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ABSTRACT
         This guide distills lessons from an extensive body of
research into practical advice for policymakers and practitioners concerned
with helping hard-to-employ individuals find jobs and succeed in the work
force. Part 1 examines the following topics: characteristics of the
hard-to-employ; the prevalence of various barriers to employment; and the
effectiveness of past welfare-to-work efforts for hard-to-employ individuals.
Part 2 explores the following aspects of policy and design: implications for
state and local policy; techniques for identifying and assessing barriers;
staff development and interagency partnerships; program models; and best

practices. Part 3 consists of six sections that are each devoted to one of the following employment problems faced by hard-to-employ individuals: multiple barriers; substance abuse; domestic violence; physical disabilities and chronic health problems; depression and other mental health problems; criminal records; very low basic skills and learning disabilities; and language barriers. Each section contains the following items: overview; screening and assessment guidelines; service strategies; labor market strategies; guidelines for staff development and interagency partnerships; and best practices. Seventeen text boxes are included. The appendix contains lists of the following items: 63 programs, organizations, and contact information; 113 references and suggested publications; and 113 recent publications on Manpower Demonstration Research Corporation projects. (MN)

# ReWORKing Welfare

Technical
Assistance for
States and
Localities

A How-to Guide

# Beyond Work First

## How to Help Hard-to-Employ Individuals Get Jobs and Succeed in theWorkforce

## Amy Brown

## MDRC

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# ReWORKing Welfare

Technical Assistance for States and Localities

A How-to Guide

# Beyond Work First

## How to Help Hard-to-Employ Individuals Get Jobs and Succeed in the Workforce

## Amy Brown

April 2001

## MDRC

Manpower Demonstration Research Corporation

# Contents

[Sections 11 through 17 are each organized as follows: *Overview of the Issue, Screening and Assessment, Service Strategies, Labor Market Strategies, Staff Development and Interagency Partnerships*, and *Best Practices*. Each section con-cludes with a text box describing program examples related to the key topic.]

# Contents

# List of Text Boxes

# Preface

Since passage of the Personal Responsibility and Work Opportunity Reconciliation Act in 1996, the number of Americans on cash assistance has dropped dramatically — nearly 50 percent. But the story does not end there. Even with this sharp decline, many people have not made a successful transition from welfare to work. Some long-term recipients have been unable to benefit from welfare-to-work programs, even with the help of a very strong economy. Others cycle on and off welfare, unable to maintain steady employment. Employment programs are attempting to identify and ameliorate the difficulties faced by these individuals, which include such complex problems as substance abuse, domestic violence, physical and mental health barriers, and learning disabilities.

In the past, most welfare-to-work programs did not serve people with the most serious barriers to employment. The research, however, does provide some guidance about the effectiveness of different program approaches in helping these people make the transition into employment. Moreover, many lessons can be learned from the long experience of rehabilitation and clinical treatment programs and from the emerging experience of welfare-to-work practitioners. This guide distills these lessons into practical advice for policymakers and practitioners to help them better understand the issues facing this population and design effective program responses. It identifies promising practices across a wide range of service delivery issues and the various health and behavioral problems associated with being "hard to employ."

Prepared with the support of the Annie E. Casey Foundation, the Charles Stewart Mott Foundation, and the David and Lucile Packard Foundation, this book is the eighth in a series of "how-to" guides that are part of our ReWORKing Welfare technical assistance project. The project seeks to synthesize and share lessons from our research and experience in the field to assist states and localities to make informed decisions in this new environment. We are grateful to the funders of ReWORKing Welfare, which are listed at the front of this guide.


Judith M. Gueron
President

# Acknowledgments

# I.
# Introduction

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# 1. Who Are the Hard-to-Employ?

Welfare caseloads across the country have dropped nearly 50 percent since 1996, when the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) was signed into law.[1] Employment was the central focus of the new Temporary Assistance for Needy Families (TANF) block grant created by PRWORA, and under state TANF programs large numbers of welfare recipients have moved into the workforce.[2] They have done so under pressure from welfare time limits and work requirements and with the aid of a booming national economy and increased employment-related services, such as job placement assistance and expanded child care subsidies.

Many families, however, have not made the transition from welfare to work, and they are the families who concern us here. Some are long-term recipients who have been unable to respond to welfare-to-work efforts or take advantage of the strong labor market. Still others cycle between work and welfare, unable to maintain a steady attachment to the labor market. Pressure to reduce welfare caseloads even further is causing local welfare-to-work programs to confront the barriers to employment faced by these individuals. Time limits add a concern that if programs cannot help them, these recipients may be left with neither a job nor a safety net.

While they are a diverse group, those still on welfare may be more likely to have lower levels of education, less work experience, and fewer skills than those who have already made the transition to work. Many face serious personal and family barriers to employment, such as depression, substance abuse, physical health problems, and learning disabilities; these recipients pose new challenges for policymakers and employment program staff. Most programs have little experience working with these individuals, who were often exempted from participation in the past. And the fact that they remain on welfare suggests that current employment efforts are not sufficient to help them. New strategies need to be developed. This book provides guidance for policymakers, administrators, and line staff in welfare-to-work and other employment programs on how to help hard-to-employ individuals find jobs and sustain employment.

Because these job seekers are new to most welfare-to-work programs, there is little research evidence on what strategies are most effective for them. Fortunately, however, this guide is able to draw lessons from vocational rehabilitation services, treatment programs, and community organizations that have had long experience working with individuals who face these challenges. Many welfare-

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1. U.S. Department of Health and Human Services, 2000. PRWORA replaced the previous Aid to Families with Dependent Children (AFDC), the nation's main safety net for poor families, with Temporary Assistance for Needy Families (TANF), a block grant under which states have broad flexibility to implement their own approaches.

2. There is no clear estimate for how many of those who have left welfare have moved into jobs. A national study (Loprest, 1999) found that 30 percent of those who had left welfare later returned to the rolls and 40 percent of those who were still off welfare were not working. Even for those who had jobs, many remained in poverty — median monthly earnings were $1,149.

to-work programs have begun to develop partnerships with these institutions and service providers. The partnerships take different forms and use varied strategies to link employment activities with other services, but they share the objective of enabling welfare-to-work program staff to focus primarily on employment.

There are other reasons for optimism. The flexibility provided by federal block grants gives states unprecedented freedom to test innovative approaches for working with hard-to-employ welfare recipients. To date, states have barely made use of their ability to spend TANF funds in new and different ways (see Section 5). Because of fixed block grants and large caseload reductions, states now have more funding than ever available for those persons who are receiving assistance. States can use these funds to invest in additional services to address the barriers that those who remain on welfare face.

## Potential Barriers to Employment

A variety of issues can interfere with successful employment for welfare recipients, ranging from personal factors such as physical and mental health problems to situational factors such as housing instability, family-related factors such as caretaker responsibilities, and social factors such as lack of support networks. Nearly all parents on welfare must address some common issues — such as the need to find safe, reliable, and affordable child care — before moving to work. Many states and communities have made progress on these broader issues, for example, by increasing access to child care subsidies and helping to link parents with available care.

Since we cannot attempt to address all potential issues, we deal here with seven factors that have emerged through both research and program experience as significant barriers to employment for a subset of welfare recipients:

▶ substance abuse

▶ domestic violence

▶ physical disabilities and chronic health problems

▶ depression and other mental health problems

▶ criminal records

▶ very low basic skills and learning disabilities

▶ language barriers

Many of these issues are related, and welfare recipients may have multiple barriers. For example, women who abuse drugs are likely to also have mental health problems or histories of domestic violence.[3] Identifying and addressing multiple barriers will be crucial in helping individuals succeed in employment (see Section 10).

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3. Fleischer, Dressner, Herzog, and Hong, 2000.

## Are All Those Still on Welfare Hard to Employ?

It is tempting to consider all those still on welfare as hard to employ. Arguably, given low unemployment levels nationwide, it seems likely that those most able to go to work have already done so. Yet even the current welfare caseload is diverse, and it is important to keep in perspective the extent to which their barriers to employment define those receiving assistance (see Section 2).[4]

Many welfare recipients are relatively recent applicants who are using TANF as temporary support during a period of unemployment or family crisis; these individuals will likely soon be able to reenter the labor market with only limited assistance. An increasing number of recipients are already working, combining low-wage or part-time jobs with supplemental welfare grants. Others have cycled back and forth between welfare and employment; for them the challenge is less about getting a job than sustaining employment. Still others have little work experience and have been on welfare continuously for long periods. For recipients in these last two groups, the barriers discussed in this guide may have played a role in impeding their labor market success.

However, we should not assume that individuals who face any of the barriers outlined above will be unable to find a job or sustain employment. Many working people face these same barriers and succeed in the labor market. For this reason, it is important not to operate with preconceived notions about who is and who is not employable based on individual characteristics. Indeed, the term "hard to employ" itself, with its focus on barriers, can lead to self-fulfilling prophesies about who will succeed. *This guide strongly recommends that programs focus on individuals' strengths as well as barriers and set high expectations for their success — an approach that has long been used by programs for the mentally and physically disabled.* Programs also need to have the flexibility to respond over time if it becomes clear that some individuals need additional support.

Finally, the extent to which the presence of barriers makes the current challenge of welfare-to-work programs more difficult than it has been in the past is not altogether clear. The most successful programs to date have had impacts across major subgroups, including the more disadvantaged welfare recipients (though they generally did not work with the most disadvantaged groups).[5] In addition, a recent national survey found that participation in work activities is at a historic high, despite the fact that more than 40 percent of recipients reported at least two significant obstacles to work. The study concluded that there does not seem to be a relationship between recent caseload reductions and barriers to employment.[6]

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4. It is also important to note, as discussed later in this guide, that caseload reductions include many hard-to-employ individuals, whose barriers may make it difficult for them to comply with program requirements.

5. Scrivener et al., 1998; Riccio, Friedlander, and Freedman, 1994; Michalopoulos and Schwartz, 2000.

6. Zedlewski, 1999a, 1999b.

## Some Key Points

There is no one model for designing welfare-to-work programs for hard-to-employ individuals and no clear best strategy for helping all welfare recipients succeed in the workforce. Instead, this guide presents advice and best practices to help states and localities make informed choices in implementing their own programs.

Readers should bear in mind these key points:

▶ Helping individuals with barriers succeed in employment will require both service strategies that address the barriers directly, for example, through counseling or treatment, and labor market strategies that identify or create employment opportunities in which individuals with barriers can succeed. This guide presents recommendations for both types of strategies.

▶ The path from welfare to work is not linear. Some problems must be addressed before individuals begin work, others can be addressed while they are working, and still others may not even emerge until after they have begun to work.

▶ Because participants often face multiple barriers to employment, programs must be prepared to use multiple strategies, at different intensities and in different combinations, to adequately meet their individual needs.

▶ A key lesson that emerges from the experience of practitioners who have worked successfully with even severely disabled individuals — and which welfare-to-work programs should bear in mind — is that programs cannot, and need not, address all of individuals' problems in order to clear the path to employment.

▶ Serving individuals with serious barriers will require new investments of resources in staffing, staff training, and service delivery. Fortunately, states currently have resources available — from TANF block grant funds, U.S. Department of Labor Welfare-to-Work grants (see Box 1), and increased revenues — to invest in this way. All three allow a great deal of state and local flexibility in developing innovative approaches that draw on local opportunities and meet local needs.

▶ Helping individuals address barriers will require additional support services, beyond those traditionally provided by welfare-to-work programs (such as child care and transportation). These include mental health counseling, shelter for victims of domestic violence, and substance abuse treatment. Programs will need to form partnerships with community-based providers of these services, making sure the supports are both available and accessible to program participants.

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**Box 1**

**The Department of Labor Welfare-to-Work Grants**

The Balanced Budget Act of 1997 included funding for welfare-to-work activities targeted to individuals who are considered hard to employ. The Welfare-to-Work grants, funded through the U.S. Department of Labor (DOL), can be used for services to individuals who meet specific eligibility requirements, such as long-term welfare receipt, low skills in reading and math, substance abuse, and a poor work history.

For the purposes of this guide, it is important to distinguish between characteristics that are used to *define eligibility* — as in the Welfare-to-Work grants — and characteristics that present a *barrier to employment* for a given individual. The first case determines who gets in the door to receive program services. The second determines whether the individual needs special services and what those services should be.

As noted in this section, the presence of a characteristic does not necessarily mean that an individual will be hard to employ. Therefore, not all individuals who meet the DOL eligibility criteria will have difficulty succeeding in the labor market, and others who do not qualify may in fact be unable to find and sustain work. States may therefore want to consider both further assessment within programs funded by the Welfare-to-Work grants and the use of other funding to provide additional services to hard-to-employ individuals who are not eligible to be served under the DOL grants.

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▶ Despite the best efforts of both individuals and employment program staff, some people may need long-term safety net support. States should have policies and programs in place for these individuals.

## The Challenge Ahead

The challenge of identifying strategies to help hard-to-employ welfare recipients is heightened by several factors:

▶ **Welfare-to-work programs have limited experience with this group.** Many of those now considered hard to employ were exempted from participation in Job Opportunities and Basic Skills Training (JOBS), the welfare-to-work program that preceded PRWORA. Individuals commonly exempted included those with health problems and those who were caring for an ill or incapacitated family member. Under TANF, however, states have taken a much broader view of who should participate in employment-related services.

▶ **Welfare time limits increase the urgency of working with this
group.** PRWORA places a five-year limit on the use of federal funds to
provide ongoing cash assistance to most families, and many states have
adopted even shorter time limits. While states have the option to exempt
20 percent of their caseload from the federal time limit (plus an addi-
tional percentage for those who are victims of domestic violence), it is
impossible to predict exactly who will and will not find jobs. Therefore,
time limits raise the stakes for welfare-to-work programs and add to the
importance of working with *all* recipients before they reach the end of
their time limit.

▶ **It can be difficult to identify barriers to employment.** Barriers to
work may not be readily apparent. Welfare recipients may be reluctant to
disclose information about certain issues, such as domestic violence or
substance abuse. Other issues, such as depression or learning disabilities,
may be at first difficult to recognize. And still others, such as family prob-
lems related to the parent's employment, may not even surface until after
an individual has begun to work.

▶ **Individuals are not defined by simple characteristics.** The presence
of barriers does not necessarily mean that individuals will have difficulty
moving to work. Employability depends on a variety of factors, including
the number and severity of barriers, the presence of counterbalancing
strengths, individuals' own motivation and social support networks, the
availability of support services, and other factors.

# 2. How Common Are Barriers to Employment?

Before considering strategies to help welfare recipients overcome barriers to
employment, it is helpful to understand how common the barriers are. This
section presents estimates — from both national and local data — of the preva-
lence of key barriers among welfare recipients. In order to put those figures in
perspective, this section also provides information about the prevalence of those
same barriers in the national population.

## The Prevalence of Potential Barriers Among Welfare
## Recipients and in the National Population

A large body of fairly reliable national data gathered over many years is available
on the demographic characteristics, economic conditions, and welfare and em-
ployment patterns of welfare recipients. Unfortunately, a similar body of data
does not exist on the prevalence of potential barriers to employment. While a
number of national and state studies have attempted to identify barriers, the
results do not yield reliable estimates about true prevalence rates. This is not
surprising for the following reasons:

▶ It is inherently difficult to identify barriers such as substance abuse, depression, and learning disabilities using large surveys or administrative records data.

▶ Different studies have used various definitions, criteria, and assessment tools for identifying barriers.

▶ Different studies have taken place at various times and locations.

One study that reviewed the available research concluded that at least 25 percent of the caseload is likely to face a serious barrier and experience difficulty entering the labor force. When those who work only intermittently are included, 51 percent of the caseload is likely to need additional assistance to achieve long-term employment.[7]

Table 1 presents estimated ranges for the prevalence of the barriers discussed in Part III of this guide. *Because of the problems noted above, the estimates include wide ranges that limit their usefulness in drawing conclusions about the welfare caseload. Despite this, we present them here because they represent the best available knowledge on the prevalence of these barriers.*

Both the national and welfare estimates may underrepresent true prevalence because of individuals' reluctance to acknowledge barriers. In addition, in light of recent caseload declines, the estimates for welfare recipients may underrepresent the extent to which the current welfare population faces these barriers. At the same time, not everyone who faces them will have difficulty moving to work; therefore, the percentages may overestimate the degree to which recipients are hard to employ.

As Table 1 shows, the issues addressed in this guide are not unique to welfare recipients. It is important to recognize that many working people face these same barriers. *It is also important that programs not become preoccupied with identifying and attempting to address all of the problems that participants face.* Rather, they should focus on recognizing those barriers that directly or indirectly inhibit the ability of participants to find or sustain work.

Having said that, there is reason to pay special attention to these issues in the context of welfare-to-work efforts, for the following reasons:

▶ The research strongly indicates that the prevalence of these barriers is higher among welfare recipients than in the population at large. For example, a national study found that 24 percent of welfare recipients reported being depressed at least three days in a week compared with only 11 percent of women in the same age group who were not receiving welfare. Similarly, 33 percent of welfare recipients had extremely low basic skills (in the bottom decile of test scores) compared with only 8 percent of nonrecipients.[8]

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7. Olson and Pavetti, 1996.

8. Olson and Pavetti, 1996; Danziger et al., 1999.

## Table 1

## Potential Barriers to Employment Among Welfare Recipients and in the National Population

| Potential Barrier | Estimate of Prevalence Among Welfare Recipients[a] (%) | Estimate of Prevalence in National Population[b] (%) |
|---|---|---|
| Substance abuse | 5-60 | 9.5 |
| Domestic violence[c] | 15-34 | 1.5 |
|  | 29-65 | 25 |
| Physical disability or chronic health problems | 10-31 | 11 |
| Mental health, depression, or other problems | 2-39 | 20 |
| Criminal records | 46[d] | 5[e] |
| Very low basic skills or learning disabilities | 10-66 | 21 |
| Language barriers | 7-20 | 5 |

NOTES: [a]Compiled from the following studies and reports: Johnson and Meckstroth, 1998; Kramer, 1998; Loprest and Acs, 1996; Olson and Pavetti, 1996; Pavetti et al., 1997; Zedlewski, 1999a, 1999b.

[b]Compiled from the following studies and reports: California Institute for Mental Health, 1997; Tjaden and Thoennes, 2000; Stoddard, Jans, Ripple, and Kraus, 1998; National Institute of Mental Health, as cited in Behney, Hall, and Keller, 1997; U.S. Department of Justice, Bureau of Justice Statistics, 2000; U.S. Department of Education, National Center for Education Statistics, 1992; Fix and Passel, 1994.

[c]The first estimate is for current and recent victims of domestic violence; the second estimate is for those who were victims at some time in their life.

[d]This estimate is for noncustodial parents of children on welfare, a population targeted by many programs. Data from the Parents' Fair Share Demonstration show that approximately 75 percent of the noncustodial parents who were served in that program had been arrested and that 46 percent had been convicted of a crime (Bloom and Sherwood, 1994).

[e]The U.S. Department of Justice estimates that if recent incarceration rates remain unchanged, 1 person of every 20 will serve time in a prison during his or her lifetime (U.S. Department of Justice, Bureau of Justice Statistics, 2000).

▶ Few studies control for income and demographic factors in making these comparisons, but those that do indicate that these barriers occur more frequently among welfare recipients than among comparable working-poor families. A study of current and former welfare recipients in four urban areas found that health problems were strongly related to employment status — that is, women who were working were in substantially better physical and mental health than were women who did not work.[9]

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9. Polit, London, and Martinez, forthcoming.

▶ Studies that have looked at the welfare population alone have found that recipients with more barriers or more severe barriers are less likely to work (see below).

Because of the wide variation in the estimates above and because the prevalence of each barrier may vary greatly from community to community, the data presented here should serve only as a starting point and should be supplemented with local information. Welfare departments, workforce agencies, and welfare-to-work providers may collect data on some of these issues. Other potential sources of information include universities, advocacy groups, treatment programs, and other community organizations.

## Other Issues to Consider

In considering the extent to which potential barriers affect welfare recipients, readers should bear in mind the following additional points:

▶ **The severity of barriers matters.** As noted briefly above, one difficulty in estimating the prevalence of barriers is that it is unclear how to define and measure them in the context of employment. For example, research suggests that having a disability does not significantly affect the likelihood of leaving welfare, while having a severe disability does.[10] Similarly, low basic skills (in the 10th to 25th percentile of test scores) are not strongly linked to labor market attachment, while extremely low basic skills (in the bottom decile) are. Welfare recipients who report being depressed three to five days in a week are not less likely to work than the caseload as a whole, while those reporting being depressed five to seven days in a week are.[11]

▶ **Many individuals face multiple barriers.** Another difficulty is that many welfare recipients face more than one potential barrier to employment. A recent national survey found that 78 percent of welfare recipients experienced at least one barrier to employment; 44 percent experienced two or more barriers; and 17 percent experienced three or more barriers.[12] Indeed, some of the barriers discussed in this guide are likely to go hand in hand. (See Section 10 for more on multiple barriers.)

▶ **Correlation is not the same as causation.** The higher prevalence of barriers among welfare recipients suggests a correlation between these barriers and difficulty sustaining employment. But the fact that an individual faces a particular barrier does not necessarily mean the barrier is the *cause* of her or his employment struggles. Other factors may be at work.

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10. Acs and Loprest, 1995, as cited in Olson and Pavetti, 1996.

11. Pavetti et al., 1997.

12. Zedlewski, 1999b. The barriers examined by the survey include less than high school education, last worked three or more years ago, child under age 1, reports either very poor mental health or health limits on work, caring for a child on SSI, and English-language limitation.

# 3. How Effective Were Past Welfare-to-Work Efforts for This Group?

Evaluations by MDRC and others have examined the extent to which welfare-to-work programs can increase employment among welfare recipients. This section reviews the research, focusing in particular on the impact that the programs had on individuals facing serious barriers to employment.

Before discussing the research, a few caveats should be mentioned:

▶ This is not a comprehensive review of the research on welfare-to-work programs. It draws mostly from MDRC's own research and focuses on the effects of programs on the more disadvantaged welfare recipients.

▶ Most of the programs included in this section did not specifically target hard-to-employ individuals for services. In fact, many programs exempted individuals with serious barriers, such as physical or mental health problems, from participation.

▶ Most of the programs were designed and run before the implementation of TANF. Therefore, only a few include elements such as time limits and broad participation mandates that are typical of current welfare-to-work programs.

▶ The studies described here have not examined results for all the subgroups discussed in this guide. For example, several studies provided information about education levels, health problems, and risk of depression, but none examined substance abuse, domestic violence, or criminal records.

▶ Finally, the results here are presented in terms of impacts, not outcomes. Using a random assignment research design, impacts measure the *difference* between outcomes for program participants and those for a control group. For example, if 80 percent of a program's participants find jobs but 75 percent of control group members also do so, the impact is only 5 percentage points. A program in which only 50 percent of participants find jobs and (perhaps because of a weak labor market) 40 percent of control group members do so would have a larger, 10 percentage-point impact. While impacts are a better measure of a program's effectiveness, even a successful program can leave many individuals behind.

Despite these caveats, the research presented here can inform the current challenge. And newer studies, including an evaluation of programs funded by Department of Labor Welfare-to-Work grants, will provide valuable information on the effectiveness of programs in the current environment.[13]

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13. See Nightingale et al., 2000, and Perez-Johnson, Hershey, and Bellotti, 2000, for early implementation research.

## Research on State and Local Welfare-to-Work Programs

Over the past 10 years, MDRC has conducted numerous evaluations of welfare-to-work efforts in states and counties across the country. A synthesis of information from 20 of those programs provides reasons for both optimism and caution in working with individuals with serious barriers to employment.

The programs used a variety of approaches: five encouraged or required nearly all individuals to look for work; seven focused on basic education for most participants; and eight used a mixed approach, requiring the more job-ready participants to look for work but allowing others to build skills through basic education. All the programs served a range of welfare recipients, but no programs specifically targeted individuals with serious barriers, and few provided services explicitly designed to address those barriers.[14]

The barriers identified in the analysis include long-term welfare receipt, lack of a high-school diploma or General Educational Development (GED) certificate, lack of earnings in the prior year, depression, work-related parental concerns, and physical health and emotional problems. Individuals were considered the most disadvantaged if they were long-term recipients, had not graduated from high school, and had no prior-year earnings. Overall, the programs produced the following results:

▶ The programs increased earnings and reduced welfare for almost every subgroup, including the most disadvantaged. The amount by which earnings increased was about the same for the more disadvantaged groups as for the less disadvantaged groups (about $500 per person per year in 1997 dollars).

▶ However, the more disadvantaged groups tended to earn much less than others, and earnings for some groups were very low.

▶ The programs did not increase earnings for those at high risk of depression. Aside from depression, there was little relationship between the presence of potential barriers and earnings impacts.

▶ Employment-focused programs that offered a variety of activities — including job search, basic education, short-term training, and work experience — were generally the most effective for all welfare recipients, including the most disadvantaged.

The results of these 20 programs suggest that strong traditional welfare-to-work models, emphasizing employment but providing a variety of activities and services, can help many welfare recipients with barriers move to work. *The outcome of most concern, however, is that despite positive program impacts,*

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14. Michalopoulos and Schwartz, 2000. The programs operated in Alameda, Butte, Los Angeles, Riverside, San Diego, and Tulare Counties, California; Escambia County, Florida; Atlanta, Georgia; Columbus, Ohio; Detroit and Grand Rapids, Michigan; Portland, Oregon; and several Minnesota counties. Some sites ran more than one program.

*average earnings remained very low for the most disadvantaged group.* Average annual earnings for program group members over the three-year follow-up period were $1,387 compared with $6,086 for the least disadvantaged group.

## The National Supported Work Demonstration

The National Supported Work Demonstration[15] tested a work experience model specifically designed for individuals with serious barriers to employment. The voluntary program targeted four hard-to-employ groups: long-term welfare recipients (those who had received welfare for at least 30 of the previous 36 months), ex-addicts, ex-offenders, and young high school dropouts. Welfare recipients in the program averaged more than 8.5 years on assistance.

Participants were placed in structured worksites, operated by nonprofit corporations, under conditions of close supervision, peer group support, and gradually increasing demands. Jobs performed by the work crews included rehabilitating and painting houses, operating a daycare center and gas station, building and selling office furniture, and performing janitorial services. The full-time positions paid wages (subsidized by welfare grants) and were time-limited to 12 or 18 months.

Supported work proved more effective for long-term welfare recipients than for the other three target groups.[16] The model was able to produce sustained effects on earnings and welfare receipt for this group. In the third year of follow-up, program group members earned an average of $5,779 (in 1985 dollars), or 23 percent more than control group members, and they were 10 percent less likely to be receiving welfare. The impacts for supported work were largest for those welfare recipients who did less well on their own: older women, women who had not completed high school, those who had been on welfare for a particularly long time, and those with no prior work experience.

Key features of the supported work model that contributed to its success include:

▶ small work crews of 10 or fewer individuals

▶ close supervision, with the supervisor acting as both crew foreman and counselor-helper

▶ graduated stress, with structured increases in job demands over time

▶ development of job skills and resolution of job-related problems that arose on the worksite

▶ conversion of welfare checks into paychecks

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15. Gueron and Pauly, 1991; Manpower Demonstration Research Corporation, 1980; Bloom, 1997.

16. The program also had impacts on employment and earnings for ex-addicts, though not as strong as for welfare recipients. The program had only marginal impacts for ex-offenders and did not yield long-term positive results for youth.

▶   time-limiting of positions

▶   jobs that were real and productive

▶   peer support provided by work crews that contained like individuals

One limitation of the program was that many participants failed to transition from the work crews to unsubsidized employment. The average stay in supported work was longer for welfare recipients — 9.5 months — than for any other group, largely because they were less likely to move to other jobs. Almost 25 percent of participants successfully completed their maximum time in the program but did not obtain other employment. More aggressive job development and placement efforts might have made a difference in this area.

Another major drawback of the supported work program was that it cost more than $20,000 per person (including wages and benefits) in 1993 dollars, although it did prove cost-effective after five years. One reason for the high cost was the start-up and capital expenses for the businesses in which work crews were engaged. A model that incorporates the practices above into work experience positions in existing worksites may accomplish similar results at a lower cost.

## Open Questions

Because this is still a new area for welfare-to-work programs, the research to date provides only limited guidance for how to help hard-to-employ individuals succeed in work. Further research is needed to answer the following questions:

▶   What are the most effective strategies to help people with serious barriers become and stay employed?

▶   Are different treatment strategies more or less successful for different subgroups?

▶   What screening instruments and protocols to identify barriers to employment are the most reliable and easiest to use?

▶   Is it better to screen individuals for barriers when they first enter a program or at a later stage?

▶   Are there reliable, quick, low-cost assessments that can identify both appropriate clinical treatment and employment services?

▶   What kinds of training and supervision do staff need to assist job seekers with serious barriers?

▶   How should programs approach individuals with multiple barriers?

▶   How should clinical treatment be linked to employment and training services?

▶ How can programs engage employers in opening up employment oppor-
tunities for these individuals?

▶ What are the best methods to get welfare recipients to enter and stay in
treatment?

# 4. About This Guide

This guide provides practical advice for designing and implementing programs
to help hard-to-employ individuals succeed in the labor market. While it is geared
largely to programs serving welfare recipients, the lessons and strategies are
relevant to other low-income, unemployed or underemployed individuals. The
target audience for the guide includes policymakers, program administrators,
and line staff who are involved in welfare-to-work and other employment ef-
forts. They may work for government agencies, nonprofit organizations, or for-
profit companies. In particular, the guide is for readers who find that they face
special challenges when working with individuals with serious barriers to em-
ployment.

Readers are expected to have a basic understanding of employment pro-
grams and best practices for job readiness, job search, job placement, and post-
employment follow-up. Those who want more information in these areas may
want to refer to previous guides in this series, in particular:[17]

▶ *Work First: How to Implement an Employment-Focused Approach to
Welfare Reform*

▶ *Business Partnerships: How to Involve Employers in Welfare Reform*

▶ *Steady Work and Better Jobs: How to Help Low-Income Parents Sustain
Employment and Advance in the Workforce*

The guide is divided into three parts, each containing a number of short
sections.

▶ **Part I** (Sections 1-4) introduces readers to the topic and the guide and
provides a framework for understanding the issue and developing a
response. It presents the research knowledge about the hard-to-employ,
including the prevalence of barriers to employment and the experience
of past welfare-to-work efforts.

▶ **Part II** (Sections 5-9) discusses policy implications and general program
strategies for working with hard-to-employ individuals. It includes infor-
mation on options and best practices for identifying and assessing barri-
ers, staff development, and interagency partnerships, and gives examples
of program models designed to serve a broad cross-section of the hard-to-

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17. See Brown, 1997; Brown, Buck, and Skinner, 1998; Strawn and Martinson, 2000.

employ. Part II ends with a discussion of best practices for employment-focused efforts targeting these individuals.

▶ **Part III** (Sections 10-17) presents suggestions for working with individuals who face specific barriers to employment. After offering guidance concerning individuals who face multiple barriers, it addresses the following issues: substance abuse, domestic violence, physical disabilities and chronic health problems, depression and other mental health problems, criminal records, very low basic skills and learning disabilities, and language barriers. Each section in Part III follows the same basic outline, so that similar information is presented on each issue. The topics include:

▶ an overview of the issue

▶ screening and assessment

▶ service strategies

▶ labor market strategies

▶ staff development and interagency partnerships

▶ best practices

▶ program examples

The guide is structured so that readers can quickly identify and turn to those sections that are most relevant to their own situation or role. While the sections can be read independently, many issues overlap, and so cross-references are provided to assist readers in making those connections. Throughout the guide, you will find bulleted material and checklists. The bullets highlight important points and thus make the guide easier to use. The checklists denote specific suggestions for readers.

The guide draws from research conducted by MDRC and others, as well as from the experience of welfare-to-work programs, other employment programs for low-income individuals, and programs that have expertise in each of the issue areas. *Program examples are included throughout the guide, and contact information for those programs can be found in the appendix.* The mention of a program should not imply that the program has been evaluated or has been proven to be successful. The references are intended to provide concrete examples of programs that have attempted to address the challenges raised in this guide in a variety of ways. The appendix also includes contact information for other agencies and organizations that may be helpful to readers.

This guide does not provide a complete welfare-to-work program model, nor does it provide all the answers for helping individuals with serious personal and family problems. Each section could easily be expanded into its own lengthy paper and would still not adequately address the subject. However, the ideas presented here can help readers begin to identify strategies for working with hard-to-employ individuals, building on your current program services and tailoring the suggestions contained here to local challenges and opportunities.
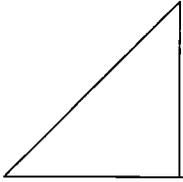
# II.
# Policy and Program Design

# 5. Implications for State and Local Policy

While state and local TANF policies generally apply to all welfare recipients, they may have particular implications for those who have the most difficulty moving to work. In addition to implementing the programmatic recommendations of this guide, we therefore encourage policymakers to review and reconsider TANF policy. This section discusses policy implications in five areas: participation and work requirements, sanction policies, time limits, financial incentives, and transitional benefits.

## Participation and Work Requirements

Welfare agencies generally require individuals to participate in employment or employment-related activities as a condition of receiving benefits. In order to receive full federal TANF funding under PRWORA, a certain percentage of the annual caseload in each state must participate in defined work-related activities for a given number of hours each week. These include unsubsidized or subsidized employment, work experience, on-the-job training, job search, and some education and training activities. The work requirements can make it difficult for welfare recipients to engage in other activities, such as counseling or treatment, designed to address barriers to employment.

State and local participation requirements tend to roughly parallel those in the federal law. However, states have the flexibility under PRWORA to set whatever participation requirements they like. In addition, the federal rates are reduced by the percentage decline in a state's caseload, and dramatic caseload declines nationwide mean that few states are currently at risk of not meeting the federal rates (though this may change in the future). States that want to maximize their flexibility and are concerned about meeting the federal rates

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**Box 2**

**Participation Requirements: Key Questions**

▶ Will participants be encouraged to address barriers before or concurrent with employment activities?

▶ How much will treatment or other services be integrated with employment-focused activities?

▶ Will participation in services to address barriers count toward participation requirements?

▶ Will participation in treatment or other services be mandatory or voluntary?

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can use segregated state funds to provide assistance to certain recipients, and those individuals will not count in calculating the federal participation rates.

In order to support participation by recipients with barriers to employment, Utah and Oregon require that everyone participate in some way, but have expanded the definition of allowable activities so that participation is possible for all recipients. Allowable activities include substance abuse and mental health treatment. Other states have made narrower exceptions to their participation requirements. For example, Tennessee allows welfare recipients who test at or below 8.9 on the Test of Adult Basic Education to participate in educational activities for 20 hours a week instead of fulfilling the regular 40-hour work requirement, so long as they make progress in these activities.[1]

## Sanction Policies

The same issues that present barriers to employment also make it difficult for some individuals to comply with program requirements. *For this reason, sanctions for noncompliance can affect hard-to-employ individuals especially harshly.* In Minnesota, sanctioned families were four times as likely to report chemical dependence, twice as likely to report mental health problems, twice as likely to report family violence, and three times as likely to report a family health problem.[2] In Utah, workers who made home visits to families who were scheduled to lose assistance found that as many as half of those threatened with termination had serious family or personal problems or did not understand the program's rules.[3]

States can take a number of steps to protect individuals who may have barriers from the harshest effects of sanctions. In San Bernadino County, California, home visits to sanctioned clients found that many seemed to have substance abuse, mental health, or domestic violence problems, and that a high percentage could be brought into compliance.[4] Partial grant reductions, as opposed to full-family sanctions or grant termination, can keep individuals in contact with the welfare agency for follow-up efforts to engage them. Graduated sanctions (which become harsher with each incidence of noncompliance) can protect individuals from quickly losing all assistance. Once an individual is identified as having a barrier, programs can require that additional efforts be made to engage and support the individual before a sanction can be imposed.

Programs also need to decide whether participation in activities such as substance abuse treatment or counseling will be mandatory and enforced with sanctions. Making these activities mandatory provides a way for case managers

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1. National Governors' Association, 1998.
2. Minnesota Department of Human Services, as cited in Pavetti et al., 1997.
3. Strawn, 1997.
4. California Institute for Mental Health, 2000.

to hold individuals accountable for addressing barriers. At the same time, programs will lose their opportunity to work with individuals who are quickly sanctioned off of welfare. In addition, many programs believe that voluntary participation is important to the success of these kinds of activities. Programs can choose to apply sanctions only for certain types of noncompliance — for example, for program violations related to employment (such as failure to attend job search workshops) but not for those related to barriers (such as failure to attend a doctor's appointment). This would focus mandates on employment-related requirements while still encouraging participation in other services.

Finally, programs should consider reaching out to individuals who become sanctioned to identify whether a barrier may have played a role in the noncompliance. If so, steps should be taken to address the barrier, while making it easy for the individuals to return to compliance. Lifting sanctions immediately after individuals begin to participate sends a signal that the program is interested in working with recipients even when they have serious barriers.

## Time Limits

PRWORA restricts states from using federal TANF funds to provide benefits to most families for more than 60 cumulative months. *Although there are no categorical exemptions from the federal time limit, states have great flexibility in designing their own time-limit policies.* Because individuals with serious barriers to employment may need more time to make the transition to work, states should use this flexibility to allow those individuals to take the time they need. State policies should also recognize that in some cases recipients may never be fully self-sufficient and should therefore build in the possibility of long-term safety net support.

State flexibility regarding time limits comes from two main provisions of the law. The first allows up to 20 percent of a state's caseload to exceed the time limit at any point. States can therefore exempt this percentage of individuals or extend the time limit for them without facing a federal penalty. States can exempt additional individuals — beyond the 20 percent — if they are victims of domestic violence. The second provision states that the federal time limit applies only to federal funds. States can choose to use their own funds to provide assistance to individuals without that assistance counting against the federal time limit. In order to do this, states need to account separately for the funds, either within the TANF program or in a separate state-only program.

States can structure time-limit policies in a variety of ways to provide additional flexibility for individuals facing serious barriers to employment.

▶ Provide up-front temporary or permanent exemptions. Twenty-four states have exempted individuals with disabilities from time limits, though they

define disabilities in a variety of ways. States have been especially likely to do this when the local time limit is shorter than the federal limit.[5] However, programs are generally reluctant to permanently exempt people up front, preferring to send a message that employment is expected of all recipients. Up-front exemptions can allow individuals to work on addressing barriers without using up months of their time on welfare.

▶ **Provide temporary or permanent exemptions once the time limit is reached.** In this situation, individuals reach their time limit, but may receive extensions under certain conditions. Vermont provides short-term exemptions for individuals with serious health problems; the need for the exemption is reviewed at the end of the period and extended if warranted. Some states, including Minnesota and Maine, plan to use state funds to provide assistance to individuals who still need assistance after the federal time limit is reached, in effect exempting them from the time limit.

▶ **Stop the time-limit clock for individuals in certain activities.** A third option is to temporarily stop the time-limit clock when individuals are involved in approved activities, such as substance abuse treatment or counseling. This permits individuals to work on addressing serious barriers without using up months of their time limit. It also provides the flexibility for case managers to individualize plans, as some welfare recipients may need more time to address barriers than others.

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5. Kramer, 1999.

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### Box 3

### Time Limits: Key Questions

▶ Will different time-limit policies apply to recipients with barriers to employment?

▶ Will there be opportunities for exemptions from or extensions of the time limit? If so, what will be the allowable circumstances, and who will make the decision?

▶ Will there be circumstances under which the time-limit clock stops ticking, such as when an individual is in a long-term treatment program?

▶ What will happen if someone reaches a time limit but still has not been able to move to work?

▶ How will time limits affect recipients with barriers who are able to work part time but remain on welfare?

▶ **Set different time limits for different recipients.** Florida has two time limits: 24 months in any 60-month period for most recipients, but 36 months in any 72-month period for those with greater barriers to employment (including long-term recipients and those without a high school diploma and little work history). All welfare recipients face a cumulative 48-month lifetime limit on benefits.

## Financial Incentives

Financial incentives are an important element of welfare-to-work efforts. Most state TANF policies include earned income disregards, so that welfare recipients who go to work do not lose their benefits as quickly as they otherwise would have lost them. Research has shown that these make-work-pay efforts can both increase employment and reduce poverty (as well as yield other benefits, such as improved outcomes for children).

Financial incentives may be particularly effective for welfare recipients with barriers to employment. Early results from programs in Minnesota and Canada found employment and earnings gains that, especially for long-term recipients, were larger than those found in previously evaluated welfare-to-work programs. The programs also produced unprecedented income gains and poverty reductions, and both were effective for a broad cross-section of welfare recipients. In Minnesota, the program also resulted in significantly reduced incidence of both domestic abuse and depression among long-term welfare recipients.[6]

Two elements may have been key to these results. First, the programs combined financial incentives with participation requirements and employment-related services. The combination proved to be more effective than either incentives or services on their own — and may have helped both encourage and support recipients who otherwise would not have been successful. Second, the programs targeted long-term welfare recipients, effectively focusing resources on those least likely to go to work on their own. In both programs, employment, earnings, and income effects were largest for the longer-term recipients.

For incentives to make a difference, however, welfare recipients must know about and understand them. Without marketing, only people who would have gone to work anyway would receive the payments, thus making no difference for the hard-to-employ. States offering financial incentives should review their outreach, marketing, and staff training to make sure that incentives are promoted and used.

In addition, because financial incentives can increase the amount of time that individuals stay on welfare (by raising the point at which they would no longer be eligible because of earnings), they can conflict with time-limit policies that are intended to push people more quickly off the rolls. Recognizing this contradiction, Illinois stops the time-limit clock (using segregated state TANF funds) for those recipients who work at least 25 hours a week.

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6. Berlin, 2000; Gennetian and Miller, 2000; Michalopoulos and Schwartz, 2000.

## Transitional Benefits

Finding a job is only the first step to long-term employment, and for many welfare recipients keeping a job may be more difficult than getting one. Transitional benefits such as child care, health insurance, and post-employment case management are crucial supports for job retention, and they may be especially important for individuals with barriers. For example, individuals with physical or mental health problems will need medical coverage to receive ongoing treatment. For others, the added difficulty of overcoming severe barriers may make it harder to sustain work when typical job retention issues emerge.

Individuals leaving welfare for work are generally eligible for child care assistance (including transitional child care or subsidies for low-income working families) and transitional Medicaid for up to 12 months (followed by coverage through Medicaid expansions or, in some states, separate state programs). Some families with earnings may qualify for Medicaid even if they do not qualify

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### Box 4

### Encouraging the Use of Transitional Benefits

Programs should take active steps to promote the use of transitional benefits. The following are some promising strategies:*

✔ Market transitional benefits from the beginning of an individual's involvement with welfare, and repeat the information regularly through a variety of both verbal and written methods.

✔ Create procedures to identify and enroll eligible families.

✔ Train staff in marketing and administering the benefits.

✔ Facilitate applications by extending office hours to accommodate working individuals, extending recertification periods, or allowing recertification by mail or telephone.

✔ Follow up with recipients whose cases are closed for failure to attend an eligibility review to inform them that they may be eligible for transitional benefits if they are working.

✔ Institute supervisory review of all cases in which Food Stamp and Medicaid benefits stop along with cash benefits.

✔ Partner with community organizations to distribute information, publicize the benefits, and help enroll families.

*Strawn and Martinson, 2000; Quint and Widom, 2001.

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for cash assistance.[7] Low-income working families are also likely to remain eligible for Food Stamp benefits.

However, studies have shown that many former welfare recipients do not receive these benefits. One study found that only 12 to 22 percent of employed welfare recipients and recent former recipients who used child care were receiving any subsidy.[8] Even before welfare reform, utilization rates for transitional Medicaid were as low as 20 to 30 percent.[9] Food Stamp caseloads declined 25 percent nationwide between August 1996, when the federal welfare law was signed, and September 1998. About two-thirds of families who no longer received Food Stamps were still eligible for benefits, and most of the families left welfare as well.[10]

The following are some reasons for the low utilization of transitional benefits:[11]

▶ Welfare recipients often receive inadequate information about transitional benefits, and many do not know they are eligible.

▶ Welfare agency staff may receive inadequate training about transitional benefits.

▶ Case closings, when entered into computer systems for reasons other than increased earnings, generally do not trigger follow-up with regard to transitional benefits.

▶ Welfare recipients who find jobs often fail to appear for their next eligibility review, unaware that nonattendance may result in loss of transitional benefits.

▶ Many welfare recipients incorrectly believe that time limits on cash assistance apply to these benefits as well.

# 6. Identifying and Assessing Barriers

As discussed in Section 1, it is difficult to identify ahead of time who will be hard to employ. Few participants enter employment programs with barriers already diagnosed. Often, barriers such as mental health problems, domestic violence, and learning disabilities are hard to recognize, and thus are misinterpreted as problems with motivation and attitude or a lack of soft skills. Even if individuals do have barriers, it does not necessarily mean that they cannot suc-

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7. A family member qualifies for Medicaid if he or she meets the income, resource, and family composition rules that applied to the state's AFDC program on July 16, 1996 — regardless of whether or not the person qualifies for TANF.

8. Meyers and Heintze, 1998. See also Freedman et al., 2000.

9. Kaplan, 1997. See also Greenberg, 1998.

10. Zedlewski and Brauner, 1999.

11. Quint and Widom, 2001.

ceed in employment. Because of these difficulties, there is no easy or proven method for identifying those individuals who need extra assistance.

Programs have three basic choices:

▶ Take no steps to identify barriers at the beginning of program participation, and instead wait until issues surface in the course of participation in activities or employment. This option promotes an expectation that all individuals can work, but it risks setting up those who have serious barriers for failure (or for sanctions — see Section 5).

▶ Conduct an initial brief screening of welfare recipients, to test for the presence of barriers. These screenings tend to be unreliable and miss many individuals with the barriers (largely because they rely on self-disclosure), but they can function as a first step in identifying some participants for special assistance.

▶ Conduct a full assessment of all welfare recipients. This option is the surest way to identify barriers, but it is expensive and time-consuming and wastes resources on many individuals who do not need extra help. Assessing all recipients can also send an unwanted early message that the program does not believe recipients can succeed.

The most practical and effective approach will likely be a combination of the three: an up-front screening of those welfare recipients most likely to face barriers together with ongoing identification of barriers as they become evident, followed by full assessment of those individuals identified by either method.

It is important to distinguish between the two phases of the screening and assessment process. We use "screening" to describe the initial step of identifying a potential barrier and "assessment" to refer to a more in-depth determination of the existence, nature, and severity of a barrier. The results of the screening determine who will receive an assessment; the results of the assessment are used to identify the services and activities that can enable each individual to succeed in employment. Screening can often be done by employment program staff with some additional training. Assessment, on the other hand, should usually be

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**Box 5**

**Screening and Assessment: Key Questions**

▶ At what point in the program will screening and assessment occur?

▶ Will certain groups be targeted for screening and assessment?

▶ Who will conduct the screening and assessment?

▶ What screening and assessment tools will be used?

done by specialized staff who have clinical expertise in a particular area. (See Section 7.)

Programs should limit both screening and assessment to obtaining information that will be helpful in the context of employment planning and the options available to participants. In-depth assessments may provide more information than is needed in this context.

Programs should also be aware that screening for barriers can tilt the focus of staff and participants away from employment. To balance the focus, identification of potential barriers should be only part of the assessment process. Staff should work jointly with participants to determine their interests, skills, experience, goals, and support networks. Focusing on assets will not only help motivate participants and guide them in their employment efforts, but can also help them get a better job than they might otherwise find — one that makes use of their strengths, fits their interests and needs, and offers a path to longer-term employment goals.

## At What Point in the Program Will Screening and Assessment Occur?

A key decision involves timing: screening and assessment can take place when individuals enter the program or after they have participated in some activities. Some programs try to identify potential barriers as early as possible, conducting in-depth assessments as an initial step. Case managers use the information obtained to determine who should receive additional services before or concurrent with job search. By anticipating problems, staff can avoid failure later on.

However, an up-front assessment will not identify everyone who needs extra help. Experienced practitioners report that often very little is learned through initial assessments and that only after a relationship of trust is developed do some individuals disclose problems that may be barriers to work. (In order to encourage recipients to answer screening questions honestly, Los Angeles provides information about the availability of substance abuse and mental health services before administering the screening.) In other cases, problems become evident only when individuals attempt to participate or to work (and, for example, a domestic partner tries to sabotage employment efforts). Equally important, an up-front assessment will misidentify other individuals who do not need special help; as noted in Section 3, many individuals with potential barriers succeed in employment. Finally, and not of least concern to program administrators, it is both costly and time-consuming to assess every incoming program participant for a full range of potential barriers to employment.

Some programs, therefore, begin with job search for all, or almost all, participants. They assess only more practical needs, such as child care and transportation, which can interfere with participation, and interests and skills, which can help direct the employment plan. Expecting participation before looking for barriers also communicates a strong message that participation and employ-

ment are expected of everyone. The risk of delaying assessment is that some individuals with barriers may have difficulty complying with participation requirements and drop out or face sanctions before receiving extra assistance.

## Will Certain Groups Be Targeted for Screening and Assessment?

Although it is impossible to predict who will succeed in employment, some groups of welfare recipients may be more likely than others to have difficulty moving to work. Rather than assessing all welfare recipients, programs can try to target those subgroups who may be more likely to face barriers. They include:

▶ **Those without recent labor market experience.** Recent work history is perhaps the best predictor of employment success. In MDRC studies, program group members who did not work in the year before entering the program were significantly less likely to work during the follow-up period. The difference in earnings was even more stark. Those without recent work experience earned an average of only $2,325 per year over three years of follow-up, compared with $7,505 for those who had worked in the previous year.[12]

▶ **Those who are unsuccessful in a job search.** Perhaps the most practical targeting method is to have all welfare recipients test the labor market through job search. Research has found that the most successful programs have high expectations for participants and believe they can succeed. Up-front job search promotes this expectation and reserves additional services for those who are not able to find work.

▶ **Those who have been on welfare for a long period.** Because many recipients find jobs and quickly leave welfare on their own, services might target recipients who have been on the rolls for at least a year. This strategy also focuses attention on those who are closer to reaching a time limit on assistance.

▶ **Those referred by program staff.** In the course of interactions with participants, staff may identify individuals who appear to have barriers to employment. Staff training should include information on how to recognize barriers, and programs should develop procedures that allow staff to refer participants for screening or assessment.

▶ **Those facing related barriers.** Many participants face multiple barriers (see Section 10), and often barriers are related. Programs may therefore want to screen participants with one barrier for other commonly related

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12. Michalopoulos and Schwartz, 2000. Figures are in 1997 dollars. The previous-work-experience group includes those with earnings of at least $5,000 in the previous year.

ones. This may identify those participants most in need of special attention, since the more barriers that individuals face, the less likely they are to move from welfare to work.

▶ **Those in sanction status.** Many of the same issues that make it difficult for an individual to succeed in employment may also make it difficult to comply with program requirements. Programs may therefore want to target individuals whose welfare grants have been reduced or terminated for noncompliance or those at risk of sanction (for example, those who have received an intent-to-sanction notice or are in the conciliation process).

▶ **Those who cycle back onto welfare.** Success in employment means not just getting a job but staying attached to the labor market, and many barriers may become evident only after someone begins work. Programs might target individuals who quickly lose jobs and return to welfare, or who cycle through multiple jobs.

Because none of these targeting strategies will be wholly accurate, programs should make sure to leave opportunities to identify participants who may not fit any of these categories but still have difficulty moving to work.

## Who Will Conduct the Screening and Assessment?

There are four basic options, described below, for determining who will conduct a screening or assessment. While some functions can be performed by general program staff, others require specialized clinical training and experience (see Section 7).

▶ **Intake staff at employment programs.** These staff members are generally the first to see participants and would likely conduct any up-front screening. Screening tools will need to be easy to use, however, and staff will need training in using them. These staff members should not be expected to do more than an initial screening to identify individuals for further assessment.

▶ **Employment case managers.** These staff members are likely to have the closest relationships with participants and may be able to identify potential barriers through regular interactions and monitoring of participation. They will need training in recognizing potential barriers and learning how to use any formal screening tools. These staff members should generally not conduct more in-depth assessments.

▶ **Specialized staff working on-site in employment program offices.** These staff members, with clinical training and expertise in the different barriers that participants may face, might be hired directly by the program or outstationed by a partner agency. They are more qualified to conduct both initial screening and in-depth assessment of barriers and

can also provide support to program staff in working with participants who have barriers.

▶ **Professional staff from outside agencies, working off-site.** Professionally trained staff should be involved in assessment of barriers such as mental illness and substance abuse. When referrals are made to outside specialists, however, systems must be in place for communication of the assessment results and coordination in using the results to develop a plan for addressing any barriers identified.

A nonjudgmental, trusting environment is an important factor in encouraging individuals to divulge problems such as drug use and domestic violence. Some programs have found that recipients are unwilling to divulge information that they fear may affect their eligibility or benefits. One way to promote disclosure is to separate the functions of employment case management and benefits determination, so that the case manager is not the same person who imposes sanctions or terminations.

Other programs bypass this issue by using staff from other agencies to conduct screening on-site at the employment program office. This can both increase the number of participants identified with a potential barrier and facilitate referrals to specialized service providers. It may be that welfare program staff — simply by nature of the control they have over recipients' economic security — are not the best people to conduct screenings for sensitive issues.

## What Screening and Assessment Tools Will Be Used?

A number of screening and assessment tools are available for programs to use in identifying potential barriers to employment. Some programs use formal pencil-and-paper tests and others use informal staff-participant interactions or program participation as a "real-world" screening tool. By making the program mirror a work environment (for example, by beginning activities promptly at 9:00 A.M.), problems that could jeopardize employment will likely surface. Individuals can then be referred for additional assessment to determine the nature and extent of the barrier.

Employment programs have experimented with various screening and assessment tools and have found that some work better than others, depending on the situation. Programs may need to use a variety of tools targeted to different potential barriers. In the context of this guide, we do not recommend any specific tools, but caution overall that such tools have generally not been particularly effective as predictors of employment success. Programs should therefore carefully choose and test screening and assessment tools and provide more than one opportunity for barriers to be identified.

The test of a screening or assessment tool is whether it provides staff and participants with information that they can understand and use in making practical decisions about next steps. In choosing tools, programs should consider the following questions:

▶ **What will the tool be used for?** Is it an initial screening to identify potential barriers or an assessment to determine the nature and severity of a barrier?

▶ **How accurate is it?** How well will it identify those with barriers, and how often will it misidentify those without?

▶ **What is the cost of using the tool?** Costs include training of staff and time needed to administer and score the tool.

▶ **Who will administer it?** Is the tool appropriate for employment program staff, or is specialized training required?

▶ **How easy is the tool to use?** What special training or staffing is needed to administer and score it?

▶ **What information can the tool uncover?** Will it uncover sufficient, but not superfluous, information about employment-related issues?

In general, the choice of a tool will depend on the purpose of using it. If the goal is to quickly and easily identify individuals for whom more in-depth assessment is warranted, then programs should look for short questionnaires that can be completed by participants individually, as part of a group activity, or through question-and-answer sessions with program staff. If the goal is to determine the nature and severity of a barrier, then a more detailed assessment tool is required, probably conducted by a specially trained professional.

Whatever tools staff use, questions about barriers should not be posed to participants without informing them how the information will be used and what confidentiality policies apply. In addition, program administrators and staff should be aware that asking individuals about certain barriers may infringe on their legal rights. Programs should take care in how they frame questions and should consult legal counsel before implementing screening procedures.

# 7. Staff Development and Interagency Partnerships

For most employment programs, staff development and interagency partnerships will be needed to increase the ability of the programs to serve hard-to-employ individuals. Employment programs do not need to become substance abuse treatment providers or mental health experts, but they do need to have a basic understanding of these issues and their effect on employment, be able to help participants develop plans to overcome barriers, and coordinate with other agencies to provide specialized services to participants.

Two best practices are key to successful staffing in this context. First, all staff members need to clearly understand where their roles begin and end in helping participants address barriers, what roles belong to other staff members

and partner agencies, and how communication will occur among the various parties. Second, staff workloads must take into account the amount of time needed to assist hard-to-employ individuals, provide the extra support needed, and coordinate with outside providers.

## Bringing Specialized Staff On-Site

Hiring staff with specialized expertise and experience, or bringing such staff on-site from a partner agency, can immediately enhance a program's capacity to work with individuals with serious barriers. These staff can function in a variety of roles, including:

▶ providing training and support to case managers

▶ conducting screening and assessment to identify barriers

▶ coordinating referrals to outside providers for treatment, counseling, and other services

▶ carrying a specialized caseload of individuals with barriers

In Nevada, 30 social workers and two supervisors have been added to the staff in the state's 19 district welfare offices. The social workers provide a variety of services for TANF participants with severe barriers to work, including psychological assessments, treatment referrals, home visits, and support services. Staff members also help build bridges between the welfare agency, treatment providers, and other partner agencies.[13]

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13. National Center on Addiction and Substance Abuse at Columbia University, 1999.

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**Box 6**

**Staff Development and Interagency Partnerships: Key Questions**

▶ What will program staff do, and what will be done by partners?

▶ What additional training will be provided to staff, and who will provide the training?

▶ What other organizations would be helpful partners?

▶ What will be the role and responsibility of each partner and each staff member?

▶ Will specialized staff be on-site, or will people be referred to outside providers?

▶ How will participation in services with outside providers be monitored?

If the caseload in the locality is small or barriers are not prevalent enough to warrant a full-time staff member, offices in the same region can share staff, who spend a specified amount of time at each office every week. Alternatively, programs can contract with outside agencies to have staff visit the site either at regular hours or as needed. In Oregon, certified alcohol and drug treatment professionals are on-site in local welfare offices for a scheduled time each week; they screen participants for alcohol and drug problems, provide referrals for treatment, and help develop self-sufficiency plans.[14] Some programs, in particular those operated by nonprofit organizations, make use of social work students who have a required field placement or internship.

Specialized staff working on-site in employment programs can be most effective when the following elements are in place:[15]

▶ They have the full support of agency leadership.

▶ They provide training for other staff, in part to let staff get to know them and establish a habit of interacting with them.

▶ They spend a significant portion of time on-site.

▶ Their roles and responsibilities are clearly defined and understood by all staff.

▶ Their work is integrated into the program's operations, and they attend staff meetings and other staff activities.

Another staffing recommendation advised by several programs is to hire former welfare recipients and other individuals who face or have overcome the same barriers as program participants. These staff members act as role models for participants, proving that barriers do not preclude employment success. They can motivate participants in employment efforts and provide advice and encouragement from their own experience.

## The Role of Employment Case Managers

The role of employment program case managers should be clearly defined and should not extend beyond their expertise. In general, their role is to package individual service plans and monitor progress, while maintaining a focus on the employment goal. More specifically, the role of case managers includes:

▶ being alert to potential barriers and referring participants for further assessment when a barrier is suspected

▶ developing individual employment plans, in consultation with participants and partner agency staff, and revising those plans as needed

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14. Kirby, Pavetti, Kauff, and Taponga, 1999.
15. Burt, Zweig, and Schlichter, 2000.

▶ monitoring participants' progress in all activities, through communication with service providers

▶ providing ongoing motivation and encouragement to participants

▶ coordinating the provision of any needed support services, such as child care and transportation assistance

▶ enforcing program rules and requirements

In order to accomplish the goals of this guide, it must be clear to case managers that each of the above roles is part of their job description. A staff survey in California found that 40 percent of workers feel that identifying issues is not part of their job or that they are not prepared to do so.[16]

Staff workloads should be adjusted to allow case managers the time needed to perform these tasks. Identifying issues, counseling participants, and monitoring referrals to service providers all consume a great deal of staff time and energy. When staff are overwhelmed, they are likely to focus on eligibility, participation in core program activities, and those participants who require less individualized attention. Workloads can be adjusted by reducing caseload size, using specialized case managers to work with some participants, delegating tasks to administrative staff, and upgrading computer systems to perform additional functions.

It is important to clearly define staff roles whenever there might be overlap or confusion. For example, if an employment program case manager refers an individual for services at a community-based mental health agency and the individual does not show up for the appointment, who is responsible for following up with the participant and rescheduling the appointment? If roles are not clearly defined, it is likely that individuals will fall through the cracks.

## Staff Training

Because employment programs have traditionally focused on the more job-ready segment of the population, program staff may not have experience working with individuals who face the issues discussed in this guide. Staff training should provide information about the various barriers that participants face, as well as guidance as to how they are expected to work with these participants. Training should cover the following areas:

▶ basic understanding of various barriers: their prevalence, characteristics, and associated behaviors

▶ the relationship between the barriers and employment

▶ staff comfort in discussing barriers with participants, including how to broach the subject, deal with denial, and handle confrontations

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16. California Institute for Mental Health, 2000.

▶   how to identify participants who might have barriers

▶   how to use screening tools to identify the potential presence of a barrier

▶   policies and procedures of service providers, including how to refer participants for assessment and treatment

▶   the specific roles of staff members from partner agencies

One key goal of staff training should be to make sure that staff working with participants have consistent and informed attitudes toward individuals with barriers to employment. Workers are likely to come to the program with widely differing attitudes, stemming from stereotypes, their own training, and their personal experience. It is important that staff recognize their own biases, increase their knowledge about the reality of barriers, and understand the program's philosophy and policies concerning these participants.

In order to avoid overwhelming staff, training should be narrowly focused on topics that staff need to know in order to do their jobs. In particular, it should focus on issues related to employment rather than treatment of barriers.

It is also important to remember that staff training is not sufficient to ensure a change in practice. Training is not a one-time event; it must take into account staff turnover and be regularly reinforced through review and supervision. Developing formal policies and procedures around identifying and addressing barriers can help ensure that training translates into practice. One study found that identification rates for domestic violence doubled not because of staff training provided on the topic but because of the addition of an automatic prompt on client record charts.[17]

## Interagency Partnerships

One of the basic recommendations of this guide is that employment programs should maintain their focus on employment and not attempt to become providers of mental health services, drug treatment, or other services for individuals with serious barriers to work. Even assessing these barriers is generally best left to those with specialized or clinical expertise. Assisting these individuals, therefore, requires employment programs to form partnerships with other organizations that can provide additional services.

Key potential partners include:

▶   state and local departments of vocational rehabilitation, health, mental health, substance abuse, and education

▶   community-based programs providing drug, alcohol, health, and mental health treatment and other services

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17. Heise, Ellsberg, and Gottemoeller, 1999.

> ▶ vocational training, basic education, and literacy programs

> ▶ advocacy organizations

The Kansas TANF agency, for example, collaborates with a wide range of partners, including the state Vocational Rehabilitation (VR) agency to offer a work activity for TANF recipients with disabilities; the Independent Living Centers to provide assistance to recipients with disabilities in determining and advocating for appropriate workplace accommodations; community mental health centers to accept more TANF recipients with mental illness into their programs; Kansas Legal Services to advocate for recipients who pursue federal disability benefits; the Alcohol and Drug Abuse Services division and Regional Alcohol/Drug Assessment Centers (RADAC) to diagnose and treat substance abuse and to place RADAC specialists in TANF offices; the Kansas Department of Education and the University of Kansas Center for Adult Learning to train case managers to identify learning disabilities and to use screening tools; and the Kansas Coalition Against Sexual and Domestic Violence to provide specialized services to recipients who are battered.

In some cases, local capacity among service providers may be insufficient. For example, some communities face a shortage of substance abuse treatment slots, especially residential programs for women with children. In Kansas, the collaboration described above with the VR agency was so successful that it initially resulted in waiting lists for VR services. Employment programs should assess the local availability of services and take steps to expand services where needed (TANF funds can be used for this purpose).

When agencies collaborate, each needs to understand the others' procedures, mission, and service philosophy. Employment program staff generally have little knowledge about barriers or treatment options, and staff at partner agencies may know little about how the welfare system and employment programs work. Agencies may also have different goals and may initially disagree on appropriate steps and time frames for individuals. In particular, the quick employment focus of welfare-to-work programs may not sit well with staff used to focusing on long-term treatment. They may feel that work requirements place unwelcome pressure on individuals and divert their attention at a time when they should be focused on overcoming barriers.

To overcome these differences, staff from the various agencies should jointly develop common goals and procedures, as well as a plan for ongoing communication and relationship building. Holding formal staff meetings, cross-training staff, outstationing staff at each others' sites, and creating opportunities for more informal get-togethers can improve working relationships. Relationships take time to build: All potential partners should be involved from the earliest stages of program implementation, and partnerships should involve staff at all organizational levels, not just the top.

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Systems also need to be established for communication and sharing of information among partners. Once participants are referred, employment staff need to be able to monitor the attendance and progress of individuals receiving treatment and other services. Some programs use weekly attendance sheets, phone calls, e-mail, or joint case conferences to maintain ongoing communication around individual cases. Another option is to identify one staff person in each agency who will be the contact person for all participants jointly served. Where technology permits, it may be possible to give service providers access to on-line case records so that they can directly input progress reports and other information.

When developing partnerships, it will be important to address issues of confidentiality, as providers may be reluctant to share certain kinds of information with employment program staff. Staff should determine exactly what information is needed to monitor participants' progress; this is not likely to be the type of clinical information that is of concern to providers. In some cases, participants will need to sign releases to permit treatment programs to share confidential information.

# 8. Program Models

Part III of this guide discusses specific strategies for assisting individuals with particular barriers to employment. This section describes more general program models that offer alternative approaches to working with any or all of the groups discussed in the guide. Three broad approaches are described:

▶  modified work first

▶  supported work

▶  the incremental ladder

## Modified Work First

Most state and local TANF agencies have implemented welfare-to-work programs following a work first philosophy. The programs generally begin with job search or other work-related activities, with the goal of moving individuals quickly into jobs. Some programs have modified this model to allow greater flexibility in working with recipients who have serious barriers to employment. (See Box 7.)

The core case management tool in a work first model is the employment plan (sometimes called a self-sufficiency plan). Case managers and participants jointly develop these plans, which establish employment goals and determine the activities in which individuals will participate and the services that will be provided. In the modified model, treatment, education, and other activities and services can be incorporated into the plan, alongside job preparation and job search. Whenever possible, employment-related and barrier-related activities are

pursued simultaneously. Even in cases in which treatment is the sole initial focus, it is viewed as a first step toward the employment goal. The process of developing and monitoring self-sufficiency plans helps case managers discuss barriers within the context of employment and maintain an ongoing focus on the employment goal.

Some modified work first programs screen welfare recipients up-front for barriers, but more often staff are trained to be able to identify barriers as they

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### Box 7

### Program Examples: Modified Work First

**Oregon** requires participation in welfare-to-work activities with few exceptions, so local programs work with almost all welfare recipients, including those with serious barriers to employment. To accommodate these recipients, the state expanded its participation requirements to include participation in services such as mental health counseling and substance abuse treatment. These activities are integrated into an individual's Employment Development Plan, and welfare recipients are expected to work toward economic self-sufficiency at the same time as they address barriers. In some districts, participation in barrier-related services is mandatory; in others, participants are permitted to "opt out" of services at any time to pursue more traditional employment activities. The state has conducted intensive training for caseworkers in working with individuals with barriers, and local offices have developed ties with community agencies that can provide specialized services to participants. In fiscal year 1997, Oregon reported a 97 percent work participation rate among all families on welfare, the highest of any state.*

**Utah** eliminated all exemptions from welfare-to-work participation before the passage of TANF and found that it began to encounter recipients facing serious barriers, including mental health and substance abuse problems. The program hired specialized staff — generally with master's degrees in social work or counseling — to work intensively with these individuals. The specialized workers have small caseloads and focus on identifying and addressing the main barrier to employment, facilitating incremental steps toward full participation and employment, and determining whether recipients may qualify for SSI. In addition, substance abuse and mental health providers have been colocated in welfare offices to provide links to more in-depth services. Employment remains the goal for *all* participants, so short-term treatment and counseling are emphasized. In order to provide the flexibility needed for these participants, Utah expanded its definition of allowable activities to include treatment, parenting classes, and other activities. All activities are mandatory; recipients who fail to follow up on their plans face sanctions and termination of assistance.

*Kirby et al., 1999.

become evident in the course of program participation or job search. When problems arise — such as an individual regularly showing up late for activities or being unsuccessful in job search — assessment takes place to discover the nature and severity of the problem. Once a barrier is identified, the employment plan is revised to include activities and services that address the barrier.

Key elements of a modified work first strategy include:

▶   staff training to identify barriers

▶   on-site staff or partnerships with other agencies to provide further assessment of identified individuals

▶   expanded definitions of allowable activities so that employment plans can address barriers as well as employment

▶   partnerships with local mental health, substance abuse, domestic violence, education, and other providers to offer an expanded range of services to participants

▶   close monitoring of both participation and progress in all activities and services, including those provided by partner agencies

▶   development of a variety of employment opportunities specifically intended to help individuals with barriers transition into the workplace

▶   post-employment services that pay particular attention to the problems faced by individuals with barriers

## Supported Work

Supported work provides individuals with job experience in real-world employment settings as a transitional step to permanent employment. It gives individuals the chance to learn and practice both soft skills (such as coming to work on time, following directions, interpersonal relationships, and problem-solving) and job-related skills specific to the field in which they are working.

There is no one way to structure supported work. The jobs may be in government agencies, private nonprofit or for-profit companies, or business ventures run by the program. Participants may work individually or in work crews. The jobs may be unpaid (while individuals receive welfare benefits) or paid and may be called transitional jobs, internships, or volunteer positions. As much as possible, programs generally try to match individuals with positions in areas of interest to them, and many programs offer participants a choice of jobs. Some programs require individuals to interview for supported work positions, to increase employer choice and give participants a taste of the experience they will face when looking for a permanent job. (See Box 8.)

However they are structured, successful supported work positions share the following elements:

▶ a highly structured work environment

▶ close supervision

▶ gradually increasing expectations and demands

▶ real work producing goods and services

▶ time-limited participation

▶ job development and job search to move to permanent employment

Supported work can function as an assessment tool, offering an opportu-
nity for staff to observe participants in a real job setting and identify issues that
interfere with employment success. It can be a job-readiness activity, giving
individuals the chance to learn and practice job skills in an environment in
which they can make mistakes without losing their job. And it can provide a
transitional activity for those who are not yet ready to move into permanent

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## Box 8

## Program Examples: Supported Work

**Goodwill Industries** in Oakland, California, operates an apprentice program
that provides nine months of transitional employment, life skills training, job
search assistance, and job retention services to individuals with a variety of bar-
riers, including substance abuse, mental health problems, learning disabilities,
illiteracy, domestic violence, and criminal records. After meeting with a staff
member to address any logistical issues related to participation (including child
care, transportation, and housing problems), individuals are immediately placed
in a custodial or retail sales position in one of Goodwill's 25 businesses in Oak-
land. Supervisors, who receive special training and are often called "job
coaches," work closely with participants to help them develop work behaviors
and skills. After five months of transitional employment, participants work with
an employment specialist to develop a résumé and look for a job.*

**Kandu Industries** operates an employment and training program for welfare
recipients in Ottawa County, Michigan. Participants begin with a two-week job
club in which they work with job developers to identify and apply for job
openings. Those who do not find jobs are hired by Kandu in its manufacturing
facilities at minimum wage for 30 hours a week. The program offers partici-
pants the chance to learn work behaviors and gives program staff an opportu-
nity to identify barriers in the context of a real work environment. While work-
ing, participants continue their job search. Most find jobs within the six-week
period of employment at Kandu.

*Dion, Derr, Anderson, and Pavetti, 1999.

employment. Individuals with serious barriers may need additional services prior to or concurrent with participation in supported work.

Job search and job placement activities are crucial components of a supported work model in which the goal is unsubsidized employment. Many programs serving severely disabled individuals have traditionally used supported work as a long-term therapeutic activity rather than a transitional one. Research on welfare-to-work programs utilizing work experience positions suggests that such activities will not necessarily lead to unsubsidized employment.[18]

## The Incremental Ladder

The incremental ladder model was developed by Project Match, a Chicago employment program (see Box 9).[19] The model is based on the concept of a ladder, which supports individuals as they take incremental steps to employment. Each individual's ladder is different, as participants begin at different points and move in different sequences. The model has been used in government welfare-to-work programs in Illinois, Minnesota, and New York. (See Figure 1 for an illustration of the incremental ladder model.)

The incremental ladder recognizes that many individuals are not prepared to directly enter unsubsidized employment and allows the lowest rungs to include activities such as taking children to extracurricular activities and addressing health problems. Individuals can move up, down, sideways, or diagonally on

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18. Brock, Butler, and Long, 1993.
19. Pavetti et al., 1997.

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**Box 9**

**Program Example: The Incremental Ladder**

**Project Match** is an employment program that has served welfare recipients and low-wage workers in Chicago, Illinois, since 1985. The program's direct-service model supports participants as they make progress on a personalized ladder of incremental steps to self-sufficiency. Individuals may begin at any place and progress at their own pace. In recent years, Project Match has also focused on the development of the Pathways System. While Pathways incorporates many principles of Project Match's direct-service model, it is a separate initiative. An innovative case management and tracking tool for state and local welfare agencies, Pathways is intended to be used with Temporary Assistance for Needy Families (TANF) recipients and is particularly appropriate for "hard to serve" populations. The incremental ladder model is the heart of the Pathways System. Each rung on the ladder can involve a number of activities related to personal and family issues, skill development, and work. Each activity is designed to build skills and self-confidence and bring the participant closer to the long-term goal of self-sufficiency.

# Figure 1

## The Incremental Ladder to Economic Independence

*(rotated table/figure)*

**Self- and Family-Improvement Activities**

- 11-25 or More Hours/Week
  - Crafts/Sewing
  - Exercise Class/Aerobics
  - Substance Abuse Treatment
- 6-10 Hours/Week
  - Domestic Violence Support Group
  - Leadership Training
  - Exercise Class/Aerobics
  - Substance Abuse Treatment
- 1-5 Hours/Week
  - CPR Class
  - Medical Appointment
  - Individual & Family Counseling
  - Managing Family Crises

**Education/Training Activities**

- More Than 25 Hours/Week
  - College
  - Vocational Training
  - High School
  - ABE/GED
  - Job-Readiness Classes
- 11-25 or More Hours/Week
  - College
  - Vocational Training
  - ABE/GED
  - Literacy
- 6-10 Hours/Week
  - ABE/GED
  - Literacy
- 1-5 Hours/Week
  - ABE/GED
  - Literacy

**Employment**

- Unsubsidized Jobs — 40 Hours/Week
  - (Family-Supporting Wage) Over 5 Years / 4-5 Years / 1-3 Years
- Unsubsidized Jobs — 40 Hours/Week
  - (Entry Level) Over 1 Year / 7-12 Months / 4-6 Months / 0-3 Months
- Unsubsidized Jobs — More Than 25 Hours/Week
  - 7-12 Months / 4-6 Months / 0-3 Months
- Unsubsidized Jobs — 11-25 Hours/Week
  - 7-12 Months / 4-6 Months / 0-3 Months
- Subsidized Jobs — 6-10 Hours/Week
  - On-the-Job Training
  - Pay for Performance
  - Work Experience (WEP) (e.g., Agency or Client-Generated)
- Internships with Stipend — 1-5 Hours/Week
  - Structured Activities with Stipends (e.g., WIC Clerk, Head Start Aide)
  - 7-12 Months / 4-6 Months / 0-3 Months

**Volunteer Work/Advisory Boards** *(Community Service)*

- Scheduled Hours — More Than 25 Hours/Week
  - Outside Community (e.g., Red Cross, United Way)
  - In Community (e.g., Child's School, Head Start, Church, Advisory Board)
- Scheduled Hours — 11-25 Hours/Week
  - Outside Community (e.g., Red Cross, United Way)
  - In Community (e.g., Child's School, Head Start, Church, Advisory Board)
- Scheduled Hours — 6-10 Hours/Week
  - Local School Council
  - Tenant Management Board
  - Child's School
  - Head Start
- Unscheduled Hours — 1-5 Hours/Week
  - Food Pantry
  - Church
  - Child's School
  - Head Start

**Activities with Children**

- 11-25 or More Hours/Week
  - School-Based Activities (e.g., Homeroom Mother)
  - Take Child to Extracurricular Activities (e.g., Scouts, Little League, Music)
- 6-10 Hours/Week
  - Family Literacy Programs
  - Family Support Programs
  - Take Child to Extracurricular Activities (e.g., Scouts, Little League, Music)
- 1-5 Hours/Week
  - Take Child to Appointments (e.g., Medical, Tutoring, Speech Therapy)
  - Act on Referrals in a Timely Manner
  - Get Child to School on Time

the ladder; the key is that they continue to take steps. In some programs, participants keep diaries to chart their progress. Key elements of the model include:

▶ Paths are highly individualized, and case managers have great flexibility in designing the starting point, sequence, and intensity of activities.

▶ Case managers work closely with participants to keep them engaged and moving forward.

▶ Ladders are regularly revisited and revised, based on an individual's progress.

▶ Small successes are celebrated, and failures are treated as opportunities to learn.

▶ There are no fixed time lines for movement to full-time, paid employment.

Work and work-oriented activities — including volunteering and part-time employment — are central to the model, and at each rung they provide opportunities for participants to learn about the world of work and practice job-related skills. In the mid-1980s, through an analysis of job-turnover data for the program's earliest participants, Project Match recognized that, for many welfare recipients, keeping a job can be harder than finding one. To address this problem, the program developed long-term, post-employment services including job retention, reemployment, and advancement assistance.

# 9. Best Practices

Part III of this guide offers information and advice for about seven specific barriers to employment. This section discusses best practices that apply to working with all hard-to-employ individuals. (Best practices that apply to specific barriers are discussed in Sections 11-17.) *These best practices are the basis on which successful programs are designed. Therefore, all readers should pay particular attention to this section.*

Best practices are discussed for each of the following key program recommendations:

▶ Set high expectations for success.

▶ Stay focused on the employment goal.

▶ Promote access and support for all participants.

▶ Provide staff with training, flexibility, and support.

▶ Work closely with employers.

▶ Continue to support participants after employment.

Depending on the role played (for example, as a case manager, job developer, or agency administrator) not all these recommendations will be under each reader's control. We encourage readers to find those that apply to their position and use the information as a checklist to make sure that these elements are incorporated into their own work.

## Set High Expectations for Success

The most successful programs are those in which staff believe that participants can succeed and convey that expectation from the onset of program participation. This may be especially important for working with individuals with barriers to employment, who are likely to have low self-confidence and to have confronted low expectations in the past.

✔ **Clearly articulate and consistently enforce program rules.** It is important for participants to receive a clear and consistent message about the program's approach to serving individuals with barriers to employment. Make sure that participants understand both what you expect of them and what assistance you will offer, and follow through on both.

✔ **Set goals for program performance and monitor success.** Quantify expectations in performance measures that reflect the challenge of working with hard-to-employ individuals. Administrators should track both employment and intermediate outcomes (such as participation and completion of program activities) and use the information as a management tool.

✔ **Model program expectations after the workplace.** Treating participation as a job conveys the expectation that participants will move to work at the same time that it teaches and reinforces job-readiness skills. This includes expecting participants to arrive on time, dress and behave professionally, take instruction, and work in teams with their peers.

✔ **Focus on strengths, skills, and interests rather than on barriers.** Although this guide deals with barriers to employment, it should not be a program's primary focus. Staff should help participants identify their assets and interests. Consider not whether individuals can succeed, but what employment goals they can realistically pursue and what support they need to achieve them.

✔ **Teach participants to conduct their own job search.** While job development will be a key factor in helping individuals with barriers move to work (see below), individual job search is also a key program component. Learning how to identify job openings, complete an application, and conduct a job interview are important skills and can build self-confidence.

✔ **Hire staff who face, or have faced, the same barriers as participants.**
These staff members can be role models for participants, showing that
barriers do not preclude success, and can also offer advice and support from
their personal experience. Former participants can also play this role (and are
proof that the program can help) and can be involved as staff, volunteers,
guest speakers, or mentors to current participants.

## Stay Focused on the Employment Goal

It is easy for program staff and participants themselves to become preoccupied
with the barriers that participants face. It is crucial, therefore, to always keep in
mind that the goal of the program is employment and to emphasize employ-
ment at every stage of the process. Barriers should always be considered and
addressed within the context of the employment goal.

✔ **Define success in the context of employment.** Develop definitions of
success that involve managing issues so that employment is possible, rather
than solving problems. Staff need to recognize that they will not be able to
solve all of an individual's problems — nor is that their role. Participants
should understand that they need not fully address all issues before moving to
work.

✔ **Identify both short- and long-term goals, with interim benchmarks of
success.** Be realistic about what participants can accomplish and how
quickly, balancing high expectations with incremental steps for participants
who face serious barriers. This will enable staff and participants to chart a
realistic path to employment and see continuous progress toward the longer-
term goal.

✔ **Help participants explore their interests and options.** The presence of
barriers does not mean that individuals have no options concerning the type
of job they pursue. Yet many participants may have no idea what type of job
they would like or what positions may be available to them. Help participants
identify their interests and skills, and create realistic yet individualized em-
ployment goals.

✔ **At all stages of the process, maintain a clear focus on the goal of
employment.** In developing participants' plans, remember that all activities
— whether job search, basic education, or counseling — are intended to
promote employment. Staff should make sure that participants understand
how each assignment relates to the employment goal.

✔ **Monitor attendance and progress in all activities and services.** It is
important that participants remain involved and make steady progress toward
employment. Close communication with service providers will ensure that

participants remain productively engaged. If either attendance or progress
falters, the assignment should be reviewed and alternative activities consid-
ered.

✔ **Keep participants motivated to move forward.** It can be difficult for
individuals to acknowledge and begin to address serious barriers. The path to
sustained employment may be long for some participants, so each step
forward should be recognized and celebrated, to provide positive reinforce-
ment and motivate participants to continue to make progress.

## Promote Access and Support for All Participants

In the past, welfare-to-work programs have typically served the more job-ready
participants and have exempted or deferred — or simply not reached out to —
those with serious barriers to employment. In order to serve this group, pro-
grams need to adopt policies and procedures that extend access to these groups
and provide the support services needed to enable them to move to work.

✔ **Make an active commitment to serving all individuals, including
those with serious barriers to employment.** Target individuals with
barriers for aggressive outreach, including follow-up with those in sanction
status. Make sure that intake, assessment, and program activities comply with
the Americans with Disabilities Act, so that participation is accessible for all
individuals.

✔ **Provide a range of support services to address participant needs.**
Individuals with barriers will need help accessing a variety of social services,
including treatment, counseling, and legal assistance. While programs may
provide some services themselves, they will more likely develop partnerships
with government and community agencies to provide services to partici-
pants.

✔ **Invest the resources needed to serve participants with barriers.**
Serving individuals with barriers to employment requires investments in staff
(including hiring specialized staff and reducing staff workload), staff training,
and support services. Programs cannot attempt to serve this new group
without committing adequate resources.

✔ **Develop personal and trusting relationships with participants.** Form-
ing good relationships with participants is critical if participants are to be
comfortable revealing barriers to staff and both are to be comfortable discuss-
ing them. Staff should act as advocates for participants, supporting them even
when setbacks occur and brokering services to meet their needs.

✔  **Use employment plans as comprehensive case management tools.** The
plans should lay out a course to employment, including all activities, services,
and supports along the way. Review and revise plans as barriers are identified,
if individuals are not making progress in activities, or whenever a significant
event — positive or negative — occurs that can affect employment.

✔  **Help participants help each other.** Many programs have found that some
of the most effective support for individuals with barriers can come from
their peers. Promote opportunities for peer support, information-sharing, and
problem-solving, such as regular support group meetings, buddy or mentoring
programs, or informal dinners and get-togethers.

## Provide Staff with Training, Flexibility, and Support

Employment program staff are likely to have little experience working with
individuals who have serious barriers. If staff are to take on this role, they will
need additional training, support, and the flexibility to tailor services to meet
participant needs. Section 7 provides additional recommendations for staff de-
velopment, as well as advice on establishing interagency partnerships.

✔  **Give staff a clear mandate to serve individuals with barriers.** The
commitment to working with these participants should be clear, from the top
levels of agency leadership on down. Define program goals and expected
outcomes as they relate to participants with barriers. Make formal changes in
policy and procedures to ensure that the decision to address barriers trans-
lates into staff practice.

✔  **Provide regular, ongoing training for staff.** Use staff training to introduce
information about barriers, procedures for identifying them, and strategies for
working with participants who may have them. Confront any underlying
attitudes, beliefs, and misconceptions that staff may hold about individuals
with particular barriers to employment.

✔  **Provide multiple opportunities for staff development and support.**
Create opportunities for staff development beyond training, and reinforce
what is learned in training. Specialized case managers can take on certain
cases or provide advice to other staff members. Case conferencing — struc-
tured group meetings where case managers share problems and ideas — can
help staff members learn from each other.

✔  **Form partnerships with agencies that have experience serving indi-
viduals with barriers.** Even while working with participants with barriers,
program staff should focus primarily on their own roles related to employ-

ment. Partnerships with other government or community agencies can allow programs to meet participant needs that they otherwise would be unable to meet.

✔   **Give staff the time they need to help participants with barriers.**
Staffing plans must recognize the additional time it takes to identify and address barriers, as well as to provide personal support to participants. Programs can address this by reducing caseload, hiring specialized staff to work with some participants, or using support staff to assume some responsibilities.

✔   **Give staff the flexibility and tools to address individual needs.** Allow sufficient flexibility — within a framework of clear and consistent policies and procedures — for staff to tailor services and activities to meet individual needs. Implement a strong record-keeping system so that case managers can monitor participation and progress and measure participant outcomes.

## Work Closely with Employers

Employer involvement is a key element of successful programs and is even more crucial when working with individuals who have barriers to employment. Employer involvement can open up job opportunities for participants by ensuring that programs meet employer needs, overcoming prejudices and stereotypes that employers may hold, and building employer willingness to hire individuals they might otherwise not consider.[20]

✔   **Use aggressive job development to increase opportunities for participants.** Job development should supplement individual job search and seek out a wide range of positions, to improve the chances of finding an appropriate match for each individual. Programs should market wage subsidies, tax credits, and other benefits available to employers who hire program participants.[21]

✔   **Build long-term relationships with employers.** In addition to identifying current openings, build relationships so that employers are willing to take risks in hiring through your program. Get to know employers' individual needs, and work jointly to meet those needs. Follow up with employers after placement to address issues that arise on the job and to maintain and strengthen relationships.

✔   **Involve employers in program design and implementation.** This can ensure that the program meets employer needs and can overcome stereo-

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20. For more information on developing business partnerships, see Brown et al., 1998.

21. Two federal tax credits, the Welfare to Work Tax Credit and the Work Opportunity Tax Credit (WOTC), are available to employers. The Welfare to Work Tax Credit targets long-term welfare recipients. WOTC is available to businesses that hire individuals with a variety of barriers to employment, including certain individuals with criminal records, disabilities, and histories of welfare or Food Stamp receipt.

types that employers may have. Employers can be involved by conducting practice interviews or by talking to participants about what jobs are available in their field and what they expect from employees.

✔ **Focus on individuals' strengths rather than barriers in marketing participants to employers.** Remember that program staff should not engage in conversations with employers about individuals' barriers without their knowledge and consent because doing so may violate the individuals' privacy or run afoul of employment discrimination laws.

✔ **Address stereotypes and misconceptions about individuals with barriers.** The best way to overcome employer preconceptions is to encourage interaction between participants and employers. Bring employers into the program — to sit in on activities, speak with participants, or participate in events — and bring participants to job sites, for tours or job shadowing.

✔ **Look for jobs that provide a supportive work environment.** Reach out to small businesses or larger companies that can provide flexibility and support for employees, for example, through flexible schedules or Employee Assistance Programs (EAPs). Look for jobs that provide health coverage for services that participants may need, including mental health and substance abuse treatment.

## Continue to Support Participants After Employment

Getting a job is only one step toward sustained employment. For many individuals, the hardest challenges may arise once they begin working, and many of those who move from welfare to work quickly lose their jobs.[22] This may be especially true for individuals facing the issues discussed in this guide, who must manage the dual challenge of a new job and continued attention to addressing barriers.

✔ **Build in post-employment services as a formal program component.** Post-employment services include ongoing case management, access to transitional benefits, peer support groups, skill upgrading, and job advancement assistance. Formalizing these services will ensure that staff have both the time and the mandate to adequately provide them.

✔ **Pay careful attention to the transition to work.** Most new workers who lose jobs do so in the first months of employment, and program experience suggests that close follow-up is especially critical in the first days and weeks

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22. About one-fourth of recipients who become employed stop working within three months and at least one-half are no longer working within one year. For more information on promoting job retention and advancement, see Strawn and Martinson, 2000.

on the job. In addition, staff should be aware of family and personal transitions, such as a move, pregnancy, or promotion, that change the status quo.

✔ **Facilitate access to transitional benefits.** A key role of post-employment case management is to make sure that individuals receive all available transitional benefits, including health care, child care, and wage supplements. Take-up rates for transitional benefits are often quite low; aggressive efforts are needed to inform people about these supports and facilitate access to them.

✔ **Use post-employment follow-up to achieve multiple goals.** Post-employment follow-up can accomplish a variety of objectives, including supporting employees' transition to work, addressing any issues that arise on the job, providing additional training as needed, getting feedback from supervisors, assessing employees' job satisfaction, and strengthening relationships with employers.

✔ **Help participants get the best job they can.** What programs do before employment can also help support participants after they are working. Initial job quality — starting in jobs with higher wages, employer-provided benefits, and in certain occupations — is a key factor in both job retention and advancement. Target job search and job development efforts to help participants get better jobs.

✔ **Help workers to upgrade their skills and advance to better jobs.** The jobs that participants get are likely to be relatively low-paying, entry-level positions. Long-term self-sufficiency will depend on skill development and the ability to move to better jobs. Post-employment services should therefore include planning for next-step jobs and the activities needed to support advancement.
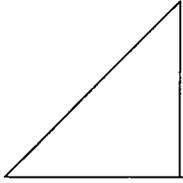
# III.
## Addressing Barriers

# 10. Multiple Barriers

This guide provides information and advice on how to address some of the most serious barriers to employment that welfare recipients face. Sections 11 through 17 address each issue independently, although many welfare recipients face more than one of these barriers. Employment program staff need to be able to identify and assess multiple barriers and to develop individualized employment plans that take into account each participant's unique situation.

As noted in Section 2, a national survey found that 78 percent of welfare recipients experienced at least one barrier to employment, 44 percent experienced two or more barriers, and 17 percent experienced three or more barriers. Individuals with multiple barriers were far less likely to work: 52 percent of welfare recipients with no barriers were working, compared with only 22 percent of those with one barrier, 6 percent of those with two barriers, and just 3 percent of those with three or more barriers.[1]

Having said that, the same overall caveat applies to multiple barriers as to individual ones. Programs should not focus exclusively on participants' barriers. Many individuals with barriers work, and putting too much emphasis on barriers can undermine a program's success. The most effective welfare-to-work programs are those that convey a belief that all participants can succeed and that help participants define their goals, identify their strengths and skills, and chart a course to successful employment. Programs should therefore balance their approach, helping participants address those issues that present barriers to employment, but not those that do not.

Table 2 lists the seven barriers addressed in this guide and the barriers most commonly related to them. This provides yet another tool for staff to use in identifying potential barriers to employment.

In addition, because these barriers have made work difficult, individuals with any of them are likely to have limited or inconsistent work histories and doubts about their own abilities to succeed in employment. They may appear unmotivated, fail to report for program participation, or have difficulty attending regularly. They may lack personal and family support networks, as well as clear employment-related goals.

*Flexibility is key to assisting individuals with multiple barriers. Program staff will need to work with individuals to design personalized employment and service plans that meet their unique situations.* Using the information included in each of the sections that follow, staff will need to combine, coordinate, and prioritize a variety of services and strategies.

The following are some suggestions for accomplishing this goal:

✔ **Build on a base of best practices.** The programs in the best position to serve individuals with multiple barriers to employment will be those that have a strong foundation of activities and services for all participants. With

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1. Zedlewski, 1999b.

## Table 2

### Commonly Related Barriers to Employment

| Potential Barrier | Related Potential Barriers |
|---|---|
| Substance abuse | Criminal record (often for drug-related arrests), domestic violence, physical health problem (including HIV), mental health problem, child welfare involvement, suspended driver's license |
| Domestic violence | Health problem, mental health problem (in particular, depression, anxiety, or low self-esteem), child welfare involvement, substance abuse, legal problem, social isolation |
| Physical disability or chronic health problem | Multiple health problems[a] |
| Depression or other mental health problem | Substance abuse, domestic violence |
| Criminal record | Ongoing legal problem, substance abuse, low basic skills, lack of access to certain professions |
| Very low basic skills and/or learning disability (often related) | Mental health problem (in particular, low self-esteem, anxiety, depression, or anger), substance abuse |
| Language barrier | Low native-language skills, cultural differences (leading to miscommunication and misunderstanding) |

NOTE: [a]In MDRC's study of welfare reform in four large cities, nonworking women were much more likely than working women not only to have health problems but to have multiple health problems (Polit, London, and Martinez, forthcoming).

these basics in place — including the best practices described in Section 9 — programs can add specialized services for those participants who need them.

✔ **Screen for commonly related barriers.** Table 2 and the sections that follow note barriers that are commonly related. Programs can use this information as a tool to identify barriers. For example, a program may decide to target individuals facing domestic violence for mental health screening. Similarly, job developers should know whether participants with substance abuse problems also have criminal records. Staff training should include information about commonly related barriers and strategies to recognize and address them.

✔ **Prioritize barriers and services.** Participants may not be able to address all issues simultaneously, and some will necessarily present more urgent needs. Case managers, together with participants and specialized staff or partners, should prioritize services based on those needs. For example, a woman who is in an abusive situation and also faces another barrier should clearly be

assisted first in securing a safe environment for herself and her children. In other cases, one issue may mask another, so that the first needs to be addressed before the second can even be diagnosed.

✔ **Understand how services to address different barriers interact.** The response to a given barrier may change depending on what other issues participants face. For example, a substance abuser may need to complete detoxification before medication for mental health problems can be prescribed. Specialized staff or staff from partner agencies should be involved in making service decisions concerning the treatment of multiple barriers, to ensure that these types of interactions are taken into account.

✔ **Coordinate among multiple service providers.** The employment plans for individuals with multiple barriers are likely to include referrals to a variety of outside service providers. It is generally the responsibility of the employment program case manager to coordinate communication among those providers to ensure that, when appropriate, each knows about the other services participants are receiving. In addition, the case manager will have to work with both participants and service providers (and employers, when appropriate) to schedule the various activities and avoid time conflicts.

✔ **Help participants avoid becoming overwhelmed.** If it is difficult for an individual to acknowledge and begin to address one of the issues discussed here, it may be much more so if multiple barriers are present. Program staff and specialized counselors or other workers should help participants understand the interrelationship of these issues, how each relates to employment, and how their service plan prioritizes and addresses them. Setting incremental goals and recognizing each small success can help participants stay motivated and avoid becoming overwhelmed.

✔ **Keep barriers in perspective.** It is easy for staff — and participants — to get caught up in the obstacles that participants face. Remember that individuals have unique skills, assets, and interests that define them and their potential as much as do their barriers. Even those with multiple barriers can succeed in employment. Rather than focusing solely on barriers, help participants set realistic employment goals, and work with them to develop strategies to achieve those goals.

As the points above make clear, assisting participants with multiple barriers requires a more comprehensive approach than simply providing services for each barrier. The same holds true for employment programs as a whole: a commitment to address multiple barriers requires more than the aggregation of screening mechanisms and special services for individual issues. In order to create a program that effectively serves the hard-to-employ, program administrators need to foster an environment that promotes attention to these issues as a whole and supports efforts to help participants with whatever — and however many — barriers they may face.

# 11. Substance Abuse

## Overview of the Issue

The typical response of employment programs to substance abuse has been to tell potential participants to seek treatment on their own and "come back when you're clean." However, a recent report concludes that employment programs can productively engage participants with drug or alcohol problems and suggests that staff approach these cases just as they would those with other barriers to employment.[2]

Substance abuse is defined as "regular, sporadic, or intensive use of higher doses of drugs, alcohol, or tobacco that leads to social, legal, or interpersonal problems."[3] Estimates as to the prevalence of substance abuse among welfare recipients vary widely, from 5 to 60 percent (see Section 2). Screening tools used in some states generally identify less than 5 percent of the caseload, though that may say more about the difficulty of identifying substance abuse than about the prevalence of the issue. In Portland, Oregon, over a 12-month period 15 percent of all TANF clients were referred for drug and alcohol assessments based on initial screening. Of those assessed, 82 percent were referred for treatment. The National Center on Addiction and Substance Abuse at Columbia University estimates that 25 percent of women on welfare abuse or are addicted to drugs or alcohol.[4]

According to the U.S. Department of Labor, 70 percent of people who use illegal drugs are in the labor force.[5] It is important, therefore, to distinguish between drug or alcohol *use* and substance *abuse* that presents a barrier to employment and to focus on the latter. Substance abuse can affect employment efforts in a variety of ways. First and foremost, substance abusers often have difficulty maintaining regular attendance and appropriate and productive workplace behavior. In addition, many employers regularly test both job applicants and employees for drugs, and those who test positive will not get jobs or keep their jobs, regardless of their ability or performance.

Because relapse is common, addiction is thought of as being chronic or cyclical. Therefore, even individuals who are able to move to work will likely need longer-term support to retain employment. In fact, programs that have experience working with this population stress that job retention strategies are more important than job placement.

Related problems can also present barriers to employment. These include criminal records (often for drug-related arrests), domestic violence, health problems (including HIV), and mental health problems (see Sections 12 through 15).

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2. Fleischer et al., 2000.
3. Callahan, 1999.
4. Callahan, 1999.
5. Fleischer et al., 2000.

Sixty to 95 percent of female addicts in treatment have been raped or otherwise sexually or physically abused.[6] Women who abuse drugs may be involved in the child welfare system. Participants may encounter a range of legal issues, including community service obligations, child custody issues, and child support arrears. Finally, individuals who have a suspended driver's license due to Driving Under the Influence (DUI) convictions may face transportation problems.

Outcome data on drug treatment programs are encouraging for those who complete treatment, and a number of states that have increased access to drug treatment for welfare recipients have found positive employment outcomes. In Minnesota, employment increased 64 percent among welfare recipients after treatment.[7] In Kansas, monthly employment earnings of those who completed treatment were 33 times higher than earnings received before treatment.[8] In Oregon, those who completed treatment earned 65 percent more than those who did not.[9]

Program staff, in consultation with substance abuse professionals, will need to make individual decisions about the degree to which individuals can participate in work-related activities while they pursue treatment. Combining treatment with other activities is more likely to be possible for those in outpatient programs and those who have reached a certain stage of recovery. Some residential programs incorporate work or training as part of their treatment model. The federal Center for Substance Abuse Treatment (CSAT) recommends that life skills, vocational training, education, and employment services be included as components of alcohol and drug treatment services for women.[10]

## Screening and Assessment

Employment program staff do not need to know how to diagnose addiction, but they do need to have basic information so they can identify a potential problem, and they need to know where to refer individuals for further assessment. Programs can hire specialized staff to do this assessment, can bring in staff on-site from other agencies, or can develop a partnership with an outside agency to conduct the assessments off-site.

Employment programs and substance abuse experts generally do not recommend universal up-front drug testing of welfare recipients.[11] Such tests are costly, identify only recent use, do not distinguish between drug use that is a barrier to work and use that is not, and do not uncover use of legal drugs, such as alcohol or prescription medications. Tests also set up an adversarial relation-

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6. Fleischer et al., 2000.

7. Callahan, 1999.

8. Johnson and Meckstroth, 1998.

9. Finigan, 1996, as cited in Fleischer et al., 2000.

10. Legal Action Center, 1999.

11. Legal Action Center, 1997.

ship between the program and participants that can hinder future efforts to address substance abuse and other barriers.

Screening tools that rely on clients to disclose information are also problematic because individuals are often reluctant to admit to drug or alcohol abuse. Women, especially, often have a higher degree of denial than men do, resulting from stigma and feelings of guilt or shame.[12] Women may also fear being thought of as a bad parent and, especially, losing custody of their children. However, several programs use screening tools. Two of the most common are the Substance Abuse Subtle Screening Inventory (SASSI), a pencil-and-paper test, and CAGE, which consists of four questions.[13] Annapolis, Maryland, uses a modified Michigan Alcohol Screening Test (MAST). These tools serve only as an initial screen, to identify individuals for further assessment by substance abuse professionals.

In lieu of or in addition to screening, programs can use participation requirements to expose substance abuse issues. For example, individuals who come late to program activities or miss appointments may have a problem. Active case management will be needed to quickly catch participation problems, and staff should be trained to identify signs of potential substance abuse.

## Service Strategies

Service strategies for substance abuse focus on identifying and referring individuals to appropriate treatment.

✔  **Foster an open and nonjudgmental environment.** In order to encourage disclosure, programs should promote a relationship of trust between participants and staff. Being open about the program's policies related to substance abuse can set the stage for these discussions. In addition, programs should minimize — or at least make clear — the consequences of such a disclosure.

✔  **Train staff to talk about substance abuse.** Not only are participants often reluctant to discuss substance abuse, but staff may be equally uncomfortable speaking with participants. Staff should receive training in how to broach the topic in a nonthreatening and nonjudgmental way. The focus should be on the consequences of addiction for employment rather than on personal or societal values related to drug or alcohol use.

✔ ·  **Develop clear confidentiality policies.** Participants may be concerned about other people and systems learning about a substance abuse disclosure. Be clear about what happens to personal information that a participant shares

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12. Kirby et al., 1999.

13. CAGE is an acronym based on key words in the questionnaire. The CAGE questions are listed in Legal Action Center, 1997. In this guide, commonly used screening and assessment tools may be mentioned by name. A mention, however, does not imply endorsement by MDRC nor is it a statement of a tool's effectiveness. Indeed, in our experience screening and assessment tools are generally ineffective at identifying who will have difficulty succeeding in a program or in employment. Readers will have to decide whether they want to use these tools and, if so, which work best for their situation.

with a caseworker. Be honest about what information will be held in confidence and what information might be shared.

✔ **Match individuals with treatment options that fit their needs and preferences.** Where treatment options are available, try to match individuals with the option that is most suitable for them. Treatment may be residential or outpatient and may differ in terms of length of stay, target population, treatment model, and availability of counseling and other support services.

✔ **Consider the different needs of men and women.** Most treatment programs serve both men and women. However, many experts believe that women require distinctive approaches — for example, placing more emphasis on personal connections and family issues.[14] In addition, women may be more likely to face multiple issues, including physical and sexual abuse. Finally, many residential programs do not accommodate children.

✔ **Look for treatment that is compatible with an employment focus.** While some treatment models focus exclusively on recovery, others include work or employment-related activities as part of the treatment. In some cases, individuals may be able to pursue treatment and employment concurrently. Employment program staff should coordinate with treatment providers to develop shared goals around both treatment and employment.

✔ **Build in structure to participants' schedules.** The less structured their time, the more likely participants may be to return to drugs or alcohol. Use employment and job-readiness activities to help participants create a regular schedule that supports treatment and recovery.

✔ **Follow up with participants during and after treatment.** Kansas found that while it did a good job of identifying and referring participants, most either did not enter or did not complete treatment. Close communication with treatment providers will be needed to learn if participants drop out, and staff should quickly follow up to reengage those who do. After treatment, ongoing contact can help individuals maintain progress and manage the dual challenges of recovery and employment.

✔ **Guard against relapse.** After treatment, individuals will be vulnerable to relapse, which may be triggered by certain people, places, things, and times associated with previous drug use. Staff should help participants recognize and avoid or manage potential triggers. Programs should teach participants budgeting and financial management skills, as both having and not having money are typical relapse triggers.

✔ **Create support systems to avoid isolation.** Isolation is a key problem for those in recovery. Staff should provide encouragement directly as well as help participants develop both formal and informal support networks in their

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14. Fleischer et al., 2000.

community. One way to do this is to encourage individuals to come back to
the program as volunteers or mentors to other participants.

## Labor Market Strategies

Labor market strategies for substance abuse involve identifying employment
opportunities that individuals can get while simultaneously focusing on
recovery.

✔  **Find out if employers test for drugs.** Include in the mix of jobs available
to participants ones that do not conduct drug tests, and let participants know
if employers test before they apply for a job. This will allow participants who
choose not to disclose drug use to self-select the leads they will follow. It will
also make the program feel accessible to those with substance abuse prob-
lems, helping retain them in the program so you can work with them.

✔  **Offer to provide bonding for individuals hired through your pro-
gram.** One hurdle in employment may be employers' concern about the risk
of theft or other loss of money or property. Privately available fidelity bonds
may not cover employees with a history of drug or alcohol abuse. Employ-
ment programs can purchase federal bonds that provide coverage for these
individuals (see Box 16).

✔  **Look for jobs in low-stress environments.** Individuals who are in treat-
ment or in the early stages of recovery will be vulnerable to relapse and need
to be able to focus their attention on the recovery process. Recognizing this,
programs should look for employment opportunities that will not be overly
challenging or stressful.

✔  **Look for jobs that avoid relapse triggers.** Certain work environments may
be more likely to trigger relapse. Jobs that should be avoided are those in
which individuals receive tips or handle cash, are around alcohol or medicine,
or work at night or in high-stress environments.

✔  **Provide transitional jobs.** For some individuals, moving directly from
treatment to full-time or permanent employment can be overwhelming.
Transitional jobs, such as work experience positions, can provide an opportu-
nity to ease into the world of work with more supportive supervision and less
job stress.

✔  **Use employment to promote recovery.** Employment success can motivate
individuals to stay clean and sober. Provide positive reinforcement and
support to workers, and help them develop new work and career advance-
ment goals as they succeed.

## Staff Development and Interagency Partnerships

Diagnosing and treating substance abuse require specialized, clinical training. Programs may want to either hire staff with this expertise or, more likely, partner with other agencies. Some employment programs "borrow" staff from treatment providers. These staff members are outstationed at the employment program and provide substance abuse assessment, diagnosis, and referral services.

Employment programs also need to develop partnerships with substance abuse treatment providers to accept referrals of individuals in need of treatment. Private programs are the most common providers of publicly funded substance abuse treatment services for TANF-eligible women.[15] Other potential partners include departments of social services, child protective services, and vocational rehabilitation.

Training for employment-focused staff should include:

▶ understanding basic information on different kinds of drugs, their effect on behavior, and the cycle of addiction and relapse

▶ recognizing key behavioral and physical indicators of a drug or alcohol problem

▶ understanding the relationship among substance abuse, mental health, domestic violence, and other issues

▶ dealing with individuals who come to the program under the influence of alcohol or drugs

▶ talking with participants about substance abuse

▶ using any screening tools

▶ referring individuals for assessment and treatment

▶ following up post-treatment and preventing relapse

Supervision is key to helping staff deal with difficulties or frustration resulting from working with individuals with substance abuse problems. Group meetings can provide opportunities for staff to share their experiences and ideas.

### Best Practices

✔ Serve individuals with substance abuse problems in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ Formulate explicit policies regarding substance abuse, and follow those policies consistently and uniformly.

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15. National Center on Addiction and Substance Abuse at Columbia University, 1999.

| ✔ | Focus on drug and alcohol use only when it is a barrier to work. |
|---|---|
| ✔ | Develop open and trusting relationships between staff and participants to facilitate discussion of substance abuse issues. |
| ✔ | Limit the role of employment program staff to identification of suspected abuse and referral for additional diagnosis and treatment. |
| ✔ | Coordinate with substance abuse treatment providers to reinforce the employment goal throughout the treatment process. |
| ✔ | Provide post-employment services and supports to promote recovery and help prevent relapse. |

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**Box 10**

**Program Examples: Substance Abuse**

**CASAWORKS for Families,** a demonstration program designed by the National Center on Addiction and Substance Abuse at Columbia University, operates in 11 sites across the country. CASAWORKS combines drug and alcohol treatment and employment services for TANF recipients. Local collaboratives include the welfare department; substance abuse treatment providers; organizations providing health and mental health services, literacy and job training, work experience and job placement; employers; and other service agencies.

**Center Point,** in San Rafael, California, is a residential treatment program that integrates vocational preparation and job development into its treatment curriculum. The program provides formal training in five vocational areas (maintenance/repair/construction; clerical/administrative/ data entry; culinary arts; child care; and retail/service) and operates a job bank of 150 employers. Staff work closely with employers and provide post-employment support around both on-the-job issues and reintegration into the community. Early evaluation results suggest that the program has successfully helped pregnant women and mothers overcome addiction and return to work.*

**Oregon's TANF program** requires localities to integrate drug and alcohol services into their welfare-to-work activities. Welfare recipients are expected to work simultaneously toward recovery and employment. Certified treatment professionals, working on-site at local welfare offices, provide training for case managers, screening, referrals, and help with the development of self-sufficiency plans. Treatment for substance abuse is generally one component of a participant's plan and is therefore a mandatory TANF activity, enforceable by sanctions.

*Taylor and Bersing, 2000; Legal Action Center, 1999.

# 12. Domestic Violence

## Overview of the Issue

Domestic violence involves abusive or aggressive behavior — whether physical, sexual, or emotional — by a person in an intimate relationship with the victim.[16]

In studies that have examined the prevalence of domestic violence among welfare recipients, between 15 and 56 percent of women report that they are current victims of abuse or have been victims in the past 12 months. Between 55 and 65 percent report having ever been victims of abuse in their lives. This compares with only 1.5 percent and 25 percent nationally, though abuse is likely underreported in both instances.[17] Victims of domestic violence often suffer from physical as well as mental health problems, including low self-esteem, depression, anxiety, and anger (see Sections 13 and 14). There is also a link between domestic violence and substance abuse (see Section 11).

Especially in the case of current abuse, health and safety concerns — for both abused parents and their children — will necessarily take primary attention away from employment goals. However, employment programs can — and should — attempt to engage families who face domestic violence, both as part of a broader mission to assist families and because employment-related activities can provide a route to independence. Financial self-sufficiency, increased self-esteem, goal-setting, and expanded social networks can all motivate individuals to take steps to get out of abusive relationships and can support them as they do so.

Research suggests that welfare recipients and other low-income women who are *current* victims of domestic violence are less likely to be employed than are other similar women. (It is less clear whether having a history of abuse affects employment rates.) In addition, both program staff and abused women themselves consistently report that getting and maintaining employment can be difficult for victims of domestic violence. In five studies, 16 to 60 percent of women surveyed reported that their partner discouraged them from working, and 33 to 46 percent said that their partner prevented them from working.[18]

Domestic violence can affect participation and employment in various ways. Violence against women is often accompanied by emotionally abusive and controlling behavior. Partners may be violent or may sabotage work efforts in more subtle ways, such as by refusing to provide transportation, promising to provide child care and then reneging, or destroying or hiding clothing or other items needed for work activities. Threats of violence may make women afraid to take steps toward employment. Once victims begin working, partners may show up

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16. Johnson and Meckstroth, 1998.
17. U.S. General Accounting Office, 1998; Tjaden and Thoennes, 2000.
18. U.S. General Accounting Office, 1998.

at the job site uninvited or telephone repeatedly. Lack of support at home can make it hard for individuals to cope with other difficulties that arise, such as a sick child or car trouble. In addition, physical injuries — especially visible ones — can cause women to miss work. Finally, dealing with an abusive partner can be all-consuming, reducing women's motivation to participate in the program and draining them of energy to focus on employment.

## Screening and Assessment

Welfare-to-work programs generally rely on voluntary disclosure of domestic violence, though many victims do not report abuse. To promote disclosure, programs should provide information to all participants about the support services and options available to victims of domestic violence. Program policies should include clear guidelines about confidentiality, to address recipients' fears about disclosure — including fears that the abusive partner will learn about their disclosure and fears of child welfare involvement.

A supportive, nonjudgmental environment will be most likely to encourage disclosure. Case managers should attempt to build trusting relationships with participants so that they are comfortable reporting abuse. Finally, programs should provide multiple opportunities for disclosure throughout the welfare-to-work process rather than only during the initial intake or assessment.

Oregon and Colorado have both developed domestic violence screening and assessment instruments for use in their TANF programs. The National Resource Center on Domestic Violence can provide additional information on screening and assessment tools. In screening for abuse, alternative terms should be used to describe situations in which participants might find themselves, since many victims do not identify with the label "domestic violence."[19]

Once victims of domestic violence have been identified, additional assessment should examine the extent to which these women face issues related to housing or shelter, physical and mental health services for themselves or their children, substance abuse services, and legal assistance.

## Service Strategies

Service strategies for domestic violence encourage disclosure of the problem and facilitate access to services available in the community.

✔ **Take care of safety first.** Women who feel that they or their children are in immediate physical danger will not be able to focus on employment. In those situations, work with partner agencies to facilitate access to shelters and other emergency services.

✔ **Train staff in policies related to domestic violence.** Staff need to know about any exemptions or special services related to state adoption of the

19. Raphael and Haennicke, 1999.

Family Violence Option (FVO) — see Box 11 — or other state and local welfare policies (including those related to participation, time limits, and child support enforcement). In addition, staff should understand confidentiality policies regarding suspected and reported abuse.

✔ **Make use of allowable flexibility.** Program staff should maximize their ability to assist victims of domestic violence by taking advantage of any flexibility allowed under local TANF rules, including the FVO and other policies that allow modification of program activities or exemption where appropriate from participation, child support reporting, and other requirements.

✔ **Let participants know that help is available.** Inform individuals about counseling, support, emergency funds, and other services that may be available to them. A survey in Wisconsin found that only 25 percent of those who reported abuse were aware of the services available to them, and only 5

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## Box 11

## The Family Violence Option

The Family Violence Option (FVO) under TANF allows states to waive certain requirements (including participation in work-related activities, cooperation with child support enforcement, and time limits on assistance) for victims of domestic violence. If the state's standards for doing so meet federal requirements, a state can qualify for penalty relief if the state fails to meet federal work participation or time-limit requirements because it granted the waiver.

States wishing to take advantage of the FVO must formally choose to adopt it; 39 states have done so, and others have adopted separate provisions regarding domestic violence. States adopting the option are required to screen and identify individuals with a history of domestic violence (while maintaining confidentiality), refer such individuals to counseling and supportive services, and provide "good cause" waivers of program requirements if meeting those requirements might endanger or unfairly penalize recipients.

A recent study of efforts by TANF programs in seven counties to address domestic violence found that FVO waivers were rarely used.* Instead, counties developed other procedures, such as expanding the list of allowable activities and giving staff flexibility in deciding what activities are appropriate for each individual. The study concludes that these procedures can support most TANF recipients, who need only relatively short-term intervention to address domestic violence issues, but that the adoption of an FVO waiver may be critical for those recipients who need long-term services.

*Burt et al., 2000.

percent were told they might have good cause for noncompliance with child support enforcement.[20]

✔ **Allow participants to access services during program hours.** It may be difficult for victims of domestic violence to access support services because they fear that partners will find out. To encourage use, allow women to access these services during hours they already spend in program participation.

✔ **Facilitate access to services for children.** Domestic violence results in physical and emotional problems for children in the household. Provide information and referrals to health care, counseling, and other services for children. Women may be more likely to seek help for their children than for themselves.

✔ **Help women find safe and affordable child care.** Child care is likely to be a key factor in supporting the move to employment for women who are victims of domestic violence. Women may fear for the safety of their children if left in the care of their partners.

✔ **Help participants expand their social and professional networks.** Women in abusive relationships are often isolated and rely on their partners for self-esteem and a connection to the outside world. Helping women counter this isolation and develop new connections — for example, though group sessions with their peers — can support efforts to address abuse.

✔ **Pay attention to what happens after employment.** Employment can often lead to an escalation of violence, so build in monitoring to identify and address problems that may occur once an individual begins work.

## Labor Market Strategies

Labor market strategies for domestic violence focus on helping employers understand the issue and address it in the workplace context.

✔ **Look for jobs that offer a safe and comfortable environment.** Victims of domestic violence who enter the labor market may be fearful and insecure about work. Identifying a workplace in which the individual feels secure and comfortable will help ease the transition. Take into account factors such as the extent and nature of contact with customers and coworkers, the physical space of the workplace, and the degree of supervisory support.

✔ **Educate employers about domestic violence.** Domestic violence can reduce worker productivity and increase turnover. Program staff working with employers should help employers understand the nature of the problem, how it affects their productivity and workplace, and the confidentiality issues involved.

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20. Moore and Selkowe, 1999.

✔        **Teach employers strategies to address domestic violence.** Employers
         can take steps to support workers and reduce the negative effects of domes-
         tic violence on the workplace. Flexible scheduling can allow employees to
         keep medical and court appointments. Employee Assistance Programs (EAPs)
         should include help related to domestic violence. Clear guidelines regarding
         corporate policy and a sympathetic response when partners harass workers
         on the job can promote a safe workplace environment.[21]

## Staff Development and Interagency Partnerships

Many welfare-to-work programs have developed partnerships with domestic
violence service providers or advocacy organizations to provide training for
welfare agency and employment program staff. In some cases, a domestic vio-
lence counselor is colocated in the program office, providing personal assis-
tance and coordinating referrals to other service providers.
    Staff training should include:

▶    understanding domestic violence issues, including myths and realities

▶    understanding safety and confidentiality issues associated with domestic
     violence

▶    understanding state or local TANF policies related to domestic violence,
     including good cause waivers

▶    encouraging disclosure and talking about domestic violence with partici-
     pants

▶    using any screening tools

▶    referring participants to services and supports for victims of abuse

    Staff training is especially critical in overcoming worker discomfort in broach-
ing the topic of domestic violence. As documented by the experience of
Options/Opciones (see Box 12), programs may find that there are few referrals
for specialized assistance, owing to staff and participant reluctance to discuss
the issue as well as preconceived attitudes that staff may have. To address this
problem, Options/Opciones retrained staff to improve their communication skills,
use and encourage problem-solving skills, and see their clients as part of a larger
family system whose needs must be addressed if the family is to become more
self-sufficient.[22]
    Employment programs should build relationships with organizations that
assist victims of domestic violence. These organizations might offer a range of
services, including emergency hotlines, crisis counseling, shelter, support groups,
vocational counseling and job training, housing and relocation assistance, legal

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21. Sachs, 1999.
22. Levin, 2001.

services, health and mental health services, assistance in planning for safety, and services for children.[23] Other potential partners are child welfare agencies, child care providers, law enforcement (police, prosecutors' offices, and courts), child support offices, health care providers, legal services, and advocacy groups.

23. Saathoff and Stoffel, 1999.

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## Box 12

## Program Examples: Domestic Violence

**The Anne Arundel County (Annapolis), Maryland**, Department of Social Services partnered with the local YWCA to train staff to identify and serve TANF recipients who are victims of domestic violence. Staff address the subject during intake and reassessment interviews and are trained to identify suspected abuse through subtle cues and indirect questions. Once abuse is identified, an Intensive Service Team — including a job counselor, caseworker, social worker, and, if necessary, child support worker — develops a six-month plan for each individual. Services typically include emergency shelter (where chores count toward the TANF work requirement), counseling, legal advocacy, relocation funds, and, in some cases, temporary exemption from work requirements.

**Options/Opciones**, a demonstration project in Chicago running through the spring of 2001, provides welfare-to-work services to victims of domestic violence. The project is a collaboration between the Illinois Department of Human Services and two community-based service providers: Rainbow House and Mujeres Latinas en Acción. Options/Opciones trains TANF case managers to use a domestic violence screening tool. When issues are identified or disclosed, recipients have the option of participating in the program. Those who choose to participate are referred to an Options/Opciones staff person located on-site, who provides initial services. Participants may be referred to an off-site location for additional services, which then partially satisfy the TANF work requirement.

**In Oregon**, domestic violence issues are addressed through a partnership between the Office of Adult and Family Services (AFS) and the Oregon Coalition Against Domestic and Sexual Violence, a membership group of local domestic violence programs. In each AFS district, a point person collaborates with the local service provider, tracks staff training, and may also carry a caseload of domestic violence cases. A full day on the topic of domestic violence has been incorporated into TANF training, including half a day on the dynamics of domestic violence (provided by the local service provider) and half a day on AFS policies related to domestic violence. Staff also receive follow-up training and refreshers. Tools, including domestic violence assessment questions and a safety assessment form, have been developed for staff use.

In some communities, domestic violence services may be insufficient to meet local needs, especially if welfare agencies begin to take active steps to identify abuse. Existing programs for victims of domestic violence tend to be small, serving relatively few women annually. TANF programs should work with local providers to determine available capacity and take steps to increase capacity if needed, using TANF funds or other resources.

## Best Practices

✔ Serve individuals with domestic violence problems in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ Maximize flexibility to serve victims of domestic violence, using the Family Violence Option and other policy alternatives.

✔ Provide a safe and trusting environment to promote disclosure of domestic violence.

✔ Facilitate immediate access to emergency services — including health care and shelter — when needed.

✔ Coordinate access to a range of support services through referrals to community organizations.

✔ Provide assistance for children as well as parents.

✔ Help victims of domestic violence develop support networks.

✔ Encourage employers to adopt policies to address the effects of domestic violence on the workplace.

# 13. Physical Disabilities and Chronic Health Problems

## Overview of the Issue

Welfare recipients may face a variety of physical health problems. Some are acute conditions, such as a broken limb or recovery from surgery, that generally require only a temporary delay or modification of employment activities. This section deals with chronic conditions and disabilities that present long-term and persistent barriers to employment. These may include asthma, chronic back pain, diabetes, hypertension, obesity, side effects from medication, and HIV/AIDS.

Vocational rehabilitation (VR) programs define a disability as a physical or mental impairment that constitutes or results in a substantial impediment to employment.[24] (See Section 14 for information on mental health problems.)

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24. U.S. Department of Health and Human Services, 1990, as cited in Johnson and Meckstroth, 1998.

Several state studies have attempted to measure the prevalence of health barriers among welfare recipients. Iowa identified 12 percent of its caseload as chronically and physically ill; in Oregon, 17 percent of TANF recipients surveyed reported physical health problems that prevented them from seeking or retaining employment.[25]

TANF gives states the flexibility to develop their own definitions and standards for recipients with health problems. Under JOBS, ill or incapacitated individuals were exempted from participation in employment activities. Most states no longer have automatic categorical exemptions.

People with disabilities are less likely to work than those without disabilities. National data show that 82 percent of adults without disabilities are employed compared with 77 percent of those with nonsevere disabilities and only 26 percent of those with severe disabilities.[26]

As is true for the other barriers discussed in this guide, however, even serious health problems do not necessarily prevent individuals from working. VR programs have long recognized that individuals' potential to succeed is not defined solely by their disabilities. At the same time, employment activities must recognize participants' physical limitations and be tailored to accommodate them. VR programs tend to use one of three employment models for individuals with disabilities:[27]

▶   sheltered employment, in which participants work in a controlled environment, usually performing work involving a limited set of tasks

▶   supported employment, in which individuals work in regular job settings with the support of a job coach and other post-employment services

▶   competitive employment, in which individuals are placed in regular jobs after receiving job training and other pre-employment services

Accommodations are an important element of helping people with physical disabilities succeed in the workplace. The National Council on Disability found that assistive technology helped disabled individuals work more productively for more hours, increase their earnings, and either obtain employment or keep their jobs.[28]

Finally, a related issue for welfare-to-work programs concerns individuals who are primary caregivers to a child or other family member with a disability. These obligations can limit their ability to participate in programs and employment. Most states apply the same rules and policies to parents who are caretakers of disabled family members as to those who are disabled themselves.

25. Callahan, 1999.

26. Stoddard et al., 1998.

27. U.S. General Accounting Office, 1996.

28. National Council on Disability, 1993.

## Screening and Assessment

Individuals should be screened when they first enter a program. The screening can be as simple as asking whether they have a serious or chronic health problem that will interfere with their ability to participate in the program or to work. Individuals responding in the affirmative are generally required to get medical documentation, either from their own physician or from a physician contracted by the program. Programs should have in place clear confidentiality rules related to disclosure of health problems.

Medical assessments should specify the nature of the problem and the ways in which it might impact employment, including activities that the individual is unable to perform and work environment concerns. Assessments should differentiate between health problems that *limit* the ability to work or the type of job an individual can do and those that make an individual *unable* to work. (Physicians should be told that the report will be used in part to develop accommodations and be asked to write it accordingly.)

Welfare programs typically suggest that individuals who appear to have severe health problems apply for federal Supplemental Security Income (SSI) benefits. Some states stop the welfare time-limit clock while SSI applications are pending. However, strict eligibility rules and medical guidelines make it likely that many will not qualify for SSI, even though their health problems do interfere with their ability to work.

## Service Strategies

Service strategies for physical health problems involve promoting access to health care and making decisions about appropriate levels of work activities.

✔ **Help those who may qualify to apply for SSI.** Individuals who are unable to work because of a health problem may qualify for federal disability benefits. The application process, however, can be complicated and lengthy. Programs should have designated staff people who can assist with the application process or coordinate with another agency to provide this assistance.

✔ **Develop consistent standards for establishing work expectations.** States that have no blanket exemption for individuals with health problems must develop alternative standards for participation and work requirements. Some states have established medical review teams that are responsible for approving requests for exemption, deferral, or modification of participation requirements.

✔ **Get the medical information needed to make informed decisions.** Medical documentation will be important in determining the appropriate level and type of participation and employment for individuals with health problems. New Jersey developed a form for physicians to give detailed information about the characteristics of a person's disability, the degree of

limitation caused by the disability, and how the disability will affect the individual's ability to work. The form replaces a more generic "excuse note" from the doctor.[29]

✔ **Educate participants about the ADA.** The Americans with Disabilities Act (ADA) provides protection in hiring and employment for individuals with disabilities (see Box 13). In order to receive protection, including the right to accommodations, individuals must tell employers about their disability.

29. Thompson, Holcomb, Loprest, and Brenan, 1998.

## Box 13

## The Americans with Disabilities Act

The Americans with Disabilities Act (ADA) is a federal civil rights law that prohibits discrimination on the basis of a disability.* The law defines a disability as a physical or mental impairment that substantially limits one or more major life activities such as walking, breathing, hearing, seeing, speaking, learning, and working. People with HIV are protected under the ADA even if they do not display symptoms. Individuals with learning disabilities (see Section 17) are also protected under the ADA.

The ADA applies to workplaces with more than 15 employees and covers hiring, firing, promotion, leave of absence, wages, and access to benefits. To receive protection under the ADA, a person must meet the skill, experience, education, and other job-related requirements of the position and must be able to perform its essential functions with or without reasonable accommodation. A reasonable accommodation is a change in the job or work environment that would enable a qualified person with a disability to perform the essential tasks of the job. Employers are required to provide accommodations, which may include making existing facilities accessible, modifying work schedules, and adjusting or modifying examinations, training materials, or policies. Employers are not required to lower production standards.

The ADA also prohibits discrimination against individuals with disabilities in all programs, activities, and services of public entities. State and local governments must eliminate any eligibility criteria that screen out or tend to screen out persons with disabilities unless they can establish that the requirements are necessary for the provision of the program, service, or activity. Public entities must also modify policies, practices, and procedures to accommodate individuals with disabilities.

*U.S. Equal Employment Opportunity Commission (EEOC) Web site (www.eeoc.gov); Department of Justice Web site (www.USDOJ.gov); Smith, 1997. The Job Accommodation Network, a service of the Office of Disability Employment Policy, U.S. Department of Labor, is a toll-free resource for those who have questions about job accommodations or employment-related provisions of the ADA.

Employment program staff can help participants consider the advantages and disadvantages of disclosing such information in a given circumstance.

✔ **Provide accommodations within the program.** In order to serve individuals with disabilities, programs must be accessible to them (this is also necessary to comply with the ADA). For example, if participants are asked to use computer job banks to search employment listings, make sure that computers with voice-output and enlarged print on the screen are available.

✔ **Facilitate access to transitional Medicaid.** When participants find jobs that do not offer health insurance, transitional Medicaid can provide crucial coverage. However, take-up rates for transitional Medicaid are low, either because many welfare recipients are not aware of the benefits or because the application process is complicated. Program staff should make sure that participants know they can continue to receive Medicaid once they go to work and should act as advocates to make sure they get the benefits.

✔ **Address transportation needs.** Transportation can be a special problem for individuals with physical disabilities. They may be unable to drive or have difficulty accessing public transportation systems, especially in areas where those systems are not very extensive. Staff should make sure participants know about existing paratransit services and assist in coordinating other transportation as needed.

## Labor Market Strategies

Labor market strategies for physical health problems involve matching jobs to individual abilities and facilitating workplace accommodations.

✔ **Break down job descriptions into specific tasks.** Understanding whether an individual with a physical health problem can do a given job requires understanding exactly what the job entails. In developing jobs, talk with employers to break down general job descriptions into more specific tasks. In particular, pay attention to any physical demands, such as movement, lifting, or reaching.

✔ **Do not automatically rule out certain jobs.** Avoid jumping to conclusions about what jobs individuals can and cannot do. Match participants with jobs based on their skills and interests as well as physical limitations, and explore possibilities for accommodations that can expand employment opportunities.

✔ **Work with employers to design job accommodations.** Accommodations are usually not expensive and may be as simple as rearranging equipment. New employees should be involved in identifying workplace accommodations, which should take into account the nature of the physical limitation, job tasks, and work environment. Accommodations can include modifying the job, modifying the environment, or using special equipment.

✔    **Visit job sites.** Matching individuals with jobs and developing accommoda-
     tions require knowledge of the physical layout of the job site. Look at the
     location of the job site and workspace, how the workspace is organized, any
     movement required during the course of the workday, the physical condi-
     tions, such as temperature, and social conditions, including interactions with
     other workers.

✔    **Look for jobs that provide health insurance and other benefits.**
     Individuals with medical problems will continue to need access to health care
     once they are working. Job developers should target jobs that provide cover-
     age without high copayments. In addition, benefits such as flextime and sick
     leave can be important in allowing individuals to keep medical appointments
     or deal with health-related problems.

✔    **Address any fears, myths, and misconceptions that employers might
     have.** Employers may have mistaken beliefs about disabled individuals — for
     example, that they will have a higher absentee rate than other workers.
     Employers may also be reluctant to hire individuals with health problems
     because they fear that their insurance costs will rise or that accommodations
     will be expensive or because they are concerned about how other employees
     or customers will react. Program staff should address these fears and miscon-
     ceptions honestly and directly.

✔    **Be careful to safeguard participants' privacy and legal rights.** In
     interacting with employers, program staff should not discuss participants'
     disabilities — health or otherwise — without the knowledge and consent of
     those participants. Programs should also educate participants about what
     questions employers can and cannot ask under the law.

## Staff Development and Interagency Partnerships

Employment programs do not generally need to reconfigure staffing in order to
serve individuals with health problems. However, additional staff training can
help program staff appropriately work with this population.
     Staff training should include:

▶    exploring staff attitudes about and perceptions of people with physical
     disabilities and their ability to work

▶    talking with participants about health problems

▶    identifying job tasks and determining reasonable accommodations that
     would enable an individual with a disability to perform those tasks

▶    determining exemption or deferral from participation requirements and
     helping individuals with SSI applications

▶ understanding Medicaid, transitional Medicaid, and any other available health insurance benefits

▶ marketing this population to employers and discussing workplace accommodations

Vocational rehabilitation (VR) programs are the most obvious partners for serving this population. State VR agencies and local VR providers have experience working specifically with disabled individuals in the context of employment and employment preparation. Individuals served by VR programs may be more severely disabled than those typically served by welfare programs.

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**Box 14**

**Program Examples: Physical Disabilities**

**Kansas** has developed a process to determine the appropriate employment goals and path for recipients with disabilities. Vocational assessments, including medical and psychological evaluations, are conducted to determine individuals' capacity to work. TANF recipients who have conditions that preclude their ability to work are assisted in obtaining federal disability benefits. Those who can work receive counseling, training, and support services. Finally, Kansas has created a formal component that allows TANF recipients with disabilities to use participation in the state vocational rehabilitation program in order to meet work requirements.

**In Vermont,** a pilot in four districts pairs state Department of Vocational Rehabilitation (VR) counselors with Department of Employment and Training case managers. The partners share responsibility for a caseload of 40 participants and work together to assess skills, support needs, and barriers to employment. The program also uses a job coach to provide intensive support around job-related issues. Under a separate agreement, the Department of Social Welfare has partnered with VR to pilot a program in which VR case managers work with TANF recipients who may be exempt from participating because of health problems.

**The Virginia Disabilities Initiative** is a pilot project involving the state Department of Social Services, Department of Rehabilitative Services (DRS), local employment service organizations (ESOs), centers for independent living, and social service organizations. The project provides employment services to TANF recipients with disabilities. DRS provides technical assistance and training in identifying, assessing, and diagnosing disabilities, as well as vocational evaluations, job placement, and support services. ESOs provide case management, assessment, training, work experience, job coaches, and job placement. Local departments of social services provide participant referrals and cover daycare and transportation costs.

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Employment program staff should be aware of any other community-based programs that provide services to individuals with disabilities, the services they can provide, and any eligibility requirements. Programs should establish policies for referring participants for services, with the goal of facilitating access and avoiding multiple intake processes. A review of federally funded programs providing employment-related services to people with disabilities concluded that the programs are not sufficiently coordinated, setting up barriers to access and effective service provision.[30]

## Best Practices

✔ Serve individuals with physical disabilities and chronic health problems in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ Facilitate access to health coverage, especially once an individual goes to work.

✔ Help those who may be eligible for SSI to negotiate the application process.

✔ Educate both participants and employers about the Americans with Disabilities Act.

✔ Take individuals' skills and interests, not just their limitations, into account when developing jobs.

✔ Get detailed information about the tasks and demands of each job opening.

✔ Help employers design workplace accommodations.

# 14. Depression and Other Mental Health Problems

## Overview of the Issue

Mental health problems include disorders related to anxiety, depression, and schizophrenia. Problems can vary in their symptoms, severity, and duration from person to person and even for one person over time. Symptoms are often minimized by medication or therapy, but can last a lifetime. Depression occurs more frequently in women than in men and may be the most common mental health problem for welfare recipients. Individuals with mental illness are protected from discrimination in employment under the Americans with Disabilities Act (see Box 13).

The State of Oregon estimates that 75 percent of women on welfare have mental health problems, ranging from clinically diagnosable problems to low

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30. U.S. General Accounting Office, 1996.

levels of depression.[31] In MDRC's New Chance evaluation, half of the young mothers entering the program were identified as at risk of depression, and half of those were at high risk.[32] Women on welfare may also face post-traumatic stress syndrome, resulting from experiences of rape, domestic violence, and sexual molestation.[33] Individuals with mental health problems often have related barriers, especially substance abuse; nearly one-third of adults with mental illness have abused drugs or alcohol.[34]

Addressing mental health issues offers an opportunity for employment programs to reach out to an often neglected group. Individuals with mental health problems may be less likely than other welfare recipients to even show up at the program office and more likely to drop out. For these reasons, they may be more likely to be sanctioned for noncompliance (see Section 5).

Once individuals are engaged, staff should work with these participants as they do with all others — focusing on their interests, abilities, and options, while offering services to address their mental health problems as needed. Employment activities can be empowering and motivating for those with mental health problems and can even help address some problems, such as depression and low self-esteem. Combining mental health treatment with employment-related services can help individuals move to work, and post-employment support and job accommodations can help people sustain employment.

Mental health problems can affect employment in a variety of ways. The irregular nature of mental illness can make it difficult for individuals to maintain consistent work schedules and to handle day-to-day stress and social interactions. Stigma and discrimination can lead to reluctance by employers to hire individuals with mental health problems, increased anxiety for workers, and problems on the job. Medications can have side effects, including drowsiness, nervousness and headaches, and confusion.[35] In addition, because mental health problems may be episodic, long-term job retention is a key challenge for this group.

## Screening and Assessment

Mental health problems can be difficult to recognize. Without formal mechanisms to identify and diagnose them, they can easily be misinterpreted as motivation or behavior problems. Some individuals with mental health problems may simply drop out of programs and accept sanctions for noncompliance.

In general, employment program staff will play a role only in the initial identification of individuals who may have mental health problems. There are some screening tools available that employment program staff can administer

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31. Callahan, 1999.
32. Quint, Fink, and Rowser, 1991.
33. Danziger et al., 2000.
34. Zuckerman, Debenham, and Moore, 1993.
35. Center for Psychiatric Rehabilitation, 1997.

to identify individuals for further assessment; the California Institute for Mental Health has identified a number that may be appropriate for welfare-to-work programs.[36] Any assessment beyond a basic one, however, should be done by clinically trained professionals.

Once an assessment has been made, mental health professionals should work in partnership with employment staff to understand the nature of the diagnosis, recommended treatment, and impact on employment. Some clinical information related to the diagnosis may be confidential, and confidentiality issues need to be addressed ahead of time, so that needed information can be shared. Employment and clinical staff should also work together to develop individual service plans for participants and to regularly assess progress toward both treatment and employment goals.

## Service Strategies

Service strategies for mental health problems involve encouraging participation and facilitating access to appropriate treatment, both before and after employment.

✔ **Conduct aggressive outreach.** Individuals with mental health problems may be less likely to even show up for employment program intake or orientation activities. Programs should follow up — with phone calls and even home visits — with those who fail to report and those in sanction status for noncompliance with work activity requirements. Steps should be taken to protect individuals with mental health problems from sanctions (see Section 5).

✔ **Encourage individuals to identify their own career path.** Participants may have little idea what they want to do or what opportunities are available to them in the world of work. Help them explore their options through informational interviews, job shadowing, mentoring, and developing a network of community contacts who will support them in their exploration and in the realization of their employment goals.

✔ **Consider whether individuals may qualify for federal disability benefits.** Individuals with the most serious mental health problems should be assisted in completing an application for Supplemental Security Income (SSI) benefits. Some programs contract with other organizations to provide this assistance. Because the process can take some time, states should consider stopping the welfare time-limit clock while an SSI application is pending.

✔ **Address the stigma associated with treatment.** Some participants may be reluctant to accept a diagnosis of mental health problems or to accept treatment because of the stigma often attached to mental illness. Staff training should include strategies to discuss mental illness with participants in a

36. California Institute for Mental Health, 1997.

nonjudgmental and supportive way. Programs should maintain a focus on the employment goal and treat mental health problems as they would any barrier to employment.

✔      **Focus on workplace issues rather than job skills.** The employment-related challenges of people with mental health problems generally have less to do with performing work tasks (so-called hard skills) than with handling work-related stress, criticism from supervisors, and relationships with cowork-ers.[37] Use both individual counseling and group activities to address these issues.

✔      **Make sure participants know their civil rights.** Individuals with mental illness are protected under the Americans with Disabilities Act (see Box 13). The ADA prohibits discrimination in hiring and requires employers to provide reasonable accommodations that may be necessary for employees to perform job functions.

✔      **Promote opportunities for peer support.** Peer support can provide a chance for individuals to discuss both personal and work-related issues that arise in the course of employment preparation or employment. Programs can coordinate formal support group meetings as well as create opportunities for more informal peer interactions.

✔      **Provide supports for workers.** Once working, individuals with mental health problems will need support services to help them cope with the stresses of work and to interact successfully with supervisors and coworkers. Program staff should help individuals put together a post-employment service plan.

✔      **Develop a plan for ongoing mental health treatment after employ-ment.** Make sure that individuals will continue to receive treatment services once they go to work. This might entail reassessing treatment needs or revising schedules as needed so that treatment does not interfere with work hours.

## Labor Market Strategies

Labor market strategies for dealing with mental health problems involve identifying supportive work environments and easing the transition to employment.

✔      **Address employer bias.** Employers may be reluctant to hire people with mental health problems, and if such individuals are hired, their experience in the workplace may be affected by employer bias. Individuals and employers should understand the protections and rights provided by the ADA.

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37. National Technical Assistance Center for State Mental Health Planning, 1997.

✔ **Look for jobs with supportive work environments.** Appropriate super-
vision and a flexible, supportive work environment can help individuals with
mental health problems succeed on the job. Smaller businesses may be more
likely to have this kind of environment. Some businesses also offer Employee
Assistance Programs (EAPs), which provide support to workers in a variety of
areas, including mental health.

✔ **Arrange for workplace accommodations.** In keeping with the ADA,
employers are required to provide workplace accommodations for employees
with mental illness, if they have disclosed their disability and require an
accommodation. Simple accommodations, such as providing workspace that
is quiet and has few distractions or repeating and reviewing instructions, can
make employees more productive and successful.

✔ **Use supported work to build skills and confidence.** Supported work and
sheltered workshops have long been used in the vocational rehabilitation
field to provide work experience and work opportunities for adults with
disabilities. These positions teach skills on the job, in situations of close
supervision and gradually increasing demands. However, participants are
unlikely to move to permanent employment on their own; job placement will
be needed to facilitate the transition.

✔ **Ensure that, once employed, individuals continue to have access to
health coverage.** Most entry-level jobs do not provide employer-sponsored
health benefits, and those that do often do not cover mental health problems.
Take-up rates of transitional Medicaid are low (see Section 5). Employment
program staff should try to target jobs that provide sufficient coverage and
should act as advocates for participants, facilitating access to transitional
Medicaid.

✔ **Use job coaches to support participants during the first weeks of a
job.** When employers and employees are willing, job coaches who go to the
worksite can provide training and additional support to new workers with
mental health problems. Job coaches work with one or more employees to
make sure that they understand the job tasks and to help them become
comfortable in the job. In supported employment programs, this type of
support continues during the life of the job.

✔ **Work with employers to support the transition to work.** Symptoms of
mental illness can be misinterpreted as behavior, attitude, or skill problems.
Helping employers understand how individuals' learning and interpersonal
problems can be addressed in the context of the job can improve their ability
to supervise and support employees and can promote successful employ-
ment.

## Staff Development and Interagency Partnerships

Programs seeking to assist participants with mental health problems need to provide additional training to their existing staff as well as augment employment staff with clinically trained mental health professionals, by either hiring specialized staff, bringing staff from mental health service providers on-site, or making referrals to partner agencies.

Training for employment program staff about mental health issues should include:

▶ sensitizing staff to the nature of mental health problems and how they impact individuals' lives and, in particular, employment

▶ recognizing signs of mental health problems

▶ using screening instruments to identify individuals for further assessment

▶ understanding the interaction of mental health with other barriers, including domestic violence and substance abuse

▶ providing support and services to participants and making appropriate referrals to outside agencies and community providers

▶ alerting staff to confidentiality issues and protocols related to diagnosis and treatment of mental health problems

Partnerships for serving people with mental health problems are likely to involve staff from vocational rehabilitation (VR) programs and mental health agencies as well as psychologists and other mental health professionals. Such agencies and professionals may have extensive experience working with individuals with mental health problems in the context of education, training, and employment. Welfare-to-work programs may also be able to take advantage of existing relationships that vocational rehabilitation and mental health agencies have developed with employers who are interested in hiring individuals with disabilities. In addition, for those needing extra transitional support, these agencies often operate supported worksites or provide job coaches for employees at private sector jobs.

## Best Practices[38]

✔ Serve individuals with mental health problems in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ Normalize work by creating an atmosphere where individuals can succeed.

✔ Match both job tasks and the work environment with individual interests and preferences.

38. Ridgway and Rapp, 1998.

✔    Monitor the work environment, and facilitate any modifications needed to improve the "fit" of the job placement.

✔    Provide ongoing, flexible, personally tailored supports, such as workplace accommodations, job coaching, and support groups.

✔    Be ready and willing to help place individuals in new jobs as they learn more about what they want to do and to better match their strengths and desires with job characteristics.

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### Box 15

### Program Examples: Mental Health Problems

**New Jersey's Supported Employment Program** serves individuals with severe and chronic mental illness. The program matches participants to job opportunities, develops appropriate job accommodations, and provides intensive job coaching and case management services. The program recently added a mental health TANF pilot project. Welfare agencies use a 10-question screen to identify possible mental illness and refer those who screen affirmative to a trained mental health clinician. Individuals may receive psychiatric evaluation, medication, outpatient counseling, or other services. Employment specialists from the Division of Mental Health Services provide job-readiness and employment services. Individuals' mental health and employment services are customized to their needs, and all activities count toward the welfare-to-work participation mandate.

**Oregon's welfare-to-work program** includes a focus on assisting recipients with mental health problems. Most offices in the Portland area have mental health counselors working on-site, providing support to staff, counseling to participants, and referral for additional services. They perform a balancing act, offering help when needed, but trying not to pay undue attention to problems with which participants have learned to cope. Mental health services are not mandated, but are offered to participants who are having difficulty making progress toward self-sufficiency. When participants are referred for outside services, case managers receive notice of any missed appointments and are responsible for following up with these individuals. On average, those deemed in need of mental health services receive about 12 weeks of counseling.

**Wisconsin's Pathways to Independence** is a research and demonstration project designed to remove barriers to employment for people with severe physical and mental disabilities. The state Department of Health and Family Services and Department of Workforce Development jointly contract with 20 provider agencies, including clubhouse programs and assertive case management programs in the mental health field. The agencies implement a model that uses a team approach to create networks of support for the vocational goals of participants, intensive benefits counseling, and available long-term vocational supports.

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# 15. Criminal Records

## Overview of the Issue

Job search can be a frustrating process for individuals with criminal records. Those with convictions for certain types of crimes may be barred from working in some fields, such as child care or banking. Even in occupations that are not formally closed to ex-offenders, employers may screen out potential applicants with criminal backgrounds. Employers may believe that ex-offenders will be more likely to steal, be violent, use drugs, or cause other problems on the job. In some cases, employers may be unwilling to hire employees who cannot be bonded. (See Box 16.)

It is important to distinguish between an arrest record and a conviction record. The term "criminal record" is often used to refer to both, but they have

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### Box 16

### The Federal Bonding Program

Some employers purchase fidelity bonds to cover loss of money or property due to dishonest acts of employees. However, individuals with criminal records (as well as ex-addicts and individuals with poor credit records or limited work experience) are not covered by commercially available bonding insurance. Employers may therefore be reluctant to hire these individuals. Employment and training programs — public, nonprofit, or for-profit — can purchase coverage for individual employees through the Federal Bonding Program.*

Offering to provide this coverage can both reassure employers and eliminate bonding as a barrier to employment. Programs serving ex-offenders find that they do not need to purchase bonds for all, or even most, participants, but that having the option can open up certain job opportunities — in particular, those that involve the handling of cash.

Federal Fidelity Bonds are available in packages of 25 to 100 units, and the cost varies from $84 to $98 per unit, based on the number purchased. (Two or more agencies can combine resources to purchase the smallest bond package.) Each unit provides $5,000 of coverage for one employee for six months, beginning the first day of employment. The bonds can cover any worker on any job, full time or part time (although they do not cover self-employed individuals) regardless of whether the employer purchases private bonding insurance. There is no deductible, and no paperwork is required of the employer.

*Federal bonds are sponsored by the U.S. Department of Labor. The bonds are Travelers insurance policies, and the McLaughlin Company is the agent for Travelers in managing the programs nationwide.

very different implications for employment. While rules vary from state to state, arrest records can often be expunged, and individuals who have not been convicted can often truthfully answer "no" to employers' questions about their records. Some states prohibit discrimination on the basis of an arrest record, though not a conviction record. Juvenile convictions also represent a somewhat different situation and can often be expunged.

Individuals with criminal records often have incomplete work histories, low levels of education, and little exposure to the norms and interpersonal environment of a typical workplace setting, including the supervisor-employee relationship. Programs that work with ex-offenders find that job loss frequently occurs as the result of miscommunication with supervisors or misinterpretation of events in the workplace. Ex-offenders may face other related issues as well, including ongoing legal problems, substance abuse, or mental health problems (see Sections 11 and 14). Finally, some states impose additional penalties on convicted offenders, such as refusal to grant a commercial driver's license.

At the same time, criminal records present a more straightforward barrier to employment than others discussed in this guide. Programs across the country that work with ex-offenders have proven that individuals with criminal backgrounds can succeed in employment. In addition, employment may be a key strategy in reducing repeat offenses. A 1996 study found that offenders with stable employment are much less likely to violate parole or to re-offend.[39]

Because the ex-offender population is largely male, criminal records may be a greater issue in programs that work with noncustodial parents than programs serving only women on welfare. (As noted in Section 2, one study of noncustodial parents of children on welfare found that 75 percent had been arrested and 46 percent had been convicted of a crime.) Noncustodial parents have become a focus for an increasing number of welfare-to-work programs, including those funded through Department of Labor Welfare-to-Work grants. PRWORA denies Food Stamp and cash benefits to individuals convicted of drug felonies, unless the state overrides the federal legislation. More than half the states have done so.[40]

In the National Supported Work Demonstration (see Section 3), ex-offenders were one of the groups for which the program did *not* have an effect. Employment increased among program group members while they held supported work positions, but ex-offenders dropped out much more frequently than other participants, and after one year of follow-up employment rates were no different for program group members than for control group members. However, the program did increase employment for ex-offenders who received welfare in the month prior to participation — that is, those with children. It may be that individuals with families were more prepared to take advantage of the opportunities presented by the program.[41]

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39. Motiuk, 1996.

40. Center for Law and Social Policy, July 2000 audioconference.

41. Piliavin and Gartner, 1981.

## Screening and Assessment

Employment programs should be aware of participants' criminal histories so that they can most effectively assist them in finding jobs. Programs can ask about criminal records directly or bring the subject up in the context of job search activities. Most job-readiness curricula include modules that teach individuals how to fill out a job application and how to conduct a successful interview. Both activities provide an opportunity to broach the subject of criminal records in a practical and nonjudgmental way.

Programs can also help participants by providing information on what jobs are closed to individuals with certain types of convictions and what occupations or employers are most open to hiring individuals with criminal records.

## Service Strategies

Services for individuals with criminal records include teaching job search techniques, building job-readiness skills, and providing assistance with related issues.

✔ **Teach participants how to address their records in résumés and applications.** Participants should never lie to employers, but they can learn techniques for sharing information in a way that will increase their chances of being hired. For example, time spent in prison can be included in a résumé by listing a job held or training program attended. If an application asks directly about a criminal record, job seekers should include an explanation (or a commitment to explain in an interview) rather than simply answering "yes" to the question.

✔ **Make sure participants are ready to answer questions about their past.** Before participants with criminal records apply for a job, they should have prepared responses to questions about their past. In job search workshops, participants should practice answering questions that may be posed in a variety of ways, such as "Have you ever been in prison?" and "What were you doing during the gap in your work history?" While job seekers should always be honest, they do not have to give out more information than is necessary for the given situation or job.

✔ **Help individuals address any current legal issues they may have.** Many ex-offenders are dealing with ongoing legal issues related to parole, creditors, and child support enforcement. Putting in place plans to deal with these matters — either within the program or through referrals to legal assistance programs — can prevent their interfering with employment.

✔ **Help individuals clear their records.** Criminal records can be erased in certain cases, such as those that were dropped or dismissed in court. Individuals can then answer "no" truthfully when asked about a criminal background. For those offenders who have convictions, many states offer Certificates of Rehabilitation that remove many of the civil obstacles they may encounter.

✔   **Work on presentation, communication, and confidence in job search.**
Ex-offenders may be insecure in job search because they fear, or have experi-
enced, rejection because of their criminal records. Some may present them-
selves poorly to prospective employers by using slang, responding to
questions aggressively, or simply being nervous about an interview. Teaching
ex-offenders techniques to present themselves professionally can boost
confidence and overcome interview pitfalls.

✔   **Use work experience to build skills and get individuals quickly work-
ing.** Men, in particular, may be impatient to begin working and earning
income. Work experience, rather than job-readiness classes, can get individuals
quickly into a work setting and provide a transitional period in which to build
both soft and hard job skills.

✔   **Allow extra time for job search.** Because employment options are more
limited for individuals with criminal records, it may take them longer than
other participants to find jobs. Encourage these individuals to make more job
contacts, and allow extra time for job search.

✔   **Be alert to substance abuse.** Fifty-seven percent of prisoners report using
drugs on a regular basis prior to incarceration.[42] Program staff should recog-
nize the concurrence of these two issues and be prepared to identify and
address substance abuse problems in the ex-offender population (see Section
12).

✔   **Prepare participants to handle questions or reactions from cowork-
ers and others.** Once participants are working, others on the job may find
out about their criminal records. As with the job interview, individuals will be
able to respond better if they have thought through beforehand how they
will handle such situations. This can prevent negative consequences and
guard against job loss.

### Labor Market Strategies

Labor market strategies for individuals with criminal records involve identifying
existing job opportunities and developing new ones.

✔   **Target occupations that are friendly to ex-offenders.** Some jobs, in
particular those requiring physical strength (for example, in construction,
manufacturing, and food service), may be open to hiring individuals with
criminal records. Banks, hospitals, schools, and child care settings are less
open to ex-offenders.

✔   **Conduct aggressive outreach to employers.** Employers may be less
reluctant to hire individuals with criminal records if they are referred through

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42. U.S. Department of Justice, 1999.

a respected employment program. Job development efforts should promote the program's track record of successful placements and satisfied employers. In marketing the program, staff should be prepared to answer the question: "Why should I take a chance with an ex-offender?"

✔ **Offer to provide bonding for individuals hired through your program.** One hurdle in employment for individuals with criminal records may be employers' concern about the risk of theft, forgery, or other loss of money or property. Federal bonding (see Box 16) can provide coverage against such loss.

✔ **Teach job applicants how to present their histories to employers.** Most employment programs include opportunities for participants to learn and practice interviewing skills. Participants should understand what information needs to be disclosed and when, how to present information to prospective employers, and how to handle employer questions about their criminal backgrounds.

✔ **Be straightforward with employers.** While job developers (and job seekers) may not need to reveal all information about criminal backgrounds to employers, they should not attempt to distort the information they do share.

✔ **Ask employers to at least consider candidates with criminal records.** Getting in the door for an interview offers individuals the chance to change employers' preconceptions about ex-offenders. Another way to begin to get beyond employer bias is to ask employers to hire individuals on a trial basis. A positive experience may convince employers to remove a categorical hiring requirement.

## Staff Development and Interagency Partnerships

Programs working with ex-offenders find that hiring ex-offenders as program staff can improve their ability to motivate and retain participants. Former offenders are more likely to listen to and accept advice from those who have served time and understand the challenges they face. Staff who have successfully made the transition from prison to the labor market also serve as role models for participants.

The National Institute of Corrections offers technical assistance and staff training to local jurisdictions in job training and placement for offenders and ex-offenders. Areas of training include:

▶ labor market analysis

▶ employment needs assessment

▶ job counseling

▶ job search and placement strategies

▶ job retention strategies

State correction departments and local law enforcement agencies are potential partners in working with individuals with criminal records. Lawyers,

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**Box 17**

## Program Examples: Criminal Records

**Cleveland Works** provides training and employment services to low-income adults, primarily welfare recipients, offenders, and ex-offenders. In addition to job readiness and placement, Cleveland Works offers legal services, mental health and substance abuse counseling, and help with child care, housing, and other life management needs. Five full-time staff attorneys represent over 1,000 participants each year for legal problems. The program finds that employers are willing to hire participants because of the follow-up support they receive from the program. The program's experience has been that individuals with criminal records have as much opportunity for success as the rest of the unemployed population, but sometimes need more patience with the hiring process. Since 1986, 1,200 employers have hired Cleveland Works graduates for full-time jobs with health benefits.

**The Miami-Dade, Florida, WAGES (Work and Gain Economic Self-Sufficiency) program**, the county's welfare-to-work program, contracts with the county clerk to help welfare recipients seal or expunge their criminal records. A WAGES staff coordinator first screens welfare recipients to make sure that they are eligible (eligibility depends on the offense and whether or not there was a conviction). Individuals are then referred to a staff member of the county clerk's office, who confirms eligibility and helps them complete and file the needed paperwork. WAGES pays the required $75 fee for processing the application with the state. Hundreds of applications have been filed since the program began, and staff at both WAGES and the county clerk's office believe the program has been a success. The most common issues concern battery, theft, and drug-related offenses.

**The South Forty Corporation**, based in New York City, is a nonprofit organization providing counseling, education, and vocational services to prisoners and ex-offenders. South Forty's services include assessment, career and educational counseling, résumé preparation, job placement assistance, social service referrals, follow-up counseling, and aftercare support groups. The organization conducts aggressive outreach to employers and has developed long-term relationships with employers who trust the program and are willing to hire participants. The organization's career development program provides subsidized on-the-job training and work experience for those not yet ready for competitive employment.

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either on staff or volunteers, can help participants address any current legal problems they face. Programs may also want to develop working relationships with probation and parole officers. These officers, because they will have regular contact with participants both before and after they go to work, can reinforce the instruction provided in pre-employment workshops and help resolve any post-employment problems.

In some communities, local organizations operated by ex-offenders provide a range of services to other ex-offenders including counseling, referrals for education and training, and job assistance. In addition to the services, these groups can offer peer support and advice to participants.

For programs working with fathers of children on welfare, training staff in fatherhood and child support issues or partnering with child support enforcement agencies may be useful.

## Best Practices

✔ Serve individuals with criminal records in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ In job development, target occupations that regularly hire individuals with criminal records.

✔ Advise participants on how to present their criminal backgrounds to employers on applications and in interviews.

✔ Conduct practice interviews to help participants fine-tune their presentations.

✔ Build relationships with employers so that they are willing to take a chance on hiring participants.

✔ Market the Work Opportunity Tax Credit and other incentives to employers who hire ex-offenders.

# 16. Very Low Basic Skills and Learning Disabilities

## Overview of the Issue

Very low basic skills may be the most common barrier faced by welfare recipients. The Educational Testing Service estimates that about 40 percent of welfare recipients have literacy levels so low that it is difficult for them to complete such tasks as filling out the application for a Social Security card.[43] A national survey found that nearly two-thirds of welfare recipients scored in the bottom

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43. Kirsch, Jungeblut, Jenkins, and Kolstad, 1993.

quartile of the Armed Forces Qualifying Test.[44] Some programs define low skills by whether or not individuals have a high school diploma or GED.[45] In the context of this guide, however, we are concerned with those who have the lowest skill levels. This group generally includes individuals reading at fourth- to seventh-grade levels and below, or performance in the bottom 10 to 25 percent of scores on standardized tests.

Employment opportunities are limited for individuals with very low skills. Even most entry-level jobs require a certain level of reading and math proficiency, and many employers require a high school diploma for employment, whether or not it is actually needed to do the job. A survey of employers in four cities estimated that only 10 percent of the jobs available to noncollege graduates (and only 5.5 percent of jobs in central cities) did not require employees to perform daily tasks including reading and writing paragraphs, doing arithmetic, or using computers.[46]

Low basic skills may result from a variety of factors, such as limited or poor-quality education. In many cases, low basic skills are also linked to learning disabilities. The Department of Labor estimates that 50 to 80 percent of adults with low reading levels are learning disabled and that 25 to 40 percent of those on welfare may have learning disabilities.[47]

Learning disabilities is "a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities."[48] Individuals with learning disabilities typically have average or above average levels of intelligence, but the disabilities can affect their academic and vocational success and emotional growth.[49] Different strategies are needed to assist participants with low basic skills that are due to learning disabilities, and civil rights issues also apply in these cases. When diagnosed through a certified procedure, learning disabilities are considered a disability under federal law and covered by the Americans with Disabilities Act (ADA; see Box 13).

Individuals with learning disabilities may present a number of characteristics that interfere with employment, including appearing disorganized or inconsistent, having difficulty planning and prioritizing, using imprecise language or misusing terminology, writing illegibly, and having difficulty filling out forms — all of which can be misinterpreted as lack of motivation or poor work habits.[50]

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44. Olson and Pavetti, 1996.

45. Individuals who are close to getting a GED can often quickly do so with tutoring, classroom, or computer-based preparation. For these individuals, getting a GED can increase their employment options and help them get better jobs.

46. Holzer, 1996.

47. U.S. Department of Labor, 1991.

48. National Joint Committee on Learning Disabilities, 1994, as cited in National Adult Literacy and Learning Disabilities Center, 1999b.

49. National Governors' Association, 1998.

50. Presentation by Dianne Glass, Kansas Board of Regents, 1998.

These individuals often face other issues as well, including low self-esteem, anxiety, depression, anger, and substance abuse (see Sections 11 and 14).

Despite the importance of basic skills to employment, welfare-to-work programs emphasizing basic education have been only modestly successful at increasing educational attainment and even less successful at improving employment outcomes.[51] One reason may be that the programs have not taken into account the special needs of adult learners or the presence of learning disabilities. The research suggests that programs rethink how they approach education activities, but not eliminate them. (See Box 18.) The most successful programs overall have been those that emphasize employment, but also provide opportunities for education.

Many programs have had success helping individuals with low basic skills find jobs. Because individuals have unique combinations of skills and skill deficits, careful job development can help participants find jobs that take advantage of their strengths. Accommodations can open up employment opportunities for individuals with learning disabilities who have the knowledge and skills needed for a job. As with other barriers discussed in this guide, employment program staff should focus on individuals' strengths and the accommodations necessary for them to be successful rather than on their limitations.

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51. Freedman et al., 2000.

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## Box 18

## Improving Adult Learner Persistence

A key challenge for literacy programs is that adult learners often drop out before reaching their goals. The Literacy in Libraries Across America (LILAA) initiative is undertaking a four-year study to test the following approaches to increasing learner persistence:*

▶ providing child care while parents attend classes or meet with tutors

▶ providing transportation directly or subsidizing public transportation

▶ adopting curricula more relevant to adult students' everyday lives

▶ expanding hours of operation so students can remain active if their schedules change because of employment or other reasons

▶ improving training for teachers and tutors

▶ using new instructional approaches such as group learning, computer-assisted learning, and project-based learning

▶ redesigning intake and orientation, to make sure that students make the right choice in entering a program and feel welcome

*Comings and Cuban, 2000.

## Screening and Assessment

Various assessment tools are available for measuring basic skills. Four that are commonly used by employment and training programs are:[52]

▶ **Test of Adult Basic English Work-Related Foundation Skills (TABE-WF).** Available from CTB/McGraw-Hill, this tool assesses skills in four areas: adult reading, mathematics, language, and problem-solving.

▶ **Secretary's Commision on Achieving Necessary Skills (SCANS).** Available from the U.S. Department of Labor, this tool assesses workplace competencies (such as interpersonal, information, and technology skills) and foundation skills (such as basic and thinking skills).

▶ **Equipped for the Future (EFF).** Available from the National Institute for Literacy, this tool assesses skills in four areas: lifelong learning, decision-making, interpersonal skills, and communication.

▶ **Job Literacy Skills.** Available from the Center for Skills Enhancement, this tool assesses skills in eight areas, including quantitative skills, following directions, decision-making, and communication.

These tests measure skill levels, but do not identify learning disabilities. Therefore, individuals who test very low on basic skills should be further screened for learning disabilities. Washington State has developed a 13-question screening tool that has also been adopted by other states; Kansas has also developed a screening tool for adults with learning disabilities.[53] Once a learning disability has been diagnosed, individuals may need help understanding what the diagnosis means. Staff should try to present the diagnosis in a constructive way to avoid scaring or confusing participants.

## Service Strategies

Service strategies for very low skills or learning disabilities tailor educational and employment approaches to the specific strengths and deficits of each individual.

✔ **Redesign job-readiness, education, and training activities.** Adults with low basic skills are likely to have had unsuccessful educational experiences in a traditional classroom situation. Instead, vary instruction methods to meet learners' needs and focus on the practical uses of the skills being taught. In addition, provide access and accommodations to enable individuals with learning disabilities to participate fully.

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52. As noted earlier, the mention of a tool in this guide does not imply endorsement by MDRC nor is it a statement of the tool's effectiveness.

53. For information about other screening tools and advice on how to evaluate and select an appropriate instrument, see National Adult Literary and Learning Disabilities Center, 1999b.

✔        **Connect all instruction to the workplace.** Adult learners tend to be more motivated and engaged in education activities that have a clear link to skills needed on the job. Education and training activities should be work-oriented and use examples from real job tasks. Involving the business community in developing curricula can help ensure that the activities are geared to the workplace.

✔        **Emphasize group activities and peer learning.** Think of instructors as facilitators of adult learning rather than lecturers at the front of a classroom. Interactive and group activities can promote educational goals, facilitate peer support, improve interpersonal and teamwork skills, and increase self-esteem and confidence.

✔        **Set realistic goals.** For most individuals with very low basic skills, GED attainment before entering employment is not a realistic goal, especially in the context of time-limited welfare. Instead, focus on teaching the skills needed to move to work in the short term and on helping participants combine work with skill-building activities. Make sure that, for all students, instruction is both accessible and challenging.

✔        **Clearly identify participants' strengths and weaknesses.** A firm knowledge of individuals' areas of strength and limitation will help job seekers to develop needed skills, be well matched to a job, and require fewer workplace accommodations.

✔        **Break down entry requirements.** Employers and training providers may use a GED or other education credential as a recruiting screen. Wherever possible, identify the skills actually needed for the job (or program), and work with employers (and providers) to reconsider entry requirements.

✔        **Address issues of social skills and self-esteem.** Adults with learning disabilities may have difficulty in social situations, and academic and employment failure, combined with those social difficulties, may lead to low self-esteem.[54] Programs should incorporate counseling, mentoring, and peer support services to address these issues.

✔        **Make use of computerized educational software.** Several computer programs are available that allow individuals at different levels to learn at their own pace with minimal supervision or support. An instructor should be available to help participants learn how to use the computer program and answer any questions that may arise. These programs also have the advantage of teaching beginning computer skills while upgrading basic skills.

✔        **Provide opportunities for skill-building after employment.** Help individuals continue to improve their skill levels after they go to work by

54. National Adult Literacy and Learning Disabilities Center, 1999a.

offering education activities in the evenings or on weekends, and at or near job sites. Working parents will be more likely to participate if child care and activities for older children are provided as well. In addition, help parents create a job advancement plan, and tailor continuing education to skills needed for advancement.

## Labor Market Strategies

Labor market strategies for individuals with very low skills or learning disabilities focus on good job-matching and providing workplace accommodations.

✔ **Match workers with jobs they can do.** Targeted job development can help individuals with low skills find better jobs than they could have on their own. Job developers should carefully assess individuals' strengths and limitations to identify employment opportunities in which they can succeed.

✔ **Look for jobs that provide training and advancement opportunities.** The jobs that participants with low skills get are likely to be the lowest paying. Where available, on-the-job training or jobs with built-in career ladders can provide opportunities for those who enter the workforce with low skill levels to move ahead.

✔ **Promote workplace literacy services.** Target job development efforts to take advantage of literacy services already provided by employers, and partner with employers to provide literacy services at the worksite. Employers may be more eager to partner in workplace literacy instruction when that instruction is available to all their employees.

✔ **Identify workplace accommodations.** Minor accommodations can often substantially improve individuals' ability to perform a job. People with diagnosed learning disabilities are covered under the ADA, and employers are required to provide reasonable accommodations in any testing required for the job as well as on the job. These might include: [55]

▶ For individuals who have difficulty reading and writing, use graphics to explain tasks, and allow extra time for tasks.

▶ For individuals who have trouble managing time and following directions, break down large tasks into smaller ones, and provide step-by-step directions.

▶ For individuals who have difficulty understanding language, maintain eye contact during conversations, and have them restate instructions.

▶ For individuals who have trouble understanding and organizing visual information, use color-coded files, and keep the work area organized.

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55. National Center for Learning Disabilities, cited in Business Publishers, 1999.

✔ **Teach individuals how to advocate for themselves.** Employees need to understand the nature of their strengths and limitations and be able to explain them to employers. Those with learning disabilities should feel comfortable asking for accommodations and should be prepared with strategies to alleviate any concerns and misconceptions held by employers and coworkers.

## Staff Development and Interagency Partnerships

Oklahoma's Adult Education and Literacy program[56] includes staff training in:

▶ improving awareness and understanding of adults with learning disabilities and recognizing the characteristics of learning disabilities

▶ recognizing self-esteem and social skill issues and providing ways to foster development in these areas

▶ understanding the differences among screening, assessment, and diagnosis and being able to apply appropriate screening

▶ using specific techniques for instructing individuals who may have learning disabilities

▶ identifying resources that are available in the community for adults with disabilities and facilitating access to those resources

Other areas of training might include the legal requirements of the ADA as they pertain to individuals with learning disabilities, and workplace challenges and accommodations for individuals with low skill levels and/or learning disabilities. A comprehensive resource for training is *Bridges to Practice*, a project of the National Institute for Literacy. This five-part guidebook, designed for literacy practitioners serving adults with learning disabilities, provides information on legal issues, screening for learning disabilities, selection of curricula, and effective instructional methods.[57]

State and local efforts to assist job seekers with low basic skills and learning disabilities frequently involve partnerships with local education departments, community colleges and universities, vocational rehabilitation agencies, literacy providers, and employers. In implementing its learning disabilities initiative, Kansas found that some areas of the state lacked a sufficient number of psychologists who were qualified to diagnose learning disabilities. Solutions included contracting with school district psychologists to perform the function in their off-hours and using graduate psychology students working under the guidance of certified professors.

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56. U.S. Department of Education and the National Institute for Literacy, 1999.
57. National Adult Literacy and Learning Disabilities Center, 1999b.

## Best Practices

✔ Serve individuals with very low basic skills and/or learning disabilities in the context of a strong employment program, characterized by the best practices presented in Section 9.

✔ Clearly define individual expectations for skill-building, related directly to the goal of employment.

✔ Offer students choices about what and how they learn. The first will enhance their motivation; the second will personalize learning to meet their needs.

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**Box 19**

**Program Examples: Very Low Basic Skills**

**The Center for Employment Training (CET)**, headquartered in San Jose, California, integrates basic skills with hands-on job skills training so that students immediately experience success and begin to move toward employment. CET's students are individuals with low incomes and low skills who have multiple barriers to success. The program does not screen out any potential participants based on educational attainment or test scores, but does use testing to determine the starting point for services. Training is open-entry and open-exit and is highly individualized so that students can learn at their own pace. Any remedial instruction for English, math, or literacy skills is provided in the context of job training. Support services and life skills are also provided.

**Chicago Commons Employment Training Center (ETC)** is a welfare-to-work program located in Chicago's West Humboldt Park neighborhood. The program assists both TANF and non-TANF recipients to achieve their employment, education, and family goals. The ETC model begins with an intensive assessment, followed by skills development, vocational training, and employment. The six-month program includes basic literacy/numeracy, English as a Second Language (ESL), GED preparation, and computer literacy, integrated with family literacy and workplace exposure. ETC participants are offered lifetime career advancement services.

**Des Plaines, Illinois, TANF Special Learning Needs Employment/Vocational Training Project** combines intensive academic and life skills classes, job shadowing, unpaid internships, and mentoring. The Adult Learning Resource Center, located in Des Plaines, provides training for intake workers, employment and training specialists, testers, and instructors. The local welfare office is responsible for intake and initial screening. Adult education instructors incorporate teaching strategies for memory, visual, auditory, organization, and attention disabilities. The program targets individual job search to jobs that emphasize individuals' particular motor, reading, or listening skills.

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✔   Integrate basic skills with other employment activities, including job search, job readiness, and training.

✔   Open up access to education, training, and employment opportunities to individuals with low skills.

✔   Help individuals understand their strengths and limitations so that they can advocate for themselves and ask for needed accommodations.

# 17. Language Barriers

## Overview of the Issue

In some communities, non-English speakers constitute a large proportion of individuals on welfare. In Los Angeles, for example, 20 percent of single parents and 50 percent of the heads of two-parent families who enter the county's welfare-to-work program do not speak or understand English. In the past, these individuals would have been referred to English as a Second Language (ESL) classes, where they likely would have stayed for several years. However, with time limits and the national shift to a work first approach, employment programs face the challenge of helping those with limited English skills to get jobs quickly, while also helping them improve their English proficiency as a strategy for longer-term job advancement.

Individuals with language barriers often face other employment barriers as well, including discrimination in hiring. Cultural differences, as well as miscommunication caused by language difficulties, can result in misunderstandings and conflicts between employees and their supervisors, coworkers, or customers. In addition, many non-English speakers who enter employment programs had low levels of education in their native countries. Finally, cultural attitudes in some communities may oppose women working outside the home. These can cause family difficulties for households that are called in to participate in welfare-to-work activities.

At the same time, non-English speakers often enter employment programs highly motivated and eager to work. Cultural work ethics can be very strong, and many participants are interested in quickly entering the labor market. In addition, participants may have higher skill levels in their native language or in job-related skills. Requiring participation in ESL before providing job search assistance may therefore contradict participants' own interests as well.

While language barriers may not preclude employment, they do limit individuals' options. Furthermore, jobs that do not require much communication tend to be very low-paying and physically demanding, such as housekeeping and agriculture-related work. Programs may find that participants who are fairly recent immigrants may be more willing than native Americans to take low-paying jobs. However, these jobs will not move families out of poverty. English

language skills will likely be needed to help these workers advance to better jobs.

Programs that have provided employment-related services to individuals with language barriers have found that these individuals can be as successful as — or even more successful than — English-speaking participants. An evaluation of the welfare-to-work program in Los Angeles found the largest increases in employment and earnings for Asians and Hispanics.[58]

## Screening and Assessment

Individuals with language barriers will likely be identified during the initial intake process, based on their need for bilingual case management. Additional screening and assessment might be used to determine:

▶ English-language skill levels in reading, writing, and communication

▶ skill levels in individuals' native language

▶ any specialized skills or training that individuals might have

▶ participants' expectations in terms of employment

▶ family or cultural issues that relate to employment

This information can be useful in tailoring job search activities and matching participants with jobs. The experience of Los Angeles, however, suggests that the best way to determine whether individuals with limited English language skills are able to find employment is not through testing and assessment, but through actual job search efforts.[59]

## Service Strategies

Service strategies for individuals with language barriers focus on helping them build job-related English language skills and quickly move to employment.

✔ **Run job clubs in a variety of languages.** This was the focus of the welfare-to-work program in Los Angeles. After implementing job search workshops in a variety of languages, staff found that non-English speakers were often very motivated to work and able to successfully find jobs.[60]

✔ **Teach the basic language skills needed to get and keep a job.** Make sure that individuals have at least the skills needed to conduct a job search and maintain employment. Job-getting skills include reading want ads, negotiating local transportation systems, completing job applications, giving personal information orally, and asking and answering questions. Job-keeping skills

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58. Freedman, Mitchell, and Navarro, 1999.
59. Weissman, 1997.
60. Weissman, 1997.

include following oral and written directions, asking questions, understanding technical terms used in the job, and understanding safety information.[61]

✔ **Redesign ESL classes to be employment-focused.** Teach language skills that are directly relevant to a workplace context. For example, work-related materials such as instructions for operating equipment or job descriptions can be used to practice reading skills. Role-playing exercises and practice interviews can teach communication skills. Making the learning more relevant to employment can also increase students' motivation and improve participation.

✔ **Integrate ESL, soft-skills, and vocational training.** Teaching soft skills at the same time as language skills can help prepare participants for work once they have developed sufficient language skills. Combining ESL instruction with vocational training can both break down entry barriers to participation in training and ensure that participants learn language skills specific to the job for which they are preparing.

✔ **Be aware of cultural differences that can impact employment.** In job-readiness activities, recognize and address cultural differences that might affect job performance and retention, including different attitudes and behavioral expectations. In post-employment follow-up, be especially sensitive to any conflicts that may arise with supervisors or coworkers stemming from cultural differences.

✔ **Connect individuals with ESL instruction after they are working.** Even if individuals are able to find jobs that require only limited English language skills, job advancement is likely to require higher skills. To promote post-employment learning, look for ESL classes that are offered in the evening and on weekends and organizations that provide one-on-one tutoring. Where possible, tailor ongoing ESL instruction to individuals' specific advancement goals.

## Labor Market Strategies

Labor market strategies for individuals with language barriers focus on helping individuals identify jobs for which their language skills are sufficient.

✔ **Identify jobs for which language is not a barrier.** Language skills may not be critical to doing certain jobs, such as those involving independent work, accounting or bookkeeping skills, or physical labor. In addition, in communities with large non-English-speaking populations, participants may be able to get jobs with businesses where their native language is spoken.

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61. Grognet, 1997.

✔ **Identify jobs for which another language is an asset.** For some jobs, speaking another language may be an asset in hiring. These might include tourist information, foreign-language customer service positions, and jobs where other crew members speak the same language. In these circumstances, work interactions — whether with customers or coworkers — take place in a language other than English.

✔ **Use relationships with employers to facilitate the interview process.** Some participants may have relatively high levels of skills despite language barriers. For some occupations, such as those involving accounting skills, language barriers may be more of a problem in interviewing than in actually doing the job. Job developers can play a role in facilitating hiring when a skills match is identified.

✔ **Identify the language needs of each job.** In order to effectively match individuals with jobs, as well as to design workplace-focused ESL classes, programs need to understand the specific language needs associated with different jobs. To do this, program staff should speak not only with employers and supervisors, but also with workers doing the same or similar jobs.

✔ **Look for jobs with a bilingual supervisor.** For some jobs, language barriers may not be an issue for workers so long as their immediate supervisor speaks their language. Supervisors from participants' native region may also be able to provide support around cultural and workplace issues.

✔ **Use job coaches to facilitate the transition to work.** Bilingual job coaches can provide additional support and instruction to workers during their first days or weeks at a job. The job coaches can make sure that workers understand their job tasks, provide clarification if workers or supervisors have any questions or concerns, and intercede if language problems arise elsewhere at the worksite.

✔ **Promote worksite ESL instruction.** Because of increasing skill needs and the increased numbers of immigrant workers, many companies have initiated English-language programs at their worksites. Employers may be open to providing space for classes and even release time for workers to attend them. Employer-sponsored ESL classes tend to be tailored to the skills needed for those jobs, and employers may have specific outcome expectations in terms of increased skills or improved productivity.[62]

## Staff Development and Interagency Partnerships

Perhaps the most important staffing requirement for working with individuals with limited English language skills is to make sure that at least one staff mem-

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62. Isserlis, 1991.

ber speaks each participant's language. This is essential in order for individuals to be able to participate in the program. Even if no other language-specific services are available, the staff member can work individually with the participant — and in cooperation with job developers and other staff — to guide the participant through job search and other activities.

When a core number of participants share the same language, employment programs should hire other bilingual staff, in order to provide more activities in participants' native language. These include case managers, job club facilitators, job developers, and job coaches.

Staff training related to individuals with language barriers should include:

▶ clarifying the employment expectations for individuals with language barriers, including the extent to which ESL will be offered

▶ knowing what bilingual services are available through the program and in the community to support participants as they move to work

▶ being aware of and sensitive to cultural attitudes and backgrounds of participants

ESL programs and other literacy providers are likely to be key partners in serving this group. However, adult literacy providers may have longer-term education-focused goals that can seem at odds with the short-term workforce preparation goals of employment programs. In addition, some participants may have very limited education, even in their native language, and it may take many years for them to master a second language. Building partnerships with ESL providers may therefore involve the development of common goals and tailored curricula for serving this group of welfare recipients.

In addition, programs should look to other community organizations that serve non-English speakers, including health care providers, immigrant assistance programs, and social services agencies in immigrant communities. These providers can help meet any other needs that participants might have in an atmosphere in which they are comfortable.

## Best Practices

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|---|---|
| ✔ | Serve individuals with language barriers in the context of a strong employment program, characterized by the best practices presented in Section 9. |
| ✔ | Help individuals get jobs quickly and then improve their English language skills once they are working. |
| ✔ | Look for jobs in which supervisors and coworkers speak the workers' language and for jobs located in communities where that language is spoken. |
| ✔ | Redesign ESL programs to focus on workplace-related language skills, and include soft-skills training. |

✔ Combine classroom-based ESL instruction with vocational training or work experience.

✔ Encourage employers to provide ESL instruction at the worksite.

✔ Understand the language skills needed for each job in order to provide customized instruction and match individuals with jobs.

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**Box 20**

**Program Examples: Language Barriers**

**El Paso Community College-Community Education Program (EPCC-CEP)** uses an ESL literacy instructional model that teaches language in context rather than through lectures on isolated grammar or other discrete language skills. Each class begins with a discussion on a topic such as health, career, buying a home, or current events. Reading and writing activities are directly related to the day's topic. Outside-the-classroom activities — such as field trips to health clinics, museums, the grocery store, or the library — give students opportunities to practice their new language skills. Contextual teaching allows students to quickly use what they learn in their everyday lives, which can have an impact on the quality of their lives and can motivate them to continue attending the classes.

**Hmong American Partnership (HAP)** provides social services to Hmong families in Minneapolis and St. Paul, Minnesota. HAP was established in 1990 as a refugee organization directed and operated by former refugee entrants. In providing employment assistance, staff assess each job seeker's language ability, job experience, skills, interests, and barriers to employment. A full-time job developer works with local businesses to find job openings and, in some cases, create culturally specific on-the-job training. Post-employment services include cultural training for employers, job coaching, worksite translation, and cultural conflict resolution. HAP's Workplace English program includes work-focused English and workplace cultural orientation geared to adults with no prior exposure to the American workplace.

**The Rainier Vista Jobs-Plus program** provides employment-related services to residents of a public housing community in Seattle, Washington. Residents are ethnically and culturally diverse and speak more than 20 different languages. Through a contract with the neighboring Refugee Women's Alliance, four bilingual, bicultural job coaches work with limited English speakers, and a range of vocational ESL programs are offered at different levels. Translation services are available if staff do not speak a resident's language. Rainier Vista's resident organization was a key partner in developing the program and helped ensure that services were designed to be accessible to all groups of residents.

# Appendix

## Programs, Organizations, and Contact Information

The following contact information for many of the programs, organizations, and government agencies mentioned in the guide is intended to help readers learn more about the approaches discussed.

**Anne Arundel County, Department of Social Services:** 80 West Street, Annapolis, MD 21401; (410) 269-4500; www.dhr.state.md.us/annearundel.htm

**California Institute for Mental Health:** 2030 J Street, Sacramento, CA 95814; (916) 556-3480; www.cimh.org

**CASAWORKS:** National Center on Addiction and Substance Abuse at Columbia University, 633 Third Avenue, 19th floor, New York, NY 10017-6706; (212) 841-5200; www.casacolumbia.org

**Center on Budget and Policy Priorities (CBPP):** 820 First Street NE, Suite 510, Washington, DC 20002; (202) 408-1080; www.cbpp.org

**Center for Employment Opportunities:** 32 Broadway, New York, NY 10004; (212) 422-4430; www.ceoworks.org

**Center for Employment Training (CET):** 701 Vine Street, San Jose, CA 95110; (408) 534-5360

**Center for Law and Social Policy (CLASP):** 1616 P Street NW, Washington, DC 20036; (202) 328-5140; www.clasp.org

**Center for Psychiatric Rehabilitation, Boston University:** 940 Commonwealth Avenue West, Boston, MA 02215; (617) 353-3549; www.bu.edu/sarpsych

**Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services:** 5600 Fishers Lane, Room 12-105 Parklawn Building, Rockville, MD 20857. For information and publications, call (800) 729-6686; for helpline, call (800) 662-HELP; www.samhsa.gov

**Center Point Women and Children's Program:** 809 B Street, San Rafael, California 94901; (415) 454-7777

**Chicago Commons Employment Training Center (ETC):** 1633 North Hamlin Avenue, Chicago, IL 60647; (773) 772-0900

**Cleveland Works:** 812 Huron Road SE, Suite 800, Cleveland, OH 44115; (216) 589-9675

**Connecticut Reach for Jobs First:** Connecticut Department of Social Services, 25 Sigourney Street, Hartford, CT 06105-5033; (800) 842-1508 or (860) 424-5346; www.dss.state.ct.us/contact.htm

**Des Plaines, Illinois, TANF Special Learning Needs Employment/ Vocational Training Project:** Adult Learning Resource Center, 1855 Mount Prospect Road, Des Plaines, IL 60018; (847) 803-3535; www.thecenterweb.org

**El Paso Community College-Community Education Program:** PO Box 20500, El Paso, TX 79998; (915) 831-2000; www.epcc.edu

**Employee Assistance Professionals Association:** 2101 Wilson Boulevard, Suite 500, Arlington, VA 22201; (703) 387-1000; www.eap-association.com

**Federal Bonding Program, The McLaughlin Company:** 1725 DeSales Street NW, Suite 700, Washington, DC 20036; (800) 233-2258; www.ttrc.doleta.gov/onestop/fbp.htm

**Goodwill Industries:** National Office, 9200 Rockville Pike, Bethesda, MD 20814; (301) 530-6500; www.goodwill.org; Greater East Bay Office, 1301 30th Avenue, Oakland, CA 94601; (510) 534-6666

**Hmong American Partnership (HAP):** 1600 University Avenue, Suite 12, St. Paul, MN 55104; (657) 642-9601; www.hmong.org

**Johns Hopkins University Center for Communication Programs:** 111 Market Place, Suite 310, Baltimore, MD 21202; (410) 659-6300; www.jhuccp.org

**Kandu Industries:** 1373 South Lincoln Avenue, Holland, MI 49423; (800) 747-0718; www.kandu.org

**Kansas Department of Social and Rehabilitation Services:** For information on Kansas Learning Disability Screening: 915 Southwest Harrison, Room 681-W, Topeka, KS 66612; (785) 296-3959; www.srskansas.org

**Learning Disabilities Association of Washington:** 7819 159th Place NE, Redmond, WA 98052; (425) 882-0820

**Legal Action Center:** New York office, 153 Waverly Place, New York, NY 10014; 1-800-223-4044; Washington office, 236 Massachusetts Avenue NE, Suite 505, Washington, DC 20002; (202) 544-5478; www.lac.org

**Miami-Dade, Florida's WAGES (Work and Gain Economic Self-Sufficiency) program:** Training and Employment Council of South Florida, 3403 N.W. 82nd Avenue, Suite 300, Miami, FL 33122; (305) 594-7615

**Minnesota Family Investment Program (MFIP):** Minnesota Department of Human Services, 444 Lafayette Road, Saint Paul, MN 55155; (651) 297-3933; www.dhs.state.mn.us

**National Adult Literacy and Learning Disabilities Center:** 1825 Connecticut Avenue NW, Washington, DC 20009; (202) 884-8186, (800) 953-2553; www.ld-read.org

**National Center on Addiction and Substance Abuse at Columbia University:** see CASAWORKS

**National Center on Education Statistics, U.S. Department of Education:** 1990 K Street NW, Washington, DC 20006; (202) 502-7300; www.nces.ed.gov

**National Center for Learning Disabilities:** 381 Park Avenue South, Suite 1401, New York, NY 10016; (888) 575-7373, (212) 545-7510; www.ncld.org

**National Center on Poverty Law:** 205 West Monroe Street, Chicago, IL 60606; (312) 263-3830; www.povertylaw.org

**National Center for Research in Vocational Education:** 2030 Addison Street, Suite 500, Berkeley, CA 94720; (510) 642-4004; http://ncrve.berkeley.edu

**National Council on Disability:** 1331 F Street NW, Suite 1050, Washington, DC 20004-1107; (202) 272-2004; www.ncd.gov

**National Governors' Association:** 444 North Capital Street, Suite 267, Washington, DC 20001; (202) 624-5300; www.nga.org

**National Institute of Corrections, Office of Correctional Job Training and Placement:** 320 First Street NW, Washington, DC 20534; (800) 995-6423, (202) 307-3106; www.nicic.org

**National Institute for Literacy:** 1775 I Street NW, Suite 730, Washington, DC 20006; (202) 233-2025; www.nifl.gov

**National Institute of Mental Health:** U.S. Department of Health and Human Services, National Institute of Health, 6001 Executive Boulevard, Room 8184, MSC9663, Bethesda, MD 20892-9663; (301) 443-4513; www.nimh.nih.gov

**National Resource Center on Domestic Violence:** 6400 Flank Drive, Suite 1300, Harrisburg, PA 17112-2778; (800)-537-2238

**National Technical Assistance Center for State Mental Health Planning:** National Association of State Mental Health Program Directors, 66 Canal Center Plaza, Suite 302, Alexandria, VA 22314; (703) 739-9333; www.nasmhpd.org/ntac

**New Jersey Division of Mental Health Services:** 50 East State Street, PO Box 727, Trenton, NJ 08625; (800) 382-6717; www.state.nj.us/humanservices/dhsmhl.html

**Office of Disability Employment Policy, U.S. Department of Labor:** 1331 F Street NW, Suite 300, Washington, DC 20004; (202) 376-6200; www50.pcepd.gov/pcepd. The Job Accomodation Network has a toll-free resource for questions about job accommodations or employment-related provisions of the ADA: 1-800-526-7234

**Options/Opciones, Center for Impact Research:** 926 North Wolcott, Chicago, IL 60622; contact Rebekah Levin at (773) 533-2180; www.impactresearch.org

**Oregon Department of Human Services:** Adult and Family Services Division, 500 Summer Street NE, Salem, OR 97301; (503) 945-5601; www.afs.hr.state.or.us

**Project Match:** Erikson Institute, 420 North Wabash Avenue, Chicago, IL 60611; (312) 755-2250, ext. 4001; www.pmatch.org

**Public/Private Ventures (P/PV):** One Commerce Place, 2005 Market Street, Suite 900, Philadelphia, PA 19103; (215) 557-4400; www.ppv.org

**Rainier Vista Jobs-Plus:** 4422 Tamarack Drive South, Seattle, WA 98108; (206) 722-4010

**Safer Foundation:** 571 West Jackson Boulevard, Chicago, IL 60661; (312) 922-2200; www.safer-fnd.org

**South Forty Corporation:** 500 8th Avenue, New York, NY 10018; (212) 563-2288; http://members.aol.com/south40x

**Steps to Success:** Mount Hood Community College, 14030 Northeast Sacramento Street, Portland, OR 97230; contact Kim Freeman, Regional Director, at (503) 256-0432 or freemank@mhcc.cc.or.us. Portland Community College, 5600 Northeast 42nd Avenue, Portland OR 97211; contact Pamela Murray, Regional Director, at (503) 788-6287 or pmurray@pcc.edu

**STRIVE:** Chicago STRIVE, 4910 South King Drive, Chicago, IL 60615; (773) 624-9700; national STRIVE, 1820 Lexington Avenue, New York, NY 10029; (212) 360-1100; www.strivecentral.com

**U.S. Department of Health and Human Services:** Administration for Children and Families, Office of Family Assistance, 370 L'Enfant Promenade SW, Washington, DC 20447; (202) 401-4849; www.acf.dhhs.gov/programs/ofa

**U.S. Department of Justice:** Office of Justice Programs, 810 Seventh Street NW, Washington, DC 20531; (202) 307-0703; www.ojp.usdoj.gov

**U.S. Department of Labor:** Employment and Training Administration, Office of Public Affairs, 200 Constitution Avenue NW, Washington, DC 20210; (202) 219-6871; www.doleta.gov

**U.S. Equal Employment Opportunity Commission (EEOC):** 1-800-669-4000; www.eeoc.gov

**Urban Institute:** 2100 M Street NW, Washington, DC 20037; (202) 833-7200; www.urban.org

**Utah State Department of Workforce Services:** 140 East 300 South, 5th Floor, Salt Lake City, UT 84111; (801) 526-7966; www.dws.state.ut.us

**Vermont Department of Employment and Training, Welfare-to-Work Program:** PO Box 4088, Montpelier, VT 05601-0488; (802) 828-4157; www.det.state.vt.us

**Vermont's Welfare Restructuring Project (WRP):** Vermont Department of Social Welfare, 103 South Main Street, Waterbury, VT 05671-1201; (802) 241-2800; www.dsw.state.vt.us

**Virginia Disabilities Initiative:** Virginia Department of Social Services, 730 East Broad Street, Richmond, VA 23219; (804) 692-1900; www.dss.state.va.us

**Washington State Department of Social and Health Services:** PO Box 45130, Olympia, WA 98504-5130; (206) 760-2393; www.wa.gov/dshs

**Welfare Information Network (WIN):** 131 G Street NW, Suite 820, Washington, DC 20005; (202) 628-5790; www.welfareinfo.org

**Welfare-to-Work Tax Credit and the Work Opportunity Tax Credit (WOTC):** For information, see http://workforcesecurity.doleta.gov/employ/WOTC.asp

**Wisconsin's Pathways to Independence:** Department of Health and Family Services, Office of Strategic Finance CDSD, Pathways to Independence, PO Box 7850, Madison WI 53707-7850; www.dhfs.state.wi.us/wipathways/index.htm

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# Recent Publications
# on MDRC Projects

## Reforming Welfare and Making Work Pay

### ReWORKing Welfare: Technical Assistance for States and Localities

A multifaceted effort to assist states and localities in designing and implementing their welfare reform programs. The project includes a series of "how-to" guides, conferences, briefings, and customized, in-depth technical assistance.

*After AFDC: Welfare-to-Work Choices and Challenges for States.* 1997. Dan Bloom.

*Changing to a Work First Strategy: Lessons from Los Angeles County's GAIN Program for Welfare Recipients.* 1997. Evan Weissman.

*Work First: How to Implement an Employment-Focused Approach to Welfare Reform.* 1997. Amy Brown.

*Business Partnerships: How to Involve Employers in Welfare Reform.* 1998. Amy Brown, Maria Buck, Erik Skinner.

*Learnfare: How to Implement a Mandatory Stay-in-School Program for Teenage Parents on Welfare.* 1998. David Long, Johannes Bos.

*Promoting Participation: How to Increase Involvement in Welfare-to-Work Activities.* 1999. Gayle Hamilton, Susan Scrivener.

*Encouraging Work, Reducing Poverty: The Impact of Work Incentive Programs.* 2000. Gordon Berlin.

*Steady Work and Better Jobs: How to Help Low-Income Parents Sustain Employment and Advance in the Workforce.* 2000. Julie Strawn, Karin Martinson.

*Beyond Work First: How to Help Hard-to-Employ Individuals Get Jobs and Succeed in the Workforce.* 2001. Amy Brown.

### Project on Devolution and Urban Change

A multi-year study in four major urban counties — Cuyahoga County, Ohio (which includes the city of Cleveland), Los Angeles, Miami-Dade, and Philadelphia — that examines how welfare reforms are being implemented and affect poor people, their neighborhoods, and the institutions that serve them.

*Big Cities and Welfare Reform: Early Implementation and Ethnographic Findings from the Project on Devolution and Urban Change.* 1999. Janet Quint, Kathryn Edin, Maria Buck, Barbara Fink, Yolanda Padilla, Olis Simmons-Hewitt, Mary Valmont.

*Food Security and Hunger in Poor, Mother-Headed Families in Four U.S. Cities.* 2000. Denise Polit, Andrew London, John Martinez.

Note: For works not published by MDRC, the publisher's name is shown in parentheses. A complete publications list is available from MDRC and on its Web site (www.mdrc.org), which also contains copies of MDRC's publications.

*Assessing the Impact of Welfare Reform on Urban Communities:The Urban Change Project and Methodological Considerations.* 2000. Charles Michalopoulos, Johannes Bos, Robert Lalonde, Nandita Verma.

*Post-TANF Food Stamp and Medicaid Benefits: Factors That Aid or Impede Their Receipt.* 2001. Janet Quint, Rebecca Widom.

*Social Service Organizations and Welfare Reform.* 2001. Barbara Fink, Rebecca Widom.

### Next Generation Project

A collaboration among researchers at MDRC and several leading research institutions focused on studying the effects of welfare, antipoverty, and employment policies on children and families.

*How Welfare and Work Policies Affect Children:A Synthesis of Research.* 2001. Pamela Morris, Aletha Huston, Greg Duncan, Danielle Crosby, Johannes Bos.

*How Welfare and Work Policies Affect Employment and Income:A Synthesis of Research.* 2001. Dan Bloom, Charles Michalopoulos.

## Time Limits

### Florida's Family Transition Program

An evaluation of Florida's initial time-limited welfare program, which includes services, requirements, and financial work incentives intended to reduce long-term welfare receipt and help welfare recipients find and keep jobs.

*The Family Transition Program:An Early Implementation Report on Florida's Time-Limited Welfare Initiative.* 1995. Dan Bloom.

*The Family Transition Program: Implementation and Early Impacts of Florida's Initial Time-Limited Welfare Program.* 1997. Dan Bloom, James Kemple, Robin Rogers-Dillon.

*The Family Transition Program: Implementation and Interim Impacts of Florida's Initial Time-Limited Welfare Program.* 1998. Dan Bloom, Mary Farrell, James Kemple, Nandita Verma.

*The Family Transition Program: Implementationand Three-Year Impacts of Florida's Initial Time-Limited Welfare Program.* 1999. Dan Bloom, Mary Farrell, James Kemple, Nandita Verma.

*The Family Transition Program: Final Report on Florida's Initial Time-Limited Welfare Program.* 2000. Dan Bloom, James Kemple, Pamela Morris, Susan Scrivener, Nandita Verma, Richard Hendra.

### Cross-State Study of Time-Limited Welfare

An examination of the implementation of some of the first state-initiated time-limited welfare programs.

*Implementing Time-Limited Welfare: Early Experiences in Three States.* 1995. Dan Bloom, David Butler.

*The View from the Field:As Time Limits Approach, Welfare Recipients and Staff Talk About Their Attitudes and Expectations.* 1997. Amy Brown, Dan Bloom, David Butler.

*Welfare Time Limits:An Interim Report Card.* 1999. Dan Bloom.

## Connecticut's Jobs First Program

An evaluation of Connecticut's statewide time-limited welfare program, which includes financial work incentives and requirements to participate in employment-related services aimed at rapid job placement. This study provides some of the earliest information on the effects of time limits in major urban areas.

*Early Data on the Implementation of Connecticut's Jobs First Program.* 1997. Dan Bloom, Mary Andes.

*Jobs First: Early Implementation of Connecticut's Welfare Reform Initiative.* 1998. Dan Bloom, Mary Andes, Claudia Nicholson.

*Connecticut Post-Time Limit Tracking Study: Three-Month Survey Results.* 1998. Jo Anna Hunter-Manns, Dan Bloom, Richard Hendra, Johanna Walter.

*Connecticut Post-Time Limit Tracking Study: Six-Month Survey Results.* 1999. Jo Anna Hunter-Manns, Dan Bloom.

*Jobs First: Implementation and Early Impacts of Connecticut's Welfare Reform Initiative.* 2000. Dan Bloom, Laura Melton, Charles Michalopoulos, Susan Scrivener, Johanna Walter.

## Vermont's Welfare Restructuring Project

An evaluation of Vermont's statewide welfare reform program, which includes a work requirement after a certain period of welfare receipt, and financial work incentives.

*WRP: Implementation and Early Impacts of Vermont's Welfare Restructuring Project.* 1998. Dan Bloom, Charles Michalopoulos, Johanna Walter, Patricia Auspos.

*Forty-Two Month Impacts of Vermont's Welfare Restructuring Project.* 1999. Richard Hendra, Charles Michalopoulos.

*WRP: Key Findings from the Forty-Two-Month Client Survey.* 2000. Dan Bloom, Richard Hendra, Charles Michalopoulos.

## *Financial Incentives*

*Encouraging Work, Reducing Poverty: The Impact of Work Incentive Programs.* 2000. Gordon Berlin.

## Minnesota Family Investment Program

An evaluation of Minnesota's pilot welfare reform initiative, which aims to encourage work, alleviate poverty, and reduce welfare dependence.

*MFIP: An Early Report on Minnesota's Approach to Welfare Reform.* 1995. Virginia Knox, Amy Brown, Winston Lin.

*Making Welfare Work and Work Pay: Implementation and 18-Month Impacts of the Minnesota Family Investment Program.* 1997. Cynthia Miller, Virginia Knox, Patricia Auspos, Jo Anna Hunter-Manns, Alan Orenstein.

*Reforming Welfare and Rewarding Work: Final Report on the Minnesota Family Investment Program.* 2000:

    *Volume 1: Effects on Adults.* Cynthia Miller, Virginia Knox, Lisa Gennetian, Martey Dodoo, Jo Anna Hunter, Cindy Redcross.

    *Volume 2: Effects on Children.* Lisa Gennetian, Cynthia Miller.

*Reforming Welfare and Rewarding Work: A Summary of the Final Report on the Minnesota Family Investment Program.* 2000. Virginia Knox, Cynthia Miller, Lisa Gennetian.

*Final Report on the Implementation and Impacts of the Minnesota Family Investment Program in Ramsey County.* 2000. Patricia Auspos, Cynthia Miller, Jo Anna Hunter.

### New Hope Project

A test of a community-based, work-focused antipoverty program and welfare alternative operating in Milwaukee.

*The New Hope Offer: Participants in the New Hope Demonstration Discuss Work, Family, and Self-Sufficiency.* 1996. Dudley Benoit.

*Creating New Hope: Implementation of a Program to Reduce Poverty and Reform Welfare.* 1997. Thomas Brock, Fred Doolittle, Veronica Fellerath, Michael Wiseman.

*Who Got New Hope?* 1997. Michael Wiseman.

*An Early Look at Community Service Jobs in the New Hope Demonstration.* 1998. Susan Poglinco, Julian Brash, Robert Granger.

*New Hope for People with Low Incomes: Two-Year Results of a Program to Reduce Poverty and Reform Welfare.* 1999. Johannes Bos, Aletha Huston, Robert Granger, Greg Duncan, Thomas Brock, Vonnie McLoyd.

### Canada's Self-Sufficiency Project

A test of the effectiveness of a temporary earnings supplement on the employment and welfare receipt of public assistance recipients. Reports on the Self-Sufficiency Project are available from: Social Research and Demonstration Corporation (SRDC), 275 Slater St., Suite 900, Ottawa, Ontario K1P 5H9, Canada. Tel.: 613-237-4311; Fax: 613-237-5045. In the United States, the reports are also available from MDRC.

*Creating an Alternative to Welfare: First-Year Findings on the Implementation, Welfare Impacts, and Costs of the Self-Sufficiency Project* (Social Research and Demonstration Corporation [SRDC]). 1995. Tod Mijanovich, David Long.

*The Struggle for Self-Sufficiency: Participants in the Self-Sufficiency Project Talk About Work, Welfare, and Their Futures* (SRDC). 1995. Wendy Bancroft, Sheila Currie Vernon.

*Do Financial Incentives Encourage Welfare Recipients to Work? Initial 18-Month Findings from the Self-Sufficiency Project* (SRDC). 1996. David Card, Philip Robins.

*When Work Pays Better Than Welfare: A Summary of the Self-Sufficiency Project's Implementation, Focus Group, and Initial 18-Month Impact Reports* (SRDC). 1996.

*How Important Are "Entry Effects" in Financial Incentive Programs for Welfare Recipients? Experimental Evidence from the Self-Sufficiency Project* (SRDC). 1997. David Card, Philip Robins, Winston Lin.

*Do Work Incentives Have Unintended Consequences? Measuring "Entry Effects" in the Self-Sufficiency Project* (SRDC). 1998. Gordon Berlin, Wendy Bancroft, David Card, Winston Lin, Philip Robins.

*When Financial Incentives Encourage Work: Complete 18-Month Findings from the Self-Sufficiency Project* (SRDC). 1998. Winston Lin, Philip Robins, David Card, Kristen Harknett, Susanna Lui-Gurr.

*Does SSP Plus Increase Employment? The Effect of Adding Services to the Self-
Sufficiency Project's Financial Incentives* (SRDC). 1999. Gail Quets, Philip Robins,
Elsie Pan, Charles Michalopoulos, David Card.

*When Financial Work Incentives Pay for Themselves: Early Findings from the Self-
Sufficiency Project's Applicant Study* (SRDC). 1999. Charles Michalopoulos, Philip
Robins, David Card.

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Michalopoulos, David Card, Lisa Gennetian, Kristen Harknett, Philip K. Robins.

*The Self-Sufficiency Project at 36 Months: Effects on Children of a Program That
Increased Parental Employment and Income* (SRDC). 2000. Pamela Morris, Charles
Michalopoulos.

## *Mandatory Welfare Employment Programs*

### National Evaluation of Welfare-to-Work Strategies

Conceived and sponsored by the U.S. Department of Health and Human Services, with
support from the U.S. Department of Education, this is the largest-scale evaluation
ever conducted of different strategies for moving people from welfare to employ-
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*Adult Education for People on AFDC: A Synthesis of Research* (U.S. Department of
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Program for Welfare Recipients.* 1997. Evan Weissman.

*Evaluating Two Welfare-to-Work Program Approaches: Two-Year Findings on the
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(HHS/ED). 1997. Gayle Hamilton, Thomas Brock, Mary Farrell, Daniel Friedlander,
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Portland (Oregon) Welfare-to-Work Program* (HHS/ED). 1998. Susan Scrivener,
Gayle Hamilton, Mary Farrell, Stephen Freedman, Daniel Friedlander, Marisa Mitchell,
Jodi Nudelman, Christine Schwartz.

*Do Mandatory Welfare-to-Work Programs Affect the Well-Being of Children? A
Synthesis of Child Research Conducted as Part of the National Evaluation of
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### Los Angeles's Jobs-First GAIN Program

An evaluation of Los Angeles's refocused GAIN (welfare-to-work) program, which emphasizes rapid employment. This is the first in-depth study of a full-scale "work first" program in one of the nation's largest urban areas.

*Changing to a Work First Strategy: Lessons from Los Angeles County's GAIN Program for Welfare Recipients.* 1997. Evan Weissman.

*The Los Angeles Jobs-First GAIN Evaluation: Preliminary Findings on Participation Patterns and First-Year Impacts.* 1998. Stephen Freedman, Marisa Mitchell, David Navarro.

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### Teen Parents on Welfare

*Teenage Parent Programs: A Synthesis of the Long-Term Effects of the New Chance Demonstration, Ohio's Learning, Earning, and Parenting (LEAP) Program, and the Teenage Parent Demonstration (TPD).* 1998. Robert Granger, Rachel Cytron.

### Ohio's LEAP Program

An evaluation of Ohio's Learning, Earning, and Parenting (LEAP) Program, which uses financial incentives to encourage teenage parents on welfare to stay in or return to school.

*LEAP: Final Report on Ohio's Welfare Initiative to Improve School Attendance Among Teenage Parents.* 1997. Johannes Bos, Veronica Fellerath.

### New Chance Demonstration

A test of a comprehensive program of services that seeks to improve the economic status and general well-being of a group of highly disadvantaged young women and their children.

*New Chance: Final Report on a Comprehensive Program for Young Mothers in Poverty and Their Children.* 1997. Janet Quint, Johannes Bos, Denise Polit.

*Parenting Behavior in a Sample of Young Mothers in Poverty: Results of the New Chance Observational Study.* 1998. Martha Zaslow, Carolyn Eldred, editors.

### *Focusing on Fathers*

#### Parents' Fair Share Demonstration

A demonstration for unemployed noncustodial parents (usually fathers) of children on welfare. PFS aims to improve the men's employment and earnings, reduce child poverty by increasing child support payments, and assist the fathers in playing a broader constructive role in their children's lives.

*Low-Income Parents and the Parents' Fair Share Demonstration.* 1996. Earl Johnson, Fred Doolittle.

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*The Responsible Fatherhood Curriculum.* 2000. Eileen Hayes, with Kay Sherwood.

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*Can They All Work? A Study of the Employment Potential of Welfare Recipients in a Welfare-to-Work Program.* 1995. James Riccio, Stephen Freedman.

*Florida's Project Independence: Benefits, Costs, and Two-Year Impacts of Florida's JOBS Program.* 1995. James Kemple, Daniel Friedlander, Veronica Fellerath.

*From Welfare to Work Among Lone Parents in Britain: Lessons for America.* 1996. James Riccio.

## Education Reform

#### Career Academies

The largest and most comprehensive evaluation of a school-to-work initiative, this study examines a promising approach to high school restructuring and the school-to-work transition.

*Career Academies: Early Implementation Lessons from a 10-Site Evaluation.* 1996. James Kemple, JoAnn Leah Rock.

*Career Academies: Communities of Support for Students and Teachers — Emerging Findings from a 10-Site Evaluation.* 1997. James Kemple.

*Career Academies: Building Career Awareness and Work-Based Learning Activities Through Employer Partnerships.* 1999. James Kemple, Susan Poglinco, Jason Snipes.

*Career Academies: Impacts on Students' Engagement and Performance in High School.* 2000. James Kemple, Jason Snipes.

### Project GRAD

This evaluation examines Project GRAD, an education initiative targeted at urban schools and combining a number of proven or promising reforms.

*Building the Foundation for Improved Student Performance: The Pre-Curricular Phase of Project GRAD Newark.* 2000. Sandra Ham, Fred C. Doolittle, Glee Ivory Holton.

### LILAA Initiative

This study of the Literacy in Libraries Across America (LILAA) initiative explores the efforts of five adult literacy programs in public libraries to improve learner persistence.

*So I Made Up My Mind: Introducing a Study of Adult Learner Persistence in Library Literacy Programs.* 2000. John T. Comings, Sondra Cuban.

### Project Transition

A demonstration program that tested a combination of school-based strategies to facilitate students' transition from middle school to high school.

*Project Transition: Testing an Intervention to Help High School Freshmen Succeed.* 1999. Janet Quint, Cynthia Miller, Jennifer Pastor, Rachel Cytron.

### Equity 2000

Equity 2000 is a nationwide initiative sponsored by the College Board to improve low-income students' access to college. The MDRC paper examines the implementation of Equity 2000 in Milwaukee Public Schools.

*Getting to the Right Algebra: The Equity 2000 Initiative in Milwaukee Public Schools.* 1999. Sandra Ham, Erica Walker.

### School-to-Work Project

A study of innovative programs that help students make the transition from school to work or careers.

*Home-Grown Lessons: Innovative Programs Linking School and Work* (Jossey-Bass Publishers). 1995. Edward Pauly, Hilary Kopp, Joshua Haimson.

*Home-Grown Progress: The Evolution of Innovative School-to-Work Programs.* 1997. Rachel Pedraza, Edward Pauly, Hilary Kopp.

## Employment and Community Initiatives

### Connections to Work Project

A study of local efforts to increase competition in the choice of providers of employment services for welfare recipients and other low-income populations. The project also provides assistance to cutting-edge local initiatives aimed at helping such people access and secure jobs.

*Tulsa's IndEx Program: A Business-Led Initiative for Welfare Reform and Economic Development.* 1997. Maria Buck.

*Washington Works: Sustaining a Vision of Welfare Reform Based on Personal Change, Work Preparation, and Employer Involvement.* 1998. Susan Gooden.

*Cost Analysis Step by Step: A How-to Guide for Planners and Providers of Welfare-to-Work and Other Employment and Training Programs.* 1998. David Greenberg, Ute Appenzeller.

*Designing and Administering a Wage-Paying Community Service Employment Program Under TANF: Some Considerations and Choices.* 1999. Kay Sherwood.

*San Francisco Works: Toward an Employer-Led Approach to Welfare Reform and Workforce Development.* 2000. Steven Bliss.

### Jobs-Plus Initiative

A multi-site effort to greatly increase employment among public housing residents.

*A Research Framework for Evaluating Jobs-Plus, a Saturation and Place-Based Employment Initiative for Public Housing Residents.* 1998. James Riccio.

*Mobilizing Public Housing Communities for Work: Origins and Early Accomplishments of the Jobs-Plus Demonstration.* 1999. James Riccio.

*Building a Convincing Test of a Public Housing Employment Program Using Non-Experimental Methods: Planning for the Jobs-Plus Demonstration.* 1999. Howard Bloom.

*Jobs-Plus Site-by-Site: An Early Look at Program Implementation.* 2000. Edited by Susan Philipson Bloom with Susan Blank.

### Section 3 Public Housing Study

An examination of the effectiveness of Section 3 of the 1968 Housing and Urban Development Act in affording employment opportunities for public housing residents.

*Lessons from the Field on the Implementation of Section 3* (U.S. Department of Housing and Urban Development). 1996. Maxine Bailey, Suzanne Lynn.

### Canada's Earnings Supplement Project

A test of an innovative financial incentive intended to expedite the reemployment of displaced workers and encourage full-year work by seasonal or part-year workers, thereby also reducing receipt of Unemployment Insurance.

*Implementing the Earnings Supplement Project: A Test of a Re-employment Incentive* (Social Research and Demonstration Corporation). 1997. Howard Bloom, Barbara Fink, Susanna Lui-Gurr, Wendy Bancroft, Doug Tattrie.

*Testing a Re-employment Incentive for Displaced Workers: The Earnings Supplement Project.* 1999. Howard Bloom, Saul Schwartz, Susanna Lui-Gurr, Suk-Won Lee.

## MDRC Working Papers on Research Methodology

A new series of papers that explore alternative methods of examining the implementation and impacts of programs and policies.

*Building a Convincing Test of a Public Housing Employment Program Using Non-Experimental Methods: Planning for the Jobs-Plus Demonstration.* 1999. Howard Bloom.

*Estimating Program Impacts on Student Achievement Using "Short" Interrupted Time Series.* 1999. Howard Bloom.

*Using Cluster Random Assignment to Measure Program Impacts: Statistical Implications for the Evaluation of Education Programs.* 1999. Howard Bloom, Johannes Bos, Suk-Won Lee.

# About MDRC

The Manpower Demonstration Research Corporation (MDRC) is a nonprofit, nonpartisan social policy research organization. We are dedicated to learning what works to improve the well-being of low-income people. Through our research and the active communication of our findings, we seek to enhance the effectiveness of social policies and programs. MDRC was founded in 1974 and is located in New York City and San Francisco.

MDRC's current projects focus on welfare and economic security, education, and employment and community initiatives. Complementing our evaluations of a wide range of welfare reforms are new studies of supports for the working poor and emerging analyses of how programs affect children's development and their families' well-being. In the field of education, we are testing reforms aimed at improving the performance of public schools, especially in urban areas. Finally, our community projects are using innovative approaches to increase employment in low-income neighborhoods.

Our projects are a mix of demonstrations — field tests of promising program models — and evaluations of government and community initiatives, and we employ a wide range of methods such as large-scale studies to determine a program's effects, surveys, case studies, and ethnographies of individuals and families. We share the findings and lessons from our work — including best practices for program operators — with a broad audience within the policy and practitioner community, as well as the general public and the media.

Over the past quarter century, MDRC has worked in almost every state, all of the nation's largest cities, and Canada. We conduct our projects in partnership with state and local governments, the federal government, public school systems, community organizations, and numerous private philanthropies.

# MDRC

**16 East 34 Street**
**New York, New York 10016**
**(212) 532-3200**

**www.mdrc.org**

**88 Kearny Street, Suite 1800**
**San Francisco, California 94108**
**(415) 781-3800**

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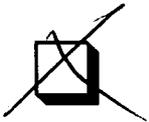
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