

Less Than Ideal: The Reality of Implementing a Welfare-to-Work Program for Domestic Violence Victims and Survivors in Collaboration with the TANF Department

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As the clock on the receipt of Temporary Assistance to Needy Families (TANF) benefits continues to tick, TANF departments across the United States are being expected to address the needs of their harder to serve populations, including domestic violence victims and survivors. This article documents the experiences and learnings from a large TANF office in Chicago where a pilot program was initiated 2 years ago to provide on-site domestic violence services to TANF participants. Despite considerable efforts, most TANF caseworkers resisted referring women for services, forcing the project to devise alternative means of gaining access to the women in the TANF office. Of the women who came to at least one follow-up session with the domestic violence advocates, 57% have been placed in work activities, demonstrating successful outcomes and indicating that it is critically important to solve the organizational issues raised by the demonstration project.

As of December 1, 1999, Options/Opciones, the Center for Impact Research's pilot project designed to address the multiple needs of domestic violence victims who are trying to move off Temporary Assistance to Needy Families (TANF) and become self-sufficient, completed its first 29 months of implementation. This demonstration project, in collaboration with the Illinois Department of Human Services, Rainbow House, and Mujeres Latinas en Acción (two community-based domestic violence service providers), is located in an inner-city community on

the west side of Chicago whose residents primarily are poor and working-class African Americans and Hispanics.

Options/Opciones was designed with the belief that TANF policy sensitive to the needs of battered women not only depends on policy changes in the TANF department itself but also requires a supportive service delivery system to be developed, lest already overburdened battered women's services be overwhelmed. Given the new TANF legislation and concurrent work requirements (U.S. House of Representatives, 1996, pp. 26-32), there was a need to develop a service delivery system that could serve far greater numbers of women who are struggling with the coupled problems of domestic violence and unemployment, using the existing service providers within the community and the TANF office as the beginning access point to provide assessment and case management services.

This article addresses one basic research question generated by the Options/Opciones demonstration project: Can local TANF offices serve as an effective access point for large numbers of domestic violence victims and survivors who need specialized services to help them address their domestic violence and employment-related needs?

PROJECT DESIGN

According to the initial project design, all TANF participants were to be screened for domestic violence at intake and every subsequent meeting with their caseworker at the TANF office. Those TANF participants who identified themselves as domestic violence victims were to be given the option of participating in Options/Opciones, with one of the project's domestic violence advocates doing an initial intake with the women on-site at the TANF office. Continuing services would then be provided in an off-site location where they would receive individual counseling, group workshops on TANF-to-work transitions, and case management for their related needs (e.g., legal, medical, education/ training, day care, housing, and food). When needs were identified, domestic violence advocates were to work with the women to obtain these services at agencies that have been sensitized to the predicament and needs of domestic violence victims.

Domestic violence advocates use the individual follow-up sessions as opportunities to provide the TANF participants with personal attention to their particular situations through on-site counseling, problem solving, strategizing, goal setting, and through referrals to the extensive set of agencies that provides the range of services needed by the TANF participants. TANF participants are

strongly encouraged to attend weekly group sessions (held in Spanish and in English), where the isolation so common among domestic violence victims begins to diminish. The group sessions were initially envisioned as a 10-week process, addressing the following topics: identifying the impact of abuse on their lives, exploring their capabilities, increasing their self-esteem, assessing their readiness for work or training programs, and setting short-term and long-term goals. However, domestic violence advocates are finding that some of the women neither want nor feel a need to commit to participating in the group for 10 weeks, or are unable to do so due to their work schedules, child care responsibilities, or limitations on their activities set by their abusers. Others are not able to move through the modules as quickly as had been anticipated, given their histories of abuse. Domestic violence advocates thus tailor the groups to the women's situational needs, addressing the range of topics approximately every 4 months.

Preliminary data about the effects of the domestic violence services provided by the Options/Opciones program are encouraging. Of the women who stated that they wanted to participate in the program, 35% actually followed through with services, a large percentage for domestic violence victims who often face barriers in being able to avail themselves of services due to the domestic violence itself. Of those women who came for at least one followup session, 56% were involved in work activities. Thirty-six percent entered paid employment, 9% entered vocational training programs, and 11% were involved in educational activities.

Given these encouraging statistics, it becomes all the more important for larger numbers of women to be referred to and participate in the demonstration project. This article will describe the multifaceted efforts undertaken by the pilot project to try to obtain greater TANF caseworker cooperation and referrals to the program.

THE IMPLEMENTATION OBSTACLE COURSE

Hurdle 1: The Domestic Violence Notice and Screening Form

As of December 1997 (5 months after the project began), referrals were down to a low of 8 women per month in an office that, at that time, was serving approximately 4,000 TANF participants. Part of the problem had to do with a cumbersome domestic violence notice and screening form that was being used in the TANF office. Although considerable effort went into the development of the form by domestic violence and employment service providers as well as the

TANF agency, the notice was far too long (a full page, single-spaced). Furthermore, the screening tool consisted of a series of questions that required women to divulge highly personal and potentially embarrassing questions to their intake or caseworker. It is not surprising that case and intake workers were no more comfortable asking the questions than were the women being asked to respond to them. As a result, most staff chose to ignore the new notice, read the list of questions to the women who, for the most part, denied having experienced the abuse, and thus had few, if any, TANF participants to refer for services. In response, the TANF agency temporarily eliminated the separate domestic violence notice and screening forms. Instead, TANF staff were instructed to informally raise the possibility of domestic violence as a barrier for their TANF participants when the women first come through the intake assessment as well as when they meet with their caseworkers to fill out their Responsibility and Service Plan. A shorter, far less intrusive form was developed, based on the Nevada TANF department's domestic violence screen. This form was never adopted by the TANF office and, for a full year, intake and caseworkers raised the issue of domestic violence with their TANF participants if and when they chose to do so, making an average of nine referrals for domestic violence services per month.

Hurdle 2: Poor Communication

Another problem with the implementation of the project related to the poor lines of communication between project staff and TANF department line staff, neither of whom had a comprehensive understanding of what the Others Were doing relative to the same TANF participants. Tensions between the TANF line staff and the project staff were tangible to everyone. From the perspective of some TAN1a department line workers, sending TANF participants to Options/Opciones was "like throwing people into a black hole. You never hear anything about them or know what's going on over there" (T. Tudor, personal communication, April 29, 1999). Project staff were equally frustrated with the TANF agency: "Many times, they don't ask the women about domestic violence at all, even though they are supposed to be giving everyone the screening and then they send us TANF participants who say they don't want services or need services. They sent us a lady who has problems with her children's school and want us to take care of it. They think that we are like the social worker for everything" (Project Advocate, personal communication, March 19, 1999). In a series of focus groups run by the TANF department to assess the implementation of the Options/Opciones project, these same problems with regard to communication were raised by participants (Illinois Department of Human Services, 1998). To address this situation, TANF staff were given further

information about the way the project operated and had a chance to raise questions with their supervisors as well as with project staff. Project staff were given a better understanding of the responsibilities that the TANF staff carry for each of their TANF participants. In addition, a Change/Progress Report form formalized a process for project staff to give TANF staff monthly feedback about their mutual TANF participants.

Hurdle 3: TANF Worker Roles and Expectations

A great obstacle to the project's implementation has to do with the roles of the TANF agency staff and the resulting interactions between them, their TANF participants, and the domestic violence service providers. Until the advent of 'reengineering,' Public Aid staff largely had the role of the "benefit police," verifying eligibility, getting benefits to the persons whose level of poverty or disability entitled them to aid, and trying to catch people who had assets or income disqualifying them from food stamps or cash benefits. Furthermore, they were expected to process a large number of TANF participants in a short time frame (Gurwitt, 1997). According to administrators within the TANF agency, many of the workers in the local offices had been TANF recipients up until the time that they were hired by the department to work as intake or caseworkers, and were similar to their TANF participants in their skill level and knowledge base:

Look, a lot of folks here are one paycheck away from being on the other side of their desks. Now in some people, that makes them more sensitive to people's circumstances. But for others, it just makes them mean. Do you know what I'm saying? They show how important they are by treating others like they're nothing. (Illinois Department of Human Services administrator, confidential communication, June 1998)

One caseworker, when asked why she thought that TANF participants were reticent to share their domestic violence situations with the IDHS workers, said,

I've been working with some of these people [IDHS staff] for over 20 years, and I can tell you that I'd never share anything about my life with most of them--not as a coworker, and for sure not as one of their TANF participants. They treat them like dirt. (Illinois Department of Human Services caseworker, confidential interview, July 15, 1998)

In a follow-up interview with another caseworker who has referred people to Options/Opciones, when asked why he thinks that we are getting so few referrals, he responded,

People [TANF participants] take it as a joke. But it's like child support. I tell them that they need to do it for the sake of the children. The caseworkers? They think that it is just another burden--a lot of them do. We are under some stress now and this is just taking up their time. But [the local office administrator] told everyone to fill out the papers and it seems like it's having an effect. It will take time and patience. When some of them [caseworkers] go home and get in a little scrape with their partners, they'll take this domestic violence a little more seriously. I don't mean to stereotype any group, but most people end up having some rough times in their homes. (Illinois Department of Human Services supervisor, confidential interview, July 15, 1998)

What is uncertain is whether getting TANF staff to refer TANF participants for services is simply a matter of patience or if the model is inappropriate, given the dynamics of the office. In a discussion with Oregon Adult and Family Services, which has been implementing a domestic violence referral service for approximately 2 years, the director of domestic violence services explained that unlike the situation in Illinois, her agency began its changeover from a benefits eligibility focus to that of a case management arrangement approximately 6 years ago. There was considerable resistance on the part of caseworkers to this change, and the resistance lasted for 2 to 3 years. According to the domestic violence director, "There are still some workers who are still resisting, but it has become much easier. The resistance comes primarily from people who were hired many years ago and think that this change will go away eventually, and all that they have to do is hold out" (C. Krager, personal communication, April 1998). In the TANF office that houses the Options/Opciones pilot project, the majority of the workers were hired quite a few years ago, and many have made it clear to their colleagues that they have no intentions of "empowering" their TANF participants, much less encouraging them to participate in a domestic violence program.

The new system places staff in new roles in which they are expected to function as quasi social workers, taking a holistic view of their TANF participants' needs, building a relationship with them based on trust, and helping them move to a situation in which their physical, mental, and emotional needs are addressed sufficiently so they can enter the paid labor force (Hagen & Owens-Manley, 2000). This component of reengineering--the changing of staff

roles and relationships with TANF participants and other service providers--is a long and, depending on one's perspective, welcomed or unappreciated process. During a domestic violence training session, one case manager, when asked her feelings about the new expectations for staff to help TANF participants address the multiple barriers to employment (including domestic violence), replied,

Look, I've been doing this for years anyway. If a woman is sitting here in front of me with sunglasses on and she's telling me she's fine and I know that she's been beaten bad--I've known her for years and seen her like that more than once, how can I just pretend like everything is ok? My heart goes out to her. I always tried to work with the ladies. Sometimes they don't want to talk with you, but I say something anyway. The difference is now we're supposed to do it [talk with the TANF participants]. But nobody is reducing my caseload. It's crazy. (IDHS case manager, personal communication, July 27, 1997)

Other staff comments reflected frustration and cynicism with the new role expectations.

It will be just fine. We'll sit around and hold hands and talk. I can't wait. (IDHS case manager, personal communication, July 27, 1999)

Hurdle 4: TANF Worker Attitudes Toward Domestic Violence

Domestic violence is not just another barrier to self-sufficiency, such as a lack of transportation or child care. Although the issue is being brought up more frequently in the media and public spheres (e.g., schools, medical settings, and occasionally in religious institutions), domestic violence is not a topic that most people are comfortable addressing. This is true not only for victims but also for those persons potentially in a position to reach out to help them. In the case of TANF intake and caseworkers in the pilot project office, the discomfort was compounded by overt hostility toward the women the project was intending to serve. During one of the domestic violence training sessions for TANF staff, one of the caseworkers remarked,

I haul my ass to work every day and I don't need anyone making excuses for me. If these ladies want to work, they certainly can.

Although the level of personal experience with domestic violence among the TANF staff in this particular office is unknown, a recent study of frontline workers in another TANF office found that more than 20% of the TANF workers

were domestic violence victims or survivors (Hagen & Owens-Mardey, 2000). Workers may feel resentful that they need to make special allowances for the needs of domestic violence victims in their caseloads, when their own conditions are not being addressed. Others may be in such denial about their own situations that it makes it difficult for them to recognize and respond to the domestic violence in their TANF participants' lives as well.

Initially, there was uncertainty as to whether the lack of referrals for domestic violence services was simply a reflection of caseworkers' reticence to refer TANF participants for any social services or something that had to do specifically with the issue of domestic violence. Once the TANF office began tracking referrals by caseworker, they found that few TANF participants were being referred to any outside agencies for any types of services other than job placement. In response, they hired mental health and substance abuse counselors to do on-site intake and assessment of TANF participants who caseworkers and intake workers felt might need these services, similar to the arrangement existing with the Options/Opciones program. And yet within 2 months, referrals for mental health and substance abuse services averaged 25 TANF participants per month (for each of the two service areas), whereas referrals for domestic violence services remained at approximately four to five per month, indicating that domestic violence is an issue with which TANF caseworkers continue to have difficulty.

REMEDIES FOR AN AILING PROJECT DESIGN

Retraining

The Illinois Department of Human Services is taking an aggressive stance in working to make the transformation occur. All intake and caseworkers are being required to attend extensive and ongoing retraining to improve their communication skills (active listening, challenging, conflict resolution, and effective interviewing techniques), to use and encourage problem-solving skills, and to see their TANF participants as part of a larger family system whose needs must be addressed if the client/family is to become more self-sufficient (Illinois Department of Human Services, 1999). However, if the pilot project was to be effective, something would have to be done before the effects of the department's retraining would be seen.

Bypassing TANF Workers

The temporary solution devised by Options/Opciones project staff, in conjunction with the TANF office administrators, was to jump-start the referrals to the project using the domestic violence advocates to advertise their own services, at the same time that they continued to work with the TANF staff to encourage them to make the referrals as well. Project domestic violence advocates began providing information about domestic violence and a general overview of the Options/Opciones project to women in groups as they waited to see their caseworkers or intake workers or participate in "Job Club" activities at the TANF office. Referrals to and participation in Options/Opciones increased significantly for the next 11 months, averaging 25 referrals per month, of which approximately 12 per month were a direct result of TANF department staff referrals.

One of the domestic violence advocates then suggested an additional mechanism that might have better results, and the TANF office administrator agreed to give it a try. In February 1999, intake workers were given a directive to send all of their female applicants for any assistance program to meet with the Options/Opciones domestic violence advocate following their intake interview, regardless of whether or not the TANF participants identified domestic violence as part of their application interview. How effective this process will be as a means to get services to women who want and need them still is uncertain. In the first 11 months of this new automatic intake referral procedure, 1,856 women came through the project's doors (a monthly average of 169 women), of whom 83 (4%) chose to participate in the project.

DISCUSSION

The fact that 56% of the Options/Opciones participants who came to at least one follow-up session are in work, school, or training is encouraging. However, is the TANF office a viable place to screen women for domestic violence? Can it be done effectively by TANF staff (caseworkers/intake workers) as part of their overall work with TANF participants, or does it need to be undertaken by staff who are specialists in domestic violence?

TANF department line staff are overwhelmingly not referring their TANF participants for domestic violence services in the Options/Opciones demonstration project. The vision of the TANF office as the public agency with access to poor women that can identify individuals living with domestic violence and help them gain access to domestic violence services may be unrealistic. It may be that county hospital and clinic staff or school personnel are more capable of establishing the kinds of relationships with their patients or clients that lend

themselves to involvement in this highly charged and personal issue. It may be that the nature of the TAN1a office, where TANF participants' economic well-being is in the hands of staff who have a significant degree of discretion in providing or denying the needed support, is not an environment in which TANF participants will reveal this information about their lives.

As the TANF roles continue to drop, however, an increasing proportion of those remaining have multiple barriers to overcome in their attempts to achieve economic self-sufficiency (Thompson & Mikelson, 2000), including domestic violence. It is in the best interest of domestic violence victims that domestic violence service providers continue to help TANF offices succeed in their efforts to identify and assist domestic violence victims.

REFERENCES

- Gurwitt, R. (1997). Cracking the casework culture. *Governing*, 10, 27-30.
- Hagen, J. L., & Owens-Manley, J. (2000). Implementing TANF in New York: The perspective of frontline workers. *Social Work*, 45.
- Illinois Department of Human Services. (1998). *Report: Domestic violence pilot focus groups*. Springfield, IL: Author.
- Illinois Department of Human Services. (1999). *HSC core curriculum training manual*. Springfield, IL: Bureau of Service Design and Planning.
- Thompson, T, & Mikelson, K. (2000). *Screening and assessment in TANF/Wt.W.* Washington, DC: Urban Institute.
- U.S. House of Representatives. (1996). *Conference report on the Personal Responsibility and Work Opportunity Reconciliation Act of 1996*, 104th Cong. 2nd Sess., H. Report 104-725.

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