



Report II from the
Assessing Work First Series

*Assessing Work First:
Challenges Facing
Long-Term Welfare Recipients
in New Jersey*

*Conducted by the Legal Services of New Jersey
New Jersey Poverty Research Institute*

**Findings from the
Work, Poverty and Welfare
Evaluation Project**

**Through financial support from
the Fund for New Jersey**

June 2000



<http://www.lsnj.org/WPWEF.htm>

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We accept sole responsibility for any errors or omissions in the report.

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EXECUTIVE SUMMARY

The sweeping federal and state-level welfare policy changes of the mid-1990's have created a new time-limited, work-mandated welfare program. In order to understand this new program, Legal Services of New Jersey, through its Work, Poverty and Welfare Evaluation Project, embarked on a multi-year assessment project. To date, researchers have completed three surveys in six counties that were chosen to represent the state. The findings from the initial two surveys—one of current and the other of former Work First New Jersey (WFNJ)/Temporary Assistance to Needy Families (TANF) recipients—were compiled in a June 1999 report entitled *Assessing Work First: What Happens After Welfare?* The most recent survey examined the New Jersey long-term welfare population. Questions that this survey addressed include: What are the work histories and experiences of long-term welfare recipients? What challenges and needs do these recipients face? Are long-term welfare recipients aware of welfare agency services? Findings revealed that most respondents had some work history, although it was often limited. Many respondents faced challenges such as physical and mental health issues and childcare and transportation difficulties that may have interfered with their ability to comply with the many requirements of WFNJ. In addition to these challenges, a large number of respondents were not aware of specific welfare agency programs and services.

Main Findings

Work History

- Nearly all long-term welfare recipients had some history of work. Ninety-two percent of respondents had held a job or a workfare placement at some point in their lives.
- Despite the fact that most respondents had held a job or a workfare placement, such work experience remained limited for many. The average length of time that respondents had worked full-time for all or most of the year since age 18 was 5 years.
- Respondents' work experiences were concentrated in lower paying occupations. The majority (54%) of respondents who were working when interviewed were holding jobs or workfare placements in one of the service occupations.

Challenges Facing Respondents

- Respondents reported having low levels of educational attainment compared to the population as a whole, but they aspired to improve that level. Close to half (47%) of respondents had not received either a high school diploma or a GED. Many respondents also had low basic skills. Respondents scored below the national average in an assessment that



measured verbal ability. Almost half (49%) reported not having any computer skills. Most respondents (81%) were interested in continuing their education.

- Respondents were more than three times as likely to suffer from major depression than women in the general population. More than two in five (42%) respondents likely suffered from major depression, compared with 13% of women nationally.
- More than a third (35%) of respondents reported that a chronic physical health or medical condition prevented or hindered them from working. In addition, nearly a quarter (24%) had a financially dependent child with an ongoing physical, learning or mental health difficulty that prevented or hindered the respondent from working.
- More than one in five respondents (23%) reported that their circumstances forced them to live doubled- or tripled-up with another household.
- More than one-fifth (23%) of those who had used childcare during the past year had problems with that childcare.
- Respondents reported having problems related to transportation. A quarter (25%) of respondents reported that transportation problems caused them not to look for work, or not to participate in a school or training program during the past year.

Welfare Agency Services to Clients

- A large number of respondents were not aware of welfare agency programs and services such as the Family Violence Option, Individual Responsibility Plan and support services.
 - Fewer than a third (32%) of all respondents were aware of the Family Violence Option.
 - Many respondents were not familiar with the Individual Responsibility Plan (IRP). Since receiving welfare, 73% reported that their caseworkers had not prepared or that they did not remember if their caseworkers had prepared an IRP. When asked detailed questions regarding specific IRP areas, in all but one category, more than half of the respondents indicated that their caseworkers had not discussed the plan's components.
 - Many respondents reported that their caseworkers did not tell them about available support services. Most (86%) said that their caseworkers did not tell them about extra money for work-related expenses. Nearly one in three reported not being told about transportation services. More people reported being told about childcare than any other support service but, even so, 16% were still not informed of this service.

Policy Recommendations

In addition to the specific challenges and needs which emerged from each portion of the survey, two overarching needs are apparent from the research, relating to assessment and case management. Recommendations resulting from those needs are set out below, and then followed with recommendations germane to each section of the survey.

- *Create an assessment process that determines employability status and identifies the full range of service needs as well as challenges to stable employment that the client may be facing.* A comprehensive assessment is the gathering and objective evaluation of information about the client's strengths and challenges relevant to his/her current level of functioning. An up-front assessment should be completed after WFNJ eligibility has been determined but prior to the completion of an Individual Responsibility Plan and the assignment to a work activity. This assessment should be done in person by a caseworker, and should include both strengths and challenges, some of which may be unidentified by the client. Because the range of challenges that the client may face involves changing crises, a comprehensive assessment process should be ongoing. Particularly for long-term welfare recipients, assessments should focus on challenges, and facilitate caseworker efforts to assist the client in accessing appropriate services. Assessments should also be a basis to defer the client from work activities when allowable, or otherwise accommodate the client's needs in meeting work requirements. In addition to an initial assessment, further assessments should occur throughout the client's participation in WFNJ and during the individual's transitional time off the program.
- *Provide each client with a single case manager who is knowledgeable about program rules and available services, and able to facilitate participation in the program on a continuous basis.* In spite of a legal requirement for case management and comprehensive assessment, and the efforts on the part of the Department of Human Services to provide services to particular populations, the current version of WFNJ takes a piecemeal approach to what is inherently a holistic issue. The survey's main findings demonstrate that the needs and challenges that long-term welfare recipients face cover a range of issues. A case manager can work with the individual client to address his/her unique circumstances and can provide the linkage among all of the services that existing programs and initiatives are set up to address. Case managers should be trained to provide deferrals from work requirements and secure services as necessary. A case manager should not replace the direct services and treatment provided by social and legal service organizations, but rather should serve as a single point of entry to access programs and



initiatives. Case managers should provide ongoing assistance to the client so that as problems arise or circumstances change, the client is able to speak with a person knowledgeable about her situation and status within the program.

The following recommendations resulted from the findings in specific survey sections.

- *Address the need for basic education.* Nearly half of reporting respondents did not have a high school education. Respondents also had verbal ability scores below the national average. This basic education need must be addressed for long-term welfare recipients. Clients should receive an educational assessment. Caseworkers should be trained to secure educational services that are appropriate to recipients' needs and interests.
- *Consider post-secondary education as an allowable work activity.* Individuals would like to obtain further education. In light of the results of studies on the correlation between post-secondary education and lifetime earnings prospects, New Jersey should follow several other states and adopt a policy encouraging post-secondary education through a separate state-funded program that treats such education as an allowable work-related activity. The program should suspend welfare time limits for any person pursuing a first post-secondary degree full-time, or part-time, if they are working and taking at least two courses toward a degree each semester.
- *Ensure that quality, relevant and up-to-date computer training classes are available as allowable work-related activities.* Computer classes should be an available, acceptable work activity and presented as an option for welfare recipients who lack these skills.
- *Educate welfare agency staff about the causes and symptoms of depression.* Awareness of depression should infuse the conduct of the welfare system. This awareness should include an understanding of both the causes and symptoms of depression. For example, symptoms can include irritability, characterized by a fight-or-flight response to acute stress associated with depression.
- *Assess clients for major depression at periodic intervals.* As depression can be debilitating, there must be an assessment of all recipients which includes some basic indicators of risk factors for depression. Such an assessment should be completed by a professional who is trained to conduct the assessment and has the authority to follow up with appropriate referrals for treatment and deferrals from work activities.

The assessment process should be ongoing and coupled with affirmative and supportive case management since people's needs and circumstances change frequently.

- *Expand the definition of disability.* People who suffer from major depression and many other mental health disorders often do not meet the stringent guidelines for Supplemental Security Income (SSI), yet they have impairments that affect their ability to function in daily life. The definition of disability under WFNJ needs to be broader than what is currently allowed under SSI.
- *Systematically assess recipients to determine their health condition.* As the caseload declines and the 5-year time-limit approaches, there will be more of a need to ensure that services are in place to assist people with health barriers. There should be full utilization of managed care and treatment possibilities under the Medicaid program. Better assessments for health conditions and use of case management can help people obtain proper care. It is also important to screen for possible deferrals from work requirements as well as referrals to the LSNJ SSI Project.
- *Provide assessments and case management to assist those recipients whose child(ren)'s health condition requires further care.* Given that children's health can have significant impacts on parents' employment, assessments and case management can assist clients in finding ways of coping with child health barriers to employment and gaining access to support services. There must be close coordination with, and universal utilization of, the mandatory Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program in Medicaid. Case managers can either assist clients in finding ways to ensure that their children's needs are met as they participate in paid jobs and work activities, or exempt clients with child health barriers from work requirements. Case managers can also direct clients with child health barriers towards jobs that provide paid sick leave and personal days, so that they will be able to take time to care for their children without losing their jobs.
- *Provide an affirmative assessment to determine if recipients may be eligible for the Family Violence Option (FVO).* The low number of respondents aware of the FVO—fewer than one-third of all respondents—demonstrates that there needs to be better implementation of the program. Affirmative screening for domestic violence situations must take place for all WFNJ applicants and recipients. This screening needs to be conducted with great sensitivity by individuals well-trained and experienced in dealing with domestic violence victims. Adequate quality services that are easily accessible must be available to those in need.
- *Conduct further research in the area of childcare.* Further research is needed to understand what is happening with the children who are in the



homes where no childcare is being used. One third of respondents are paying for childcare, yet all TANF recipients should have their childcare needs met by the welfare agency. Further research is needed to understand the circumstances of these families. Are they paying for childcare to participate in work activities when welfare should be paying? Should the welfare agency cover certain childcare costs that it doesn't cover now, such as after school programs?

- *Invite client participation to make informed decisions.* The IRP should be developed in a joint effort between the case manager and client. The resulting document should be a flexible and realistic blueprint which describes the steps the client will take in meeting WFNJ requirements.
- *Provide an up-front, in-depth assessment at the time of application or re-determination.* Questions included in the formal IRP explore important areas but should be expanded to capture a more detailed description of the challenges facing the recipient. For example, the previous sections have revealed that many recipients met the DSM-IV criteria for an episode of depression in the 12 months prior to the survey. Such a condition may affect a person's ability to get or keep a job and must be taken into account when determining compliance with the program.
- *Review the IRP at pre-determined intervals in order to update the document so that it reflects the client's current situation.* WFNJ regulations stipulate an update to take place every 6 months at the time of re-determination. A review should also be a mandatory action prior to the imposition of a sanction.
- *Provide information about available supportive services to recipients at the time of application and re-determination interviews.* Many respondents reported that they were not informed of the various support services. With the amount of paperwork and information being exchanged at the time of a visit with the caseworker, it is possible that the information was given to the respondent, but s/he did not remember. In such instances, a system of dissemination needs to be created which clearly informs the recipient on multiple occasions about the available support services.
- *Decrease the number of cases assigned to each caseworker.* Part of the reason only roughly half of the respondents indicated that their worker knew them well or took the time to explain program rules may be attributed to the extremely high case to caseworker ratio. In some counties, for example, caseworkers manage between 200 to 300 active cases. By decreasing the caseload size, caseworkers can focus more individual attention on their clients, thereby offering greater assistance.

Introduction

Scope

This report marks the second in the series *Assessing Work First* produced by the Poverty Research Institute of Legal Services of New Jersey. It details the research findings from an extensive social science survey of long-term New Jersey welfare recipients: those who had been on Temporary Assistance to Needy Families (TANF) continuously for at least 24 months under Work First New Jersey (WFNJ). Among the many evaluation and research challenges presented by welfare reform, examination of the prospects of long-term welfare recipients as they approach their five year lifetime limit on receipt of welfare is perhaps the most pressing. The WFNJ program is now three years old, and people who have been on it continuously from the beginning of Work First have only two years left to find sustaining work before they are permanently cut off from public assistance.

The research presented within this report sought to discover the circumstances and capacities of long-term welfare recipients. We need to understand the challenges that pose barriers to these welfare recipients' ability to work and what assistance might help them overcome those barriers. Such findings can then help shape new policy directions.

The General Context

By now the story of 1990's welfare reform in America is quite familiar: the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) dramatically altered the national social policy landscape by eliminating entitlement programs to families in 1996 and created the TANF program. To implement the federal statute, New Jersey passed WFNJ in early 1997, which instituted a 5-year lifetime limit of benefit receipt and mandatory work requirements. Two sets of emergency regulations were adopted on February 1 and April 2, 1997, which, among other things, began the 24-month work activity and 5-year lifetime receipt clocks, respectively. This relatively untested new policy raised numerous questions as to its efficacy and impact on the population. Are current and former welfare recipients able to find and keep jobs during or after their time on welfare? If so, do their jobs pay a living wage? Are governmental entities properly implementing the new program? How are children faring under WFNJ? The answers to these and many other questions are complex and not always easy to find, given the diversity of the population. Early research has provided responses to some questions; more time and intensive research will reveal the answers to others.

Work First New Jersey could have serious implications for welfare recipients left on the caseload and potentially less work-ready. In February 1997, during the early WFNJ implementation phase, just over 98,000 families were receiving WFNJ/TANF¹. Recently released statistics from November 1999 indicate that approximately 53,389 families were receiving this benefit—an overall decline of 46%². Policymakers have acknowledged that this startling decline of the caseload reflects only the initial phases of the program and is not necessarily an indication of success. The concern is that people who are left on welfare—those with fewer skills, lower levels of education, and more physical or mental health barriers—are those who face special difficulties in finding and keeping a job that pays an income sufficient for supporting themselves and their families.

The Study Sponsor— Legal Services of New Jersey

Legal Services of New Jersey (LSNJ), an independent, non-profit corporation, coordinates the statewide Legal Services system. LSNJ strives to ensure equal access to justice under law to all people of New Jersey, providing free legal assistance to low-income people in civil matters. LSNJ embraces the vision of *full access to essential civil legal aid for all economically disadvantaged people who cannot secure a lawyer on their own and, through that legal aid, equal justice, both substantive and procedural.*

From this vision, LSNJ's core mission statement is:

“Just Justice”—Legal Services seeks to secure equal substantive and procedural justice for all economically disadvantaged people.

Legal Services seeks to provide its services in the most effective and efficient manner. Consequently, LSNJ is constantly on guard for approaches with potential to alleviate poverty for the poor generally, beyond just the parties to a lawsuit. Over the years LSNJ has engaged in extensive social science research in an attempt to better understand—and address—the problems and legal needs of the poor. Prioritizing, for example, legal representation that tends to help rebuild impoverished, deteriorated communities, or that addresses in a single forum or legal action recurrent problems which otherwise would repeat themselves hundreds and thousands of times in individual cases.

The Study Group on Work, Poverty and Welfare

In 1995, a group of more than fifty organizations and individuals concerned about the impending changes in the welfare law formed the Study Group on Work, Poverty and Welfare. Through regular meetings with representatives of the Governor, the Department of Human Services and the Legislature, the Study Group has played an influential role in shaping aspects of the WFNJ statute, regulations and implementation. The Study Group remains a very active observer of the Work First program.

The Poverty Research Institute

To remedy the dearth of information and statistics on poverty in the state, Legal Services of New Jersey founded the Poverty Research Institute (PRI) in 1996. The PRI is the first and only entity in New Jersey exclusively focused on developing and updating information on the extent and effects of poverty in the state. Through original research and compilation of data from publicly available sources, the PRI seeks to generate and distribute information. Such information aims to increase public awareness and knowledge and to assist policymakers in making informed decisions. Recent research projects have included a study on the cost of living in the state entitled *The Real Cost of Living: The Self-Sufficiency Standard for New Jersey*, and a Budget Analysis Project which examines the TANF budget and expenditures. The *Assessing Work First* series, of which this report is a key part, is an ongoing PRI effort to assess how the changes resulting from Work First New Jersey have affected people in poverty. The overall title of this ongoing welfare research is the Work, Poverty and Welfare Evaluation Project (WPWEP).

Launched in 1997, WPWEP seeks to understand the various changes experienced by welfare recipients following the overhaul of the former welfare program. The statewide, multi-year project incorporates both quantitative as well as qualitative research to examine the changes resulting from WFNJ. At the project's inception, LSNJ organized a group of professionals and academics to provide feedback. This Academic Advisory Panel draws from a wide range of experts in the fields of poverty and welfare. To date, WPWEP researchers have completed three comprehensive surveys of current or former welfare recipients. The first survey examined people currently receiving welfare, while the second explored the status of people who left welfare. The findings from the first two surveys were compiled in Report 1 from the *Assessing Work First* series, entitled, *Assessing Work First: What Happens After Welfare*. In addition, researchers have conducted two focus groups (Newark and Camden) in the summer of 1999 to help formulate questions for future research.

The Survey of Current WFNJ/TANF Recipients II takes another snapshot of people currently receiving welfare. Unlike the initial survey of current recipients, the sample is drawn from a population of long-term recipients—those expected to face the most challenges in leaving welfare to find sustained employment. The survey focused on two broad areas of inquiry: (1) what are the needs and challenges facing long-term recipients, and (2) how are certain services provided by the welfare agency actually working?

Methodology

Researchers interviewed 334 respondents from September through December 1999. Respondents were randomly drawn from the New Jersey Department of Human Services database of WFNJ/TANF recipients as of August 1999. Since this study focused on long-term recipients, only people who had received at least two consecutive years of welfare since the implementation of WFNJ were included in the sampling frame. Cases in which no adult caretaker received benefits (“child only” cases) were not included. Consistent with the two previous studies of the Work, Poverty and Welfare Evaluation Project, the sample consisted of recipients from six New Jersey counties. Counties studied reflect the northern (Essex and Hudson), central (Monmouth and Mercer), and southern (Camden and Cumberland) regions of the state. Counties were chosen to represent New Jersey’s diverse geography of urban, rural and suburban areas, as well as counties with large welfare recipient populations. The surveyed counties comprised just over half of the state’s poverty population and roughly two-thirds of the state’s welfare caseload.³ With this sample, researchers were able to make many statements that, more than 90% of the time, differed by no more than 4.5% in either direction from what would have been determined by interviewing all WFNJ/TANF recipients from the six chosen counties.⁴

Because of the challenge in contacting potential respondents, researchers relied on a mixed-mode approach utilized in previous WPWEP projects. Trained interviewers staffed phones to receive toll-free calls from respondents. In addition, staff made outgoing calls to respondents for whom phone numbers were available. In-person interviews occurred only after interviewers had been unsuccessful in pursuing all telephone survey options.⁵

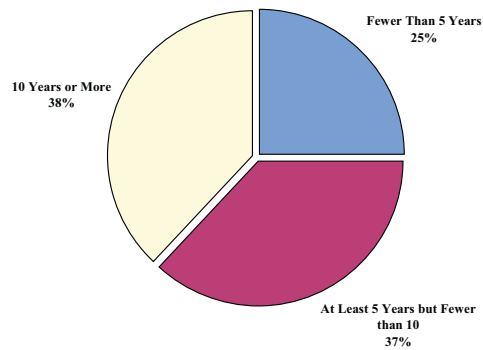
Characteristics of Long-Term Welfare Recipients

Welfare Receipt

All respondents reported the cumulative time that they had received either Aid to Families with Dependent Children (AFDC) or Temporary Assistance to Needy Families (TANF) benefits as adult or teen parents (they did not include times that they might have been a child on a case). Three-quarters of those surveyed had already been on welfare for at least five years.⁶ The average length of time that respondents had received welfare was 9 years.

Figure 1

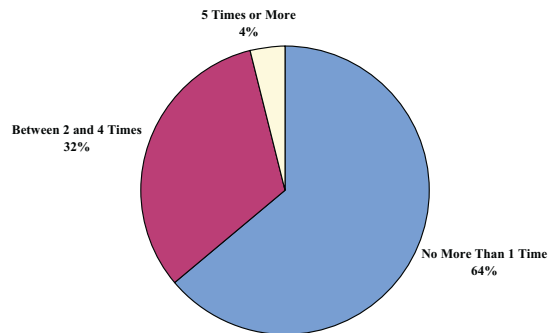
Total Number of Years Respondents Had Received Welfare



Source: Survey of Long-Term Welfare Recipients
 Note: n=329

Figure 2

Number of Times Respondents Received Welfare



Source: Survey of Long-Term Welfare Recipients
 Note: n=330

People go on and off welfare depending on their life situations. Nearly two-thirds (64%) of respondents reported that they had applied for and received welfare only once in their lives. Close to a third (32%) reported that they had received welfare between 2 and 4 times, and one out of twenty-five (4%) reported that they had received welfare 5 times or more.

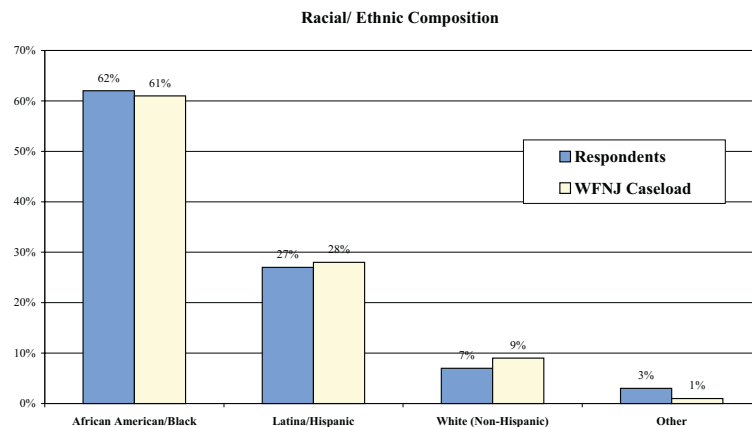
Gender

Nearly all (98%) of respondents were female.

Race/Ethnicity

The majority (62%) of respondents described themselves as African American or Black, 27% as Latina/Hispanic, 7% as White (not Hispanic), and 2% as Multi-racial. The chart below illustrates that our sample closely matches the racial and ethnic composition of the general WFNJ/TANF caseload.⁷

Figure 3



Source: Survey of Long-Term Welfare Recipients and Profile of NJ TANF Population, NJ DFD Bureau of Research and Statistics, July, 1999
Note: n=333. Due to rounding, percentages may not add up to 100.

Ability/Comfort Communicating in the English Language

Some respondents did not speak English well enough to be able to answer, or feel comfortable answering, interview questions in that language. Researchers conducted 16% of interviews in Spanish.

Table 1**Number of Dependent Children and Income**

Number of Dependent Children Living With Respondent at Time of Interview	Median Income for Preceding Year	%
0	\$6,724	2%
1	\$7,028	27%
2	\$8,535	33%
3	\$9,816	20%
4	\$10,770	12%
5	\$13,008	4%
6	\$14,136	2%
7	\$16,323	1%
10	\$24,565	<1%

Source: Survey of Long-Term Welfare Recipients
Note: n=326

Age

Respondents' ages ranged from 21 to 62 years, with a median age of 34. Over a third (36%) were ages 21 to 30, 42% were ages 31 to 40, and nearly one-quarter (23%) were over age 40.

Income

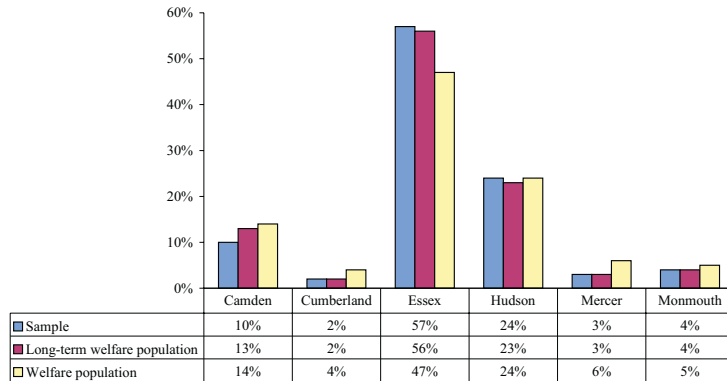
Researchers calculated income for the 12 months preceding the interview for each respondent, utilizing the amounts that respondents reported for WFNJ cash grants, monthly child support, wages from jobs, money from work "off the books," Food Stamps, other government cash benefits (including Social Security Disability, Supplemental Security Income, Veteran's Administration, Worker's Compensation, and State Disability Assistance, other disability programs), other cash (including lottery, gambling, insurance awards, etc.), and the federal Earned Income Tax Credit.

Median income for the twelve months prior to the interview was \$8,688. The average hourly wage that respondents earned in paid jobs in the year preceding the interview was \$7.19.

County of Residence

Figure 4

County Demographic



Source: Survey of Long-Term Welfare Recipients and WFNJ administrative records data
Note: n=334

Respondents lived in Essex (57%), Hudson (24%), Camden (10%), Monmouth (4%), Mercer (3%), and Cumberland (2%) counties. The sample closely reflected the adult long-term recipient populations in Essex (56%), Hudson (23%), Camden (13%), Monmouth (4%), Mercer (3%), and Cumberland (2%) counties.

Figure 4 includes figures of the general welfare population for comparative purposes. In some counties, the percentage of the long-term recipient population was higher than the general TANF population percentage. For example, of the six counties Essex accounted for 47% of the general TANF population, but encompassed 56% of the long-term welfare population.

PART IV

Work Experience

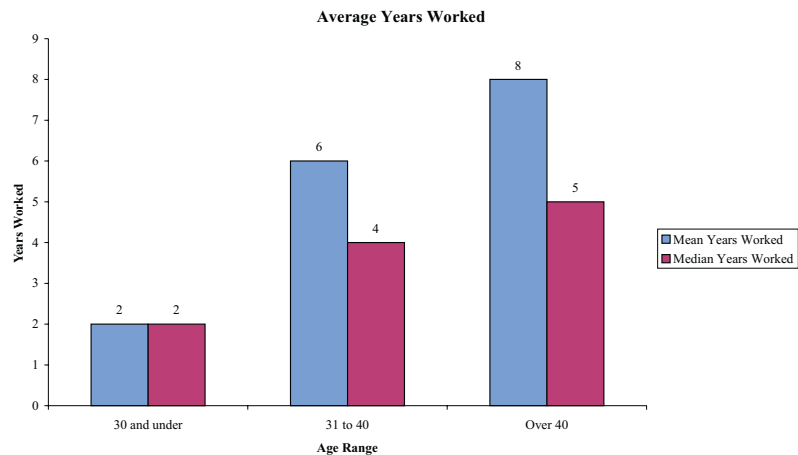
One of the major concerns about WFNJ is whether long-term welfare recipients—those who have been receiving TANF for at least two years—will be able to obtain and maintain stable, economically viable jobs. This concern heightens as such recipients approach the five-year lifetime limit on welfare receipt. Because of health problems or other factors, some welfare recipients may not be able to work in paid jobs, either at all or for significant lengths of time. For those who are able to work, the types of jobs that they are able to obtain may not provide the stability, pay, benefits and advancement opportunities necessary to support themselves and their families. Both national and New Jersey-specific studies have demonstrated that welfare recipients often find themselves in a section of the labor market characterized by unstable jobs, low pay, few if any benefits and high turnover.⁸

Researchers explored the experiences of long-term New Jersey welfare recipients in paid jobs and workfare placements. Questions focused on work experience, the characteristics of current jobs or workfare placements, the type of work done in the job held longest, and the primary reason that their most recent job ended. Researchers also asked about the primary reasons respondents were not working.

Nearly all (92%) respondents had a work history.

Nearly all long-term recipients had a work history. Ninety-two percent of respondents had held a job or a workfare placement at some point in their lives. Seventy-eight percent of respondents had worked full-time in a job or a workfare placement for at least all or most of a year.

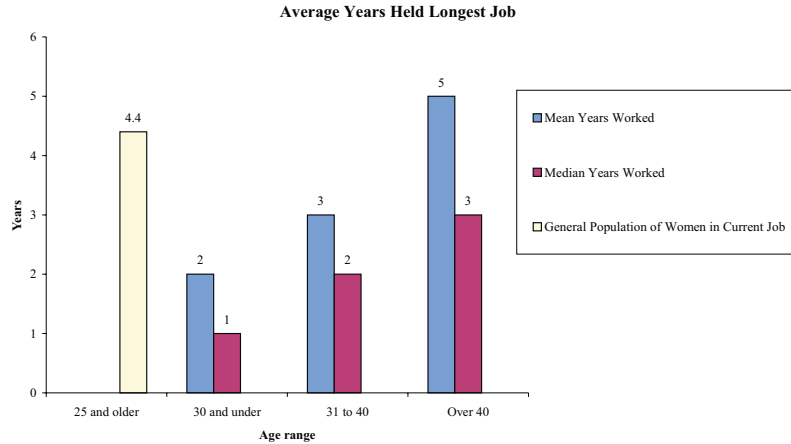
Figure 5



Source: Survey of Long-Term Welfare Recipients
Note: n=298

Despite the fact that most respondents had held a job or a workfare placement, work experience remained very limited for many, especially when compared to the general population.

Figure 6



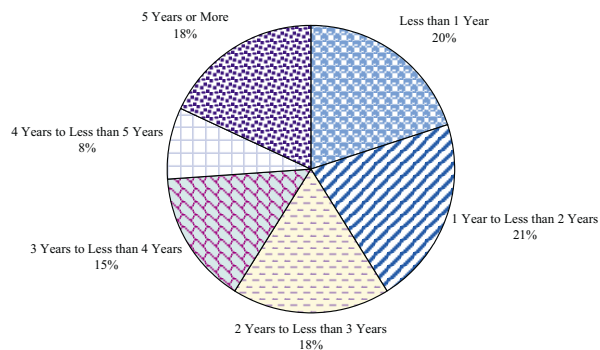
Source: Survey of Long-Term Welfare Recipients and Current Population Survey, Department of Labor, 1998
Note: n=300

Despite the fact that most respondents had held a job or a workfare placement, work experience remained very limited for many. Among respondents who had held a job or a workfare placement, the average length of time that respondents had worked full-time for all or most of the year since age 18 was 5 years. The median length of time was 3 years. The number of years worked varied by age—older respondents tended to have had longer work histories.

For the 92% of respondents who had held a job or a workfare placement, the average length of their longest single job was 3 years and the median length of that job was 2 years.

Figure 7

Longest Time Respondent Has Held a Single Job



Source: Survey of Long-Term Welfare Recipients
Note: n=300

The median length of the longest single job or workfare placement was below the median length of time—4.4 years—that the general population of women ages 25 years and older held their current paid jobs in 1998.⁹

Over a third (35%) of respondents who had worked in jobs or workfare placements at some point in their lives had held a single job for no longer than 1 year. Excluding those who were excused from the work requirements at the time of interview, a slightly higher percentage (37%) of respondents had held a single job for no longer than 1 year.

Respondents' work experiences were concentrated in lower paying occupations.

Respondents' work experiences were concentrated in lower paying occupations. Respondents had held their longest paid job or workfare placement in a variety of occupations. Few (6%) of the jobs or workfare placements were in either of the two highest paying occupational categories: "professional or technical" and "managerial or administrative." The types of work for the longest held jobs or workfare placements were sales (18%), clerical (17%), operative (17%), hospitality service (12%), personal health service (12%), education or child care service (9%), labor (3%), professional or technical (3%), managerial or administrative (3%), other service (2%), craft, precision production, or repair (1%), and other types (2%).

Labor market characteristics and individual circumstances surfaced as primary reasons that the jobs or the workfare placements held most recently ended.

Labor market characteristics and individual circumstances surfaced as primary reasons that the jobs or the workfare placements held most recently ended. For 36% of respondents who had held a job or a workfare placement at some point in their lives, the primary reason that their last job or workfare placement ended was that the job or placement was temporary or they were laid off. The following table lists the reasons that were reported as primary reasons that the jobs or the workfare placements held most recently ended.

Table 2
Primary Reason Last Job or Workfare Placement Ended

	Number	Percent
The job was temporary or short-term; employer closed business; respondent was laid off	99	36%
Had a physical or mental health condition that prevented her from working	34	13%
Was pregnant	20	7%
Did not have the transportation necessary to get to her job or workfare placement	15	6%
Had to take care of a sick family member at home	14	5%
Was fired	13	5%
Could not get adequate childcare or supervision	12	4%
Moved	9	3%
The pay/benefits of the job were not sufficient	8	3%
Got a better job	8	3%
Was treated badly on the job by co-workers or boss	5	2%
Was attending school	5	2%
Physically could not perform job duties	4	2%
Was in a domestic violence situation	1	<1%
Did not have the skills necessary for the job	1	< 1%
Other	24	9%

Source: Survey of Long-Term Welfare Recipients
Note: n=272

Many respondents had very limited and low-paying work at the time of the interview.

Many respondents had very limited and low-paying work at the time of the interview. Fewer than half (45%) of respondents reported that they were working in a job or a workfare placement. Excluding those respondents excused from the work requirement, just over half (55%) were working in a job or a workfare placement.

Among those who were working in a job or a workfare placement, two-thirds (66%) of respondents had only begun that job or workfare placement in 1999.

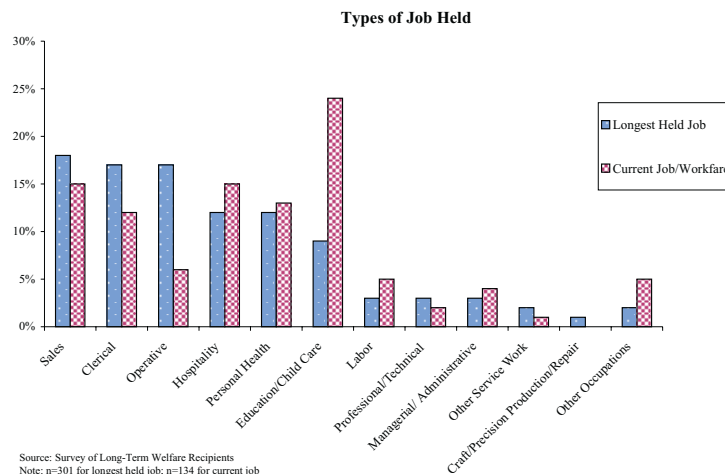
The percentages of respondents who began in prior years the job or the workfare placement that they were holding at time of interview were: 18% in 1998; 8% in 1997; 3% in 1996; 1% in 1995; 2% in 1994; 2% in 1993; 1% in 1989; and 1% in 1984.

Over two-thirds (68%) of respondents who were working in a job or a workfare placement were not working full-time.

Among respondents who were working in a job or a workfare placement, the total hours worked per week in all jobs, including workfare, was 15 hours or less for 10%, more than 15 but no more than 20 hours for 22%, more than 20 but no more than 35 hours for 36%, and more than 35 hours for 33%.

Paralleling the data concerning prior work history, few (6%) respondents with current jobs were working in the two highest earning occupational categories, “professional or technical” and “managerial or administrative.” The majority (54%) of respondents who were working were holding jobs in one of the service occupations, one of the three lowest earning occupational categories (along with labor and farm work).¹⁰ The following chart reflects the current types of jobs or workfare placements in comparison to the types of job that the respondent had held the longest. For example, only 9% of respondents had

Figure 8



prior work history in education/child care service. In contrast, more than twice that number (24%) were currently working in that area.

Many respondents working in a job or workfare placement at the time of the interview did not have employer-sponsored benefits.

Of reporting respondents who were working in a job or a workfare placement, 80% were not receiving paid sick days, 76% were not receiving paid vacation, 84% were not receiving a health plan or medical insurance, and 81% were not receiving a retirement program. Since many of those participating in workfare placements may not receive employer-sponsored benefits, the actual percentages of people not receiving benefits in traditional jobs may be lower than the percentages indicated above.

A variety of serious issues prevented respondents from working.

A variety of serious issues prevented respondents from working. More than one in four (27%) respondents reported that a physical or mental health condition prevented them from getting a job. Nearly a quarter (23%) indicated that they were interested in finding a job, but had not found one yet. Other issues that prevented respondents from working included childcare problems, the need to care for a sick or disabled family member, and a lack of skills or education.

A number of broad conclusions about respondents' work experiences can be drawn. Nearly all respondents had worked in paid jobs and workfare placements, but many still had limited work histories. This suggests that, in general, long-term recipients are quite willing to work in paid jobs and workfare placements, but that their tenuous life circumstances may have to be addressed before they will be able to maintain stable employment. Respondents identified characteristics of the low wage labor market, as well as barriers to employment, as reasons that their last job ended and as reasons that they were not currently working. The remaining sections of this report will examine some of the obstacles that long-term recipients face in meeting the work requirements of WFNJ, and some of the obstacles they face in finding and keeping jobs through which they can support themselves and their families.

Readiness for Work

Educational Attainment

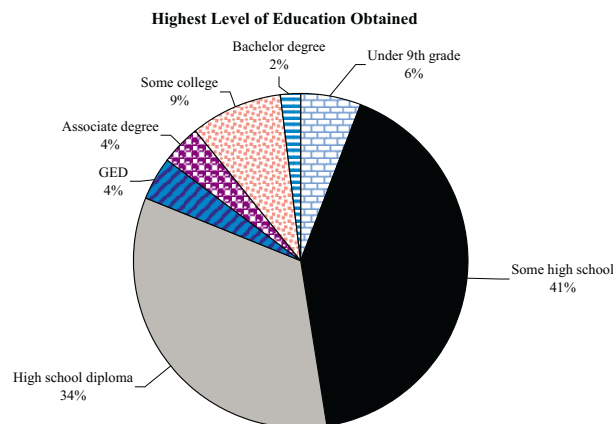
Research demonstrates links between post-secondary education and the jobs and salaries that individuals can obtain. For example, a study of labor market returns to education found that women with at least an associate’s degree earned between 19% and 23% more than women with less education, and that women who possess at least a bachelor’s degree earned between 28% and 33% more than women with less education.¹¹ In 1998, national median income for women 18 years old and over who did not graduate from high school was \$7,720; median income for those who were high school graduates was \$12,590; median income for those with some college education was \$14,270; median income for those with an associate’s degree was \$20,428; and median income for those with a bachelor’s degree was \$25,566.¹² In addition, within the population as a whole, the rate of employment for individuals 25 years old and over increased as the level of education increased.¹³

Respondents reported low levels of educational attainment compared to the population as a whole, but they aspired to improve that level.

Respondents answered questions about their levels of education and whether they were interested in further education. Respondents reported low levels of educational attainment compared to the population as a whole, but they aspired to improve that level.

The majority of respondents (85%) had at most a high school diploma or General Educational Development diploma (GED). Of that number, close to half (47%) of respondents had not received either a high school diploma or a GED. Nationally, 13% of all women between the ages of 20 and 64¹⁴ and, in New Jersey, 14% of women over the age of 18 had not completed a high school education.¹⁵

Figure 9



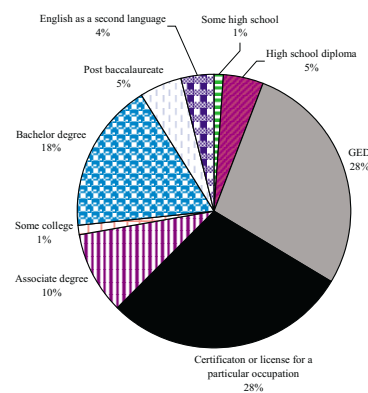
Source: Survey of Long-Term Welfare Recipients
 Note: n=333

Figure 9 illustrates the highest levels of education that respondents had completed.

Most respondents (81%) were interested in continuing their education. Nearly a third of respondents reported that they would like to receive some type of license or certification for a particular occupation. It is possible that respondents perceived that this is what is available to them. Figure 10 illustrates the levels of education that respondents reported that they would like to complete in the future.

Figure 10

Level of Education Respondent Would Like to Obtain



Source: Survey of Long-Term Welfare Recipients
Note: n=333

Occupational Credentials

Researchers did not seek to assess the quality or marketability of respondents' credentials, but to document the types of credentials that they possessed. Forty percent of respondents had received a certification or license for a particular occupation. The most common types of certifications and licenses were for home health aides or nursing assistants, computer workers, and childcare workers. Additional certifications and licenses included those for other types of health service workers, teaching assistants, business employees, cosmetologists, and security workers.

The types of certifications or licenses that respondents wanted to obtain included those for computer workers, nurses, home health aides or nursing assistants, childcare workers, teaching assistants, cosmetologists, medical technicians and business administrators.

Basic Skills

Verbal Ability

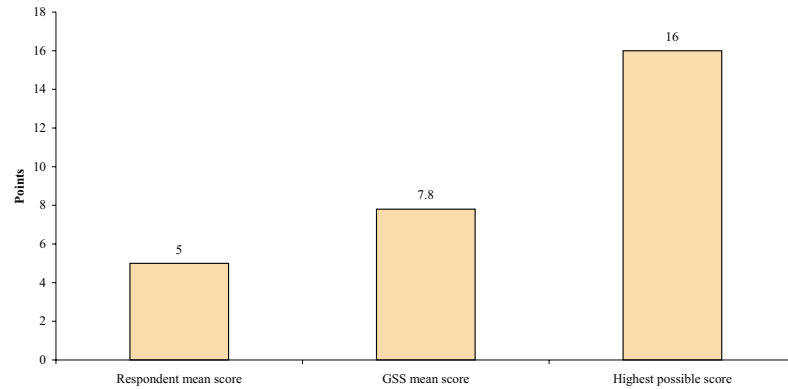
Verbal ability measures, among other things, one's ability to spell, write, read, and follow oral instructions. National data have linked low levels of literacy (a measure of verbal ability that is positively correlated with the measures used in this study) with poverty, welfare receipt, unemployment and low income. For example, in a national study of adult literacy, more than two out of five adults (43%) with low literacy skills lived in poverty. At the same time, less than 5% of those with high level skills lived in poverty.¹⁶ Seven out of ten people with the lowest literacy did not have a job or a part-time job.¹⁷ Among both welfare recipients and the general population, adults with higher levels of literacy proficiency tended to have worked more weeks in a year than those with lower levels of proficiency.¹⁸ The same study found that welfare recipients with higher levels of literacy had higher levels of income.¹⁹ Furthermore, an increase in literacy level was associated with a drop in the percentage of adults on welfare.²⁰

A 1999 focus group study of service providers found that providers ranked good verbal and written communication skills high among the technical skills necessary to be a successful employee.²¹ Low verbal ability may affect welfare recipients' ability to comply with welfare program requirements and obtain needed support services. For example, recipients may not be able to read and understand the notices sent to them by the welfare agency. Low verbal ability may also keep them from obtaining and maintaining economically viable jobs.

Researchers did not use educational attainment to measure verbal ability because studies have suggested that although educational level is highly correlated with verbal ability, it is not always a consistent and accurate measure of verbal ability. For example, literacy scores for the general population were higher than for welfare recipients with comparable levels of education in a national assessment.²²

Because literacy is one prominent aspect of verbal ability, researchers sought to find an assessment tool for literacy levels. Research indicated that it is not possible to assess literacy effectively over the telephone, the predominant survey methodology; therefore, researchers decided to use two other related and accepted measures of verbal ability—vocabulary and similarity scale scores. Such vocabulary and similarity scale scores measure abilities related to literacy.

Figure 11
Similarity Scale Scores

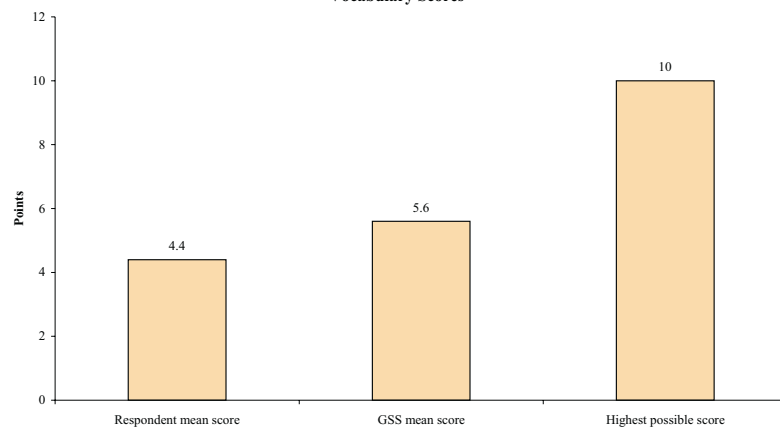


Source: Survey of Long-Term Welfare Recipients and the 1994 General Social Survey
Note: n=327

Respondents had verbal ability scores below those of the general population.

Respondents had verbal ability scores below those of the general population. Respondents' mean score on the similarity scale was 36% below the mean score of the general population in the 1994 General Social Survey (GSS). (See Appendix I for scoring) The average similarity scale score was 5.0 points, out of a possible 16. Respondents' mean score was 2.8 points below the mean score of the general population (7.8 points). Comparing respondents with exactly a 12th grade level of education to the general population with a 12th grade education, the mean similarity scale score of respondents was 2.0 points below the score of the general population.

Figure 12
Vocabulary Scores



Source: Survey of Long-Term Welfare Recipients and the 1987-1996 General Social Survey
Note: n=270

Researchers compared respondents' vocabulary scores to the GSS vocabulary scores from 1987 through 1996, the most recent year of administration. The mean vocabulary score was 21% below the score of the general population. The average vocabulary score was 4.4 points out of a possible 10. This

was 1.2 points below the mean score for the general population for the years 1987 through 1996 (5.6 points) as reported by the GSS. Comparing only respondents with exactly a 12th grade education, the mean vocabulary score of this survey's respondents was 0.6 points (6%) below the level of the general population.

Respondents to the 1994 GSS who had incomes less than \$20,000²³ annually had mean scores of 7.7 points for the similarity scale, and 5.5 points for the vocabulary section. Respondents to the 1994 GSS with annual incomes over \$20,000 had mean scores of 8.8 points for the similarity scale, and 6.3 points for the vocabulary section. This suggests that respondents who score higher on these assessments tend to have higher incomes.

R e c o m m e n d a t i o n s

- *Address the need for basic education.* Nearly half of reporting respondents did not have a high school education. Respondents also had verbal ability scores below the national average. This basic education need must be addressed for long-term welfare recipients. Clients should receive an educational assessment. Caseworkers should be trained to secure educational services that are appropriate to recipients' needs and interests.
- *Consider post-secondary education as an allowable work activity.* Individuals would like to obtain further education. Given the results of studies on the correlation between post-secondary education and lifetime earnings prospects, New Jersey should follow several other states and adopt a policy encouraging post-secondary education through a separate state-funded program that treats such education as an allowable work-related activity. The program should suspend welfare time limits for any person pursuing a first post-secondary degree full-time, or part-time, if they are working and taking at least two courses toward a degree each semester.

C o m p u t e r S k i l l s

The Governor has expressed a commitment to move New Jersey into a new economic era, relying on technology in order to create more and higher-paying jobs.²⁴ The need for computer-related skills will become increasingly critical for people entering the workforce. Not only will such skills become important in obtaining well-paying jobs, but they will also be a major factor in determining workplace advancement.

The number of people who use computers in their jobs has been increasing. In 1997, half of all employed adults used a computer in their jobs, compared with 46% in 1993 and only 25% in 1984.²⁵ More women than men have been using computers in their jobs. The percentage of employed adult women who used computers in their jobs in 1997 was 57%.²⁶ Given changes brought about by technological advances, researchers were interested in determining whether or not long-term welfare recipients possessed computer skills. The bar to measure computer skills was set low so that respondents with any type of computer skill, regardless of quality, frequency of use, or depth of knowledge, were included among the number counted as possessing computer skills.

Nearly half (49%) of respondents did not have skills in working with a computer.

Nearly half (49%) of respondents did not have skills in working with a computer. In addition, respondents with lower levels of education were less likely to have computer skills. Four in five (80%) of respondents with more than a high school education reported having computer skills, compared to 56% of those completing at most a high school education and only 39% of those with less than a high school education.

R e c o m m e n d a t i o n

- *Ensure that quality, relevant and up-to-date computer training classes are available as allowable work-related activities.* Computer classes should be an available, acceptable work activity and presented as an option for welfare recipients who lack these skills.

Issues and Challenges Facing Long-Term Welfare Recipients

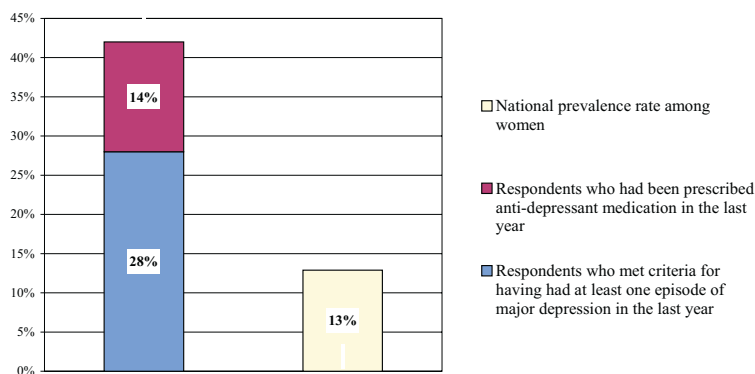
Major Depression

Major depression can greatly impede a person’s ability to function. Symptoms of depression include feelings of worthlessness, excessive guilt, lack of motivation, fatigue, and diminished ability to concentrate, among others.²⁷ Depression is also often associated with past trauma such as parental neglect, physical and sexual abuse, and other forms of maltreatment.²⁸ Anxiety and depression frequently coexist.²⁹ Thus, depression may restrict a person’s ability to participate and function in employment or work activities as well as to access necessary support services.³⁰

Researchers chose to focus on major depression as an area of inquiry in light of national- and state-level studies which have found welfare recipients to be at high risk for depression.³¹ For example, in a recent evaluation of the Jobs Opportunities and Basic Skills (JOBS) program, forty-two percent of women receiving welfare reported high levels of depressive symptoms. This number is twice the rate of depression that was reported in the general population.³² A study completed in Passaic county, New Jersey, found that 67.8% of welfare recipients in a job-readiness program had experienced severe depression. Prevalence of domestic abuse (57.3%) and sexual abuse (24.1%) was high and found to be positively correlated with depression³³. LSNJ’s study

Figure 13

Prevalence of Depression



Source: Survey of Long-Term Welfare Recipients
 National Institute of Health and National Institute of Mental Health, Healthy People 2000 Review, 1997
 Note: n=334 for those who met the criteria for depression; n=327 for those taking anti-depressant medication

Table 4
Coping With Depression

Question	% answering Yes
Did you tell a doctor about these feelings?	30%
Did you tell another professional (social worker, psychologist, clergy, etc.)?	24%
Did you take any medication or use drugs or alcohol more than once for these feelings (note that this excludes prescribed medications)?	19%

Source: Survey of Long-Term Welfare Recipients
Note: n=94

More than two in five (42%) respondents likely suffered from major depression within the past year.

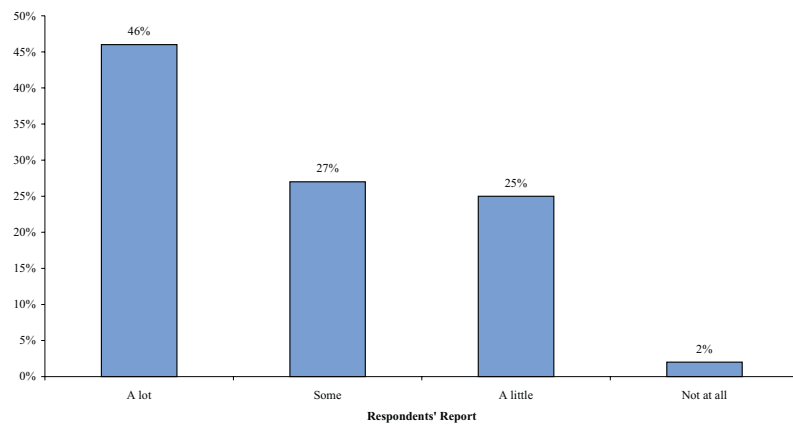
examined rates of depression rather than other mental health disorders because literature review suggested that depression was more prevalent among welfare recipients than other mental health disorders tested.³⁴

More than two in five (42%) respondents likely suffered from major depression within the past year. This percentage (42%) consisted of the 28% percent of respondents who met the criteria from an objective assessment tool (see Appendix II) for having likely suffered from at least one episode of major depression in the last year, and the 14% of respondents who reported having taken doctor prescribed anti-depressant medication in the past 12 months.

According to the National Institutes of Health, National Institute of Mental Health, Comorbidity Survey of 1990-1992, the prevalence rate of depression among women nationally was 13%.³⁵ In comparison to the national figure, respondents were 3.2 times more likely to suffer from major depression than women in the general population.

Figure 14

Extent to Which Depressive Symptoms Interfered with Life or Activities



Source: Survey of Long-Term Welfare Recipients
Note: n=132

For those who met the criteria for major depression, but were not taking doctor-prescribed anti-depressant medication, we asked questions to obtain information about how they coped with their depression.

Figure 14 indicates respondents' perceptions about the degree to which the feelings of depression interfered with their life or activities. Nearly half (46%) of respondents reported that the symptoms interfered with their lives a lot.

R e c o m m e n d a t i o n s

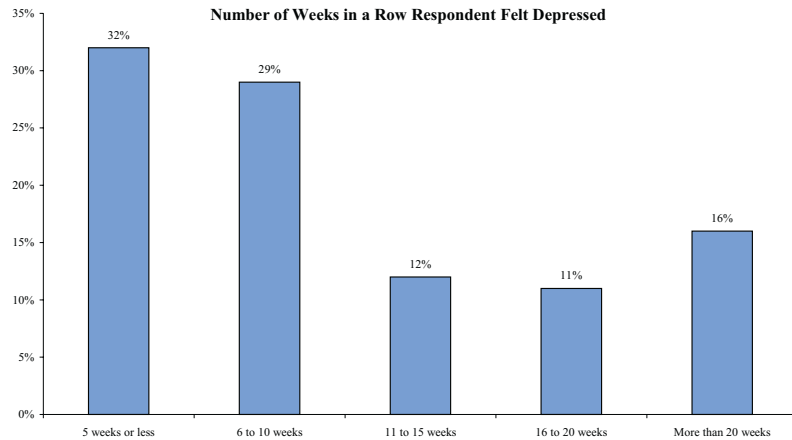
- *Educate welfare agency staff about the causes and symptoms of depression.* Awareness of depression should infuse the conduct of the welfare system. This awareness should include an understanding of both the causes and symptoms of depression. For example, symptoms can include irritability, characterized by a fight-or-flight response to acute stress associated with depression.³⁶
- *Assess clients for major depression at periodic intervals.* As depression can be debilitating, there should be an assessment of all recipients which includes some basic indicators of risk factors for depression. Such an assessment should be completed by a professional who is trained to conduct the assessment and has the authority to follow up with appropriate referrals for treatment and deferrals from work activities. The assessment process should be ongoing and coupled with affirmative and supportive case management, since people's needs and circumstances change frequently.
- *Expand the definition of disability.* People who suffer from major depression and many other mental health disorders often do not meet the stringent guidelines for Supplemental Security Income (SSI), yet they have impairments that affect their ability to function in daily life. The definition of disability under WFNJ needs to be broader than what is currently allowed under SSI.

P h y s i c a l H e a l t h

R e s p o n d e n t ' s H e a l t h

Given WFNJ's requirements of participation in employment and work activities, assessing the health status of clients is crucial to understanding their ability to participate in work requirements and to access support services. General health conditions have been an area of inquiry for several studies, and results demonstrate that poor health conditions affect large numbers of low-income

Figure 15



Source: Survey of Long-Term Welfare Recipients
 Note: n=334

More than a third (35%) of respondents reported that a chronic physical health or medical condition prevented or hindered them from working.

adults. A recent national study that included New Jersey data found that 24% of New Jersey adults in families with income below 200% of the federal poverty level reported that they were in fair or poor health, while only 7% of New Jersey adults in families with income above 200% of the poverty level reported that they were in fair or poor health.³⁷ Approximately 10% of welfare recipients nationally report that they are unable to work because of their health.³⁸ Poor health conditions may also limit the amount of work or the types of jobs that people can perform.³⁹

More than a third (35%) of respondents reported that a chronic physical health or medical condition prevented or hindered them from working. Among those who were not excused from the work requirement at the time of interview, 22% reported that a chronic physical or mental health condition that prevented them from working or seriously affected their work performance. For these respondents, 16% were between 21 and 30 years old, 47% were between 31 and 40 years old, and 37% were over 40 years old.

Respondents described their health or medical conditions; they could list more than one type. The three most common health or medical conditions that respondents reported were arthritis, bone or joint problems, and problems with range of motion (51%), asthma or breathing problems (44%), and high blood pressure or heart problems (37%).

The number of respondents who identified mental health conditions as preventing or hindering them from working in paid jobs or workfare placements was lower than the number who met criteria for major depression. Among those who identified a health condition as having prevented or hindered them from working, 17% referred to mental health difficulties. Major depression may be debilitating but unacknowledged by some respondents. Due to ten-

dencies to deny, discount or explain away symptoms, an assessment is the most reliable way to determine the prevalence of major depression.⁴⁰

Findings on the prevalence of health problems are similar to those from the first client survey conducted by Mathematica Policy Research, Inc., for the State of New Jersey. The study found that 36% of all clients reported having health problems, including 49% among those who were still receiving TANF. One in four said they had been seriously ill in the past year, including 39% among those who were still receiving TANF. More than one in five (22%) reported that their health limited the kind or amount of work they could do, while 11% reported that they could not work at all because of their health.⁴¹

Recommendation

- *Systematically assess recipients to determine their health condition.* As the caseload declines and the 5 year time-limit approaches, there will be more of a need to ensure that services are in place to assist people with health barriers. There should be full utilization of managed care and treatment possibilities under the Medicaid program. Better assessments for health conditions and use of case management can help people obtain proper care. It is also important to screen for possible deferrals from work requirements as well as referrals to the LSNJ SSI Project.⁴²

Children's Health

Nearly a quarter (24%) of respondents had financially dependent children with an ongoing physical, learning or mental health difficulty that prevented or hindered the respondent from working.

The poor health of children may affect respondents' ability to participate in WFNJ and to maintain stable jobs. Particularly in unstable jobs, respondents may be vulnerable if they have to miss work for doctor's appointments or to care for a sick child. Researchers have found that children's health affects single mothers' number of hours of work.⁴³

Nearly a quarter (24%) of respondents had financially dependent children with an ongoing physical, learning or mental health difficulty that prevented or hindered the respondent from working. Filtering out those who were excused from the work requirement, a slightly higher percentage (26%) had children with chronic health conditions which affected their employment.

In addition to asking about their children's chronic health problems, researchers asked respondents about their children's common health problems. Examples of common health problems include ear infections and sore throats. A third (33%) reported that a financially dependent child had a common health problem in the past 12 months that prevented the respondent from working or made it hard for the respondent to work.

Recommendation

- *Provide assessments and case management to assist those recipients whose child(ren)'s health condition requires further care.* Given that children's health has significant impacts on parents' employment, assessments and case management can assist clients in finding ways of coping with child health barriers to employment and in gaining access to support services. There must be close coordination with, and universal utilization of, the mandatory Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program in Medicaid. Case managers can either assist clients in finding ways to ensure that their children's needs are met as they participate in paid jobs and work activities, or exempt clients with child health barriers from work requirements. Case managers can also direct clients with child health barriers towards jobs that provide paid sick leave and personal days, so that they will be able to take time to care for their children without losing their jobs.

Domestic Violence

Research has suggested that many women who receive welfare are also victims of domestic violence. Studies of AFDC recipients have shown that about one-fifth of women receiving federal assistance are currently experiencing violence from a partner. Four studies compared in a 1997 review found that between 33.8% and 61% of welfare recipients have experienced abuse at some point in their adult relationships, and between 14% and 32% were experiencing abuse at the time of being interviewed.⁴⁴ Batterers frequently resort to violence to prevent women from completing employment training programs or from entering the work force and often sabotage childcare and transportation arrangements to keep women from work.⁴⁵ Welfare benefits are often part of an escape route from violent relationships since they can provide relatively quick financial help that can be a lifeline to women whose batterers are their only source of income. In addition, the stress and trauma that result from the violence may impede a woman's ability to begin work immediately and therefore her ability to earn her own income.⁴⁶

As the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) was being debated in Congress, many were concerned that the legislation might make welfare a program that would not protect women and children nor provide the support necessary to obtain and maintain work.⁴⁷ The final version of PRWORA partially addressed this concern by allowing states to include a Family Violence Option (FVO)⁴⁸ in their state plans. The

FVO provided states an opportunity to require certain standards and procedures, including screening welfare recipients for current danger from a violent intimate, referral to counseling and support services, and exemptions of requirements such as time limits, work requirements, and child support.

New Jersey adopted the FVO. Unlike welfare reform legislation in some other states, the WFNJ law implementing welfare reform in New Jersey explicitly adopts the FVO in statutory language that reflects the terms of the federal statute. The statute states:

The commissioner shall establish by regulation standards and procedures to screen and identify recipients with a history of being subjected to domestic violence and refer those recipients to counseling and supportive services. The commissioner may waive program requirements, including, but not limited to the time limit on benefits, residency requirements, child support cooperation requirements, and the limitation on increased cash assistance benefits as a result of the birth of a child in cases where compliance with such work requirements would make it more difficult for a recipient to escape domestic violence or unfairly penalize the recipient who is or has been victimized by such violence, or who is at risk of further domestic violence.⁴⁹

Although the statute requires that WFNJ recipients be screened for domestic violence, the WFNJ regulations do not establish any mechanism for such a screening. Rather, the regulations state that an applicant must be given written notification of his or her rights under the WFNJ program and that, during the initial contact, the provisions of the FVO must be explained. Researchers sought to determine how many long-term welfare recipients were being notified of the Family Violence Option in New Jersey.

Fewer than a third (32%) of all respondents were aware of the Family Violence Option.

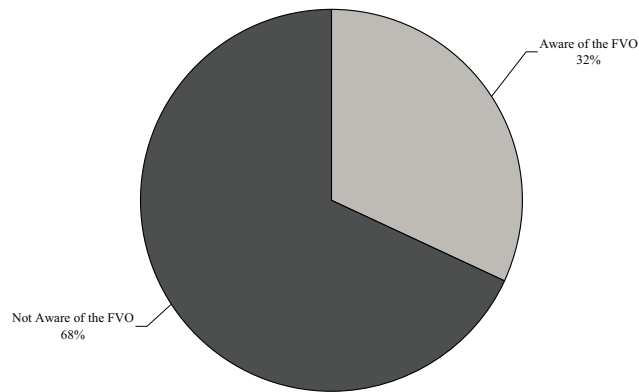
Regardless of whether or not it was immediately relevant to their personal situations, respondents were asked if they were aware of the FVO. Since people may not be familiar with the FVO by name, interviewers provided a brief description. Fewer than a third (32%) of all respondents were aware of the Family Violence Option.

The Department of Human Services' data indicates that there are a small number of recipients participating in the FVO statewide.

As there is ample evidence that domestic violence is highly prevalent among welfare recipients, researchers sought to understand the rate of violence in relationships among long-term WFNJ recipients. Researchers asked respondents whether, in the past 12 months, a spouse, partner, anyone they have been

Figure 16

Awareness of the Family Violence Option



Source: Survey of Long-Term Welfare Recipients
Note: n=334

Almost one in ten (9%) of all respondents reported that they had been in a domestic violence situation in the past 12 months.

Nearly nine out of ten (87%) of those who reported having been in a domestic violence situation in the past year said that they did not tell their caseworkers about the violence.

in a romantic relationship with, or any other people close to them, pushed, slapped, kicked, threatened or hit them.

Almost one in ten (9%) of all respondents reported that they had been in a domestic violence situation in the past 12 months. This data reveals much lower levels of domestic violence than other surveys, causing researchers to suspect that the prevalence of domestic violence among respondents has been under-reported. In a similar vein, other research in New Jersey yielded only 7% of respondents reporting that a spouse or partner in the past year had physically abused them.⁵⁰ Researchers for the State of New Jersey plan to use more advanced methods in future rounds of surveys. It is not surprising that domestic violence would be under-reported. In addition to the shame that a victim of domestic violence experiences, she also can not reveal the existence of a live-in male in the household who may be providing financial support. A mother may also fear that the child welfare agency will remove a child if she cannot provide a safe environment.⁵¹

Nearly nine out of ten (87%) of those who reported having been in a domestic violence situation in the past year said that they did not tell their caseworkers about the violence. Since the FVO was designed to help those with histories of abuse as well as those in current dangerous situations, the welfare agency is required take affirmative steps to identify and assist those who may be eligible for the FVO. Although the number is small, it is important to note that, for the 4 respondents who reported having told their caseworkers about the violence (13% of those who had been in a domestic violence situation), there was no indication that the caseworkers implemented the FVO. The caseworkers did not inform respondents that they might be temporarily excused from work requirements (nor was anyone excused from the work requirements because

of family violence). Respondents also reported that the caseworkers did not help them work on a plan to escape harm and did not suspend time limits. Since researchers did not inquire about the situation(s), it is not known whether the caseworkers were obligated to implement the FVO for the reporting respondents. FVO implementation is an area requiring further research.

Recommendation

- *Provide an affirmative assessment to determine if recipients may be eligible for the FVO.* The low number of respondents aware of the FVO—fewer than one-third of all respondents—demonstrates that there needs to be better implementation of the program. Affirmative screening for domestic violence situations must take place for all WFNJ applicants and recipients. This screening needs to be conducted with great sensitivity by individuals well-trained and experienced in dealing with domestic violence victims. Adequate quality services that are easily accessible must be available to those in need.

Housing

Stable housing is a critical need for people trying to succeed under WFNJ as they attempt to leave welfare for work. Unsafe neighborhoods may cause working parents to fear for their children’s safety. Working parents may also fear being attacked on the way home from work, especially during evening or early morning hours. Such situations could impact welfare recipients’ work participation.⁵² In a 1994-1996 study of recently employed welfare recipients in four cities, nearly one in five respondents identified housing problems as problems outside of work that made it difficult for them to maintain a job.⁵³

Researchers asked respondents whether they had lived doubled- or tripled-up with another household within the past year as well as whether they rated the quality of their housing as excellent, good, fair or poor along the dimensions of not being overcrowded and neighborhood safety. Researchers also asked respondents about their mobility rates and the amounts that they had paid out of pocket for housing within the past year.

In their first client study, Mathematica found that 48% of New Jersey TANF clients reported having a serious housing problem, which included living doubled- or tripled-up, within the year prior to their study.⁵⁴ Among this study’s long-term welfare recipients, more than one in five respondents (23%) reported that their circumstances forced them to live doubled- or tripled-up with another household within the past year.

More than one in five respondents (23%) reported that their circumstances forced them to live doubled- or tripled-up with another household within the past year.

Nearly the same percentage (22%) of respondents reported moving at least once within the past 12 months. Respondents who reported living doubled- or tripled-up had higher mobility rates—28% of this population moved at least once in the 12 months prior to interview. Respondents who reported having moved lived in an average of 2 different places within the 12 months prior to the time of interview. The reasons that they provided for their most recent move included the need for more space, inability to afford their current residence, unsafe areas, and poor building conditions.

Respondents reported a wide range in housing costs. Out-of-pocket costs ranged from \$0-\$900 per month. This wide variance may be largely attributable to whether or not the household received any rental assistance, such as public housing. Researchers did not ask about rental assistance. Families with federally funded assistance generally pay no more than 30% of income for housing costs. Other research in New Jersey has found that approximately one third of WFNJ clients receive a government housing subsidy.⁵⁵

Respondents were divided when asked about their families' living arrangements. Of all respondents, nearly a quarter (24%) rated the condition of their living space along the dimension of having enough space and not being overcrowded as excellent; 30% rated it as good; 29% rated it as fair; and 17% rated it as poor. Nearly one eighth (12%) felt neighborhood safety was excellent; 29% felt it was good; 33% felt it was fair; and 26% felt it was poor.

Respondents reported that an average of 2.5 bedrooms were available to their families. Family is defined as the number of individuals who both lived in the respondent's household and also depended on the respondent for food, housing, and clothing, including the respondent. Families living doubled- or tripled-up had 2.3 bedrooms available to them. Respondents reported an average of 4.6 members in their household, suggesting a rough estimate of approximately 2 people per bedroom.

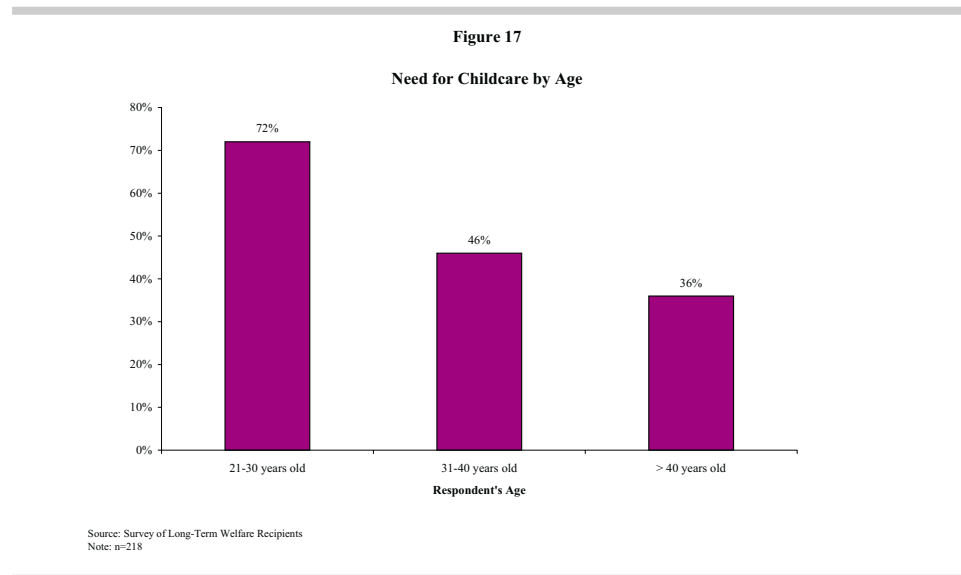
Childcare

Childcare is necessary for many people who are working, looking for work, or trying to improve their chances of escaping poverty by participating in education and training programs. TANF clients who are in approved work activities are eligible for assistance from welfare agencies in accessing and paying for childcare. This study sought to examine childcare issues facing long-term welfare recipients. Researchers asked respondents about their childcare needs, childcare utilization, out-of-pocket childcare costs, time to find childcare, types of childcare used, problems with childcare and ratings of quality for childcare.

Three out of five respondents (60%) who were working or were in a workfare placement at the time of the interview reported having used childcare for the children who financially depend on them in the past 12 months.

Three out of five respondents (60%) who were working or were in a workfare placement at the time of the interview reported having used childcare for the children who financially depend on them in the past 12 months. Just over half (54%) of respondents reported that they needed childcare in order to participate in a welfare agency approved work activity. Grouping respondents who were not excused from the welfare work requirements into age categories, the percentage of respondents reporting a need for childcare decreased as ages increased. The data in figure 17 excludes respondents who had been excused from welfare work requirements* at the time of interview.

On average, respondents who used childcare paid \$16.40 per week out of pocket for childcare. Two thirds (66%) of those respondents did not pay anything out of pocket for childcare. Among the remaining respondents, the average amount that they paid out of pocket was \$47.50 per week. This survey did not ask questions about subsidies.



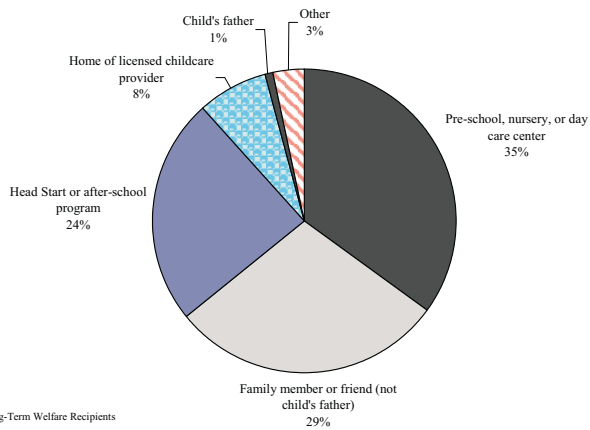
It took respondents an average of 1.2 weeks to find childcare.

As indicated in figure 18, the types of childcare that respondents used during the year prior to interview varied. Pre-school, nursery or day care center (42%) and another family member or friend (35%) comprised significant portions of the types of childcare used by respondents (some respondents used more than one type).

Twenty-four respondents used two different types of childcare and two respondents used three different types. Thirteen of the 26 respondents used at least one form of formal childcare (such as a day care center) and one form of

Figure 18

Types of Childcare Used



Source: Survey of Long-Term Welfare Recipients
Note: n=154

informal childcare (such as family members). Although most respondents who left their child with family or friends preferred that type of childcare, a small number (16) had no other suitable childcare options.

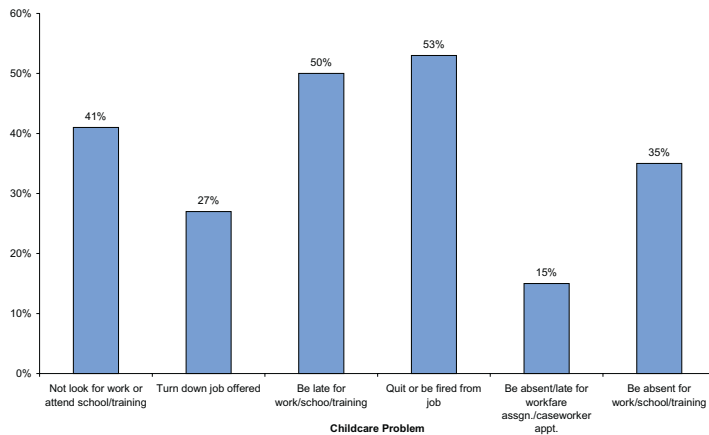
Among respondents who used childcare, 11% swapped services for childcare services. For example, some respondents reported they would provide hair-braiding services or offer to watch another person's children in exchange for childcare services.

More than one fifth (23%) of those who used childcare had problems with their childcare in the past year.

More than one fifth (23%) of those who used childcare had problems with their childcare in the past year. Some respondents described their primary problems with childcare. Problems included: they could not afford it/it cost too much; the caregiver was unavailable; there was an unsafe/dirty environment; the caregiver was not attentive to the child; the childcare was too far

Figure 19

Problems with Childcare and Work Participation



Source: Survey of Long-Term Welfare Recipients
Note: n=154

from home; the caregiver was unreliable; the respondent worried about caregiver burnout; and the respondent was not comfortable leaving the child with anyone else.

Respondents reported ways in which problems with childcare affected their ability to work. Some respondents listed more than one way in which their ability to work was affected.

Respondents rated their childcare according to several different criteria:

Table 5

Childcare Ratings

Rating of childcare on:	Excellent	Good	Fair	Poor	Don't Know	
Safety	52%	35%	11%	2%	1%	(n=124)
Quality of supervision	44%	40%	11%	2%	2%	(n=124)
Educational opportunities	37%	36%	22%	2%	4%	(n=124)
Cleanliness	51%	42%	5%	2%	1%	(n=123)
Flexibility and convenience of hours	48%	39%	10%	2%	1%	(n=125)

Source: Survey of Long-Term Welfare Recipients
 Note: n=124 for safety, quality of supervision and educational opportunities; n=123 for cleanliness; n=125 for flexibility

Recommendation

- *Conduct further research in the area of childcare.* Further research is needed to understand what is happening with the children who are in the homes where no childcare is being used. In addition, one third of respondents are paying for childcare, yet all TANF recipients should have their childcare needs met by the welfare agency. Further research is needed to understand the circumstances of these families. Are they paying for childcare to participate in work activities when welfare should be paying? Should the welfare agency cover certain childcare costs that it doesn't cover now, such as after school programs?

Transportation

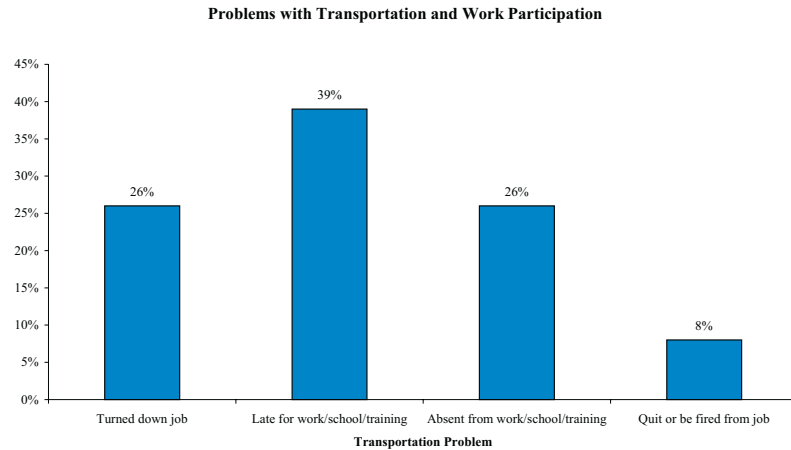
As welfare recipients are required to move from welfare to work under WFNJ, transportation remains one key component in assisting people to succeed in this effort. Respondents answered questions about their transportation situations—whether they needed transportation, whether they had problems with transportation, whether or not they had a car, what types of public transportation they used, and what their commuting times were.

Two-thirds (66%) reported needing transportation in order to participate in a welfare agency approved work activity within the past year.

In the 12 months prior to the time of the interview, a number of respondents experienced problems with their transportation.

Nearly all (91%) of respondents reported neither owning nor having regular use of a car.

Figure 20



Source: Survey of Long-Term Welfare Recipients
Note: n=212 for turned down job; n=214 for all other questions

Two-thirds (66%) reported needing transportation in order to participate in a welfare agency approved work activity within the past year. Excluding those excused from the work requirement at time of interview, 74% reported needing transportation in order to participate in a welfare agency approved work activity within the past year.

In the 12 months prior to the time of the interview, a number of respondents experienced problems with their transportation. A quarter (25%) of respondents reported that transportation problems caused them not to look for work, or not to participate in a school or training program.

Figure 20 illustrates problems that respondents had with transportation.

Respondents lived in urban, suburban and rural areas. In urban areas, a lack of access to a car is less critical if the mass transit system is convenient and efficient. Welfare recipients residing in suburban or rural areas may face challenges in finding ways to get to work if the public transportation network is less developed than in urban areas.

Nearly all (91%) of respondents reported neither owning nor having regular use of a car. Excluding those exempt from the work requirements at the time of interview, 93% of respondents reported neither owning nor having regular use of a car. Over half (57%) of the respondents with access to cars reported that the car broke down at least one time in the 12 months prior to the interview. Since low-income workers have fewer resources, this suggests that vehicle reliability could cause problems for a respondent trying to meet work requirements.

Respondents used a variety of methods of transportation. The majority (64%) of respondents who participated in a job, a workfare activity or a job hunt in the past 12 months reported their usual mode of transportation to the work activity was by bus or other public transportation.

Of the respondents who took the bus or other public transportation in the 12 months prior to the time of the interview, most respondents (81%) reported that a bus line was in their area. On average, it took respondents 6 minutes to walk to the bus line from their place of residence.

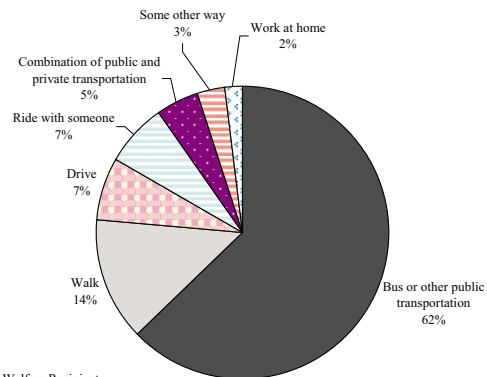
Most respondents (80%) reported that the bus in general ran at the times needed for work, workfare, childcare or job hunting. Even though the bus ran at the needed times, however, some pointed to the lack of punctuality of the bus (which ultimately led to delays and missed connections).

The average one-way commute time to a job or work activity was just over a half-hour (32.6 minutes). Respondents had slightly longer commutes (42.6 minutes) when time was included to drop children off at school or childcare. Respondents who reported having problems with their transportation had slightly longer commute times. The average one-way commute for respondents with transportation problems to travel to a job or a workfare placement was 40 minutes. Those having to drop their children off at school or childcare averaged 52 minutes for a one-way commute.

Respondents reported spending an average of \$15.78 per week out of pocket on transportation costs to get to and from work or the places where they were looking for work, including dropping children off at childcare or school. Researchers did not ask about transportation subsidies.

Figure 21

Mode of Transportation Used for Work and Work-Related Activities



Source: Survey of Long-Term Welfare Recipients
Note: n=230

Welfare Agency Services to Clients

Early in the development of the WFNJ program, policymakers recognized the need to provide direction and a variety of built-in supports to help people adjust and transition to meet the new requirements of WFNJ. A front-end planning process was introduced along with support services such as childcare and transportation. In addition, activities that provided work experience such as job training and the Alternative Work Experience Program were included. Researchers were interested in determining the usefulness and usage of such programs.

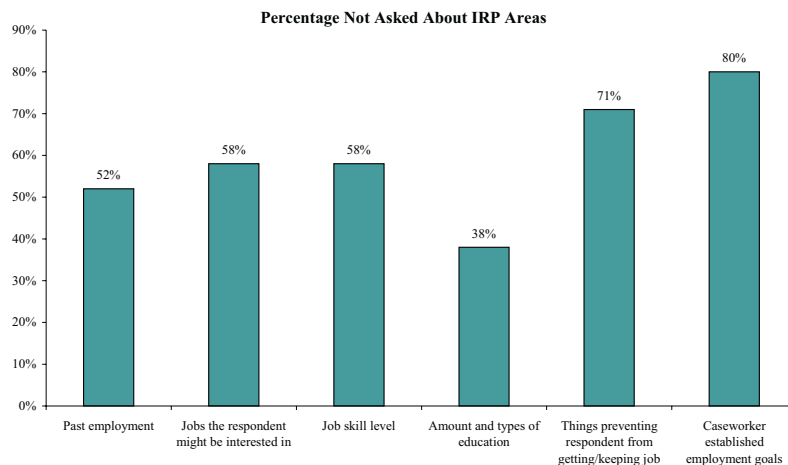
The Individual Responsibility Plan

Many respondents were unfamiliar with their Individual Responsibility Plans.

Recognizing the need to understand and chart a course of action based on a recipient’s individual situation, policymakers created the Individual Responsibility Plan (IRP). By legislative design, the IRP was intended to be an up-front, comprehensive document developed between the caseworker and the client to create specific employment and work activity goals. In addition, the IRP was meant to document the support services needed by a client through the WFNJ program. It was also intended to identify problems that might interfere with the person’s ability to meet the work requirements.

Given the importance of such a discussion and ensuing plan of action, questions relating to the respondents’ experiences with the IRP were included in this survey. Since receiving welfare, 73% reported that their caseworker had

Figure 22



Source: Survey of Long-Term Welfare Recipients
Note: n=222

not prepared or that they did not remember if their caseworker prepared an IRP. Since respondents may not have been familiar with the term “IRP,” researchers asked more detailed questions regarding specific topic areas (e.g., did the caseworker ask about the types of things that were preventing the person from getting and keeping a job?). By state regulation, IRPs are to be reviewed and/or revised at the time of the recipients’ re-determination, which occurs every 6 months. Therefore, a respondent is likely to remember reviewing and/or revising components of the IRP.⁵⁶

In all but one category, more than half of respondents indicated that their caseworker had not asked about specific areas during their re-determination. About 38% reported their caseworker had not asked about the level of education they received. More than half (58%) said their caseworker did not ask which jobs the respondent might be interested in and 71% did not discuss the types of things preventing the person from getting and keeping a job. Four in five (80%) reported that their caseworker did not establish employment goals with them.

R e c o m m e n d a t i o n s

- *Invite client participation to make informed decisions.* The IRP should be developed in a joint effort between the case manager and client. The resulting document should be a flexible and realistic blueprint which describes the steps a client will take in meeting WFNJ requirements.
- *Provide an up-front, in-depth assessment at the time of application or re-determination.* Questions included in the formal IRP explore important areas but should be expanded to capture a more detailed description of the challenges facing the recipient. For example, the previous sections have revealed many recipients met the DSM-IV criteria for an episode of depression in 12-months prior to the survey. Such a condition may affect a person’s ability to get or keep a job and must be taken into account when determining compliance with the program.
- *Review the IRP at pre-determined intervals in order to update the document so that it reflects the client’s current situation.* WFNJ regulations stipulate an update to take place every 6 months at the time of re-determination. A review should also be a mandatory action prior to the imposition of a sanction.

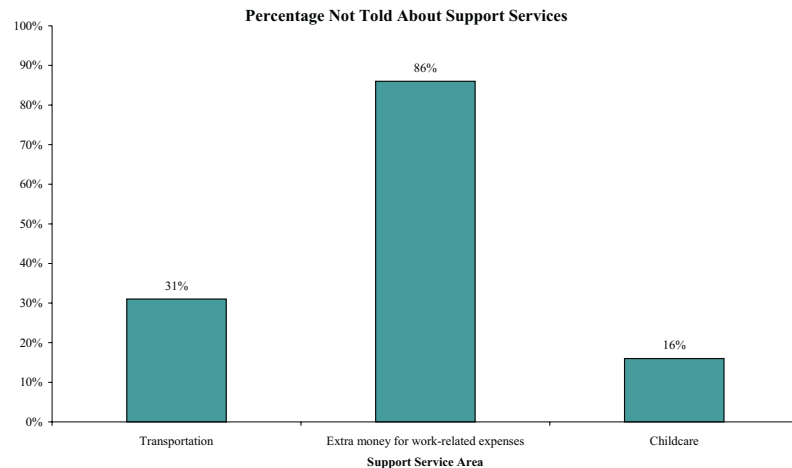
Notification of Available Support Services

Many respondents reported that their caseworker did not tell them about WFNJ support services offered by the welfare agency.

Support services are prominent features in the new work-focused program. These services, which include childcare, transportation and money for work-related expenses, were established to help offset costs associated with working, as clients moved off welfare into work activities. Report 1 from the *Assessing Work First* series included findings that indicated a significant percentage of respondents were unaware of the existing support services. Consequently, researchers were interested in following up with a similar question to gauge whether or not clients were told about WFNJ support services.⁵⁷

The percentages of people reporting on whether or not their caseworker told them about the services varied depending on support service. Most (86%) said their caseworker did not tell them about extra money for work-related expenses. Nearly one in three reported not being told about transportation. More people reported being told about childcare than any other support service but, even so, 16% were still not informed of this service.

Figure 23



Source: Survey of Long-Term Welfare Recipients
Note: n=222

Recommendation

- *Provide information about available supportive services to recipients at the time of application and re-determination interviews.* Many respondents reported they were not informed of the various support services. With the amount of paperwork and information being exchanged at the time of a visit with the caseworker, it is possible that the information was given to the respondent, but s/he did not remember.

In such instances, a system of dissemination needs to be created which clearly informs the recipient, on multiple occasions, about the available support services.

Support Services Needed

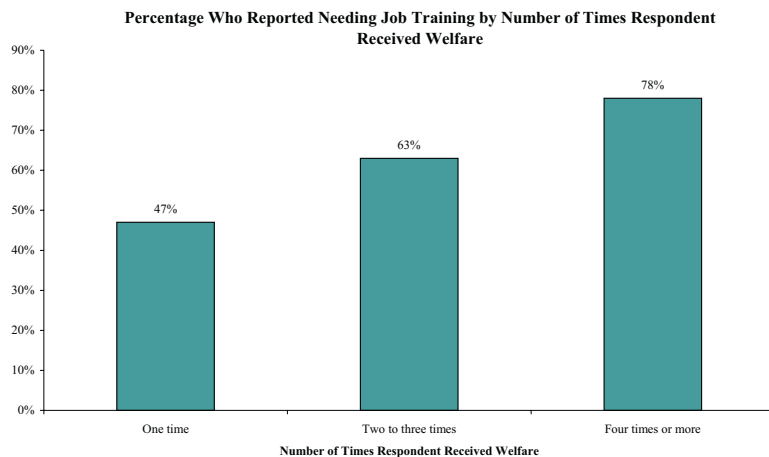
Job training was a major need for respondents.

Job training was a major need for respondents. Over half (53%) of respondents who were not excused from the work requirements of the welfare program at time of interview reported needing job training in order to participate in a welfare agency approved work activity.

The percentages of respondents who reported needing job training varied depending on the number of different times that they have cycled on and off of welfare. Nearly four in five (78%) who have applied for and received welfare four or more times reported needing job training compared with 47% of those who received welfare only once.⁵⁸

Respondents also reported needing extra money for work-related expenses. Among those not excused from welfare work requirements, more than two out of five (42%) reported they needed extra money for work-related expenses.

Figure 24



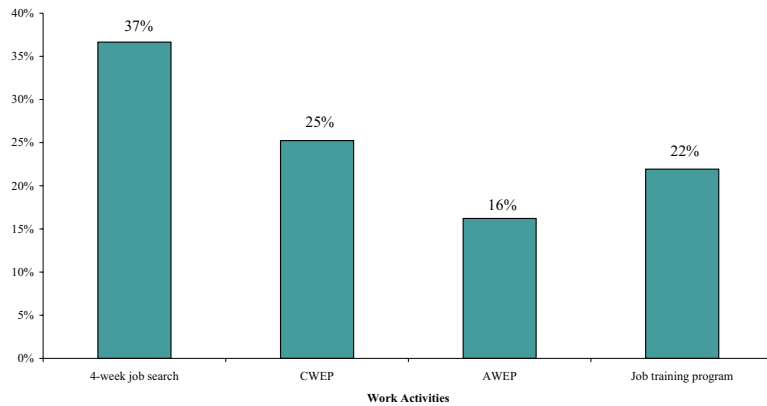
Source: Survey of Long-Term Welfare Recipients
Note: n=217

Work Activity Participation

WFNJ requires people to be in a work activity within 24 months of benefit receipt. Acceptable work activity participation includes (limited) job search,

Figure 25

Work Activity Participation



Source: Survey of Long-Term Welfare Recipients
 Note: n= 325

Community Work Experience Program (CWEP), Alternative Work Experience Program (AWEP), and job training programs. WFNJ work activities were designed to increase employability. Researchers were interested in learning about the respondents' perceptions of the helpfulness of the work programs.

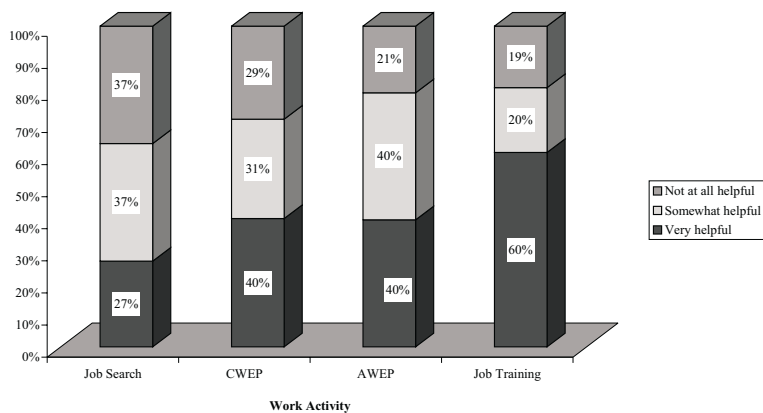
Over half (56%) of the respondents reported participating in an aforementioned work activity through the welfare program in the past 12 months. Some respondents participated in more than one activity while others, excused from the work requirements, participated in none.

Respondents were divided about the helpfulness of the work activities. When asked to rate the helpfulness of the work activity in getting a job or a better job,

Respondents were divided about the helpfulness of WFNJ work activities.

Figure 26

Helpfulness of Work Activities in Getting a Job or a Better Job



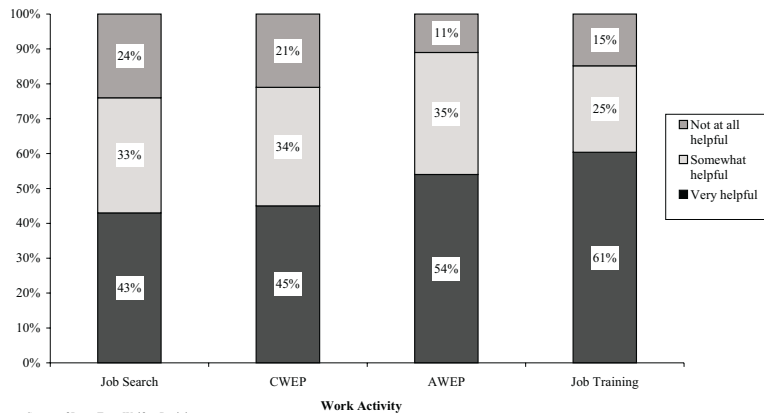
Source: Survey of Long-Term Welfare Recipients
 Note: Job Search (n=120); CWEP (n=82); AWEP (n=53); Job Training (n=70)

61% rated job training as very helpful compared with 40% for CWEP and AWEF and only 27% for job search. In some cases, a person’s response was influenced by other factors. For example, almost three in four respondents (73%) 31 years old and over said the job search was very or somewhat helpful in getting them a job or a better job. In contrast, just under half (48%) of respondents under 31 years old felt the job search was very or somewhat helpful.

Respondents were also divided about the helpfulness of the work activities in teaching them the skills they need to be successful on the job. Many respondents rated job training (61%) and AWEF (54%) to be very helpful. Less than half of reporting respondents rated CWEP (45%) and the 4-week job search (43%) as very helpful. Among respondents who did not meet the DSM-IV criteria for having at least one episode of major depression, 85% reported the 4-week job search to be very or somewhat helpful, compared with 53% of those who did meet the DSM-IV criteria.

Figure 27

Helpfulness of Work Activities in Teaching Skills to be Successful on the Job



Source: Survey of Long-Term Welfare Recipients
 Note: Job Search (n=120); CWEP (n=82); AWEF (n=53); Job Training (n=69)

Many respondents approved of their welfare worker’s attitude. Far fewer felt as though their worker explained program requirements or knew them well.

Respondents’ Opinions Regarding Welfare Workers

The introduction of a new welfare program requires a shift from a culture formerly dominated by passive eligibility determination to one that incorporates a proactive mentorship model. As a result, caseworkers play a critical role in the new welfare program. Researchers were interested in learning about respondent perceptions of their welfare worker. Respondents were asked to rate their most recent or current welfare worker whom they have seen the most

frequently. Respondents exempt from the work requirements at the time of the survey were not included in the latter two frequencies.

About four in five (79%) respondents either strongly or somewhat agreed their welfare worker treated them with dignity and respect. When asked whether workers took the time to explain program rules, 57% strongly or somewhat agreed. Just over half (54%) strongly or somewhat agreed that their welfare worker knew them and the problems they faced in getting a job.⁵⁹

R e c o m m e n d a t i o n

- *Decrease the number of cases assigned to each caseworker.* Part of the reason only roughly half of the respondents indicated their worker knew them well or took the time to explain program rules may be attributed to the extremely high case to caseworker ratio. In some counties, for example, caseworkers manage between 200 to 300 active cases. By decreasing the caseworker load size, caseworkers can focus more individual attention on their clients, thereby offering greater assistance.

Appendix I

Verbal Ability Scoring

The similarity scale consisted of eight questions in which the respondent was asked in what way two items were alike. It has been used for many years in one of the foremost written standardized tests. The questions in this study were the same as those asked in the 1994 General Social Survey (GSS).⁶⁰ Respondents received two points for a completely correct answer, one point for a partially correct answer, and zero points for an incorrect answer.

As with the similarity scale, vocabulary questions were the same as those asked by the GSS.⁶¹ The vocabulary section included ten questions in which the respondent was read a word and five possible answer choices, then asked to choose the answer that was most similar in meaning to the initial word. Respondents received one point for each correct answer and zero points for each incorrect answer.

Depression Methodology

The Composite International Diagnostic Interview (CIDI) is recognized as a valid instrument and is used by the National Institute of Health, the National Institute of Mental Health and the World Health Organization. No distinctions are made between respondents with major depressive disorder, major depressive episodes that occur as part of a bipolar disorder, or major depressive episodes that occur in the course of psychotic disorders.

LSNJ and other small studies use the short form (CIDI-SF), while the national survey to which we compare our data was based on a long form (CIDI-LF). To meet the criteria for depression, using the short form, respondents have to answer affirmatively to at least one of two sets of filter questions. Respondents have to endorse either all questions about having two weeks of dysphoric mood or all questions about having two weeks of anhedonia, which is a loss of interest in things that generally provide pleasure. In addition, the anhedonia would have to have lasted at least most of the day and at least almost every day. If a respondent does not meet either of these criteria, they are not screened further. However, if they do endorse at least one of these sets of questions, they are screened using additional criteria for major depression. Respondents are asked questions about whether symptoms occurred during a period of time lasting two weeks or more in a row. All of the symptoms would have to have occurred during the same time period. Symptoms included feelings of excessive fatigue; significant change in weight; prolonged trouble with sleep; trouble concentrating; feeling down; and thoughts about death. If a respondent endorses a total of five questions, they are scored as having met the overall criteria for having likely suffered from depression over the last 12 months.⁶²

In addition to asking the CIDI general filter questions, respondents were also asked if they had taken medication for depression during the past 12 months. If a respondent answered affirmatively, then they were not screened for criteria, since anti-depressant medication is available only after a psychiatrist's diagnosis. This figure was calculated separately from the figures obtained through the use of the CIDI and used in our analysis of the prevalence of depression.

The CIDI-SF asks fewer questions than the CIDI-LF. The two forms were found to have a reasonably high degree of agreement, but not total agreement. Some of the discrepancies between the short and long form results could be because the short form does not screen for bereavement—leading to false

positives for depression and an upward bias in our estimate. However, there are also a lot of other questions on the long form that were omitted from the short form, which, if the long form had been administered, may have led to a depression diagnosis. These false negatives would bias the estimate in the opposite direction. We are therefore implicitly assuming that these biases would balance each other out.

The Poverty Research and Training Center at the University of Michigan administered the CIDI-SF and also reported that 46% of respondents reported that someone close to them had died or been killed in the last 12 months. There was only a small (0.052) and statistically insignificant correlation between that question and the 12-month depression indicator.⁶³

Appendix III

Appendix III Total Respondents to Questions

Page#	Section & Subheading	Finding	n=
12	Welfare Receipt	Average length of time having received welfare was 9 years	329
13		# of times of welfare receipt	330
13	Gender	Nearly all respondents were female	334
13	English Language	Interviews in Spanish or English	334
14	Age	Age ranges	333
14	Income	Median income	328
14		Hourly wage in jobs held over past year	146
16	Work Experience	Ever worked	334
17		Worked full time for at least all or most of a year	299
17		Work for those 30 years old and younger	105
17		Work for those 31-40 years old	126
17		Work for those 40 years old and older	67
18		Median length of time worked	300
18		Average job held for those 30 years old and younger	103
18		Average job held for 31-40 years old	128
18		Those who held a job no longer than 1 year	300
18		Excluding those who were excused from work requirement	201
18		Type of job held	301
18		Primary reason recent job ended	272
19		Current job/workfare	306
19		Current job/workfare excluding those excused from work requirements	207
19		Began job/workfare in 1999	135
19		Those not working full-time	135
19		Type of current job	135
20		Fringe benefits	135
20		Primary reason not working in a current job	197
21	Educational Attainment	Highest level of formal education	333
22		Interest in continuing education	333
22	Occupational Credentials	License or certification	323
25	Basic Skills	Computer skills	280
26		Computer skills and education	279
28	Depression	Coping with Depression	94
30	Physical Health	Chronic health problem	331
30		Chronic health problem among those not excused from work requirements	220
30		Health problem for those between 21 and 40	330
30		Health problem among those not excused from work requirements and age	219
30		Arthritis	109
30		Asthma or breathing problems	110
30		High blood pressure	106
30		Mental health difficulties	106
31	Children's Health	Children with on-going health problems	331
31		Children with health problems excluding those excused from work requirements	220
31		Children with chronic health conditions	331
33	Domestic Violence	Aware of Family Violence Option	334
34		Those who said that they had been in a DV situation in past yr	30
35	Housing	Living doubled or tripled up	329
36		Rent	326
36		Ratings for having enough space	331
36		Ratings for neighborhood safety	330
36		# of bedrooms available	331
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Respondents' Comments

At the end of each survey, researchers asked respondents whether there were any additional comments that they would like to share. Researchers recorded the following responses in respondents' own words. Comments are listed by survey ID numbers. All comments made are included. They have not been changed in any way.

- 10 I would like help finding a Section 8 apartment. Everything has come out well with welfare. My caseworker is very nice. Of course, she has to make sure that I fulfill all of the requirements.
- 28 *You take papers to welfare. You take them proof of what you do. Then they look at it or don't do what they are supposed to do. Then you get in trouble when they don't do their work and they say they paid you too much.*
- 47 About the training, it was helpful, but the type of job that I got, it doesn't correspond with the training, so the training was only a little helpful. I was trained on equipment, but it's not what I am using now. The computers that I was trained on were newer than the ones that I am using now. I was trained on Windows 95 and that's not what I am using. I use a systematic thing now.
- 49 *I wish they would be better at CWEP and job training. You get all the training, and there are no jobs. I come because I like it, but some girls don't even bother because it doesn't go anywhere. I 'm here because I like it and I have fun here. Why can't they hire me?*
- 51 I wish they [welfare] could help me as far as housing. The housing we have is not good. There's no heat and I'm afraid that one day me and my son won't wake up. I truly, truly need to move up from out of here, if we don't die first.
- 69 *Help people out first before you cut them off.*
- 72 Since he [her son] was born, he was nervous. He has a speech problem. He has a lot of depression. He has had three operations. And now, he's getting in trouble in school.
- 75 *I think they try to do too much at one time when they change the system. I don't believe they're hurting an adult person per se. They're hurting children per se. First they said in '92, no more money for another child. Then, Work First. It's too much too fast. I don't believe*

their statistics that it's working. They're not solving the problem. They're putting them through this training and then not helping with job prospects. It's more like a scare tactic.

- 86 It's horrible. I'll just say that.
- 87 *I wish they could help people get better jobs — an amount that would let them take care of their family.*
- 92 I think that the survey is helpful because a lot of people don't understand the situation in which people are trying to get jobs. I would like to get training so that I can get a job in the future. I would like there to be a place where my disabled daughter can be cared for so I can go to work.
- 99 *I just think that if there was more transportation, more bus lines, I think that would make it a lot easier for people to get to their work assignments. The population is growing and it would make it easier for people to get work.*
- 113 It should be a rule that when you work in a CWEP placement they shouldn't be able to hire people from outside over you. I'm qualified for a paid position, but you have to know someone to get hired. It's not what you know; it's who you know.
- 114 *They should get their act together. They taking the money out which people have to pay rent. People who can't even stand on their own two feet. I'll take the work for \$5.15 an hour, but not everyone can do it. What happens to the kids? This is what really gets to me. A lot of women are afraid to talk about this, but I'm not afraid. It's not fair. They should give people the opportunity for what they really need, not what they think people need.*
- 117 My welfare check doesn't go very far. I've been waiting a year and three months for an answer on my SSI appeal, but no one is giving me an answer.
- 127 *I think they should do like certain other states do. Instead of once a month, it should be twice a month. It's real hard to manage on \$488 a month with three kids.*
- 137 The way the system is set up, it's not organized. I understand they [WFNJ] are trying to do the best they can, but it's not organized. They need to keep things uniform. My Medicaid card should be the same as my WFNJ card.

- 151 *They need to go back and think of all the people with problems and help them so they can get off the system. Some people really need help.*
- 167 When I go to education programs through welfare, the teachers don't do anything. They just give you the books and tell you, "do this page." They don't help.
- 168 *I would love to go to school, but it's so hard with me because my children are sick and I have to be home to take care of them. I was looking at the TV—how you can study at home to get your GED. When I take my kids to the doctor's office, they speak English to me and I don't always understand what they're saying. Sometimes I go home and cry because I look at myself and I'm 25 and I can't read a newspaper perfectly. I don't even have a GED. It makes me depressed. In school, if you're absent too many days, they don't want you back there. Sometimes, they call me to pick my kids up from their school and I have to take two buses to get there. My kids are always falling down at school or getting sick, so I have to go pick them up a lot. It's even hard for me to go shopping for groceries because I have no transportation. I can't afford a car, so I have to pay for taxis and things like that.*
- 171 As far as welfare workers go, they need to explain to people what benefits they're entitled to. A lot of people leave the welfare system and they don't know what benefits they can use.
- 172 *I think that they need to retrain some of their caseworkers. They need to go through counseling services to keep them humble and base-level. Sometimes they act like they've never needed help in their lives. It's disgraceful. Everybody needs help sometimes.*
- 175 My husband just slaps me when he has had a bad day. He's always sorry afterwards. My 23-year-old daughter has to help me pay the rent. She moved out and still has to send me money. It makes me very sad that I have to depend on her so much. I have had an injured leg for over a year and a half. It has been operated on three times. It still gives me a lot of problems and I don't understand why I can't get SSI.
- 176 *The job training classes were very helpful for me. Also, the training that I received in carpentry and plumbing was helpful to me.*
- 192 They gave me \$3 this month, but never told me they were cutting my benefit. When you go down to the welfare office, you almost never see the same caseworker.

- 201 *It's been a help.*
- 204 The welfare office can do better. WFNJ is not helping everybody. Welfare cuts people off too quickly after you get a job — too quick to sanction. Caseworkers have a nasty attitude.
- 206 *The caseworkers are mean and disrespectful.*
- 207 I'm so sick of Bell Atlantic blowing me off. I pay to have phone service and they have had my line crossed with someone else's for two months. It is some sort of a party line. I get call backs for job interviews and either never get the call or can't hear what the person is saying. You would never think that I was a welfare victim. I had a stroke some time back and it has been very hard putting my life back together. My welfare worker is so quick to get me in and out of the office that she never really knows what is going on in my life. They are so cut and dry in the office.
- 219 *That Work First program has a lot of good points, but there's a lot of things that mess people up. Something could really be wrong, and they won't take no excuses to cut you. Half the time, they don't believe people. Everyone's not lying. During the storm when the lights got knocked off and the food went bad in the fridge, they didn't give food vouchers. If it wasn't for my mother, I really don't know where I would be. I heard they had a deadline on sanctioning people. They can cut you off for something that happened a few months back. They sanctioned me in June for not coming in January. They had to give me my back money. I couldn't have made it if I didn't have family. There's a lot of people with no help and they do these things to people. They also sanctioned me because the road test dates were backed up and it took longer for me to complete the program, and they cut me off. I won that fair hearing too, but it took time.*
- 227 I am interested in re-location for a job. I think the program is really good — reliable for childcare payments. I haven't had any problems.
- 234 *I'm 41 years old. If I want to be in a training class, I should have the authority to do that. The caseworker shouldn't have that authority. A GED isn't going to get me anywhere without work experience.*
- 245 I really feel that people that have smaller children like mine are required to work. You need a year when the child is born to spend time with this child. Childcare is just not safe. You should not be forced to leave an infant. It's not fair to leave them in a strange environment.

- 254 *When I used to go to school, I thought that a lot of people were afraid to go to the work force. They feel afraid because they have gotten used to the system. You don't feel that you can make it. Never enough money for food, bills, or my son's clothing. I only make \$5.45 an hour. People are afraid. Welfare needs to help people more. They need to show people that they do not have to be afraid. When you get off, you might not make a lot of money, but they need to prepare for this shock. They don't tell you about the programs that are available. After job training, no one got a job. I'm still afraid.*
- 257 I don't like the programs. They're a waste of time, not helpful. The caseworkers don't think you have a life when they schedule appointments. They treat you like garbage — like you're low-class. And I dread going to the interviews and I'm due for one in December. It would be nice if they follow up with what they say. They say they'll help you find a job. They don't help you find a job. It would be nice for the 4 weeks to put you in a class that was interesting to you. Schedule interviews. Sit with computers. I don't expect them to do it for me, but they must have some kind of connections. When you get to an interview after not having worked for 5 or 7 years, what do you say to an employer? You've been on welfare? They look down on you.
- 260 *The welfare system is poor. I really don't like it. How can it be fair for a grandparent to have to go on job search and all of that when they have custody of their grandchild?*
- 262 They should help people on welfare. This program is good because they teach you, but they should take into account that there aren't enough jobs. They should give you more time so that you can find a job and be stable in that job.
- 265 *Grandmothers and mothers with handicapped children who bring medical proof are still required to go to orientation. It's not fair because they do not have a medical excuse. They want to work, but they can't.*
- 283 Grateful for what WFNJ has provided.
- 288 *Why do we have to be tortured if we quit a job we're unhappy with? We're sanctioned for 6 to 3 months. I need help with security money. The situation is too cold. I am being denied from a furniture voucher to linens to everything.*
- 290 For housing, when my mother put me out, I went to them to get into a shelter [EA], and they denied me. They sent me back to my

mother's. I went to a fair hearing and they wanted me to work it out with my mother and pay her some rent. How could I do that with the little bit of money? There are a lot of problems at my mother's.

- 291 *My caseworker said he never received the paperwork for my transportation check or bus card. I have 15 people in my class; only 4 showed up because they didn't have transportation. I only got 2 weeks of transportation out of a year. The paperwork got handed to my caseworker personally, but my caseworker says he doesn't have it and as soon as he gets my paperwork, he'll process it. I talked to his supervisor and then my caseworker started giving me trouble. My caseworker froze my benefits for 2 months in a row because he said I wasn't going to work. I explained, if I don't have transportation, then I can't get to work.*
- 293 They should take each individual problem or circumstances and treat it individually. Treat people like they're human beings. Don't say, "this is how we do things." If I could work, I would, but my kids need me more than anything now.
- 297 *I hope things get better. The system needs to do more. WFNJ needs to try to help people a little more. WFNJ puts people out there on their own. They don't involve people in the program. They aren't preparing people for what they have to do. WFNJ isn't doing these things. WFNJ doesn't follow up with people on services such as childcare.*
- 312 They need to provide people with real training. You need education so that you can make good money. Do not want to end up back on the system. I want to work.
- 323 *People were asking questions at the orientation that no one could answer. Five-year program is not going to work. There are people out there that are incapable of holding a job. First, people are hitting that in the year 2000. There will be more homeless because they won't be able to maintain housing. Essex county is going to be broken down. No one is going to be safe at all. The first person they should go rob is Whitman. It's very unfair. They should help people become motivated rather than by punishing them. They're not learning anything. Have to tune in to what they really need. They're not offering training in the areas where there are jobs like nursing, etc. I spent time in class helping the instructor.*
- 327 I think that it's working well.
- 342 *I would like help in applying for SSI.*

- 353 I think that they should have longer training classes—as far as time goes, months.
- 356 *They make you feel degrading and the rest of the crap. If you don't get along with your caseworker, you're in for it.*
- 364 I wish they would help more. The ones not doing anything get all the help; the ones who try, can't even get a [job] list. The money they give you, why do they have to cut so much if you're not making that much [on a job]? I'm only making \$5.15 an hour. They cut my welfare check to \$101. I'm barely bringing money home—less than \$200. I'm struggling. There are people out there that aren't doing anything but drugs and other things. But for the ones that are trying, they're not giving a helping hand. It's hard. It's hard. I'll be happy when my papers do come through 'cause then I'll finally get a good job. I'm trying to move away from the situation I'm in. I want to get out of public housing. I get paid every other week and the [welfare] check they give me isn't for me—it's for my children. What's that come out to? \$50.50 a person? That's nothing.
- 375 *It's a good system for those who need it, especially children. They should carefully screen people to make sure they are eligible for services because there is a lot of fraud. But, it is a good system for mothers who want to help their kids' progress through life.*
- 385 The job search class was a waste of time. It was only a bunch of grown women gossiping. They said that my daughter isn't eligible for childcare because she never was on welfare. She didn't get any benefits at all because of child support. I couldn't give them any information about her father. I didn't know anything about him.
- 387 *The system is good, but services are not provided for people like me. I need better job services, better schooling. You'd be surprised how many caseworkers get paid but don't do their jobs. It does a lot for someone who wants to get off welfare and stay off if a caseworker can help them go to school or get a better job. I've written to Whitman and to Trenton. Caseworkers aren't out to help you. They're just out to keep their jobs. Everybody always hears about the younger generation — the people who have 4 or 5 kids. But everybody's not the same. Some people want to get off.*
- 396 Overall, I feel CWEP was the best. Hands-on job placement. Work First is working. I have 2 or 3 girlfriends who had no job skills but found jobs through the Work First program. But in my case, I have to get healthy first in order to find work.

- 400 *I like to be able to read and do things around the house, but what I really want is to get better so that I can be able to improve my life.*
- 402 It's helpful.
- 405 *With 5 years, they should give us a couple of years to be able to get a high school diploma or something. The case manager is the one that sees the school and all the stuff. Case manager has higher rank than the caseworker.*
- 414 A lot of times, when I go to the welfare agency, people need translators and the caseworkers ask me to translate. Even the Spanish-speaking caseworkers don't treat Spanish-speaking clients well. I had my first son when I was 16, and if I could go back and do it again, I would wait until I had gone to school, had a good job and got married to have kids. Some girls live with guys who can pay their rent, but then the guys hit them. Some girls think that if they have a baby by a guy they really like, that's a good way to keep them by their side, but it doesn't work that way. I think the welfare system needs to change.
- 419 *A lot of fathers don't take care of their babies. It's hard for a lot of people. I have custody of my sister's kids and it's more hardship on me. My fiancée is OK with this, but most people don't have families to take care of them. My sister is on drugs, and a lot of them are. There should be a law where they should stop having babies. My sister has 6 kids in three different states. I have custody of her older kid, and there's tension with my family. Who's going to take care of them? It's hard on the families—the grandparents, the aunts. A lot of these caseworkers see them coming in high. I don't see how they can keep getting their grant. They trade in their food stamps for drugs. When I needed a place to stay, I couldn't get it. We tried to get my sister in the drug program. Trying everything. And, the last thing we did was take her kids. My sister wouldn't go to the drug programs. She just disappeared. They [the welfare program] don't give you enough help. He's ADD and my sister's kid. If you don't have a GED, they push you to work. They don't help you get a GED. If you lose that job, what are you going to do? Your employer knows you don't have a GED. They only help you for a while; then they stop. They [welfare] puts on the few cases that do work on TV, but they don't show the cases that don't. If you sit in the welfare office, you'll talk to people and find that it really doesn't work.*
- 420 My 7-year-old son has had asthma and Down Syndrome since he was born. He always needs some sort of medical help. It is very difficult to care for him. Welfare does not care about my son or me. They just want to get me out of there as fast as possible. This is not right.

- 421 *They switch caseworkers too much and the person doesn't become familiar with you. One person doesn't know what the other person did. They never help you out. Its hard to get to the supervisors — they don't want to be bothered with you. But, when something changes for you, they want you to come down immediately. But, when it comes to you needing something, they don't want to do it.*
- 423 I have been sanctioned, even though I am working in a volunteer placement 25 hours a week.
- 431 *We need to be treated fair. We are minorities and everything like that, and I feel like we are being screwed. I'm the type of person who doesn't just sit back. I like to ask questions. I don't feel like my child's father is being treated fairly either because he plays a major part in the lives of me and my daughter, and he is getting screwed as well.*
- 433 The job training is a useless part of the program. The agency should be more specific and get people with common goals and interest together in one class and not everybody at once.
- 435 *Welfare sanctions your checks. They took all my food stamps. I went to this activity. Within 4 weeks, they were supposed to give me all my benefits back, but I still haven't received them, so my kids and I didn't have any real food for a month. They offer transportation, but you don't get it when the program starts, and in the meantime, you could've been spending the money on food. The program is good, but a lot of people couldn't start until they found childcare, so some of their benefits were taken away, unless they could pay for childcare themselves. There are a lot of people who do a lot of work, but they go through a lot of drama, while the people who are on drugs are being nice or whatever.*
- 443 For the time that I've been on, at least, it was something to fall back on. I look at it this way—I didn't have a job; I didn't have a husband to fall back on. But, I look at it this way—at least it was something.
- 487 *I'm using welfare's help to prepare for work. I've been studying since I started receiving welfare. I will be graduating in May. I needed their help to get into the field I want to work in.*
- 492 I'm just ready to go to work. For now, I'm ready to continue my training, but I'd like to continue it somewhere else, like Essex County Community College. I don't feel that I'm being helped properly [by welfare]. I'm really focusing on moving to a better environment.

- 513 *The childcare issue. I wasted my time at Rutgers — they taught me DOS and Lotus and WordPerfect—all outdated programs. I felt stupid. When you get a job, they take everything. I didn't even get Food Stamps or Medicaid.*
- 517 I wish that I knew more about what was available through welfare. For example, I didn't know that they provided transportation. I found out through word-of-mouth. When I went back to the caseworker, I asked her about it, and I got it. They miss a lot of detail when they are just trying to get through the re-determination. He [the caseworker] was just so busy and didn't take the time to explain.
- 521 *They're not trying to help me go to school [GED]. I don't know why. I've asked, but they've never given me a reason.*
- 527 Need somewhere to live. Not enough money and help available. I want to be a teacher, not a teacher's assistant. They can't tell me what I want to be. They just tell you what they offer.
- 533 *What works for other families does not necessarily work for my family. The push to get off the system is excellent, but they're leaving too many holes for people to make it. I will make it, but there are some people that don't have the will. They need nurturing, and they're not getting it.*
- 537 I wish that they would be more considerate of what we're going through. It's hard to leave your children with just anyone. Be more caring. Not just the caseworkers, but the whole system. They don't care. Either you do it or you don't; if you don't, then they just cut your grant.
- 544 *I am happy that I did have a survey. There are a lot of people who really need the help and are really working hard, and other people who don't do anything and it seems like they get what they need. I am trying to do what I have to get off it. If they could take care of college, that would be really helpful. And, housing. I got to have Section 8.*
- 566 I receive \$290 for two children, and I don't think that's making it. I have to pay rent, phone bill, clothes. That's not making it. It's not enough, and the program isn't fair. I feel that the people who don't need it get their way, like drug-heads, and the people who are trying to make it get overlooked. It's not fair. I don't think so.
- 579 *I'm trying to the best of my ability to be on my own. I want a better life for myself and children. If I could get free help, I'll take it.*

- 581 The caseworkers do not take enough time. They should perhaps have a new program to learn how to handle different cases and situations. They need to be more caring. I give them respect, so they should give me respect. Yes we are dependent, but we are still human. We are not animals. I have skills. I just need to find a job I can get to. Don't treat everyone the same.
- 584 *I need to learn English to get a better job, but I don't have time to go to classes because I have to take care of my children.*
- 587 The welfare system should be tighter and stronger. They are very nasty. They should pay more attention to people and the things that they ask for. People are trying to move ahead, and they don't get help. I just do things on my own.
- 588 *I need to know if I can go to school [required classes] if my kids are sick. It's difficult for me to go to classes through welfare when my kids are sick.*
- 591 They should have the childcare program set up before they send you into the program. They may know my situation but they don't help me — like applying for energy check. They're always denying me. They don't give me anything [energy, TRA, etc.
- 606 *They keep you there too long. They never send letters and information on time. They treat you like they are better than you.*
- 617 My caseworker — she doesn't deal well with people; she doesn't answer the phone; she doesn't follow-up; and she doesn't do what she's supposed to do.
- 642 *I don't know about other welfare recipients, but I want to work.*

Endnotes

- 1 Current Program Statistics, New Jersey Department of Human Services, February 1997.
- 2 Current Program Statistics, New Jersey Department of Human Services, November 1999.
- 3 The population consisted of six counties in which recipients had received at least two consecutive years of welfare receipt.
- 4 Researchers drew a sample of 637 from a population of approximately 13,500 welfare recipients. The final sample size of 334 represents a response rate of 52%.
- 5 An analysis of the disposition codes revealed that 6% of potential respondents refused to be surveyed and 10% could not be located by phone or mail due to incorrect/incomplete information. Researchers completed most (61%) of the interviews from outgoing telephone calls, 29% from incoming hotline calls and 10% from face-to-face surveys.
- 6 All percentages from the WPWEP survey data are rounded to whole numbers. In some cases, percentages may not add to exactly 100 percent of reporting respondents due to rounding.
- 7 Profile of the NJ TANF Population, July 1999, New Jersey Department of Human Services. Ethnicity statistics: African-American (61%), Asian/Pacific Islander (>1%), Latina/Hispanic (28%), Native American (0%), White (9%), Other (1%).
- 8 Anu Rangarajan, Peter Schochet and Dexter Chu, *Employment Experiences of Welfare Recipients Who Find Jobs: Is Targeting Possible?* (Princeton: Mathematica Policy Research, Inc., 1998). Anu Rangarajan and Robert G. Wood, *How WFNJ Clients Are Faring Under Welfare Reform: an Early Look* (Princeton: Mathematica Policy Research, Inc., 1999).
- 9 “Median Years of Tenure with Current Employer for Employed Wage and Salary Workers by Age and Sex, Selected Years, 1983-98,” Table 1, *Labor Force Statistics from the Current Population Survey*, Bureau of Labor Statistics, U.S. Department of Labor, September 1998 . This figure does not include an estimate of the *additional* time that they may continue to hold the same jobs in the future. It is noteworthy that even without this estimate of the full length of a job, this general population figure is greater than the WPWEP respondents’ longest time of job tenure.
- 10 Dennis Gilbert, *The American Class Structure in an Age of Growing Inequality*, (Belmont: Wadsworth Publishing Company, 1998).
- 11 Thomas J. Kane and Cecilia E. Rouse, “Labor-Market Returns to Two- and Four-Year College,” *American Economic Review*, 85 (1995).
- 12 “Income by Educational Attainment for Persons 18 Years Old and Over, by Age, Sex, Race and Hispanic Origin,” Table 8, *Educational Attainment in the United States: March 1998 (Update)* U.S. Census Bureau, March 1998 <<http://www.census.gov/population/www/socdemo/edu-attn.html>>.
- 13 “Employment Status of the Civilian Population 25 Years and Over by Educational Attainment,” Table A-3, *The Employment Situation News Release*, Bureau of Labor Statistics, U.S. Department of Labor, April, 2000 <<http://stats.bls.gov/news.release/empsit.t03.htm>>.
- 14 Calculation based on “Educational Attainment of Persons 15 Years Old and Over, by Age, Sex, Race, and Hispanic Origin: March 1998,” Table 1, *Educational Attainment in the United States: March 1998 (Update)* U.S. Census Bureau, March 1998 <<http://www.census.gov/population/www/socdemo/educ-attn.html>>.
- 15 “Educational Attainment of Persons 18 years Old and Over, by Age, Sex, Race and Hispanic Origin for the 25 Largest States: March 1998,” *Educational Attainment in the United States: March 1998 (Update)* U.S. Census Bureau, March 1998 <<http://www.census.gov/population/www/socdemo/educ-attn.html>>.

- 16 “Fact Sheet: Literacy and Welfare,” National Institute for Literacy
<<http://www.nifl.gov/newworld/WELFARE.HTM>>.
- 17 National Institute for Literacy
- 18 Paul E. Barton and Lynn Jenkins, *Literacy and Dependency: The Literacy Skills of Welfare Recipients in the United States* (Princeton: Educational Testing Service, 1995).
- 19 Barton and Jenkins
- 20 Barton and Jenkins
- 21 Carolyn M. Timmons, Jeffrey Lowe and Traci DiMartini, *Report on Study of Perceptions of Intra-Market Penetration of Welfare Reform in Passaic County, New Jersey Among Welfare Clients, Workforce Service Providers, and Employers*, John J. Heldrich Center for Workforce Development, Edward J. Bloustein School of Planning and Public Policy, Rutgers University, September 1999
<<http://www.heldrich.rutgers.edu/publications/ACFF41.pdf>>.
- 22 Barton and Jenkins
- 23 The cutoff of \$20,000 is based on the category closest to 150% of the federal poverty guideline for a family of three for 1994 ($\$12.320 \times 1.5 = \18.480).
- 24 Whitman, Governor Christine Todd, “State of State Address 2000,” State of New Jersey.
- 25 These statistics refer to a question that does not define computer use. Eric C. Newberger, “Computer Use in the United States: October 1997,” *Current Population Reports*, U.S. Census Bureau, September 1999
<<http://www.census.gov/prod/88pubs/p20-522.pdf>>.
- 26 Newberger
- 27 *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, (Washington: American Psychiatric Association, 1994).
- 28 *Mental Health: A Report from the Surgeon General*, National Institute of Mental Health, 1999 <<http://www.nimh.nih.gov/nhsgrpt/home.html#message>>.
- 29 National Institute of Mental Health.
- 30 Eileen Sweeney, “Recent Studies Indicate That Many Parents Who Are Current or Former Welfare Recipients Have Disabilities or Other Medical Conditions,” Center On Budget and Policy Priorities, February 2000
<<http://www.cbpp.org/2-29-00wel.pdf>>.
- 31 Rukmalie Jayakody, Sheldon Danziger, and Harold Pollack, “Welfare Reform, Substance Use and Mental Health,” *Journal of Health Politics, Policy and Law*, in Press, (2000). Sandra Danziger, Mary Corcoran et al., “Barriers to Employment of Welfare Recipients,” Poverty Research and Training Center, University of Michigan, April 1999. Amanda Smith Barusch, Mary Jane Taylor, et al., “Understanding Families with Multiple Barriers to Self Sufficiency: Final Report,” University of Utah Social Research Institute, February 1999.
- 32 Jayakody, Danziger, and Pollack
- 33 William Curcio, “The Passaic County Study of AFDC Recipients in a Welfare-to-Work Program: A Preliminary Analysis,” Passaic County, 1996.
- 34 Sandra Danziger, Mary Corcoran et al., “Barriers to Employment of Welfare Recipients,” Poverty Research and Training Center, University of Michigan, April 1999. Barusch, Taylor, et al.

- 35 “National Center for Health Statistics, Healthy People 2000 Review, 1998-99,”
Public Health Service, 1999 <<http://www.cdc.gov/nchs/data/hp2k99.pdf>>. These are
the most recent years for which this data is available.
- 36 National Institute of Mental Health
- 37 Stephen Zuckerman and Stephen Norton, “National Survey of America’s Families:
Snapshots of America’s Families,” Urban Institute .
- 38 Krista Olson and LaDonna Pavetti, “Personal and Family Challenges to the
Successful Transition from Welfare to Work,” The Urban Institute, 1996 .
Rangarajan and Wood
- 39 Olson and Pavetti. Danziger, Corcoran et al.
- 40 *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition,
(Washington: American Psychiatric Association, 1994).
- 41 Rangarajan and Wood
- 42 The LSNJ SSI Project is a cooperative program between LSNJ and NJ DHS
designed to move disabled welfare recipients into the SSI program.
- 43 Barbara L. Wolfe and Steven C. Hill, “The Effect of Health on the Work Effort of
Single Mothers,” *The Journal of Human Resources*, 30 (1995).
- 44 Jody Raphael and Richard M. Tolman, “Trapped by Poverty; Trapped by Abuse:
New Evidence Documenting the Relationship Between Domestic Violence and
Welfare,” (The Project for Research on Welfare, Work and Domestic Violence, a
collaborative project of Taylor Institute and the University of Michigan Research
Development Center on Poverty, Risk and Mental Health, April, 1997).
- 45 Research compiled by Taylor Institute and the University of Michigan Research
Development Center on Poverty, Risk and Mental Health (NOW Legal Defense
press release, April 1997)
- 46 Ruth Brandwein, “Family Violence & Welfare Reform: What are the Links?” from
the National Invitational Symposium, University of Utah, May, 1996.
- 47 Angela Browne, Amy Solomon and Shari Bassuk, “The Impact of Recent Partner
Violence on Poor Women’s Capacity to Maintain Work,” *Violence Against Women*,
Vol. 5, #4, April 1999, p.399.
- 48 PRWORA Section 402(a)(B)(7) of Title I (42USCA Section 602 *et seq.*).
- 49 NJSA 44:10-59.
- 50 Rangarajan and Wood
- 51 Jody Raphael, “Domestic Violence: Telling the Untold Welfare-to-Work Story,” A
Taylor Institute Report, January 30th, 1995.
- 52 Barbara Sard and Jeff Lubell, “The Increasing Use of TANF and State Matching
Funds to Provide Housing Assistance to Families Moving from Welfare to Work,”
(Washington: Center on Budget and Policy Priorities, February 2000).
- 53 Anu Rangarajan, *Keeping Welfare Recipients Employed: A Guide for States
Designing Job Retention Services*, Mathematica Policy Research Inc., 1998
<<http://www.mathematica-mpr.com/Pesdemp.pdf>>
- 54 Rangarajan and Wood
- 55 Rangarajan and Wood

- 56 Respondents exempt from the work requirements at the time of the survey were not included in the frequencies.
- 57 Respondents exempt from the work requirements at the time of the survey were not included in the frequencies.
- 58 The chart includes only respondents who were not excused from welfare work requirements at the time of interview.
- 59 This percentage only included respondents who were not excused from the work requirements.
- 60 Scores for the general population are from the 1994 General Social Survey. As per Tom Smith of the General Social Survey, “vocabulary scores were very stable over time” and he expects that similarity scores would be too. Therefore, comparing our 1999 similarity scale data to the GSS 1994 similarity scale data should not be problematic.
- 61 The GSS had a separate category for respondents who chose not to answer a question, while the LSNJ survey counted any unanswered questions as incorrect. Therefore, researchers recategorized GSS data in order to match with LSNJ data. GSS scores are reported in their recategorized form.
- 62 Christopher B. Nelson, Ronald C. Kessler, Daniel Mroczek, “Scoring the World Health Organization’s Composite International Diagnostic Interview Short Form (CIDI-SF; v1.0, Nov98),” World Health Organization, November 1998.
- 63 Danziger, Corcoran, et al.