engagement” to be a predictor of political involvement.

Most respondents indicated that their social work education stressed the relationship between policy and practice.
Many, however, expressed a desire to learn more about how to impact the political process and felt they needed guidance on integrating political action into their professional roles. Overall, the findings paint a positive picture of the status of social workers in relation to political action. There is certainly room, nonetheless, to strengthen the profession’s hand. It is critical that we persevere in delivering the message that political behavior matters, and that our engagement in the process benefits our clients. Social work education must continue increasing its emphasis on policy practice, incorporating it into courses, assignments, exercises, and field practica. This content should be required of all students, not just those in macro concentrations. Given that social workers in private clinical practice were found to have comparatively low levels of political participation, this exposure may be especially critical for students in clinical concentrations. For all students, early training in policy practice skills could help lay the foundation for greater comfort in integrating political action into the professional role. Meanwhile, the definition of policy practice should be broadened beyond policy advocacy to include electoral politics. CSWE and NASW, respectively, should entertain including references to electoral politics in the Education Policy Statement and the Code of Ethics.

With practicing social workers, we can start by encouraging those who are inactive to take small steps: share their ideas and opinions with friends and neighbors; become active in NASW’s efforts or affiliate with other community groups that engage in advocacy; attend a march or rally; donate to a political action committee, a political campaign, or a cause of their choice; or sport a bumper sticker, button, or yard sign at election time. For many social workers (as for the general public), writing to a legislator, making a lobbying visit, contacting the media, or testifying at a hearing can be very intimidating. As in all social work practice, we should start where the client is. Meanwhile there are plenty of social workers, as evidenced by this study, who do want to know more and do more. Some just need occasional reminders, as demonstrated by the following comment: “This survey makes me feel guilty as hell. I’ll be writing Congress tonight!” Others could benefit from continuing education that provides opportunities for social
work practitioners (including those in private practice and for-profit agencies) to become more knowledgeable about how to influence policy outcomes, how to present testimony at a hearing, how to work with the media, and how to integrate political action into their professional role. In order ensure that the workplace provides the necessary climate to support political activity, administrators and supervisors should be targeted as well, and helped to identify strategies for promoting political engagement without jeopardizing ongoing organizational activities.

Research should continue to examine social workers' political participation and its impact, identifying how we can maximize the effectiveness of that participation in positively influencing policy outcomes. Social workers should become leaders in the current national movement for increased civic engagement. After all, our Code of Ethics exhorts us not only to engage in social and political action ourselves, but to facilitate the political action of the broader society. This article addresses one type of civic engagement: the use of political processes to promote the public good. We must continue to expand our role as visible, credible, and effective agents of social change.

References


Volunteer Patterns of Mid- and Later Life American Couples

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The expectation for older people to volunteer has increased, and married Americans are more likely to volunteer. Drawing on life course and couple decision-making theories, this research examines mid- and later life American couples' volunteer patterns. Ninety-five (95) couples are analyzed to determine characteristics of three groups of couples—both volunteer, neither volunteer, or only one spouse volunteers. Multinomial logistic regression comparing all couples simultaneously finds significant differences. Couples with no volunteers are more likely to report lower joint marital satisfaction and at least one spouse out of the labor force than couples where one spouse volunteers. Couples who have both spouses volunteer are more likely to have a husband with a traditional gender role ideology than those where only one spouse volunteers. Caregiving has no impact on couple volunteering. This paper addresses implications for volunteer recruitment.

Key words: volunteer, couples, mid-life, later life, life course

Volunteering in the United States goes hand-in-hand with family. A recent survey by the American Association of Retired Persons (AARP) found 56% of respondents 45 and older report participating in volunteering activities together with family members (Kutner & Love, 2003). Volunteers are more likely to be married (Independent Sector, 2001b), and married people are more likely to volunteer (Chambré, 1984; Cnaan & Cwikel, 1992; Independent Sector, 2001b; Wilson, 2000). As they enter mid-life and retirement healthier than ever before (Moen & Journal of Sociology & Social Welfare, September 2010, Volume XXXVII, Number 3

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Wethington, 1999) older Americans are expected to be today’s and tomorrow’s volunteers (Chambré, 1993; Seavey, 2005). And because 72% of Baby Boomers are married (Russell, 2001), research into the characteristics related to volunteering patterns of mid- and later life American couples becomes appropriate. The documented expectation that Americans who are retired or in the later stages of life should volunteer (Chambré, 1993; Seavey, 2005; Smith, 2004) is joined by an actual demand for volunteers (Harootyan, 1996; Jirovec & Hyduk, 1998; Minear & Crose, 1996). Many nonprofit organizations depend upon older people to complete their mission, either by elders serving each other (e.g. the Shepherd’s Center), by providing intergenerational contact (e.g. Foster Grandparents) or mobilizing retirees from a specific employer (e.g. National Retirees Volunteer Coalition).

But these expectations that retirees will provide the needed volunteer labor appear unrealistic. No evidence exists that volunteering rates are higher for retirees than their working age mates. Caro and Bass (1997) and Moen and Fields (2002) found that retirement is not associated with higher volunteering rates, and Chambré (1984, 1987) and Einolf (2009) determined retirees were actually less likely to volunteer than their working counterparts. If retirement status is unable to predict volunteering, how then should we investigate later-life volunteering?

This inquiry puts forward the concept that the most fruitful research would focus not solely on the retirement status of an individual, but rather on the interconnectedness between work, volunteering, and family, especially the linked lives of spouses (Moen & Wethington, 1999). Only recently have a small number of researchers begun to investigate volunteering at the household level for any family (Garcia & Marcuello, 2002; Hook, 2004) or older couple households explicitly. Moen, Fields, Meador, & Rosenblatt (2000) provide anecdotal evidence that older couples, especially those where one spouse is retired, are interested in volunteering as a way to spend time together. Butricia, Johnson, and Zedlewski (2009) found volunteers in the Health and Retirement Survey who are married to volunteers are least likely to stop volunteering. Kulik (2002) found Israeli couples stated volunteering had beneficial effects on their marriages and that volunteering behavior varied
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according to the working/retired configuration of the couple. It is telling that retirement/working status is intertwined with volunteering in older couples as both activities revolve around decisions of time allocation that affect the entire household.

Whereas household-level decision-making research in the past concentrated on time spent in employment or household chores, it now extends couple decision-making theory to encompass helping work such as volunteering and caregiving (Hook, 2004; Wilson, 2000). Hook (2004) found time spent in helping work is related to the time the household allocated to other activities, with women more likely to allocate time to helping work than men. Another study considering a household model of volunteering behavior found decision-making at the household level related to time allocation between volunteering, leisure, and work (Garcia & Marcuello, 2002).

This project integrates couple decision-making with volunteering in mid- and later life American couples by employing both couple decision-making and life course theories. Couple decision-making theory conceptualizes that spousal behaviors occur within a broader context of gendered norms, social expectations and marital power relationships (Hook, 2004; Kulik, 1999; Moen & Wethington, 1999; Slevin & Wingrove, 1995; Szinovacz & Davey, 2004). Life course theory situates volunteer behaviors within the dynamics of the couples' jointly lived experience rather than looking at individuals' volunteering in isolation (Matras, 1994; Wilson, 2000). Spouses' lives, roles, and decisions are interdependent (Han & Moen, 1999; Moen, Kim, & Hofmeister, 2001; Smith & Moen, 1998, 2004) with prior experiences shaping subsequent choices (George, 1993; Henretta, O'Rand, & Chan, 1993; Moen & Wethington, 1999). Life course theory also maintains that the importance of a life event is established not solely by the age at which it occurs, but also by its relationship to one's life history of paid work, family, volunteering, and caregiving (Ekerdt, Kosloski, & DeViney, 2000). For instance, retiring more than five years before one's spouse not only impacts one's work trajectory, but one's family trajectory as well.
Conceptual Model

A coherent conceptual model to investigate couples' volunteering behavior incorporates these two theories. Life course theory, with its emphasis on linked lives, assumes joint decision-making within a married couple and that prior decision-making within the couple will affect current decisions. Couple decision-making theory posits preferences, attitudes, and behaviors of an individual member of the couple cannot be assumed to influence or be influenced by the same characteristics that impact joint perceptions of the couple to which they belong. This theory would suggest research must consider husbands' and wives' behaviors and perceptions as distinct from each other, and that these individual behaviors and perceptions also differ from the couples' joint attitudes and behaviors. Using a similar conceptual model including life course and couple decision-making theories, Smith & Moen (2004) found evidence that the couple's joint perception of retirement satisfaction varied in statistically significant ways from each spouse's individual perception with gender differences being important. An analysis of 241 couples found that while retired wives and retired husbands in the sample reported similar levels of retirement satisfaction there were statistically significant disparities in the retirement satisfaction of their spouses and of the joint retirement satisfaction for the couples. For spouses individually, the husband of a retired wife was more likely to be satisfied with her retirement than the wife of a retired husband was satisfied with his retirement. Analysis at the couple level determined that the couple's joint satisfaction with the retiree's retirement was more likely to be associated with couples composed of a retired wife and her husband than with couples of a retired husband and his wife. These differences indicate the utility of investigating couples' perceptions individually and jointly; the current project continues this strand of research. This model allows us to answer the following research questions: Is it possible to distinguish between different couple volunteering patterns? If so, which factors are related to each pattern?

Because of limited research in the area of couple volunteering, the conceptual model also draws from research
on individual volunteering behavior of mid- and later life individuals to see if and/or how they may relate to couples' patterns; other research into altruistic behaviors have also used this approach (Lee, Piliavin, & Call, 1999). Following couple decision-making theory, this model incorporates both individual and couple variables (Miller, Shain, & Pasta, 1991; Smith & Moen, 1998, 2004; Szinovacz & Davey, 2004; Szinovacz, DeViney, & Davey, 2001) which divide the characteristics of interest into four types: control variables, individual characteristics, couple characteristics, and life course placement.

**Control Variables**

Research has given us a clear picture of the typical American volunteer. People with higher education are more likely to volunteer (Caro & Bass, 1995, 1997; Chambré, 1984, 1987; Clary, Snyder, & Stukas, 1996; Cutler & Hendricks, 2000; Goss, 1999; Kutner & Love, 2003; Okun, 1993; Penner, 2002). Better physical and mental health enhances volunteering with limitations due to poor health being negatively related (Caro & Bass, 1995, 1997; Chambré, 1987, 1993; Cutler & Hendricks, 2000; Jirovec & Hyduk, 1998; Okun, 1993). And people who have a religious affiliation and strong spiritual beliefs also report an increased level of volunteering (Becker & Dhingra, 2001; Kutner & Love, 2003; Okun, 1993; Penner, 2002; Perry, 1983).

**Individual Characteristics**

There are other individual characteristics in the literature that have been shown to affect voluntarism but not with as much empirical support as the control variables. The literature is unclear how age impacts volunteering, particularly during mid-life when the transition from work to retirement becomes relevant. After age 55, increased age is negatively related to volunteering (Chambré, 1987; Clary et al., 1996; Independent Sector, 1996, 1998, 1999, 2001a). Yet, there has been some success in increasing voluntarism among older people over the past quarter century (Chambré, 1993); Goss (1999) found the “frequency of volunteering by people older than 60 has risen steadily since the mid-1970s ... (p. 408).”

Some studies find women are more likely to volunteer than
men (Caro & Bass, 1995; Chambré, 1984; Independent Sector, 2001a; Wilson, 2000), but others find no differences based on gender (Cutler & Hendricks, 2000; Goss, 1999; Hook, 2004). Rather than merely gender per se, it may be that volunteering behaviors are influenced by an individual’s gender role ideology—what one considers appropriate activities for men and women. This may be particularly salient for married couples. Husbands who have a traditional gender role ideology may see themselves as the “head of the family” and therefore feel the need to set a good example. Research has found that husbands and fathers who espouse a traditional gender role ideology are often as involved, if not more involved, in their children’s activities than fathers who have a more modern gender role ideology, which they show by volunteering to be soccer coaches or Boy Scout leaders; often this is related to being a member of a religious community (Wilcox & Bartkowski, 1999). There has been no prior research to determine if this relationship between volunteering and gender role ideology continues through mid-life and beyond.

Couple Characteristics

Income is often considered a household characteristic. Those with financial worries are less likely to volunteer (Goss, 1999) and those with greater income are more likely to volunteer (Chambré, 1993; Jirovec & Hyduk, 1998; Okun, 1993; Perry, 1983). Marital satisfaction influences behaviors in later life (Szinovacz & DeViney, 2000). Decision-making history has been found to influence the individual and joint experiences of older couples (Smith & Moen, 2004), so perceptions of the balance of decision-making power between husband and wife may come into play. Decision-making also has a gendered component to it; research has repeatedly confirmed gathering data from both spouses and looking at those data individually as well as jointly is critical to full understanding of the essence of the couple (Dentinger & Clarkberg, 2002; Moen et al., 2001; Smith & Moen, 1998, 2004).

Life Course Placement

Decisions on how to spend time, while not unique to mid- and later life couples, tend to weigh more heavily on this
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group than Americans at other life stages as the planning for or the actual transition to retirement becomes prominent, if not dominant, at this stage (Ekerdt et al., 2000). Additionally, caregiving often takes on greater importance during mid-life (Moen, Robison, & Fields, 1994; Szinovacz et al., 2001) as an activity which may compete with volunteering for the time that is "left over" after attending to job and household responsibilities (Hook, 2004).

Design and Methods

Data come from The Study of Mid-life, a mail survey of randomly selected heads of households aged 50-64 living in a mid-sized Midwestern city. The self-administered questionnaire gathered information on demographics, voluntarism, and retirement. Measures were drawn from sources such as the Health and Retirement Survey (Juster & Suzman, 1995), the Quality of Employment Survey (Quinn & Staines, 1979), and the Cornell Retirement and Well-Being Study (Moen, 1996). The final sample size is 323 for a response rate of 52.5%.

The unit of analysis for this study is the couple. Ninety-eight spouses completed a smaller questionnaire (a response rate of 61%, as 161 of the 323 were married). Three same-sex couples were excluded for a final sample of 190 individuals in 95 husband-wife pairs.

Of the 190 respondents, approximately 91.1% are white, 3.7% are black, 1% are Native or Asian American, and 1.6% Hispanic. Average age of the sample is 55.5 years with a range of 40.6 to 66.2; one-third of the sample (32.1%) falls into the baby boomer cohort with the balance of the sample at the tail-end of the previous cohort. Mean hours worked per week is 42.5 hours. Over three-fourths, 147 (77.4%) are working, with 24 (12.6%) retired, and 19 (10%) other/laid-off-disabled/homemaker. The average length of marriage is 24.5 years with a range between 2.5 and 46.4 years; this is the first marriage for both spouses in half (52.6%) of the couples. Just over half (53.2%) have volunteered in the last two years, in line with national averages of 50.3% for the 55-64 age group (Independent Sector, 1998, 1999).
Dependent Variable

Due to the nature of the question asked in the survey, volunteering is defined in this analysis as allocating time to a formal organization only. "Currently volunteering" is coded one (1) if the individual respondent indicates volunteering in the last two years. The dependent variable created from this information has four possible configurations: (1) neither spouse volunteers; (2) the husband volunteers; (3) the wife volunteers; or (4) both spouses volunteer. Due to the small numbers in the husband-only and wife-only groups, these two are combined.

Independent Variables

Control Variables

The range of the original education variable is between 1 = some high school and 5 = graduate/professional school. The measure used collapses the sample into less than college (coded 0) and college graduate or more (coded 1). The physical health measure is the response to the question: "On a scale of 0 to 10, where 10 represents a person in the very best health and 0 represents a person with very serious health problems, which number indicates how your health has been lately?" To represent mental health, this study uses the age-appropriate 7-item "attitude toward own aging" subscale of the Philadelphia Geriatric Morale Scale (Lawton, 1972) with the respondent answering yes or no to questions such as: "Things keep getting worse as I get older" (No = 1/0) and "I have as much pep as I did last year" (Yes = 0/1). The scores were summed. The Chronbach's alpha is .76, indicating an acceptable level of reliability. Involvement with a religious group also is related to volunteering. A respondent indicating religious activity attendance twice a month or more is coded 1, with all others coded 0. Another item captures the importance (coded 1) or unimportance (coded 0) of self-reported spiritual beliefs.

Personal Characteristics

The age of the respondents is included because the relationship between age and volunteering rates is unclear. To ascertain what, if any, gendered aspects there are to volunteer behavior, a gender role ideology scale is included. It sums the
scores of four questions concerning roles at home and work (Moen, 1996). With respect to gender role ideology, those with high scores are labeled “modern,” and those with low scores are labeled “traditional.” A Chronbach’s alpha of .74 indicates acceptable reliability.

**Couple Characteristics**

For household income, respondents chose an income range that indicates their current situation; the household is then assigned the midpoint of the scale. Marital satisfaction is captured with the item, “All things considered, how satisfied are you with your marriage?” Individuals’ responses could range from completely satisfied to not at all satisfied. A joint satisfaction variable sums the scores of both spouses with higher scores for all measures representing a greater level of marital satisfaction. The couple decision-making measure comes from Huber and Spitze (1983) and assesses the amount of relative power the respondent perceives in decisions surrounding the amount of time the couple spends together. Possible responses are: (1) you have much more say; (2) you have more say; (3) you and your spouse have equal say; (4) your spouse has more say; and (5) your spouse has much more say. A high value indicates one thinks one’s spouse has more say. A joint measure that indicates the spouses agree on whomever has more say is also included in the analyses, because agreement on the perception of who has more power in this area of decision-making might carry more weight than an individual spouse’s own perception. Other questionnaire items ascertain marriage length and whether or not it is the first marriage for husband, wife, or both.

**Life Course Placement**

Being a caregiver is often salient at this stage of the life course when possibly both children and elderly parents are in need of assistance. Respondents self-report their caregiver status by indicating that they have responsibilities for persons who live with their household or who live somewhere else. In addition, time allocation decisions vary tremendously based on whether one is employed for pay, or retired, or “other” (laid-off, disabled, homemaker, student, etc.). For 18 couples,
## Table 1. Variable Descriptions

<table>
<thead>
<tr>
<th>Variable</th>
<th>% (n)</th>
<th>M (SD)</th>
<th>Range</th>
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</thead>
<tbody>
<tr>
<td><strong>Dependent Variable</strong></td>
<td></td>
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<tr>
<td>Couple volunteer patterns</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neither spouse volunteers</td>
<td>30.1% (28)</td>
<td>7.64 (1.78)</td>
<td>3-10</td>
</tr>
<tr>
<td>Only one spouse volunteers</td>
<td>33.3% (31)</td>
<td>7.7 (1.99)</td>
<td>0-100</td>
</tr>
<tr>
<td>Both spouses volunteer</td>
<td>36.6% (34)</td>
<td>15.44 (2.96)</td>
<td>5-20</td>
</tr>
<tr>
<td><strong>Control Variables</strong></td>
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<td></td>
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<tr>
<td>Gender</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>0 = Female</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 = Male</td>
<td>50%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education (A college degree or more)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Education</td>
<td>68.4% (64)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s Education</td>
<td>58.9% (56)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both Education</td>
<td>51.6% (49)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subjective Health*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Health</td>
<td>56.41 (4.83)</td>
<td>3.71 (.78)</td>
<td>1.5-5</td>
</tr>
<tr>
<td>Wife’s Health</td>
<td>54.60 (5.12)</td>
<td>4.17 (.86)</td>
<td>1.5-5</td>
</tr>
<tr>
<td>Both Health</td>
<td>4.31 (.83)</td>
<td>8.48 (1.48)</td>
<td>2-10</td>
</tr>
<tr>
<td>Attitude toward Aging*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Attitude</td>
<td>5.52 (1.62)</td>
<td>5.52 (1.62)</td>
<td>1-7</td>
</tr>
<tr>
<td>Wife’s Attitude</td>
<td>5.30 (1.93)</td>
<td></td>
<td>0-7</td>
</tr>
<tr>
<td>Both Attitude</td>
<td>10.82 (2.88)</td>
<td></td>
<td>2-14</td>
</tr>
<tr>
<td>Religious attendance*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Attendance</td>
<td>43.2% (41)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s Attendance</td>
<td>52.6% (50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both attendance</td>
<td>15.44 (2.96)</td>
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<td></td>
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<tr>
<td>Spiritual beliefs*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Spirituality</td>
<td>42.1% (40)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s Spirituality</td>
<td>56.8% (54)</td>
<td></td>
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<tr>
<td>Both Spirituality</td>
<td>33.7% (32)</td>
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<td></td>
</tr>
<tr>
<td><strong>Personal Characteristics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>January 1999 Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Age</td>
<td>56.41 (4.83)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s age</td>
<td>54.60 (5.12)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender role ideology*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s ideology</td>
<td>3.71 (.78)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s ideology</td>
<td>3.83 (.97)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Couple Characteristics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household income</td>
<td>$87,727</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marital satisfaction*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Satisfaction</td>
<td>4.31 (.83)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s Satisfaction</td>
<td>4.17 (.86)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both Satisfaction</td>
<td>8.48 (1.48)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decision-making on time spent together*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Decision-Making</td>
<td>3.08 (.613)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s Decision-Making</td>
<td>2.93 (.688)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both Agree on who has more say</td>
<td>69.5% (66)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Marriage</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s First Marriage</td>
<td>66.3% (63)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s First Marriage</td>
<td>66.3% (63)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both First Marriage</td>
<td>52.6% (50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Years Married</td>
<td>24.64 (11.29)</td>
<td>15.44 (2.96)</td>
<td>2-10</td>
</tr>
<tr>
<td>Life Course Placement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caregiver</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s Caregiving</td>
<td>30.5% (29)</td>
<td>10.82 (2.88)</td>
<td>1-5</td>
</tr>
<tr>
<td>Wife’s Caregiving</td>
<td>46.3% (44)</td>
<td></td>
<td>1-5</td>
</tr>
<tr>
<td>Both Caregiving</td>
<td>20.0% (19)</td>
<td></td>
<td>1-5</td>
</tr>
<tr>
<td>Retirement/work status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both working</td>
<td>63.2% (60)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Only one working</td>
<td>28.4% (27)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neither working</td>
<td>8.4% (8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*10 = Very best health; 7 = Great attitude; 2 or more times a month; *Very important to daily life; *5 = Modern, 1 = Traditional; 5 = Completely satisfied; 1 = Self has more say, 3 = Equal, 5 = Spouse has more say.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
at least one spouse indicates doing something other than working for pay but not describing themselves as retired. The couples in which at least one spouse indicates being retired or "other" are considered "not working" and coded zero (0) while couples where both work for pay are coded one (1). See Table 1 for descriptions of the sample.

**Analytic Strategy**

Analyses explore which characteristics are related to the three possible couple volunteering groups: (1) no one volunteers (NV); (2) only one spouse volunteers (OSV); or (3) both spouses volunteer (BV). Multivariate analyses determine which covariates contribute the most to the model's ability to predict membership in a particular group. To maintain theoretical consistency and allow comparisons across analyses, identical covariates are used in all multivariate analyses. Keeping with the conceptual model, at least one variable from each of the four types of independent variables is included in the full model.

Because of the relatively small sample size, it is necessary to be judicious in the number of covariates in the regression model. Extensive bivariate statistical and other preliminary analyses were conducted to get a more thorough understanding of the relationships among the independent variables themselves and between the independent variables and the dependent variable. It was determined the covariates best suited for inclusion in the multivariate model are: wife's age (control), husband's gender role ideology (personal characteristics), wife's time-allocation decision-making feelings (couple characteristics), joint marital satisfaction (couple characteristics), and joint working status (life course placement).

It is beyond the scope of this article to present all bivariate results; however, due to the inclusion of the unique variable "husband's gender role ideology" in the multivariate model, a discussion of the process by which it was decided to include it is warranted. There is a relatively large negative correlation between husband's attendance at religious services and husband's gender role ideology (correlation coefficient = -.34, p ≤ .01) meaning that frequent attendance at services is related to a more traditional gender role ideology. So to avoid issues of multicollinearity in the model and due to previous
literature indicating these concepts are related, it was necessary to choose only one of the two to include in the final model. Focusing on the absolute values, the religious attendance variable was more highly correlated with the dependent variable (.32, p ≤ .01) than the gender role ideology (-.25, p ≤ .05), therefore to avoid overlap between a covariate and the dependent variable, the variable the least correlated with the dependent variable, gender role ideology, was included as a covariate in the model.

Two binary logistic regressions are used to predict membership in the two groups in which couples display "congruent" behavior: (1) couples where no one volunteers (NV) compared to the others and (2) couples where both spouses volunteer (BV) compared to the others. Multinomial logistic regression is then employed to determine if differences exist between an even more detailed division of couple patterns—couples where only one spouse volunteers (OSV) and the NV and BV couples. Two advantages to using the multinomial logistic regression include the opportunity to compare the OSV couples with each of the other two groups simultaneously (Long, 1997) as well as the advantage of using the power of the full sample (n=93) when determining the traits that establish membership in the three groups.

For the two binary logistic regressions, five models are estimated: (1) control variables only; (2) personal characteristics only; (3) couple characteristics only; (4) life course placement variables only; and (5) the full model with control, personal characteristics, couple characteristics, and life course placement variables. For the multinomial regression, only the full model is reported. The logged odds are presented in the tables as they are more easily interpreted than logistic regression coefficients. Because of the originality of investigating couple volunteering behavior, both covariates statistically significant (p ≤ .05) and those trending toward significance (p ≤ .10) are reported and discussed.

Results

The couples fall into three groups of roughly equal size: neither spouse volunteers (NV) in 30.1% of the couples (n=28),
both spouses volunteer (BV) in 36.6% of the couples (n=34), and only one spouse volunteers in 33.3% of the couples (n=31). The wife volunteers in 20 out of 31 of the OSV couples. The ability to conduct inferential statistical analysis is enhanced by this fairly even distribution of the sample.

Table 2. Binary Logistic Regression Comparing NV Couples vs. BV & OSV Couples

<table>
<thead>
<tr>
<th>Variables</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
<th>Model 4</th>
<th>Full Model 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Control Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s education</td>
<td>.38†</td>
<td>.32†</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(-.96)</td>
<td>(-1.13)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s attitude toward aging</td>
<td>.80</td>
<td>.83</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(-.23)</td>
<td>(-.19)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Personal characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s age</td>
<td>1.16**</td>
<td></td>
<td></td>
<td>1.13†</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.15)</td>
<td></td>
<td></td>
<td>(.12)</td>
<td></td>
</tr>
<tr>
<td>Husband’s gender ideology</td>
<td>1.41</td>
<td></td>
<td></td>
<td>1.64</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.34)</td>
<td></td>
<td></td>
<td>(.49)</td>
<td></td>
</tr>
<tr>
<td><strong>Couple characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s decision-making on time spent together</td>
<td>2.05†</td>
<td>2.26†</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.77)</td>
<td>(.82)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Combined marital satisfaction</td>
<td>.64*</td>
<td>.59*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.44)</td>
<td>(.53)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Life course placement</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both working</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>(1.02)</td>
<td>(-10.28**)</td>
<td>(1.77)</td>
<td>(.15)</td>
<td>(1.12)</td>
</tr>
<tr>
<td>Hosmer Lemeshow goodness of fit</td>
<td>2.69</td>
<td>9.66</td>
<td>1.28</td>
<td>0</td>
<td>11.52</td>
</tr>
<tr>
<td>-2 log likelihood</td>
<td>106.40</td>
<td>104.35</td>
<td>102.09</td>
<td>102.89</td>
<td>82.34</td>
</tr>
<tr>
<td>Model chi square</td>
<td>7.39*</td>
<td>9.44**</td>
<td>11.70**</td>
<td>10.90***</td>
<td>31.45***</td>
</tr>
<tr>
<td>model df</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>N</td>
<td>93</td>
<td>93</td>
<td>93</td>
<td>93</td>
<td>93</td>
</tr>
</tbody>
</table>

Note: Data are given as odds ratios, with coefficients in parenthesis.
† = p ≤ .10; * = p ≤ .05; ** = p ≤ .01; *** = p ≤ .001.

Binary logistic regression compares NV couples to the combination of BV and OSV groups to determine any characteristics that are related to no one volunteering vs. any volunteering whatsoever in the couple. Table 2 shows all four partial models and the full model are statistically significant, indicating this constellation of covariates are indeed related to couple volunteering group membership. Within each partial model, at least one of the individual covariates is either statistically
significant or trends toward significance. When combining all covariates in the full model, these same variables continue to contribute to the ability to predict NV couples. The lower the husband’s education, the older the wife, and the lower the amount of the wife's perception of her own power in couple decision-making, the more likely a couple will have neither spouse volunteering. A lower joint marital satisfaction score and at least one spouse not working have even greater influence in predicting that no one volunteers in a couple.

Table 3. Binary Logistic Regression Comparing BV Couples vs. NV & OSV Couples

<table>
<thead>
<tr>
<th>Variables</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
<th>Model 4</th>
<th>Full Model 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Control Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s education</td>
<td>1.90</td>
<td>2.86†</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.64)</td>
<td>(1.05)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s attitude toward aging</td>
<td>1.37†</td>
<td>1.37†</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.31)</td>
<td>(.32)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Personal characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s age</td>
<td>.93</td>
<td>.94‡</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(-.07)</td>
<td>(-.06)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s gender ideology</td>
<td>.47*</td>
<td>.40**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(-.76)</td>
<td>(-.93)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Couple characteristics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s decision-making on time spent together</td>
<td>.64</td>
<td>.66</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(-.45)</td>
<td>(-.41)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Combined marital satisfaction</td>
<td>1.23</td>
<td>1.08</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(.21)</td>
<td>(.08)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Life course placement</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both working</td>
<td></td>
<td></td>
<td>1.24‡</td>
<td>1.13</td>
<td>1.13</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>(21)</td>
<td>(12)</td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>(-2.79**)</td>
<td>(6.17*)</td>
<td>(-1.07)</td>
<td>(-.69)</td>
<td>(4.02)</td>
</tr>
<tr>
<td>Hosmer-Lemeshow goodness of fit</td>
<td>4.17</td>
<td>6.24</td>
<td>3.54</td>
<td>0</td>
<td>8.88</td>
</tr>
<tr>
<td>-2 log likelihood</td>
<td>115.58</td>
<td>113.37</td>
<td>118.58</td>
<td>121.89</td>
<td>103.77</td>
</tr>
<tr>
<td>Model chi square</td>
<td>6.54*</td>
<td>8.75*</td>
<td>3.54</td>
<td>.23</td>
<td>18.35**</td>
</tr>
<tr>
<td>model df</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>N</td>
<td>93</td>
<td>93</td>
<td>93</td>
<td>93</td>
<td>93</td>
</tr>
</tbody>
</table>

Note: Data are given as odds ratios, with coefficients in parenthesis.
† = p ≤ .10; *= p ≤ .05; **= p ≤ .01; ***= p ≤ .001.

Binary logistic regression analysis comparing BV couples to a combination of NV and OSV couples finds only two of the four partial models—control variables and personal
characteristics—statistically significant (see Table 3.) The full model is statistically significant, with a husband’s higher education and positive attitude towards aging trending toward significance and a more traditional gender role ideology for the husband significantly more likely to be present in couples where both spouses volunteer.

Table 4. Multinomial Logistic Regression Comparing OSV Couples vs. NV Couples and BV Couples

<table>
<thead>
<tr>
<th>Variables</th>
<th>Compared to no one volunteers (NV)</th>
<th>Compared to both volunteer (BV)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Control Variables</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husband’s education</td>
<td>.48 (.74)</td>
<td>2.06 (.72)</td>
</tr>
<tr>
<td>Husband’s attitude toward aging</td>
<td>.94 (.06)</td>
<td>1.33 (.29)</td>
</tr>
<tr>
<td><strong>Personal characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s age</td>
<td>1.12 (.12)</td>
<td>.97 (-.28)</td>
</tr>
<tr>
<td>Husband’s gender ideology</td>
<td>1.00 (.00)</td>
<td>.40* (-.93)</td>
</tr>
<tr>
<td><strong>Couple characteristics</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wife’s decision-making on time spent together</td>
<td>2.22 (.80)</td>
<td>.92 (-.08)</td>
</tr>
<tr>
<td>Combined marital satisfaction</td>
<td>.55* (.59)</td>
<td>.85 (-.16)</td>
</tr>
<tr>
<td><strong>Life course placement</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both working</td>
<td>.19* (-1.68)</td>
<td>.49 (-.71)</td>
</tr>
<tr>
<td>Constant</td>
<td>(-1.9)</td>
<td>(4.98)</td>
</tr>
<tr>
<td>Hosmer Lemeshow goodness of fit</td>
<td>4.17</td>
<td>6.24</td>
</tr>
</tbody>
</table>

Note: Data are given as odds ratios, with coefficients in parenthesis.

- $p \leq .10$; * $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

Multinomial logistic regression allows use of the whole sample to compare OSV couples with NV and BV couples separately yet simultaneously. Table 4 indicates the full model is statistically significant at a high level suggesting the full model does a good job of determining which factors influence membership in each of the three groups. Of particular interest,
the results indicate individual covariates that are statistically significant in their ability to discriminate between NV couples and OSV couples are not the same as the covariate which distinguishes OSV couples from BV couples. NV couples have significantly lower joint marital satisfaction and are significantly more likely to have at least one spouse not working for pay than OSV couples. On the other hand, husbands of OSV couples are less likely to report traditional gender role ideologies than husbands in BV couples.

Discussion

This study makes a noteworthy contribution to the nascent research on volunteering patterns of mid- and later-life American couples. Primary results suggest there exist characteristics that can and do distinguish the three possible volunteer patterns of these couples and that life course and couple decision-making theories are useful in exploring volunteering among couples.

Each of the three groups of couples has a unique collection of attributes. Compared to couples where at least one spouse volunteers (OSV & BV), NV couples are more likely to report lower, on average, joint marital satisfaction and are more likely to have at least one spouse out of the labor force. These two variables maintained their significance in all partial and full models, indicating that even when controlling for other factors, these are central indicators of couples with no volunteering.

In addition, the binary logistic regression finds that BV couples also can be distinguished from the other two types of couples (NV & OSV). Husbands in BV couples are over 2½ times more likely to have a college degree and are also more likely to report a positive attitude toward aging and display, on average, the most traditional gender role ideologies over all three groups of couples. Moreover, the multinomial analyses show it is possible to further differentiate BV couples from couples where at least one spouse volunteers (OSV). The more traditional the gender role ideology held by the husband, the more likely for couples in which anyone volunteers to report that both spouses volunteer. This is an intriguing finding. Preliminary analyses which assessed the relationships amongst
the independent variables found traditional gender role ideology for a husband was highly positively correlated with his frequent religious service attendance. This finding may indicate that a husband’s volunteering in a BV couple as well as his religious behavior are both related to a traditional gender-role ideology. The husband may consider himself the head of the family, with his involvement in a religious community and volunteering as ways of fulfilling that role. This is in line with other research that has shown men who are involved in religious organizations often provide leadership for the voluntary organizations in which other family members participate (Wilcox & Bartkowski, 1999).

A spouse must negotiate a complex set of dynamics when making decisions about how to spend time; these analyses confirm that volunteer behavior is yet another issue regulated by these negotiations, suggesting couple decision-making theory is an appropriate theoretical perspective to use when investigating this topic. Particularly for mid- and later-life couples, allocating time to volunteering may have complex decision-making processes associated with it. Some couples might relish the opportunity to spend time together, while others might see volunteer work as a way to maintain a separate identity outside of the relationship; future research could determine under what conditions each argument holds more weight.

The importance of the configuration of working/not working status in distinguishing NV couples from all other couples and its non-importance in identifying the other two groups signifies that volunteering patterns within a couple are indeed a product of the spouses’ linked lives. This makes life course theory relevant to investigating older couples’ volunteering.

Another interesting finding is that caregiving has no influence on couple volunteering patterns. Some researchers have considered the time spent in caregiving as synonymous with the time spent in volunteering as both of these activities are altruistic and outside the time allocated to work and household duties (Hook, 2004). This current analysis, as well as other research on caregiving and volunteering of older Americans (Burr, Choi, Mutchler, & Caro, 2005) however, suggests they
are two distinct categories of time allocation and should be analyzed separately.

Implications for Volunteer Recruitment

The results of these analyses can be extrapolated to provide recruitment strategies for organizations that rely on mid- and later life volunteers. First and foremost, this project reinforces the fact that specifically targeting retirees as a group of potential volunteers is an approach which might limit success. Indeed, having at least one person out of the labor force was actually indicative of couples where no one volunteers (NV couples) and had no ability to predict membership in the couples where any volunteering occurred. Lack of interest in intensive volunteering by retirees has also been remarked upon by other mid- and later-life civic engagement leaders. Marc Freedman (2007) found older Americans looking to make a mark in the not-for-profit sector in their second half of life are more interested in paid employment rather than volunteering, and Phyllis Moen proposes retired Americans are interested in “not so big jobs” (Moen, 2007) rather than volunteer opportunities; crafting volunteer recruitment strategies focusing solely on retirees swims against the wave of evidence that retirees do not plan to donate their time to altruistic behaviors only.

Focusing on recruitment implications of the differences between the couple volunteering patterns specifically, the unique finding that the husband’s traditional gender role ideology is significantly related to a couple’s membership in the BV group in all models that include it suggests it is worth exploring how to use this information for recruitment. Of course, there is no suggestion of trying to change anyone’s gender role ideology; rather organizations can leverage this knowledge to fashion the most effective recruitment tactics. One concrete suggestion would be for organizations interested in volunteers to start their recruiting efforts at places of worship. Many organizations already do this. For example, a food bank might approach a church to have a group of parishioners donate time as a group for sorting packages. Other organizations may wish to consider this type of recruitment, as these current research findings suggest many husbands who volunteer are often
Volunteer Patterns of Couples

members of a religious community.

On the other extreme, these results also offer some clues as to how to reach out to spouses who do not volunteer at all in the NV couples. There seem to be many attributes unique to the couple context that impact volunteering. The lower the amount of the wife’s perception of her own power in couple decision-making, the more likely a couple will have neither spouse volunteering. A lower joint marital satisfaction score and at least one spouse not working have even greater influence in predicting that no one volunteers in a couple. Organizations could create a recruitment campaign by focusing on the positive benefits volunteers have on the community (Mellor et al., 2009). If wives feel they have little decision-making power in these couples, volunteering may provide an avenue to increase their feelings of empowerment. Feeling they have the power to affect positive change in the community may be a motivation for these wives to volunteer.

The limitations of small sample size and the lack of ethnic diversity are acknowledged. In the future, a larger, more diverse sample should be used to determine if the measures which are statistically significant or approach significance in this small sample retain their significance with a larger sample. In addition, these data are incomplete because they fail to provide information on whether or not the spouses in BV couples volunteer together or separately. A research project that would logically grow from these findings would be to gather data on whether spouses in couples where both of them volunteer do so together or separately. The Kutner and Love AARP study (2003) appears to be the only survey that even touches on the linked lives of volunteers by gathering data on whether a respondent volunteers together with a family member. Even though the respondent does not specify the family relationship (spouse, parent, child, etc.), this is an important step forward for research which seeks to capture the complexity of the volunteer experience.

At a time when there is a growing recognition that volunteering is merely one part of a complex cluster of individual philanthropic decisions, such as the relationship between one’s volunteering and monetary donations (Apinunmahakul, Barham, & Devlin, 2009), it is essential to acknowledge married
couples’ experiences of linked lives and to expand the investigation into charitable activities to include the intertwining of spouses’ volunteering behaviors. These results suggest that investigating couples’ and, more generally, family volunteering patterns may be a fertile and important aspect of future volunteer research in the United States. Add to this information that most American volunteers are married (Independent Sector, 2001a) and—as demonstrated by these results—it is possible to determine the attributes that distinguish couple patterns of volunteering, and one can begin to see the potential of this area of volunteering research. As the Baby Boomers occupy the mid-life life stage and beyond, researchers and policy makers alike must continue to explore ways to encourage them to either start or continue to engage in productive civic work. By more fully understanding how spouses and other family members jointly organize their volunteering activities, all of society can reap the benefits.

References


Volunteer Patterns of Couples


Bringing the Organization Back In: 
The Role of Bureaucratic Churning in Early TANF Caseload Declines in Illinois

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Welfare reform legislation in the late 1990s lead to rapid declines in state welfare caseloads. In contrast to prevailing accounts that emphasize rapid job creation and those that pin caseload declines on successful work incentives and behavioral sanctions, this article argues that organizational rationing mechanisms explain a large portion of the sharp initial declines in Illinois. The article first highlights how street-level bureaucratic practices oriented toward caseload reduction arose in TANF implementing bodies from a reordered and narrow set of organizational incentives that had little to do with the symbolic goals of welfare reform. Based on an analysis of state-level administrative statistics and formal interviewing and fieldwork in welfare offices and community-based organizations, this article finds that bureaucratic churning, gate-keeping, and other forms of service rationing significantly sped exits from and slowed entrances to welfare in the decisive first three years of TANF implementation.

Key words: welfare reform, poverty, organizations, policy implementation, churning

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) initiated a fundamental reorganization of the U.S. welfare system away from entitlement-based assistance and towards time-limited, work-oriented temporary assistance. Replacing Aid to Families with Dependent Children (AFDC), the new Temporary Assistance to Needy Families (TANF) block grant aimed to foster self-sufficiency...
and personal responsibility and end long-term welfare dependency among the welfare poor. Since implementation began, welfare caseloads, to the astonishment of observers across the political spectrum, have dropped at unprecedented rates. According to the Administration for Children and Families, the total family caseload in Illinois decreased from 188,069 in July 1997 (Administration for Children and Families [ACF], 2008a), the first month of TANF implementation, to 72,175 in July 2000 (ACF, 2008b), a remarkable decrease of 115,894 or 61.6 percent, in three years. As of March 2008, the total number of families receiving TANF cash assistance was 24,559, a startling 86.9% reduction from the initial TANF figure (ACF, 2008c). ACF lists Illinois as third, behind only Oklahoma and the District of Columbia, in caseload reduction percentage since enactment (ACF, 2008c).

Post-TANF literature reviews point inconclusively to the policy changes of welfare reform, non-welfare policy changes, the sustained economic expansion, and interaction effects as reasons for the caseload reductions, and note the wide variation across the literature in regards to which causal factors are emphasized (Bell, 2001; Blank, 2002; Danziger, 1999; Primus et al., 1999). Some studies have emphasized the relative importance of economic over policy-related factors (Klerman & Danielson, 2004; Klerman & Haider, 2004). Many studies of the post-TANF era, however, contend that policy-related changes played a more significant role in the accelerated caseload decline of the late 1990s (Moffitt, 1999, 2001; Schoeni & Blank, 2000; U.S. Council of Economic Advisors, 1997, 1999).

Conservative commentators have argued that caseload declines are the result of rigorous policy changes that demand more from the poor. Rector and Youssef (1999) and Michael New (2002, 2006) claim that the strength of state sanctioning policies played a much larger role than the strength of the state economy and state TANF benefits levels in forcing caseload numbers down. Likewise, Robert Moffitt (2003) argues that nonfinancial factors, including work and other requirements, sanctions, and diversion were primary causal forces in caseload reductions. And to explain caseload declines in Wisconsin, Lawrence Mead (1998) concludes that the "main instrument of change" was "public authority" and concluded, "politics, not
economics, remains the master science” (p. 31).

The post-TANF welfare system of the late 1990s was also characterized by a broader array of work supports, including childcare and transportation support, the delinking of Medicaid from cash assistance, expansion of the Earned Income Tax Credit, and an increase in the federal minimum wage to $5.15 per hour in 1997. These policy factors have received less attention as possible determinants of TANF caseload declines, in part because of the complexity of measuring their effects. For instance, in evaluating the EITC as a positive work incentive, economic studies have found that the EITC increases labor force participation (Dickert, Hauser, & Scholz, 1995; Eissa & Hoynes, 2005; Eissa & Liebman, 1996; Liebman, 2002; Meyer & Rosenbaum, 1999, 2000). However, these studies are able only, as one study puts it, to “imply a reduction in transfer program participation” (Dickert et al., 1995, p. 42).

As Bell (2001) notes, none of these studies have been able to convincingly “tie caseload declines to individual welfare reform components” (p. ii) such as time limits, work sanctions, earning disregards, work requirements, family caps, tightened work exemptions, or related non-welfare policy changes. Even tentative findings of strong policy influence have later been called into question by new methods, models, and assumptions. Important as they are, these studies ought to be considered “first-level analyses” (p. 59) because they are limited by methodological constraints, including their reliance on aggregate state-level data and key modeling assumptions.

Despite problems pinning down the reasons, TANF implementation clearly has had a dramatic impact on welfare caseloads independent of the sustained economic expansion of the late 1990s and non-TANF policy changes. My argument asserts that the reason analysts cannot specify the policy factors that drove caseload decline is because critical policy differences between states and localities cannot be easily coded and modeled. As such, prevailing evaluative models, useful as they are, overlook the street-level mechanisms of the policy implementation process that helped to produce these dramatic results.

In this article I employ a mixed methods approach to the puzzle of the rapid, early caseload declines in Illinois. I
examine state-level administrative statistics for a broad overview of caseload movement and then draw upon two years of ethnographic fieldwork and interviewing in community-based, welfare-to-work organizations and local area welfare offices to examine the initial period of TANF implementation from 1997 to 2000. In my research I attended a month-long, full-day welfare-to-work program in two community-based organizations (CBOs), attended one year of meetings of CBO leaders at the Chicago Jobs Council, and interviewed twelve caseworkers and mid- to high-level administrators at the Illinois Department of Human Services (IDHS). Additionally, I conducted 20 formal, in-depth interviews with low-income women in their homes after the welfare-to-work programs we attended were complete. Likewise, in informal conversations during small group outings to McDonald’s, the welfare office, or on errands to K-mart, participants reflected on their experience of welfare reform with each other and with me. During this two-year period, I also interacted with welfare-to-work participants and service deliverers as an adult literacy volunteer in the two CBOs I studied. This mixed methodology highlights the limitations of conventional policy analysis that relies on testing the discrete “inputs” and “outputs” of policy. By “bringing the organization back in,” my analysis provides a unique vantage point from which to view the “black box” of implementation; that is, how policy results are achieved by and in organizations.

In this article I first contend that it is necessary to examine organizational incentives and rationing mechanisms to understand fully how TANF caseloads dropped in such remarkable numbers in such a short period of time. In this first section I demonstrate how PRWORA reordered organizational and individual incentives at IDHS, local area welfare offices, and community-based organizations. Though based on high rhetoric of improving the character and circumstances of the poor, implementing this vision required dramatic simplifications to make the welfare poor “legible” to the state. These simplifications set welfare reform on a particular trajectory that ignored the complexities of the lives of the poor and set the bureaucratic mechanisms of reform in motion, searching out the most efficient means to achieve its narrow ends. I then examine the
initial phases of TANF implementation in Illinois and demonstrate that welfare recipients were shed from cash assistance rolls largely through bureaucratic churning, gate-keeping, and other forms of service rationing that sped exits from and slowed entrances to TANF. These organizational processes, because they are difficult to quantify, go largely unmeasured in most analyses of TANF caseload declines. This analysis, then, entreats welfare scholars to consider how the state “saw” the poor during the initial reform and how its implementing bodies made this vision a reality at the street-level. Further, it questions arguments that claim women left the rolls because of increased income or because they had learned the “moral lessons” of PRWORA. Finally, I discuss the social implications of welfare reform for low-income women and children given how caseload declines were achieved.

The Post-PRWORA Organizational Incentive Structure: IDHS, Local Area Offices, and Community-Based Organizations

Though based on ideals of improving the character (for conservatives) or circumstances (for liberals) of poor people, welfare reform was ill-equipped to address either. If taken seriously, the goals of welfare reform are utopian in scope, assuming a transformative power of the state to reengineer the poor into self-sufficient, responsible, obedient, and, consequently, upwardly mobile subjects. As James C. Scott argues in Seeing Like a State, such sweeping ambitions for the nation-state have emerged only recently historically, but are now commonplace (Scott, 1998, p. 92). These bold interventions, however, require massive simplifications so the target population is “legible” to state officials. “Seeing like a state” necessitates the creation of abridged maps that do not “successfully represent the actual activity of the society they depicted, nor were they intended to; they represented only that slice of it that interested the official observer” (Scott, 1998, p. 3). These maps, when allied with state power, allow the reality they depict to be remade in a particular way. In the case of welfare reform, the complexities of the lives of the welfare-reliant poor were ultimately seen by the state in the narrow terms of work participation rates
and caseload reduction quotas. These abridged maps and their corresponding performance metrics and incentives set TANF implementing bodies searching out the most efficient means to achieve their narrow ends.

Though PRWORA devolved power to states, it set out rigorous objectives concerning work participation rates and caseload reductions that redefined the incentive structure for the Illinois Department of Human Services, local area welfare offices, and community-based organizations. In 1997, the first year of implementation, 25 percent of the TANF caseload had to be participating in "employment-related activities" for a minimum of 20 hours per week. A state could have its allocation of federal funds reduced if it failed to meet work participation rates. There was, however, an important way in which states could significantly lower these requirements. For every percentage point a state lowered its TANF caseload, a percentage point was taken off the work participation rate requirement. That is, if a state lowered its caseload 15 percent in the first year, it lowered it work participation rate requirement from 25 percent to 10 percent. The law demanded, therefore, that states either put a certain percentage of their caseload to work or reduce their caseload by so many percentage points, which counted as the same thing. The legislation, therefore, posed a rather straightforward choice for state and local welfare administrators: do something that is onerous and expensive (prepare low-skilled, mostly single mothers for work and place them in jobs) or something that is quick and inexpensive (canceling cases through tightening and strictly enforcing eligibility rules and other rationing methods).

In the 1990s community-based organizations were entrusted with a much broader role in the delivery of welfare-to-work services (Salamon, 1995). Their close involvement with state welfare administrations, however, has circumscribed their organizational autonomy and has aligned their organizational interests with those of the state (Smith & Lipsky, 1993). While some states paid CBOs on a cost-reimbursement basis, in Illinois there was a dramatic move toward "pay-per-performance" or "performance-based" contracting in the 1990s. Contracts were designed to hold community-based providers accountable for each client referred to them and to ensure that
they were “responsive to IDHS’s quotas and demands,” according to the IDHS administrator in charge of state contracts with CBOs. Providers that “billed out”—that met all of the terms of their contract by placing people in jobs or at least getting them off the rolls—were preferred and given more referrals. In the initial years of implementation, IDHS revised contracts each year to include less funding for longer-term services (e.g., adult literacy, mental health counseling, domestic violence programs, substance abuse programs) and more for “quick attachment” or “work first” job readiness programs. And since IDHS writes, arbitrates, and monitors its contracts with CBOs, service providers had little bargaining power. With these incentives in place, both sets of actors had an organizational stake in cycling welfare recipients quickly through welfare-to-work channels, rather than educational or social service providers, to meet statistical and financial demands as defined under PRWORA. In one Chicago survey, for instance, only one of 358 non-working welfare clients was referred to a domestic violence agency, while 164 were sent to job search workshops. Only eight were referred to substance abuse programs and two to mental health services, while 113 were sent to job readiness skills training workshops (Work, Welfare, & Families, 2000).

The incentive structure established under PRWORA, therefore, was designed to trim caseloads regardless of whether or not welfare recipients were moving toward economic self-sufficiency. The symbolic ideals of personal responsibility and self-sufficiency served the implementing bodies well in public relations efforts touting welfare reform’s “success stories.” But those ideals remained abstractions to organizational actors at the state and street-levels attempting to meet the immediate and tangible demands of caseload reduction and work participation rate goals, and to community-based organizations attempting to “bill out” and survive under the bold new system. These organizational incentives and processes have been largely neglected in the academic and political discourse on TANF implementation.
Illinois Caseload Reductions and Bureaucratic Churning

The Illinois Department of Human Services, its local welfare offices, and community-based providers began operating under a refashioned set of organizational incentives that guided early implementation and produced dramatic caseload reductions. This section examines IDHS caseload figures from

Table 1. Activities Affecting Caseload, Illinois Department of Human Services, 1997-2000

<table>
<thead>
<tr>
<th></th>
<th>Additions</th>
<th>Subtractions</th>
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<tr>
<td></td>
<td>Reinstatements</td>
<td>New Approvals</td>
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<tr>
<td>July 1997 - June 1998</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total for Fiscal Year</td>
<td>91,336</td>
<td>41,902</td>
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<tr>
<td>% of Additions/Subtractions</td>
<td>68.6%</td>
<td>31.4%</td>
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<tr>
<td>Yearly totals</td>
<td>Additions:</td>
<td>133,238</td>
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<tr>
<td></td>
<td>Net Illinois caseload reduction for year: 29,221</td>
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</tbody>
</table>

|                      | Reinstatements | New Approvals | Canceled for Earned Income | Other Cancels |
|----------------------|                |              |                           |              |
| July 1997 - June 1998| 95,218         | 27,443       | 53,929                    | 116,586      |
| % of Additions/Subtractions | 77.6% | 22.4% | 31.6%                      | 68.4%         |
| Yearly totals        | Additions: | 122,661      | Subtractions: | 170,515 |
|                      |           |              |                           |              |
|                      |           |              |                           |              |
|                      |           |              |                           |              |
|                      |           |              |                           |              |
|                       | Net Illinois caseload reduction for year: 47,854 |

|                      | Reinstatements | New Approvals | Canceled for Earned Income | Other Cancels |
|----------------------|                |              |                           |              |
| % of Additions/Subtractions | 67.2% | 32.8% | 44.4%                      | 55.6%         |
| Period totals        | Additions: | 51,111       | Subtractions: | 71,594 |

Net Illinois caseload reduction for period: 20,483

NOTE: Author’s calculations based on data from the Illinois Department of Human Services (IDHS 2000). These figures vary slightly with those referenced above from the Administration for Children and Families.
July 1997 to March 2000 and shows that the stunning declines were to a large extent the result of bureaucratic churning—an organizational dynamic set loose by policy reform, but largely overlooked in prevailing approaches that test the impact of state differences in program rules on TANF declines.

The IDHS administrative data presented in Table 1 shows a net reduction of 29,221 cases in the Illinois TANF caseload in the first year of implementation. The work-related closings—those canceled for earned income (43,056)—were nearly the same as new approvals (41,902) in the first year. This equivalence suggests that labor force participation levels were steady among poor single mothers in Illinois during that year and also that TANF diversion strategies were not yet in place at local offices on the entry end. "Other cancellations"—denoting a recipient who was removed from the rolls for reasons other than an increase in her income, often for "noncooperation"—made up the vast majority of cancellations. The net difference between these administrative case closings (119,403) and the number of cases reinstated (91,336) accounts for almost the entire caseload reduction in the first year of 29,221 (IDHS, 2000). The figures in Table 1 show that administrative case closings and subsequent reinstatements—an organizational process I call bureaucratic churning, examined in the subsequent section—were very common in the initial three years.

Notably, churning from the rolls increased when local welfare offices were under yearly performance pressure. In June 1998, the last month of the first year of welfare reform, administrative case closings shot up to an unprecedented 16,949, 70.3 percent above the average monthly cancellation rate for the year (9,950). The first two months of TANF implementation also show high levels of administrative case closings: 15,140 in July 1997 and 11,069 in August 1997. The other high cancellation month was May 1998 at 10,974, suggesting that local offices were gearing up to meet yearly performance measures in the penultimate month of the fiscal year (IDHS, 2000).

Cycling in and out of welfare is a well-documented and long-standing phenomenon (Bane & Ellwood, 1986; Edin & Lein, 1997; Harris, 1996; Pavetti, 1993). Cycling, however, implies some volition on the part of the welfare recipient, and the time scale considered in these studies is much longer,
typically years. In bureaucratic churning, which might be considered an accelerated and organizationally imposed form of cycling, cancellations and reinstatements happen quickly, often within a week. And while welfare-reliant women were churned off the welfare rolls pre-TANF, caseload data show that churning accelerated dramatically after the implementation of TANF in July 1997, as Table 2 indicates. Even as the TANF caseload shrank post-reform, the absolute number of case cancellations and reinstatements increased. Consequently, the percentage of women on the welfare rolls being forced to cycle increased dramatically.

Table 2: Pre- and Post-TANF Comparison of Churning

<table>
<thead>
<tr>
<th>Year</th>
<th>Cases Discontinued as % of Total Caseload</th>
<th>Cases Approved/Reinstated as % of Total Caseload</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>42.1%</td>
<td>45.4%</td>
</tr>
<tr>
<td>1995</td>
<td>49.4%</td>
<td>44.9%</td>
</tr>
<tr>
<td>1996</td>
<td>63.5%</td>
<td>53.3%</td>
</tr>
<tr>
<td>1997</td>
<td>95.3%</td>
<td>71.1%</td>
</tr>
<tr>
<td>1998</td>
<td>108.2%</td>
<td>86.5%</td>
</tr>
<tr>
<td>1999</td>
<td>142.4%</td>
<td>100.5%</td>
</tr>
</tbody>
</table>

NOTE: Author’s calculations based on September figures from each year using several sources (ACF, 2008d; IDHS, 1998b; IDHS, 2000).

The Chicago-based National Center on Poverty Law (NCPL), which conducted an intensive study of caseload reductions during TANF’s first two years, wrote the following:

There is a disturbing trend of aid terminations for disciplinary reasons (“noncooperation” of one kind or another). About 8,000-10,000 cases per month are cut off for one of these reasons. Around 70 percent of these are reinstated … but this still leaves about 2,000-3,000 monthly disciplinary terminations that are not. (Illinois Welfare News, 1999a)

Cherlin, Bogen, Quane, & Burton (2002) found similar
results in their Chicago survey. Sixty-two percent of their respondents who had been canceled for missing an appointment—which was the most common official cause—later had their benefits reinstated. In fact, many TANF cases were canceled and reinstated multiple times in a single year. Indeed, as Table 1 shows there were 235,989 administrative case closings in the first two years of TANF implementation, significantly higher than the entire Illinois caseload at the beginnings of the reforms: 188,069. In large part because of the extensive use of bureaucratic churning, then, the Illinois TANF caseload was cut in half in less than three years as low-income women were shed from the rolls largely for reasons other than "earned income."

Speeding Exits, Shedding Clients: Bureaucratic Churning from a Street-Level Perspective

To look inside the "black box" of the implementation process (Palumbo & Calista, 1990) that produced these stunning policy outcomes in Illinois, this section examines TANF implementation from the perspective of IDHS administrators, local area office managers and caseworkers, and welfare recipients. As Michael Lispky (1980) writes, policy implementation analysis must start "from an understanding of the working conditions and priorities of those who deliver policy" (p. 25), and, likewise, of policy's targets. I have examined in the previous sections the post-PRWORA organizational incentives as they emerged from the simplifications of modern statecraft and the statistical results in the Illinois TANF caseload, and will now examine the street-level processes that sped welfare exits to achieve those results.

Administrative case closings were a central determinant of caseload declines in Illinois, especially in the decisive early years of implementation. And central to the administrative case closing was what local offices termed a "call-in." Welfare caseworkers would "call-in" their entire case list, usually not by phone but by mail, for a case redetermination, which often entailed completing and signing a Responsibility and Services Plan (Cherlin et al., 2002, also notes this process in Chicago). If a welfare recipient missed the appointment scheduled in
the letter, refused to answer caseworker questions, or failed to attend the mandatory work program to which they were assigned, her case could be canceled for noncompliance. This call-in process (a form of bureaucratic churning) was a standard practice in local offices and led to the majority of disciplinary cancellations.

At meetings at the Chicago Jobs Council (CJC), the umbrella organization for welfare-to-work CBOs in Chicago, administrative case closings were a major topic of discussion during the first two years of TANF implementation. In these meetings directors of these community-based service provision agencies shared and corroborated common anecdotes about women who had their cases canceled because of a missed appointment or for failing to divulge the name and whereabouts of their child’s father. Others noted that women suffering in abusive relationships or from mental illnesses or addictions were also unfairly terminated and not referred to the appropriate social services. Not infrequently, cases would be canceled because a woman was required to be at a workplace, community service location, or CBO work program at the same time she was required to come to the local welfare office for her case re-termination or other appointment. There were also regular complaints about cases taking months to be reinstated, resulting in women missing rent payments and having to find other sources of income.

Furthermore, CBO leaders in Chicago reported that caseworkers had been frequently canceling cases for improper reasons either deliberately or because they misunderstood the new rules. An account published by the National Center on Poverty Law and a report by a Chicago anti-poverty alliance both substantiated the CBO directors’ claims about disciplinary cancellations (Illinois Welfare News, 1999b; Work, Welfare, & Families, 2000). Likewise, Cherlin et al. (2002), one of the few academic studies to countenance this pervasive problem, found that the most common reasons for procedural case closing and sanctions in Chicago, “[were] bureaucratic: missing a meeting or failing to produce required forms or documents” (p. 402).

Though aligned with the state in their interest to cycle welfare recipients quickly through welfare-to-work channels, CBO leaders were critical of administrative case closings, which
they considered unfair to poor women and also against their organizational interest in maintaining a steady stream of TANF clients. The perspective at local welfare offices and among state administrators regarding disciplinary cancellations and churning was quite the opposite. One high-level administrator from the Humboldt Park local area office, “Mary,” spoke enthusiastically about call-ins. Her office was competing with another local area office, Northwest, for the largest TANF caseload reductions among the 26 Cook County local offices. She said the Northwest office had implemented a “serious plan” that had produced “incredible caseload reduction results.” That office’s caseload was reduced from 5,654 on August 12, 1998 to 4,752 a month later on September 12, 1998—a 16 percent reduction in just one month as a result of an aggressive office-wide call-in effort. Mary’s Humboldt Park office achieved similar marked reductions through call-ins, tightened eligibility and instituted tougher procedures and work requirements. She spoke enthusiastically about changes in the welfare system saying “everybody loves this,” “it’s the best thing that’s happened to everybody,” and “it’s the one political thing that nobody can protest.” She said that her staff “is really sold on it”—so much so, in fact, that “it’s not like work.” On bulletin boards around her office, Mary put up cheerful congratulatory, inspirational signs, and colorful graphs comparing local area office performance. Highlighting the Humboldt Park office on one such graph, Mary affixed gold stars (the kind elementary students get on their homework) and backslapping exclamations like, “Excellent work!” She said the environment was now better than in the 1960s and 1970s when “everybody was demanding everything as their right.” Regarding administrative case closings Mary said, “The people who were kicked off for non-cooperation who do not come back must have gotten something else.”

Though the initial response to welfare reform amongst caseworkers was mixed (Bell, 2005; Danziger & Seefeldt, 2000; Morgen, 2001), many expressed concern about the changes that came with TANF. A caseworker I interviewed, “Joe,” who had worked for 25 years in a welfare office on Chicago’s North Side, reported that things were “really bad” in his office. He said that caseworkers felt pressure to kick people off on “any
technicality to look good to their supervisors and the new office administrator, whom he described as a "hawk." Joe maintained that there were some "real soap opera stories." One story was about a homeless person who was asked to bring in a tax return from the previous year as proof of having no income. The person could not produce the form and was dropped from the rolls. Canceling a case for non-compliance, whatever the justification, was by far the easiest means, Joe said, for a caseworker to meet the onerous caseload reduction quotas they faced. Supporting this contention, Wendy Pollack, a poverty policy lawyer from the NCPL said at a CJC meeting, "a case cancellation is easier than a redetermination of benefits or a sanction, which involves messy due process."

In my fieldwork, I found that welfare recipients who had been churned off the rolls on "disciplinary" grounds presented a variety of reasons for not trying to return to welfare. Some indeed had "gotten something else" (i.e., formal or informal work) and had chosen not to return to welfare because they thought they would no longer qualify for cash assistance or because they were too busy with their current job. Several expressed how much they feared the call-ins and the intimidating redetermination interviews that they had to attend every six months since TANF was implemented. While many fought to maintain eligibility, a number of interviewees refused to put up with the heightened hurdles and indignities involved in obtaining and maintaining benefits since the reforms. These women were churned off the rolls.

When it reached low-income women, PRWORA, ostensibly aimed at reengineering the character and circumstances of the poor, had in practice become a one dimensional organizational imperative to shed clients. Welfare reform's grand vision of reengineering the individual had become operationalized in a "legible and administratively convenient format" (Scott, 1998, p. 3)—the metric of caseload reductions. Implementing bodies consequently mobilized their organizational processes around this narrow measure. As this analysis shows, looking at and inside the organization allows a glimpse beyond policy rhetoric and program rules to the difficult-to-quantify practices—including call-ins, improper cancellations, and bureaucratic hurdles—that sped an unprecedented number of
Slowing Entrances: Gate-Keeping from a Street-Level Perspective

Though bureaucratic diversion is difficult to measure as a causal factor in caseload declines (Mayer, 2000; Mead, 1998), there is a substantial, but often overlooked literature on how organizational mechanisms, even in the absence of policy changes, can be used to adjust the supply and demand of social services at the street-level (Brodkin, 1997; Lipsky, 1980; Prottas, 1979; Weissert, 1994). Given increased autonomy for states and the more rigorous organizational incentive scheme under TANF, there is indeed evidence of substantial organizational change in welfare offices (Hays, 2003; Ridzi & London, 2006) and more caseworker “buy in” (Ridzi, 2004) to reduce rolls in large part by enhancing what Lawrence Mead calls the “hassle” component of welfare reform (Mead, 2002). And just as IDHS employed street-level churning to speed exits from the welfare rolls, it similarly slowed entrances to TANF by implementing new procedural and psychological obstacles on the entry end. Organizational gate-keeping slowed entry by tightening eligibility requirements and erecting new barriers such as responsibility contracts, drug screenings, mandatory child support cooperation, and diversionary workshops. As a result of new procedural hurdles, psychological barriers (e.g., frustration, stigma) to entry and maintenance of cash assistance have likewise increased (Anderson, Halter, & Gryzlak, 2004; Meyers & Lurie, 2005; Zedlewski & Nelson, 2003).

IDHS statistics suggest that local welfare offices were primarily focused on shedding existing welfare recipients from the rolls in its first year. In the second year, however, IDHS began to focus on slowing entrance as well. As Table 1 demonstrates, “new approval” numbers declined dramatically in the second and third years as diversion strategies were implemented. It was common knowledge among welfare managers and caseworkers, community-based organization workers, and welfare recipients that there were increasingly strict procedural obstructions to joining the welfare rolls after TANF. “Gerry,” a contract specialist at IDHS, said that IDHS initiated
a "uniform front door policy" with TANF that compelled new applicants to join employment and job search programs for a month or more before they were eligible to receive benefits. Sharon Hays (2003) discusses in ethnographic detail some of the "diversionary workshops" that were established in 20 states in order to "divert" prospective welfare clients from ever completing the process of applying for welfare" (p. 104). Across the U.S., this gate-keeping policy was so effective that David Ellwood, welfare reform advisor to the Clinton administration, said, "It is virtually impossible to get on welfare since the reforms" (Ellwood, 2000). As a result of these new roadblocks, many applicants give up. As "Beverly," the receptionist at a welfare-to-work organization on Chicago's South Side said, "Whatever the welfare people [at IDHS] are doing, it's working; because these women are fed up!"

Indeed, IDHS administrators engendered stigma strategically as a psychological barrier to entering or staying on the TANF rolls. At a public symposium on welfare reform in Illinois, James Dimas (2000), a high-level administrator at IDHS, recounted a story about a woman he saw at a grocery store who was embarrassed to use her food stamps. Of that scene Dimas commented, "That embarrassment is not necessarily a bad thing—because we don’t want kids growing up worrying about food insecurity." Dimas repeated this message several times, asserting plainly that IDHS was now promoting social stigma as one of a variety of methods to keep welfare recipients off the rolls. Dimas refashioned food stamps in these statements as a cause of food insecurity rather than an anti-poverty policy designed to alleviate it. Such a position suggests that caseload reductions and cost containment are the agency's primary goals—and that further promoting stigmatization of assistance at the street-level is an effective and inexpensive organizational tactic in achieving those goals.

The dramatic decreases in new welfare approvals in 1998 and 1999 suggest that gate-keeping efforts served to maintain the caseload reductions that had been achieved through administrative churning and earned income cancellations. These findings are consistent with studies emphasizing the importance of lowered rates of entry in overall TANF declines (Acs, Phillips, & Nelson, 2003; Grogger, Haider, & Klerman, 2003;
Moffitt, 2003). Indeed, Moffitt (2003) finds significant diversionary effects for rather mundane street-level variables such as: (1) "having to discuss a plan for getting by off welfare;" (2) being discouraged or hassled; or (3) a recipient being told that she would face a work requirement. The caseload reduction literature in general, however, pays little attention to diversionary tactics and cannot measure adequately their strength in implementation. For example, in Bell's (2001) review of caseload decline studies, he devotes only one paragraph to this organizational mechanism. As demonstrated in this section, my fieldwork reveals that in official IDHS discourse and in client experience, gate-keeping was an essential mechanism in the production of post-TANF caseload declines in Illinois.

Cases Canceled Due to Earned Income: Evidence of Success or Further Churning?

In its public relations materials, IDHS emphasized aggregate statistics about the number of cases canceled because of earned income. An IDHS press release from 2000 boasted that from July 1997 to May 2000, 134,857 families left TANF due to earned income. As Table 3 indicates this figure is greater than the overall caseload reduction figure of 99,668 from that same time period, but much lower than the number of administrative case cancellations through March 2000: 275,760. The earned income figure, meant to suggest a move to self-reliance, is misleading and provides further evidence of administrative churning of cases.

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<th>Table 3. IDHS Welfare Statistics, July 1997 - May 2000</th>
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<td>Cases canceled due to earned income</td>
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<tr>
<td>Administrative case cancellations (through March 2000)</td>
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<td>Total caseload reduction</td>
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Several factors explain why earned income cancellations were higher than the overall caseload reductions. First, new welfare clients have joined and left the welfare rolls because
of earned income since implementation, thus counting toward earned income cancellations but not toward the net caseload reduction. As Table 1 shows, 86,134 new applications for welfare benefits were approved from July 1997 to March 2000. A portion of these new applicants was later canceled for earned income and has stayed off welfare, reflecting the cycling that has always characterized the welfare system. Second, an existing TANF case could be canceled for earned income and return to the rolls. “Denise,” for instance, who worked seasonally in a catalog distribution warehouse, was disqualified from cash assistance for December and January because her income surpassed the means test. In February, when her hours were reduced and her income declined, Denise returned to TANF. During the subsequent summer she worked selling funnel cakes to downtown tourists and, once again, was forced off the rolls. The next time Denise applied, however, she was referred to a diversionary program and did not return to the welfare rolls. Denise, then, showed up in IDHS statistics as reducing the caseload by one, but showed up twice in aggregate statistics for earned income cancellations. In her case, churning occurs within the “earned income cancellations” category. Though earned income cancellations suggest that more poor women are moving to economic self-sufficiency, this figure is—ironically—artificially inflated by the poor quality, irregular, and seasonal jobs that increase the need to cycle between welfare and work. Before PRWORA it was more likely that she would have continued to cycle on and off welfare; in a new, post-TANF world, Denise, like so many others, was eventually churned off the rolls. The job market failed her both before and after the reforms; what had changed were the organizational processes governing the welfare-to-work dynamic that ended her persistent cycling and left her to the whims of the low-wage labor market.

In addition to finding employment or being diverted from reentry, a woman who was an “earned income cancellation” that did not return to TANF could subsequently be: (1) unemployed and unwilling to reapply because of increased hassles; (2) working part-time or irregularly and qualified for reduced assistance but unwilling to reapply; (3) living outside Illinois; or (4) living with a boyfriend and unemployed. While it is true
Bringing Organization Back In

that welfare recipients were leaving the rolls because of administrative and earned income cancellations in record numbers, it is important not to assume “they found something,” as TANF implementing bodies tended to do, but rather to examine rigorously the jobs data and social implications of the dramatic caseload declines.

Social Implications for Low-Income Mothers and Children

In a 1998 press release, Governor Jim Edgar claimed victory for Illinois welfare reform, calling it a “resounding success” in which poor women were able to “move from dependency and to self-sufficiency” and “appreciate the pride and independence that comes from earning a regular paycheck” (IDHS, 1998a). Likewise, President Clinton celebrated TANF success stories in Chicago in 1999 in a welfare reform town meeting (Hair, 1999). The media have generally adopted the case reduction metric for evaluating welfare reform, while very few media stories have questioned the widespread sanctioning and case cancellations (Schram & Soss, 2001). As this article has demonstrated, caseload reduction and earned income cancellations figures—the evidence most often cited in public relations material—reveal very little about how poor women and children have fared under the reforms. Nonetheless, these tools of statecraft have effectively defined the discourse on welfare reform. In a sense, the simplifications of the state have become the media’s simplifications.

A national survey of leaver studies found that between 51 and 81 percent of welfare leavers were employed. The employment figure was between 39 percent and 53 percent in the four state studies that considered only people who left welfare as a result of disciplinary cancellations. Of the employed, between 57 percent and 87 percent were working at least 30 hours a week. Earnings data from these studies show that, “the average leaver’s earnings are below the poverty level, and most leavers report having incomes that are lower than or similar to their combined earnings and benefits before exit” (Brauner & Loprest, 1999, p. 9). In Illinois, Julnes et al. (2000) found that only 69 percent of leavers were employed at
welfare exit, and, of those, only 37 percent held the same job after one year and a very small percentage earned more than the poverty threshold. Despite these dismal unemployment, job turnover, and income outcomes among welfare leavers in an expanding economy, 80% remained off cash assistance.

The present public policy package for the working poor is significantly more generous than that of the 1980s and pre-reform 1990s. However, bureaucratic churning, gate-keeping, and other forms of service rationing in the initial years of the reforms kept low-income women from receiving many of the supports for which they were eligible (Brauner & Loprest, 1999; Corcoran, Danziger, Kalil, & Seefeldt, 2000; Dion & Pavetti, 2000; Primus et al., 1999; U.S. General Accounting Office, 1999; Zedlewski & Gruber, 2001). An Illinois leaver study that tracked women who left welfare showed that only 40 percent of leavers with childcare costs received help with childcare after leaving (see also Illinois Welfare News, 2000), only 47 percent had Medicaid coverage six to eight months after exit, and 44 percent of welfare leavers experienced food shortages six to eight months after exit (Halter & Anderson, 2000). Another Chicago survey found high levels of hardship amongst working and non-working leavers, including the inability to meet basic expenses. These hardships were especially high amongst disciplinary cancellations (Work, Welfare, & Families, 2000).

These data suggest that churning low-income mothers and children off the welfare rolls in the initial years of welfare reform produced significant hardship. Conservative commentators argue that caseload reductions, regardless of economic success, point to the moral success of the policy reform. Rigorous sanctioning has begun to end chronic dependency and impart valuable moral lessons. Poor women, as Lawrence Mead argues, “warmly appreciated” the “help and hassle” approach of welfare reform that forced them to change (Mead, 2002). However, these arguments rest on the behaviorist assumption that the sanctioning and administrative case closing correspond to a particular deviant or immoral behavior in need of correction—that is, the punitive measure sends a clear moral message to its target. Administrative case closings, however, were predominantly for technicalities like missed
appointments (the blame for which in many cases did not fall on the welfare recipient), a reluctance to comply with child support enforcement or other invasive requests. And as Cherlin et al. (2002) demonstrate, disciplinary cancellations meant to improve moral behavior (e.g., increasing school attendance, child immunizations, and regular medical check-ups) were a miniscule percentage of the cancellations. Instead of imparting comprehensible moral lessons, IDHS used blunt organizational measures to cast off (and keep off) poor women with little regard for individual need.

As Moffitt (2008) concedes, if cancellations target the most disadvantaged women who “cannot organize their lives sufficiently to comply with the rules” (p. 18), then the result would likely be increased hardship rather than a helpful dose of tough love. Several studies have found that in fact the most disadvantaged were the most likely to be sanctioned or cancelled (Cherlin et al., 2002; Pavetti & Bloom, 2001; U.S. General Accounting Office, 2000). The NCPL notes that the “illiterate ... those without reliable mail delivery, the mentally ill or deficient, persons with disabilities in Chicago” are “the most likely not to receive or respond properly to paper notices of meetings and activities, and they are the least able to cope successfully with the bureaucracy to obtain a prompt reinstatement of benefits.” In that vein, the Chicago area had a much higher proportion of cancellations for “non-compliance” than downstate counties for each fiscal year, indicating that bureaucratic churning was more intense in high minority and disadvantaged population areas (IDHS, 2000). An Illinois survey found that Chicago area leavers were three times as likely to cite an administrative case discontinuation as downstate respondents (Julnes et al., 2000). Corroborating this point, Schram, Soss, Fording, and Houser (2009) recently found, using experimental evidence, that caseworkers are far more likely to punish African American benefits recipients for the exact same infractions committed by non-African Americans.

So, rather than Mead’s tough love, “new paternalism” that sternly but fairly instilled a sense of personal responsibility and self-sufficiency into the deviant poor, the post-PRWORA welfare system in its decisive initial phases shed clients, rationed services, and changed the norms and expectations of welfare
receipt through bureaucratic churning, gate-keeping, and other organizational mechanisms. Some low-income women shed from TANF found decent jobs and perhaps learned the moral lessons laid out in the legislation. More often, disadvantaged mothers who had been dropped from the rolls ended up in irregular, low-wage work or unemployed and disconnected from state assistance. While stunning caseload reduction goals have been achieved, there is little evidence that the motivating moral vision of welfare reform—to change the character and to improve the circumstances of the poor—has been reached. Indeed, my argument suggests that given the organizational dynamics set in motion by PRWORA at the street-level, such goals were an impossibility from the beginning.

Conclusion

PRWORA initiated a redefinition of the goals of the state welfare system in Illinois and a concomitant reorganization of its incentive structure. IDHS, local area welfare offices, and community-based welfare-to-work agencies were aligned in their interest to push welfare recipients quickly through welfare-to-work channels and off the rolls and to limit new entries to TANF. As a result, an unprecedented number of poor women left welfare in the first three years of TANF implementation. Using IDHS statistics and ethnographic fieldwork, this article questions claims made by IDHS and others that former welfare recipients moved toward economic self-sufficiency and out of poverty as a result of the reforms. Policy ideals and political rhetoric about instilling personal responsibility and other work-related values were in essence meaningless to IDHS, local offices, and CBOs, which were concerned narrowly with meeting caseload reduction quotas, work participation requirements, and "billing out" goals—objectives that had to be met in order to maintain funding and political legitimacy. These objectives constituted the "abridged map" that the TANF implementing bodies utilized to simplify the complex reality of the welfare poor in order to make them legible targets of policy reform.

Passed in the Deficit Reduction Act of 2005, TANF reauthorization has given street-level implementing bodies more tools with which to reduce caseloads. It narrowed further the
activities and number of hours in job search that count toward weekly work requirements. And with time limits approaching for more welfare recipients, states can chum off more poor women from the roles depending on how they employ exemptions and extensions. Bureaucratic procedures and street-level discretion, therefore, will continue to play a central role in determining the well-being of poor women and children, and therefore ought to be subject to further scrutiny. Prevailing approaches to studying caseload decline, my analysis contends, systematically understate the impact of important policy-related factors like bureaucratic churning because they do not, and likely cannot, measure them.

Further, this analysis suggests we ask the broader question of whether the modern state ought to use its power in such ambitious and invasive attempts to fundamentally transform “every nook and cranny of the social order” (Scott, 1998, p. 92), whether towards a liberal or conservative ideal. While ambitious policies of reengineering and planning have produced many marvels of the modern age, those that seek to change the human person in fundamental ways ask the state to do something that it is ill-equipped to do, and likely attempts with disastrous results.


References


It seems incredible today that for centuries, Europeans ruled the majority of the world's nations. Beginning with the Portuguese and Spanish in the 15th century, the European powers gradually extended political control over much of the globe. In addition to the Europeans, other nations including the United States, Russia and Japan also embarked on imperial expeditions conquering and annexing territories populated by other people. Although a few countries escaped imperial rule, it must have seemed in the late 19th century that most of the world was destined to be subjected to foreign oppression for the foreseeable future. After the Second World War, however, the campaigns of nationalist independence movements intensified resulting by the end of the 20th century in the collapse of European imperialism and the emergence of many new sovereign nation states.

Although imperialism did not actually involve colonial settlement on an large scale, the economic, political and cultural preferences of the imperial powers were widely imposed. However, there are significant differences in the extent to which the imperial legacy shaped social and economic conditions. These differences can be detected not only among territories previously ruled by different European powers, but also among territories ruled by the same European power. For example, there are significant differences in the postcolonial experiences of countries that were previously ruled by Britain. These countries differ not only in their political systems and cultures but also in the way their economies have subsequently evolved.

In this interesting book, Matthew Lange investigates the different economic development trajectories of different British
colonial territories. He points out that some have performed extremely well while others have stagnated, resulting in widespread poverty for the majority of the population. Matthew believes that these differences can be explained by different patterns of imperial rule. In some cases, the British created a large and powerful central bureaucracy that governed the subjugated territory directly. In others, they governed through what was known as indirect rule. In this case, they ruled through indigenous leaders who were loyal to the British and carried out their mandates. Direct rule, the author believes, was more conducive to the adoption of successful economic development strategies in the postcolonial period, while indirect rule resulted in the emergence of weak states that generally failed to promote rapid economic and social development.

To test this hypothesis, the author reviewed the economic development experiences of countries that were previously ruled by Britain. He undertook a major statistical analysis correlating the type of colonial government imposed on different countries with their development performance and, in addition, focused on the development experiences of 15 countries. Of these, four countries—Botswana, Guyana, Mauritius and Sierra Leone—were analyzed in depth and form separate chapters of the book. The author also drew widely on governmental reports and previously published studies. He concludes that colonialism significantly affected the subsequent economic development of previously colonized territories. While there is support for the hypothesis that direct rule is associated with successful development, there are exceptions. Guyana, he points out, was directly ruled but has not performed well, while Botswana was subjected to indirect rule but has recorded sustained economic growth and social development.

Although this book may be reviewed by some as an intellectual exercise with little practical application, Matthew's work is important at a time when some powerful nations continue dominate others. The author shows that governments do not easily shake off the imperial legacy which continues to influence their economic and social policies. Readers will draw their own conclusions for nations such as Afghanistan and Iraq, as well as Palestine and Tibet, which continue to be subjected to external political and military authority. The author's
careful research should also inspire future inquiry into the way colonialism and imperialism continue to affect social welfare policies and programs in the modern world.

James Midgley, University of California, Berkeley


Five years after Katrina the Gulf Coast is still a mess. Billions of federal dollars have been appropriated for reconstruction but billions were wasted. Foreign workers were imported instead of training and hiring local people. Thousands still lived in toxic FEMA trailers and a third of New Orleans' homes were empty.

In 2008 the nation joined the Gulf Coast in disaster mode. A total crash was averted but official unemployment hit 10% and real unemployment, according to the National Jobs for All Coalition (NJFAC), was double that. Experts predicted five years of high unemployment, but pundits, economists and politicians were slow with solutions. Very few advocated improved versions of the New Deal job programs that employed 10% of the labor force in the 1930s to build and repair roads, schools, forests, and culture. Excessive pragmatism and market idolatry was part of the refusal to face facts. Certainly the issue was not that historians had demonstrated that New Deal projects like the CCC and the WPA failed. Just the opposite. But despite a good historical record, there has been little support among experts and politicians for what was needed: a large and varied federal public works program.

So Scott Myers-Lipton is bucking a trend when he urges such a program to rehabilitate the Gulf Coast and provide a model for how the nation can respond to soaring unemployment. Myers-Lipton is Associate Professor of Sociology at San Jose State University; he specializes in service learning courses that link class work and social action. In 2006 several things combined to spark interest in Gulf Coast reconstruction, among them student activism against homelessness, a presentation of Spike Lee's Katrina film, and Myers-
Lipton's classroom discussion of the New Deal programs. Students and teacher visited the Gulf Coast, met with residents to learn of their needs, and eventually composed the Gulf Coast Civic Works Act (GCCWA), a federal program to employ 100,000 coast residents at a living wage building and repairing public infrastructure. The GCCWA was introduced into Congress by Zoe Lofgren, Democrat from California. It was left out of Obama's first stimulus package but nine Democratic representatives reintroduced it in May of 2009.

Rebuild America is a short book. Not counting a mini-anthology of experts like Howard Zinn and Robert Leighninger, Jr., or appendices, there are about one hundred pages of text. Rebuild America succinctly describes the origins of our current depression and the operation of New Deal job programs. The book is not a work of social science scholarship in which questions of politics, social structure, and history are researched and probed. It is, mostly, an activist's handbook for the GCCWA; and I think it succeeds. I found the story of what the teacher and his students accomplished heartening.

I do think, however, that the author might have been more critical in his tally of supporters. (Full disclosure: I belong to the National Jobs for All Coalition, which has endorsed the GCCWA.) The idea that Obama, the public and the Chamber of Commerce support civic works is not much help without the details. There was not much works money in Obama's first stimulus bill and there won't be much in phase two. As to the chamber, private interests have never been squeamish about taking the public's money, but what kind of jobs do they want? Does the support of the chamber and the public fade when they are told that government job programs require higher deficits? And I am sure the chamber would oppose a twenty-first century WPA, with government as employer. In my view, there is too much Obama-like moderation in the book. In reality, there are many individuals and groups who powerfully oppose real job programs and they have to be confronted on the way to success.

The other concern I had with Rebuild America is that little is said about unions. The author is not anti-union but the union role is all but ignored in later chapters. That is an issue in several ways. The political heft of the AFL-CIO, with its ten
million members, would give clout to drive for the GCCWA. It is true that unionists have sometimes opposed government job programs because they pay too little or they seem to replace union jobs. But things seem to be improving on that front, and the issue needs to be discussed, as does the actual union presence in New Orleans, including whether union apprenticeship programs match the training goals of the GCCWA.

Frank Stricker, California State University, Dominguez Hills


The pre-eminent sociologist, William Julius Wilson, has been analyzing and clarifying the causes of impoverished African Americans' marginalization from mainstream American society for over two decades. In this latest work, Wilson extends his project by engaging the conflict between the culture of poverty and structural theories of persistent inequality experienced by those at the bottom of the U.S. socioeconomic ladder. And, while he continues to find the primary causes of harsh inequality to be structural in nature—especially the changing economy that leaves unskilled workers behind, but also discriminatory hiring practices, de facto housing segregation, the inferior schools that African American children attend, the lack of transportation and the like—he now gives more credence to cultural explanations. This shift, he bluntly states, "will likely generate controversy" because it is offensive to those social scientists who cringe from any explanation that suggests "blaming the victim."

In a compact text (155 pages plus extensive notes), Wilson covers a broad range of topics related to the consequences of living in blighted urban neighborhoods characterized by joblessness. Wilson has focused on this singularly important issue before, but he here extends his analysis by incorporating recent research on topics such as subsidies for housing choice, young black men's exceedingly high rates of incarceration (more could have been done here), the greater success that black women have in the new service economy, and
family formation and composition. This last subject has been much written about, beginning with the Moynihan Report of 1965 that Wilson partially rehabilitates. Indeed, Wilson himself has generated a stream of research from his earlier book, The Truly Disadvantaged, where he documented that black men’s inability consistently to earn sufficient wages to support a family was the most salient factor in marriage-less parenthood. But whereas young poor black women previously reported an expectation to marry after bearing children, they now express caution about and even rejection of marriage because they view their male partners as unreliable, though they continue to value highly the prospects and realities of motherhood. This attitudinal shift is an example of how Wilson integrates structural with cultural analyses of the particular situation of black families: a worsened employment climate for black males, now magnified not only by the disappearance of low-skilled industrial jobs from the inner city but especially by technological innovation (expertise for which is denied them by inadequate schools) and globalization, has resulted in cultural responses that include irresponsible and even predatory sexual behavior by young black men and women’s disinclination to trust and marry them.

The lack of trusting relationships also arises in the area of job-seeking. Wilson discusses research that shows that, in comparison to Mexican immigrant workers, black men are distrustful of each other and fail to cooperate in sharing information about jobs, a key way that those with low skills obtain work. This cultural attitude, engendered in part by black men’s understanding that they are perceived by employers as unreliable and less capable, combines with structural patterns of employer discrimination to reduce these men’s chances of obtaining work.

The topics discussed herein are only a few of the many that Wilson tackles in his comprehensive analysis of recent research in the areas of persistent poverty. Indeed, anyone wanting to catch up on recent research in this arena will gain enormously from reading this cogently and economically written book, and students unfamiliar with the theoretical controversies surrounding structural or/cultural explanations of persistent poverty will find this work approachable and engaging.
Wilson concludes his book, as he has done previously, by advancing a policy perspective that he frankly states now departs from his previous call for universal rather than targeted programs. Although he doesn’t clearly spell out specific approaches, he now states that the problems of impoverished African Americans are so severe that frank discussions about race and poverty are needed to undo the consequences of racial subjugation.

Marguerite G. Rosenthal, Salem State College (Emerita)


The field of child protection has had a long and problematic history. Despite decades of countless “reforms” at both the federal and state levels, our public child welfare system remains beleaguered and dysfunctional, reeling from crisis to crisis. Within the past 15 years alone, due to child welfare litigation resulting in consent decrees or settlement agreements, public child welfare agencies in the majority of states have been placed temporarily under court supervision or surveillance.

In 2001, Olivia Golden took on the task of heading up the extremely troubled District of Columbia child protection agency. In this book, she describes her experiences and accomplishments in that role. She led the agency out of federal court receivership through “major improvements in the number of adoptions, the timeliness of abuse and neglect investigations, the proportion of children with up-to-date service plans, and the number of young children in family settings, rather than group homes.” She and her staff sharply reduced worker caseloads, instituted rigorous new licensing standards for group-care facilities while closing one in the process, and eliminated children’s overnight stays in the agency’s office building. They closed three emergency shelters, increased the use of kinship foster care, and improved the drastically inadequate computerized information system.

Golden examines two other examples of what she calls success stories of child welfare turnarounds, in Alabama and Utah, where the state child welfare agencies had been under
court settlement. In Alabama, litigation was begun in 1988 and court oversight was finally ended in 2007. As a result of its “reform,” Golden states, Alabama’s “child abuse reports are investigated promptly, social workers carry fewer cases, children move around less from placement to placement, and many locations offer an array of family services to fill the gap between ‘an aspirin and brain surgery’ for families.” In Utah, litigation filed in 1993 was finally terminated in 2007. Accomplishments included a large increase in the number of caseworkers, reduction in caseload sizes, extensive caseworker training, improvements in data collection, and “high-quality provision of health services to foster children.”

Golden is rightly proud of her accomplishments during her three-year stint heading the District of Columbia’s child welfare agency. She is also correct in praising improvements like those described above that might reduce the suffering of children and families. However, by the spring of 2009, the District’s agency was on its fourth director in the five years after Golden’s departure. In 2008, six workers and supervisors were fired for mishandling a child abuse investigation after four children were found murdered by their mother. Subsequently, child abuse and neglect reports rose sharply, worker vacancies increased, recruitment lagged, and the backlog of overdue investigations shot up to 1,600 within a few months’ time, double the number when Golden left. A contempt motion was filed contending that “the District’s executive leadership has allowed the child welfare system to return to a dysfunctional state.” Yet the only conclusion that Golden draws is that “reform in the District, as elsewhere, is clearly the work of many years, even decades.”

In Alabama, from 2002 to 2006, while the agency was still under court surveillance, the foster care population rose by 22 percent. In Utah, the number of foster care entries did not increase during that same period, but the foster care population rose by 20 percent anyway. And, although the foster care population nationally has grown appreciably over the past few decades, there has been no evidence of any reduction in the rate of child fatalities due to abuse and neglect (it might even have risen), of any other increased protection of children, or of any better outcomes for children upon entering adulthood. The child welfare system’s century-old mission to protect
children and preserve families is belied by these facts as well as by that system's ongoing incapacity to make reasonable efforts to prevent unnecessary foster care placements.

Golden reviews some of the recent research on preventive services, insightfully identifies many of the most important qualities and actions of good leadership and management, and competently discusses the use of information to guide action. She also discusses the use and value of performance measures (although one might argue that here there is too little focus on actual outcomes, as opposed to process). But while she does identify some of the structural flaws that obstruct the development of a preventive and family preservation orientation, she sees them as correctable within the current system.

The child welfare system in the United States, as elsewhere, is driven, structured, and dominated by a reactive reporting law approach to child protection, an approach that has come under increasing criticism by a growing number of child welfare experts. Rather than the continued tinkering with the present fundamentally dysfunctional system, they are calling for alternative structures that would be more proactive, more reliant upon and supportive of preventive orientations to family preservation and child safety, and less reactive, blame-oriented, and coercive than the current system.

Olivia Golden served as the top federal child welfare official during the Clinton administration and is currently a fellow at a leading "think tank," the Urban Institute. In the former position, she had the opportunity to view the big picture, and in the latter she now has the opportunity to think and reflect outside the box. But if Golden has yet pondered the deep structural roots of the inadequate outcomes of the current system, or the mere possibility that the system itself should be replaced or that alternative systems can be envisioned, there is little evidence of it in this book. At this point in our child welfare system's dismal history, what is needed is not just good management, but better imagination.

*Leroy H. Pelton, University of Nevada, Las Vegas*

People typically have memories of childhood, some vivid and others vague, but we rarely examine our memories and question their source or accuracy. It was not until the advent of recovered memory therapy in the late 1980s and early 1990s that the topic of childhood memory became a major source of controversy among mental health professionals. Jeffrey Masson's rediscovery of Freud's seduction theory and the concomitant overdue societal acknowledgement of the reality of childhood sexual abuse led to the rise of theories and therapies to help adults "recover" their memories of childhood abuse. At the heart of this controversy was whether or not childhood memories of repeated abuse could be totally repressed or forgotten, and, decades later, be vividly and accurately recalled in adulthood. Over the last two decades, scholarly research on childhood memory proliferated in an attempt to address this issue.

In *Remembering our Childhood*, Sabbagh takes the reader on a voyage through the world of memory research and, specifically, how memories of childhood are recalled. The book contains ten chapters that cover diverse but interrelated aspects of memory, forgetting, remembering, and theories and therapies that were designed to help adults "recover" repressed memories of abuse. In chapter 1, Sabbagh sets the stage with lively vignettes of childhood memories and introduces the reader to issues related to the timing, accuracy and quality of childhood memories. Chapter 2 examines the phenomenon of childhood amnesia and how children encode memories at different ages. Chapters 3 and 4 provide insight into the reconstructive nature of autobiographical memory in both children and adults and, in particular, how memory is influenced by social interaction. This includes, for example, the ways in which parents and children speak to each other, reminiscing, the influence of first impressions, perception, pre-existing psychological states, and the importance of meaning in shaping and reshaping our memories. This corpus of research clearly demonstrates the complex reconstructive processes involved in remembering and shows the various ways in which memory can be fallible. These initial
chapters set the stage for an in-depth look at the controversy, advent and demise of the now discredited recovered memory therapy. The remaining chapters provide a thoughtful examination and analysis of the “memory wars” (the beliefs and theories of recovered memory proponents contrasted with the empirical research on memory), the array of methods used by therapists to help clients “recover” memories of abuse, and several high profile cases involving repressed memory. He also considers important and controversial studies by memory researchers and discusses the often tragic consequences to falsely accused families.

For those interested in memory, empirical research published in scholarly journals is typically dry and extremely laborious to read. Part of the appeal of this book is Sabbagh's fluid and engaging writing style; it is truly joy to read. He deftly weaves a tale of memory, drawing from research, vignettes, transcribed interviews, and accounts of therapy gone awry. His use of rich imagery and analogies to explain complex mental processes and research findings are complemented by a thoughtful selection of illuminating and provocative direct quotes. Equally as important as his writing style is his well reasoned and astute analysis of the existing empirical evidence. He rigorously examines the full body of existing research, pointing out the caveats and limitations of the data. Sabbagh's strong belief in the scientific method provides the underlying theme for the book and this point of view is clearly expressed throughout.

Despite that recovered memory therapy has been discredited as a reliable therapeutic method, there are still many victims left in its wake. This book should be required reading for all clinical social workers, psychologists, and others who work in the field of mental health. In addition, it is also an excellent book for a non-academic audience with an interest in memory and recovered memories.

Susan P. Robbins, University of Houston

In 1982, Pennsylvania’s Public Act 75 created a new category of destitution for drug addicts and alcoholics that made them eligible for 9 months of meager cash assistance and food stamp benefits. This restructuring of the general assistance program in PA, set against the larger context of the ‘U-turn’ in social welfare policy, “primed the pump” for the recovery house movement in Kensington, Philadelphia. The recovery houses and their street level entrepreneurial operators are the setting and lead characters in Robert Fairbanks *How it Works* (the title is a reference to a chapter in the AA “big book,” the main text for the 12-step self-help movement).

The recovery houses occupy abandoned or dilapidated row homes in a former working class neighborhood in post-industrial Philadelphia. Financed through the cash assistance and food stamp benefits provided to addicts and alcoholics in need of a stable roof over their heads while they attempt to ‘work a program’ (get clean and sober), recovery houses are run by operators willing to bridge the gap created by the lack of affordable housing and inpatient treatment options, in addition to and the devolution of authority engendered by Reagan’s Omnibus Budget Reconciliation Act (OBRA) and Pennsylvania Governor Thornburg’s ACT 75. Without a policy initiative, licensing body or city mandate, Fairbanks explains, the operators use the minimal requirements of a verified address to access the welfare benefits of single, adult addicts and alcoholics that are then used to provide basic needs of food and shelter to recovering addicts.

Fairbanks examines the recovery house phenomenon and the role of the operators as “re-regulating urban subjectivity and remaking postindustrial space.” The interplay between the language and goals of the self-help, 12 step movements (working a program in order to become a “productive member of society,” the expectation of “self-transformation”) and the pressures facing the urban poor in a landscape bereft of opportunities underscore the contradictions that play out as recovery house operators “govern” their programs.
The dynamic between the formal policy structures and the Kensington recovery houses supports Fairbanks' assertion that the city's tolerance of the quasi-legal recovery houses is evidence of a process of "managed persistence," well expressed through interviews with personnel at the City of Philadelphia Department of Licensing and Inspections (L & I) and Public Welfare. While most houses are "illegal" in that they violate safety/zoning codes, the department has 45 inspectors and 60,000 vacant properties and is underfunded to enforce safety codes. Likewise, Fairbanks' interviews with the public welfare department reveal a "no news is good news" approach to not regulating the recovery houses; his key informant expresses the "hope" that houses are conscientious and well run, and like the L & I, bemoans the fact that the city doesn't have the resources to properly regulate. The fact that poor recovering addicts are referred to recovery houses, and even sent from poor cities in neighboring states, speaks to their role in compensating for services that the formal system fails to provide.

One of the key achievements of this book is the juxtaposition of complex, rigorous academic analysis and the analysis of the street level entrepreneurs in their own words. In some studies of the impacts of neoliberal policies, the subjectivity of the poor and marginalized is, at best, an afterthought and, at worst, fodder for argument. Not so in this book. Fairbanks has earned the trust and respect of his subjects and in turn shows them the same respect. His rich and careful building of the context allow the words of his participants to really shine through.

Fairbanks' book, which would make great reading for a new curriculum in contemporary social welfare policy, brings together analytic frameworks from social welfare history, urban social theory, policy, philosophy and ethnography. His documentation of the recovery house phenomenon in the post welfare-reform era brings to mind the long "shadow of the poorhouse," and how these times will be viewed historically.

Jennifer R. Zelnick, Salem State College

Marshall Ganz was widely recognized during the Obama Presidential campaign as the architect of Camp Obama, the school for thousands of young organizers. Central to their training, and to the Obama campaign, was “telling your story.” In *Why David Sometimes Wins*, Ganz demonstrates his own marvelous story telling skill in his narration of the farm workers’ movement in America. Ganz, who teaches at Harvard’s Kennedy School of Government, joined Cesar Chavez and the fledgling farm workers union in 1965 as a volunteer. Eventually he rose to become the Director of Organizing and an Executive Board member.

Ganz sets out to answer three questions: “How can the powerless sometimes challenge the powerful successfully? How can strategic resourcefulness compensate for lack of resources? And how can we exercise leadership to turn what we have into what we need to get what we want?” The David referred to in the title is the Biblical David, he of the mighty sling shot. The California growers and the Teamsters alternate in the role of Goliath.

Ganz provides a history of organizing efforts with American farm workers beginning in 1900. The identities of the workers change in waves: the Japanese, Filipinos, Dust Bowl Whites, Mexican Braceros and, finally, Mexicans and Mexican-Americans. He traces the labor movement’s attempts at organizing farm workers from the International Workers of the World to the Teamsters. Most of the narrative is set in the 1960s and 1970s, and all the main players are there: the unions, Alinsky, the Civil Rights activists, the Catholic Church, college students, and, most of all, Mexican farm workers willing to put their lives on the line for their families and their fellow workers.

But interesting as the history may be, this book is really about organizing and, in particular, about strategy and tactics. Ganz writes an intriguing case history of how Chavez, Dolores Huerta, Gilbert Padilla and the other founders of the United Farm Workers built a union of 70,000 members, overcome incredible obstacles, out-organized the Teamsters, organized
several nationwide boycotts that involved millions of people and won victory after victory. Ganz’s story reads like a novel and, though you may know how it turns out, you’ll want to keep turning the pages to see what happens. At every turn the farm worker leaders faced crises, strategic dilemmas and threats to their very survival. We meet not only the farm worker leaders, but also scores of growers, Teamster and AFL-CIO organizers, and outside farm worker supporters. All is meticulously documented and referenced.

Ganz’s thesis is that the United Farm Workers won because of superior “strategic capacity” based in an open leadership style that involves many people of different backgrounds, but especially those most affected by the movement, the farm workers themselves. He contrasts this with the top-down, conventional tactics of the growers and the Teamsters. Strategic capacity results in a synergism that fuels creativity and commitment. That’s why David can win.

Here Ganz is less compelling but, nonetheless, thought provoking. There are many theories about why certain social change efforts succeed. They deal with power, internal and external forces and even timing. The 1960s were the perfect time for organizing the previously powerless. The nation was caught up in change. Many believed passionately in civil rights. Cross racial/ethnic coalitions were possible and strong. All this changed by the 1980s. The United Farm Workers gave up organizing and focused instead on affordable housing, social services, legislative advocacy and the campaign against pesticides. Chavez became a quasi-spiritual leader best known for his dramatic fasts. Union membership declined precipitously. Ganz argues that Chavez squandered the strategic capacity that had been painstakingly developed. But times had changed dramatically. The political pendulum had swung to the right. The labor movement was in decline.

This book is really not about Cesar Chavez. It’s about organizing and tactics that work. Ganz describes them in a unique and interesting manner from his own vantage point within the farm workers’ movement. Why David Sometimes Wins is a valuable resource for teachers and students of community organizing, labor history and the dynamics of social change.

Ed Marakovitz, Boston College

Over the past several years there have been a number of books that address the nature of progressive lawyering. However, filling a much neglected area of inquiry, author Corey S. Shdaimah goes beyond what she describes as the two classic approaches to scholarship in this area: work addressing the normative stance of legal services or progressive lawyering and evaluative social science frameworks that assess the broader meanings of client behavior. Describing these approaches as “lawyer-centric” the author instead presents an empirically based, qualitative study that attempts to bridge these two approaches. This book offers a discussion of “situated practice,” which the author describes as the way in which lawyers and clients interact in the context of day to day situations, both personal and professional.

The author organizes her work around four themes: (1) autonomy; (2) collaboration; (3) transformation; and (4) social change. These themes are considered in a study that involved lawyers and clients from one large, northeastern legal services organization. All of the lawyers in the study “shared a commitment to social change.” Clients, in contrast, tended to have less globalized views, typically focusing on their own individual needs and rarely explicitly articulating thoughts about social justice in broad terms. Over the course of a series of interviews with clients and lawyers, the author explores a number of questions that address the praxis of social justice and not just its theoretical consequences.

Much of the power of the book lies in its efforts to broaden the way in which we often think about the nature of progressive lawyering. Particularly striking is the chapter on autonomy. Client autonomy, as the author suggests, is frequently seen as a hallmark of progressing lawyering and is greatly valued as a mechanism for promoting non-hierarchical relations between clients and lawyers. However, as the author further observes, there is an inherent tension between client autonomy as a stated goal of progressive lawyering and the actual achievement of that autonomy. One such tension is between
"mandatory autonomy," where the lawyer forces the client to make her own decisions, and "optional autonomy," where the client is permitted a choice as to whether or not to make her own decisions. With the former there exists the specter of paternalism as clients are forced to act in ways they might not wish to. With the latter, the optional model, there is a distinct irony when, in the name of autonomy, clients may eschew some or all of the aspects of autonomy. The author, after setting out these overarching concerns, then describes how various clients and lawyers themselves have addressed the issue of autonomy. Another strength of the book is the chapter on collaboration, which, as the author notes, is closely tied to the notion of autonomy in lawyering. Although collaboration, here the working together of client and lawyer in order to achieve desired ends, is often stated as a goal of the legal process in progressive lawyering settings, the author queries whether collaboration in fact enhances the legal process or reflects client desire. Many of the lawyers interviewed suggested that such collaboration, while sometimes helpful to the client, was often difficult to achieve because of the varying range of clients' willingness and abilities to participate. What happens to ideals of collaboration (or to the related value, autonomy) when, for instance, clients have perennially bad judgment? Finally, the chapter on progressive lawyering and the ethic of risk very neatly describes the conflict between abstract critiques of progressive lawyering by theorists and actual observations about progressive lawyering by lawyers and their clients. The author argues that lawyers and clients, unlike typical disengaged theorists, have a "principled ethical grounding" that creates conditions that make change possible.

Each chapter is structured around one clear theme. However, the chapters, and the overall structure of the book, might have been more clear had each chapter contained a summary of its main points that connect it to the other chapters of the book. Another shortcoming of the book was the absence of any significant discussion of how race and gender played a role in the interactions between clients and lawyers. As the author describes them, twenty-four of the thirty clients in the study were African American, one was Nigerian, and one was Indonesian. In contrast, of the eleven lawyers
participating, ten were white. Moreover, twenty-seven of the clients and five of the lawyers were women. Race, gender and culture play crucial roles in shaping the power dynamics of certain social interactions. Because of this fact, a growing body of the literature on lawyering has queried the impact of racial, gender and cultural differences. While this is not a stated focus of the author’s work, given her concern with lawyers’ and clients’ interactions within the context of “existing social arrangements,” more discussion in this vein (or a cogent reason for not offering more discussion) is warranted. In summary, however, the book has many interesting ideas and is a useful addition to the lawyering literature.

_Lolita Buckner Inniss, Cleveland State University_


This very important work documents and analyzes contemporary Chinese America, with an emphasis on Chinese American communities in New York and California since the 1960s. This ambitious scholarly effort examines a range of interesting questions and dilemmas: is working in an ethnic enclave “a better alternative” or “the only option?” How does Confucian culture lead to an “ethnic social environment” that encourages children to pursue educational excellence? How does globalization impact immigration and family life? And what roles do ethnic media play in immigrant integration?

The author provides rich data showing that old Chinatowns, such as the one in New York City, and new enclaves such as Monterey Park in California, attract Chinese investments from Taiwan, Hong Kong, mainland China and Southeast Asia. Such centers provide Chinese language schools, cultural centers, English language classes, job-training programs, religious institutions, and other services. Chinese immigrants choose to buy houses or rent apartments near such centers for cultural as well as employment reasons. Short distances between job and residence allow both parents to work and raise a family at the same time. Chinese language schools help to raise
children with respect for Chinese culture and tradition. Zhou presents data that indicate that, on average, Chinese immigrants have raised college graduates and finished paying mortgages on their family house within 25 years. Within one generation, Chinese immigrants move up the economic ladder to achieve middle-class status, supporting the assertion that working and living in the ethnic enclave was "a better alternative."

Zhou explains how Confucian values lead to "an ethnic social environment" that encourages educational excellence. Among the immigrants since the 1960s, Zhou describes well-educated professionals who continue to reside in or nearby Chinese enclaves. Being aware of the connection between their own successes and education, they willingly help run non-profit or for-profit institutions such as Chinese schools and after-school tutoring and college preparatory courses. They also serve as role models in the neighborhood. Zhou argues that the ethnic social environment, more than Confucian values per se, contributes to the high success rates of Chinese American students.

Globalization has led to the phenomenon of "parachute kids" as part of the Chinese-American experience. While earlier immigrants from China hoped to make a fortune and then return home to their families, the parachute kids are sent here to pursue "better education" by their parents, who remain in the homeland either with high-paying jobs or running businesses. The author provides interviews collected from some of these students who describe their experiences. This phenomenon reflects a fascinating dimension of the changing fortunes of Asian and American economies.

Chinese language media have flourished along with the growth of Chinese-owned businesses, the former financially supported by the latter. These media bring local and mainstream news to those with limited English proficiency. They also provide legal and financial advice, promote civic responsibility, serve as an outlet for complaints and opinions, and encourage political participation. The Chinese language media, the author points out, is an important bridge between the ethnic enclave and the host society.

Zhou concludes that, as this country becomes increasingly multiethnic, the distinctive ethnic enclaves she describes are
"quintessentially American," and only "ignorant and stupid bigots" refuse to recognize this fact. This book combines quantitative research, such as census data, with personal interviews and is written with an insider's understanding and compassion. It is solid scholarship for the fields of immigration and ethnic studies, of American studies, of race and culture studies, of diasporic studies, and of American history and American sociology in general. It is written with lucidity and conciseness and thus a good book for college students in above-mentioned disciplines.

Shehong Chen, University of Massachusetts Lowell


In Longing and Belonging: Parents, Children, and Consumer Culture, Allison Pugh has written an engaging book about consumerism, children, and how they negotiate social class, racial, and other forms of difference. Her argument that children navigate an "economy of dignity" is one that should be considered by sociologists, feminists, parents, and policy makers. Her largest contribution is to show that, despite differences, children, in "middle childhood" or between the ages of five –nine (some were eleven or twelve by the end of the study) and of varying social classes, share a similar desire to belong.

Pugh argues that it is necessary to put childhood in a context that considers consumption as a kind of care. The book is based on three years of observational fieldwork at Sojourner Truth (an after-school center in a poor community in Oakland, California which has children from grades K-5) and six months each at two affluent schools in Oakland, which she names Arrowhead (a private school for children in grades K-6) and Oceanview (a public school for children in grades K-8). Using these data, along with interviews of fifty-four family members and observations of family shopping habits, Pugh puts forth a rich analysis that is grounded in everyday experiences.

Pugh analyzes how children establish a sense of belonging in their schools through the "economy of dignity," that is rooted
in their talk of consumption. Though the specifics of children’s discussions vary by social class, she finds similar themes which cut across social class, including being cool, old enough, and wealthy enough to be visible to peers. She also identifies four kinds of strategies that children use when navigating their experiences including bridging labor, claiming, patrolling, and concealing. “Bridging labor” was the strategy used by children who did not have as much as others did as they worked to be included. For example, at Arrowhead, an African-American third grader described her father’s blue-collar job of putting in driveways to peers from affluent families by stating that it was “really cool … [because] he’s been to all sorts of famous people’s houses.” “Claiming” involved children in both poor and affluent locales who suggested that they owned what they did not. “Patrolling” was a strategy when children evaluated, challenged, or affirmed others’ dignity claims. “Concealing” was when children worked to conceal differences from their peers that they perceived as negative.

The parenting strategies of affluent and low-income families differed in regards to consumption. Affluent families gave children things willingly only when it pertained to their children’s sense of belonging, thus exercising “symbolic deprivation.” Low-income families, on the other hand, practice “symbolic indulgence” where they strategized to maximize the use of their money in their purchases for their children. These parents had to carefully plan their purchases and buy things, such as electronic devices, that carried the most symbolic weight and also kept their children inside and safe from the harm of unsafe surroundings.

“Pathway consumption,” Pugh argues, where parents spend on the opportunities that shape children’s lives, involves a combination of aspiration and uncertainty, which might be identified as “hope” where parents try to socialize and educate their children so as to have better futures. Most of the affluent parents take a “luxury of difference” approach when choosing schools and social events; however, by looking at affluent African American families, she finds that race also plays a role along with class. She concludes that consumption is part of children’s meaning-making and relates to care as well as “pathway consumption.”
Pugh's study is impressive. She acknowledges that future research might include adults and their consumption patterns with regard to the economy of dignity. It would also be interesting to see how children and parents who are disabled fit into this research. This book makes an exciting contribution to scholarship on consumption, childcare, and social policy. It is a riveting account of how parents and children negotiate being a part of the economy of dignity and how they struggle to belong.

Cheryl Najarian Souza, University of Massachusetts Lowell


Several texts on social work practice have survived the test of time, undergoing numerous revisions to include practice knowledge, skills, and competencies. Consequently, the author of any new practice text is challenged to present solid foundational content in addition to offering something new and relevant that will capture the interest of educators and students alike. Thomas O'Hare of Boston College is the author of a new text, designed for upper level BSW and MSW students. The text provides foundations for effective casework and a framework for advanced social work practice.

The text's focus is consistent with a practitioner-scientist model where social work direct practice is informed by empiricism. O'Hare contends that social workers need not be researchers themselves but should have current knowledge of the literature regarding the validity of theory and the efficacy of interventions. Emphasis is placed on the need for social workers to be critical consumers of interdisciplinary developmental and practice research to enhance their lifelong learning and practice.

Four prominent practice theories (i.e., psychodynamic, cognitive behavioral, family systems, and phenomenological/humanistic) are briefly presented along with an apparently thorough review of their respective empirical support and contributions. This content may provide a
beginning framework for critical analysis as students engage in more in-depth exploration of practice theories and interventions in advanced courses.

O'Hare presents readers with solid information regarding the interrelated and reciprocal functions of assessment, intervention, and evaluation. For example, he emphasizes that evaluation should be an integral part of the assessment phase, while also occurring systematically throughout the treatment process. He suggests that in order to practice competently, social workers need to be well grounded in empirical literature regarding evidence-based practices (EBPs) with diverse client systems. Knowledge of EBPs should guide social workers as they select what the author terms essential skills or combinations of essential skills (i.e., interventions)—support, therapeutic coping and case management—for individuals, families, or groups.

Portions of the NASW Code of Ethics that apply to direct practice are discussed along with strategies social workers can utilize to reduce potential ethical breaches and liability. O'Hare raises compelling questions regarding liability for educators, and he offers recommendations about what educators can do to advance EBP in their teaching.

Part three of the text focuses on combining essential social work skills when working with different populations who present with varying presenting problems and diagnoses. Using case vignettes, O'Hare demonstrates how these skills can be utilized in different configurations to build upon client strengths and to enhance adaptive capabilities, positive coping, and problem solving.

O'Hare's text has notable strengths and some limitations. The link between research and practice is clearly articulated. Information on existing EBPs and the identified need for more research to establish new EBP methods may increase social worker knowledge and provide a basis for effective practice. Case vignettes and sample assessment and treatment plans are very useful to illustrate the multidimensional assessment and application of essential skills/interventions. Content on reducing social worker liability is valuable for practitioners. Two Appendices, The Psycho-Social Intervention Scale and The Comprehensive Service Plan offer tools to assist beginning
practitioners in conducting thorough assessments and planning interventions.

To gain the most from this text, it is recommended that students first complete a foundation research methods course. The content on the efficacy of prominent practice theories is useful; however, the description of each theory is limited. In order for students to gain an in-depth understanding of these theories and provide a basis for critical analyses, supplemental information is suggested. Culturally competent practice is discussed, although content on diverse cultures and underrepresented groups is not a significant focus of this text.

Karen M. VanDeusen, Western Michigan University
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INSTRUCTIONS FOR AUTHORS
(Revised November, 2007)

JSWS welcomes a broad range of articles which analyze social welfare institutions, policies, or problems from a social scientific perspective or otherwise attempt to bridge the gap between social science theory and social work practice.

Submission Process
Electronic submissions are welcome. Please send to Robert Leighninger at rleighn@asu.edu. Submit hard copies of manuscripts to: Robert Leighninger, School of Social Work, Arizona State University, 451 N. Central Ave. Suite 840, Phoenix, AZ, 85004-6699. Send with an abstract of approximately 100 words and key words. Since manuscripts are not returned by reviewers to the editorial office, the editorial office cannot return them to the authors. Submission certifies that it is an original article and that it has not been published nor is being considered for publication elsewhere. Receipt of manuscripts will not be immediately acknowledged, but author will receive e-mail notification when the manuscript goes out for review.

Progress reports can be obtained by e-mailing the editor at rleighn@asu.edu. Reviewing normally takes 120 days.

Preparation
Articles should be typed, double-spaced (including the abstract, indented material, footnotes, and references) on 8 ½ x 11 inch white bond paper with one inch margins on all sides. Tables may be submitted single-spaced. Please provide a running head and keywords with manuscript.

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To facilitate anonymous review, please keep identifying information out of the manuscript. Only the title should appear on the first page. Attach one cover pages that contain the title, author, affiliations, date of submission, mailing address, telephone number and any statements of credit or research support.

Style
Overall style should conform to that found in the Publication Manual of the American Psychological Association, Fifth Edition, 2001. Use in-text citations (Reich, 1983), (Reich, 1985, p. 5). The use of footnotes in the text is discouraged. If footnotes are essential, include them on a separate sheet after the last page of the references. The use of italics or quotation marks for emphasis is discouraged. Words should be undefined only when it is intended that they be typeset in italics.

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Book Reviews
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