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# Summary

**Grant # 98-WT-VX-0009**

# **Violence Against Women: The Role Of Welfare Reform**

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**by the**

**California Institute for Mental Health**

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## Introduction

Domestic violence is widely recognized to have a special standing in relationship to welfare reform. Congress codified this understanding when it enacted the Family Violence Option, permitting states to grant domestic violence exemptions regarding TANF welfare-to-work provisions—which at least 38 states have chosen to do.<sup>i</sup> Using survey research in two California counties, this study documents four extremely important findings relevant to welfare reform:

1. Rates of domestic violence are high in this welfare reform population. Serious abuse occurs in any given year in approximately 15 percent of the cases. Over the three year period covered by the research interviews, a total of 37 percent of the women reported serious domestic violence.
2. High proportions of women experiencing domestic violence also have serious mental health impairments and/or alcohol or other drug problems. For example, 35 percent of women experiencing serious domestic violence received a diagnosis of Major Depression compared to 16 percent of those reporting no domestic violence.
3. Domestic violence negatively impacts the capacity of women to find work. At the end of one year of welfare-to-work activities in one of the two counties we studied 28 percent were working at least 26 hours a week if they did not experience serious domestic violence but only 12 percent worked if they did.
4. On virtually all of 51 measures of the well-being of children in the family, the presence of domestic violence is associated with significant risks to the children. For example, in 21 percent of families where there was some domestic violence a child did not get all the medical care needed vs. 11 percent in families with no domestic violence.

*Glossary of terms.* Because the concepts we use are complex a glossary of terms is appended.

*Study background.* Welfare reform<sup>ii</sup> and the robust economy in the 1990s<sup>iii</sup> have resulted in massive reductions in the number of welfare recipients but have raised considerable concern regarding both those remaining on the rolls and those who leave but do not find employment. The prevalence of domestic violence (DV), mental health (MH), and alcohol and other drug (AOD) issues and their impacts on welfare tenure, finding and keeping jobs, and child well-being are among the issues that are poorly understood but most pressing.

California offers a particularly fruitful site for this study because it is among the few states that have allocated substantial funds for the identification and provision of services to TANF recipients with DV (or MH or AOD) issues. Since 1998 approximately 100 million dollars a year has been designated for mental health and AOD services and counties have, on their own, contributed approximately 22 million per year for DV services.<sup>iv</sup> These funds are controlled by the county department of social services, contracting with county MH and AOD departments and with independent domestic violence shelters and agencies.

*Study description.* This study was conducted in two California counties, Kern (with a sample limited to Bakersfield) and Stanislaus. The basic conditions for study participation were the same in both counties:

- ❖ Age: 18-59
- ❖ Language: Fluency in English or Spanish
- ❖ Female Head of the Household (relative-caretakers and two-parent families were not eligible)
- ❖ TANF applicant or recipient: applying for TANF and eligible for Welfare to Work (in Stanislaus) or TANF recipient for at least one year (Kern).

However, the samples in the two counties differ in one important way. In Stanislaus County the sample was comprised of *new applicants* for TANF while in Kern County subjects had to *have received AFDC/TANF at least one year*. Overall, 40% are white, 37% Hispanic, 15% Black and 8% other. The median age at baseline was 30 and the median number of children living with the woman was two. Forty-four percent of the respondents at baseline had a current partner.

*Description of the sites.* The TANF-oriented services for both study counties—Kern and Stanislaus—are described in detail in the Six County Case Study reports available on the CIMH website: [www.cimh.org/calworks](http://www.cimh.org/calworks). Kern County has a population of 648,000. Its largest city is Bakersfield, at 237,000. Stanislaus County has a population of 433,000; the largest city is Modesto, at 188,000.

*Methodology.* The study surveyed random samples of TANF recipients in each study county three times, starting in the summer of 1999 and then at intervals of one year and 15 months. Of the Stanislaus study-eligible applicants 71 percent were interviewed (5 percent refusal rate). In Kern, 55 percent of the recertification sample were interviewed (7 percent refusal rate). Overall, 91 percent of the Round I respondents were reinterviewed in Round II, and 88% were reinterviewed in Round III. We compared characteristics of the Stanislaus and Kern interviewees with those who were eligible but did not participate in order to detect possible bias created by attrition. In Stanislaus the groups did not differ to a statistically significant degree on any measure. In Kern there are no significant differences between the sample actually interviewed and the population on demographic, geographic, and welfare tenure measures. Thus, we believe that the study samples are representative of the sampled populations in Stanislaus and Kern. We do not know, however, the extent to which these populations themselves are similar to welfare reform populations in other California counties or in other counties around the country.

A comprehensive definition of domestic violence (which incorporated the Conflict Tactics Scale) was used while mental health and alcohol and other drug problems were defined using the World Health Organization instrument, the CIDI, which generates mental health and substance abuse diagnoses.

## Key findings

*Rates of domestic violence in these welfare samples were high for all types of abuse and indicated high “need” for domestic violence services*

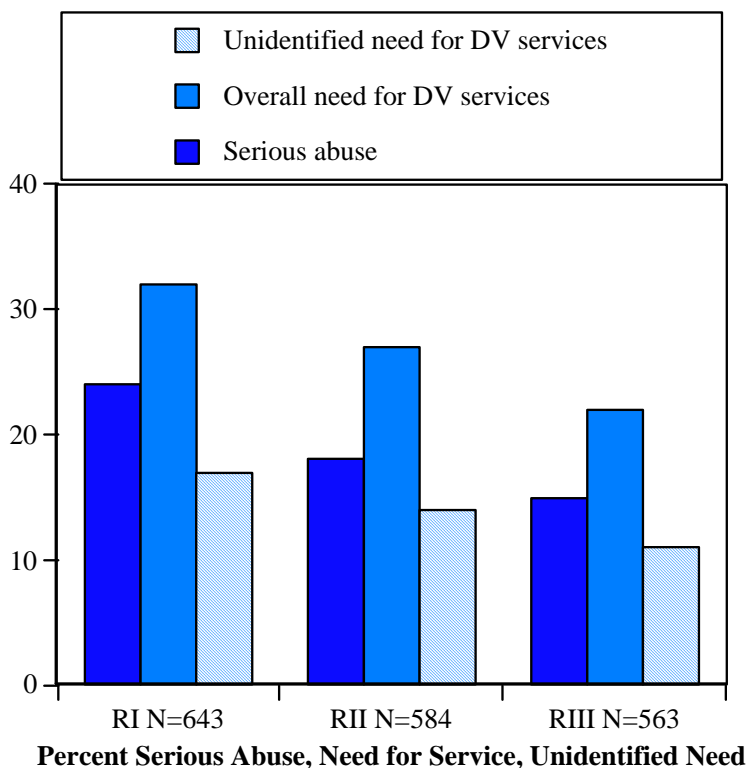
For the purpose of helping administrators and policy-makers plan for needed domestic violence services, we developed three constructs: “Serious abuse,” “Need for services,” and “Unidentified need for services.” We have included the following elements, any one of which would serve to classify the abuse as “serious”:

- ❖ Physical injury
- ❖ Response on the physical abuse questions that respondent was “choked” or “beat-up.”
- ❖ Stalking
- ❖ Forced or coerced sex
- ❖ Threatened to kill woman or kill self
- ❖ Threatened or actually hurt children
- ❖ Threatened to kidnap children or call CPS
- ❖ Actual preventing a woman from working or harassing while on the job

The overall “need for services” construct includes serious abuse but adds to it adult trauma PTSD, any of four other work abuse measures, and having seen a health professional, a counselor, a shelter/DV center, or sought help from police or courts. That is, we say that during the prior 12 months a woman “needed DV services” if she herself sought services *or* if she met the objective criteria. “Unidentified need” is the overall “need for services” measure, but excluding those who actually received professional services.

As seen in Exhibit A, almost a quarter of the women receiving TANF experienced serious abuse in the prior 12 months; almost a third had a need for domestic violence services; and over 15 percent had service needs but had not received any professional help. The rates of all three measures of serious domestic violence did decline somewhat over time. However, even in the third year (the second year of welfare to work requirements for this sample) 15 percent of the entire sample experienced serious abuse, 22 percent had a need for service, and 11 percent had unidentified needs for DV services.

**Exhibit A: Percent Serious Abuse, Need for Services, and Unidentified Need for Services**

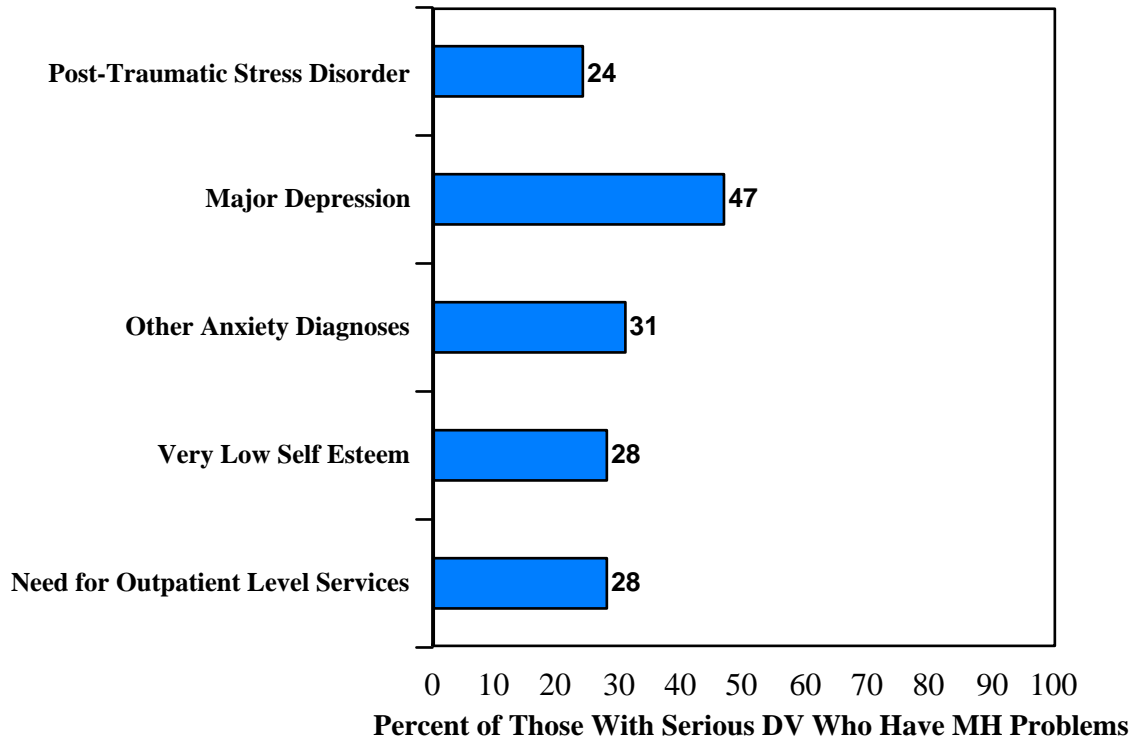


*A high proportion of women experiencing domestic violence also have mental health impairment or problems with alcohol or other drugs.*

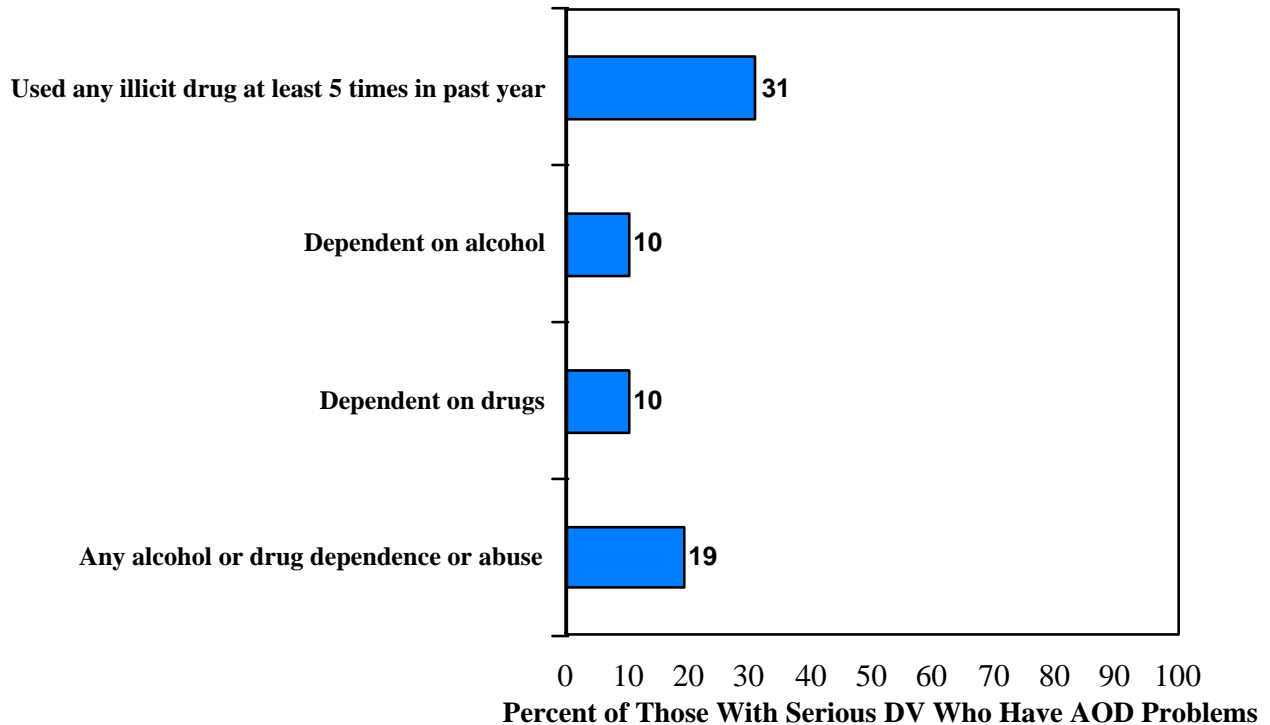
A major focus of the study was to determine the overlap between domestic violence, mental health diagnoses or problems, and alcohol and other drug (AOD) problems. As described in Exhibit B and Exhibit C, almost half of the women reporting serious domestic violence in Round I also met the criteria for Major Depression. One fourth met the criteria for Post-Traumatic Stress Disorder and an even higher percentage had one of several anxiety disorders. Although not a diagnostic category, very low self esteem is a critical trait in the context of welfare reform. Finally, 28 percent had symptom scores as high as a norming group of persons entering outpatient treatment, indicating a need for mental health services as well as domestic violence services. Even for women who would not meet formal criteria for mental health treatment, the mental and emotional distress faced by those experiencing serious abuse is overwhelming.

Women with serious abuse also reported high rates of substance abuse. A third had used an illicit drug at least five times during the prior 12 months and almost one fifth met the diagnostic criteria for alcohol or drug dependence or abuse—a good indication of need for AOD services.

**Exhibit B: Percent of Women Reporting Serious Abuse in Round I Who Have Mental Disorders**



**Exhibit C: Percent of Women Reporting Serious Abuse in Round I Who Have AOD Problems**



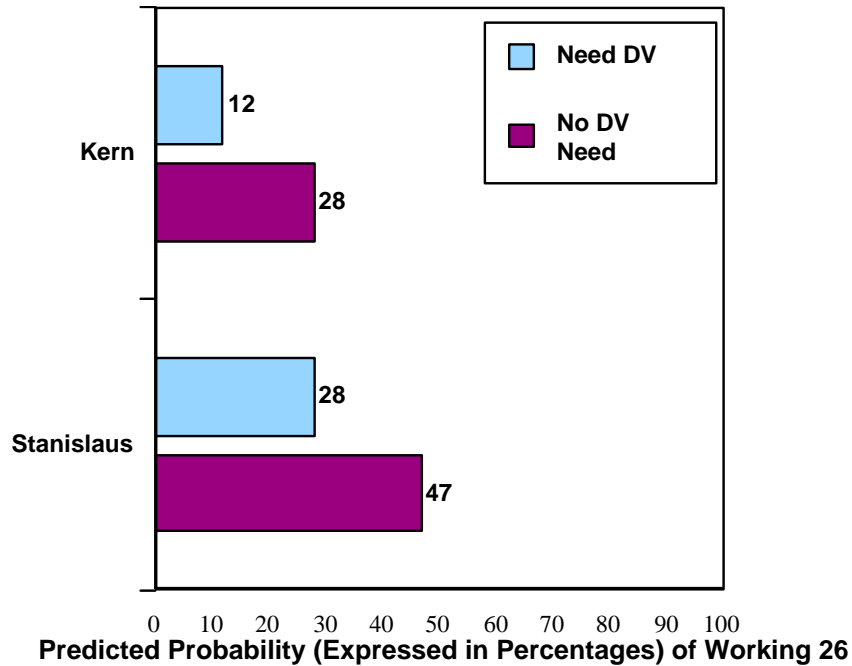


*Having a need for domestic violence services significantly impaired women in finding employment under welfare reform*

A primary goal of welfare reform is helping women achieve economic independence. Although our findings are complex, they demonstrate that having a need for DV services (or other indicators of domestic violence) makes it much less likely that a woman will find and keep a job. The negative effect of DV is much more prominent in Kern County, although when age, education, service receipt and partner-status are taken into account statistically the effect in both counties is similar. Stanislaus respondents in general were more likely to be working. Exhibit D is a graph showing the predicted probability of working at least 26 hours a week in each study county, comparing those with a need for DV services with those with no such need. The time frame is at the end of the second interview, which corresponds with having been subject to welfare to work requirements approximately one year.

In Kern only 12 percent of the sample worked if they had a need for DV services compared to 28 percent if they had no need. In Stanislaus the comparable percentages were 28 percent for those with a need and 47 percent for those with no need.

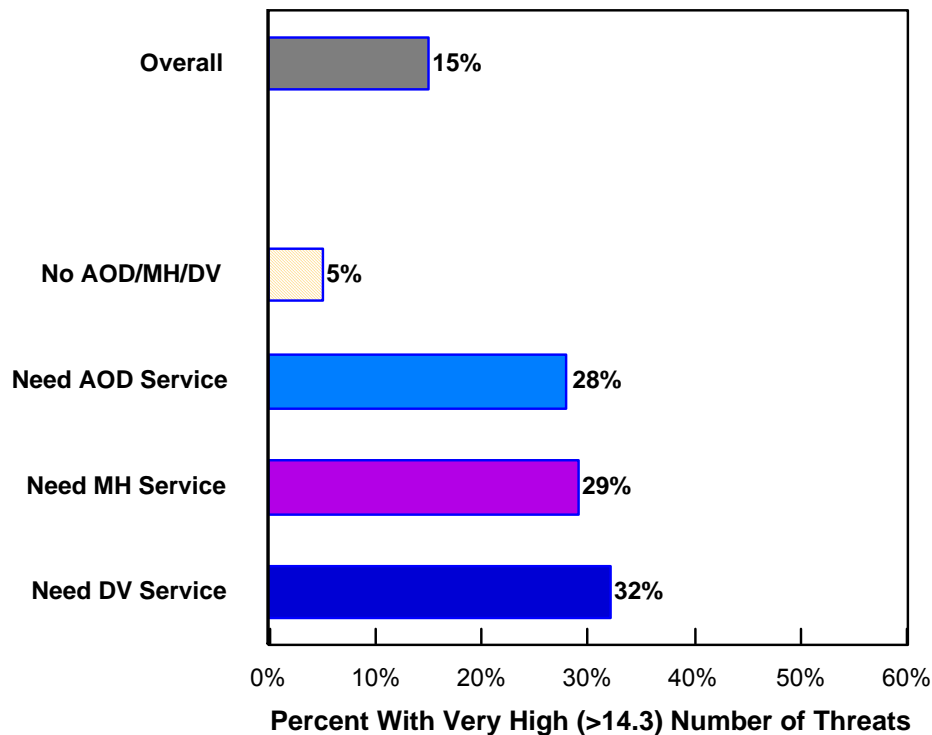
**Exhibit D: Predicted Probability of Working 26 or More Hours Associated with Need for DV Services, *Adjusted For Covariates***



*Having a need for domestic violence services was also associated with the presence of a large number of threats to the well-being of children in the family*

We collected information on a total of 51 “threats” to child well-being. These ranged from safety net measures such as whether a mother and child had been homeless in the year, to social support for the mother, to child behavior and school performance measures. Exhibit E. shows the percentage of those with DV needs (or MH or AOD needs) who scored “very high” on the sum of the 51 indicators. The top bar shows the overall percentage of those with a “very high” number of threats to be 15 percent of the sample. Only 5 percent of those women who did not have any DV, MH or AOD needs for service had this many threats to child well-being. However, 32 percent of women with a need for DV services scored at the “very high” level as did 28 percent of those with AOD needs and 29 percent of those with mental health service needs. There was also a strong statistical association of “any abuse,” “physical abuse,” and “serious abuse” with these indicators of threat to child well-being.

**Exhibit E: Women With A “Very High” Number (More Than 14.3) Threats To Children In Their Families, by AOD/MH/DV Service Needs**



**Welfare Policy implications**

- ❖ Remediable barriers, including DV (or MH or AOD) services issues, have a strong and predictable impact on employment outcomes. *Federal reauthorization of welfare reform legislation should require that TANF programs screen, assess, and provide services to persons with DV (and MH and AOD) issues.*

- ❖ *Hours spent receiving services for DV (or MH or AOD) issues should count as allowable work activities under TANF for as long as necessary.*
- ❖ *The 60-month time clock should pause during any months in which a recipient is receiving DV (or MH or AOD) services to overcome barriers to employment.* The seriousness of some of the DV (or MH or AOD) conditions requires active comprehensive services that may require more than a few months to rectify.
- ❖ Although all respondents had a TANF status of female head of household, about 40 percent of the women in each county had a steady partner. Information over the two interview rounds revealed that a substantial number of Stanislaus women experiencing serious abuse in a non-marital relationship in Round I had left the relationship by the next year. *Any attempt to promote marriage as part of the debate on the reauthorization of welfare reform—on both federal and state levels—should be approached very cautiously so as not to entrap women in abusive relationships.*

## **B. Practice implications for Welfare, DV, MH and AOD Services**

- ❖ Although a substantial number of women reported sustained abuse over two or three years, many cases of serious abuse arose each year. *Efforts to identify DV issues and to inform recipients about the availability of services and options need to be ongoing* in order to address both new cases that emerge over time and ongoing cases that have not been identified.
- ❖ A high proportion of women in the study experience more than one barrier. *Thus, programs that can integrate services are greatly needed. DV programs must also be able to assess and address low self-esteem and learning disabilities.*
- ❖ Very few women in the survey samples used the Domestic Violence Option although it was available to them. The fact that many participants don't remember being told about the DV Option or the availability of AOD and MH services (when we know they have been told) suggests that these informing efforts must also be ongoing. *TANF programs may also need to develop more effective ways of presenting information about the DV option.*
- ❖ For all four of the domestic violence measures we used (and adult trauma PTSD as well), families experiencing domestic violence were associated with high rates of multiple threats to child well-being. In order to address this association, *TANF programs should have a family focus. Professional DV (and AOD and MH) programs that serve TANF parents should address the needs of their children by ensuring that that any children with suspected problems receive thorough assessments and referrals to services.* DV residential programs serving TANF recipients should include women and their children, and special programming should be designed to meet the children's needs.

## **Glossary of Terms Used**

### **Serious abuse**

“Serious Abuse” is defined here as any one or more of the following:

- Physical injury
- Response on the physical abuse questions that respondent was “choked” or “beat-up.”
- Stalking
- Forced or coerced sex
- Threatened to kill woman or kill self
- Threatened or actually hurt children
- Threatened to kidnap children or call CPS
- Actual preventing a woman from working or harassing while on the job

### **Need for services**

A potential need for services was defined, for planning and administrative purposes, as any one or more of the following:

- Victim experienced “serious abuse.” Each of the criteria for serious abuse indicates an intimate partner violence situation that presented substantial risk to the woman.
- Victim experienced other work-related abuse. Actual preventing a woman from working, or on the job harassment are included in “serious abuse.” Here we add any of four other types of work interference (see below).
- Post-traumatic stress disorder (PTSD) in last 12 months that stems from adult abuse. A PTSD diagnosis involve meeting six criteria which together indicate considerable interference with daily life while they are being experienced.
- Self-defined need, that is, having seen a health professional, a counselor, a shelter/DV center, or sought help from police or courts.

### **Unidentified need for services**

- Persons with a “need for services” who did *not* seek or receive help from a domestic violence professional (including police and courts).

## Work measures

- Prevented from working by partner
- Partner refused to help/went back on promises
- Partner made hard to attend classes or program
- Partner tried to discourage from working
- Partner made feel guilty about working
- Partner harassed with phone calls at job
- Partner showed up at job and harassed
- Victim forced to go to work to support partner

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<sup>i</sup> <http://www.ncsl.org/statefed/welfare/famvioopt.htm>

<sup>ii</sup> The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 replaced the AFDC program of cash assistance with Temporary Aid to Needy Families (TANF) block grants. The California legislation implementing TANF is called CalWORKs (California Work Opportunity and Responsibility to Kids). Unless temporarily or permanently exempt, recipients of cash aid must participate in work activities or employment as a condition of receiving aid. Receipt of aid is limited to a maximum of two years at one time and five years lifetime.

<sup>iii</sup> Danziger, S. H. (1999). What Are the Early Lessons? In S. H. Danziger (Ed.), *Economic Conditions and Welfare Reform*. Kalamazoo: W.E. Upjohn Institute for Employment Research.

<sup>iv</sup> See the Domestic Violence Survey on the CIMH website: [www.cimh.org/calworks](http://www.cimh.org/calworks)