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Woman Battering and Welfare Reform: The view from a welfare-to-work program

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This research compares employment training program staff estimates (N = 118) and enrollee reports (N = 122) of woman battering, that is, the physical violence and other abuse men deploy against their wives and girlfriends. The vast majority of staff estimate that woman battering obstructs the transition from welfare to work for at least some of their clients. Overall, staff respondents' relative sense of the frequency of battering quite accurately reflects enrollee reports. However, staff are especially reluctant to give estimates of physical violence and injury. Moreover, many give very low estimates for those items that are obvious markers of battering, which enrollees report at nontrivial levels. Such discrepancies are particularly disturbing because successful welfare reform implementation depends in part on staff understandings of woman battering as an obstacle to welfare-to-work transition.

This research compares employment training program staff estimates and enrollee reports of one potential obstruction to welfare-to-work transition with considerable bearing on welfare reform: woman battering, that is, the physical violence and other abuse men use to control, isolate, and dominate their current or ex-wives or girlfriends.

Woman battering, welfare-to-work transition, and staff estimates

Battering potentially obstructs welfare-to-work transition in at least three ways. First, battering creates short term safety and health crises. Injuries or court appearances to seek a Protection From Abuse order (PFA) may prevent battered women

from complying with work requirements. Second, in the intermediate term, abusive control sabotages women's success in job training and waged work. Failing certification exams or probationary attendance requirements because of the damage or distractions of abuse can derail welfare-to-work transition (Raphael, 1997). Third, the long-term consequences can include disabling injuries, disrupted education, and a cluster of cognitive and emotional symptoms that can impede training and work performance (Murphy, 1993).

Battered women, in short, are likely to be among those clients whose transition from welfare to work will be most fraught. Unless welfare-to-work programs can recognize and address these obstacles, battered women may be especially vulnerable to incurring sanctions. Moreover, their failure to comply with program requirements can count against the performance criteria welfare reformers set for the states' drawing down their Temporary Aid to Needy Families (TANF) block grants.

To protect battered women from such penalties, and to motivate states to serve rather than sanction battered women, advocates lobbied for an amendment to TANF that would allow states to screen for battering, make referrals, provide services, and temporarily waive the work requirements and time limits TANF imposes (Pollack & Davis, 1997). Most important from a welfare reform administration standpoint, what became known as the Family Violence Option [FVO; PL 104-193, Title 1, TANF § 402(a)(B)(7)] allows states to meet the needs of battered women without jeopardizing their TANF block grant and without counting battered women against the twenty percent of the welfare caseload eligible for "hardship exemption" under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).

Most existing estimates of the prevalence of battering stem from advocates lobbying for adoption and implementation of FVO. Advocates marshaled anecdotal evidence from the "front lines" of welfare-to-work program administration by informally surveying directors of employment training programs—the organizations where the rubber hits the road for welfare reform. For example, in New York City, "key informants" from employment training sites estimated that battering was a problem for between

30 and 75 percent of their clients. The study concluded that "Job training providers agreed that domestic violence is a serious problem and an employment barrier for the population they serve" (Kenney & Brown, 1996: 7). The methods employed in the NYC study yielded a wide range of estimates that advocates nevertheless interpreted as consensus on the scope and character of the obstacle battering poses to women's welfare-to-work transition.

Staff estimates matter because successful TANF and FVO implementation rests in large part on assessment, referrals, and service provision by staff in local welfare offices and employment training programs. The present study addresses the wide variance of estimates and anecdotal nature of evidence of battering by systematically surveying program staff and by administering comparable instruments to both staff and enrollees. I present the most notable of my findings and seek to explain both the variation in staff estimates and the gaps between staff estimates and enrollee reports.

METHODS

During April and May 1998, I administered surveys to 120 staff (directors, caseworkers, instructors, job developers, and clerical workers with client contact) at 15 of the 16 eligible job training contract sites in an FVO county. By agreement with the State Bureau of Program Evaluation (BPE) and the University Institutional Review Board (IRB), eligible sites were those serving adult, nonprisoner welfare recipients without severe mental disabilities. The director at one eligible site denied access because the site was short-staffed when the project was in the field. The overall response rate of the staff attending the regularly-scheduled meetings at which I administered the survey was 97 percent ($N = 118$). The site access agreement required complete anonymity, which precluded identifying staff by program site; staff response are therefore pooled across the 15 sites.

Along with a trained volunteer, I also interviewed program enrollees in the shortest-term (four week) job readiness program, a subset of six of the 15 staff survey sites. We interviewed 122 respondents, the entire incoming cohort; this portion of the project was a population study of the May-June 1998 enrollees. By agreement with the BPE and the IRB, all enrollees were guaranteed

anonymity, compensated with \$10 vouchers from a regional supermarket, and offered information about how to obtain a PFA and support on a palm card provided by a local battered women's shelter.

The staff survey instrument measured estimates of how many of their clients face a wide range of potentially abusive behaviors, emotional distress, and other challenges to program participation and welfare-to-work transition (Brush, 1998). I report here on notable findings from two general items (asking whether staff thought "violent or controlling behaviors are a problem for any of the women participating in your program" and if so what percentage) and four sets of specific potential obstacles drawn from a review of research and instruments related to battering and consultation with advocates for battered women. Four items covered *violence and injury*. Seven items covered *nonviolent* controlling behaviors. Six items covered specifically *work-related* behaviors. Finally, four items covered *help-seeking and self-protective behaviors*, which are not measures of battering itself, of course, but potential battering-related obstacles to welfare-to-work transition.

On all items, providers recorded their estimates of the extent to which their clients experienced those behaviors, using a five-point scale labeled "none," "a few," "about half," "many," and "all or almost all." I report the percent of staff whose estimates were "none" or "a few," a measure of the extent to which staff consider clients experiencing specific behaviors are rare in the caseload. Respondents were instructed to give their "best estimate," based on their observations, experience, and any formal records or complaints they might have received. Internal consistency among the items on the staff survey was very high; Cronbach's α ranged from .83 (among the four help-seeking items) to .89 (among the six work-related gender conformity items).

The instrument in the enrollee survey paralleled that for staff. Items measured the frequency with which respondents reported having experienced the same potential obstacles. Program enrollees reported the lifetime frequencies (never, once or twice, or often) for all but the violence and injury measures, which were for their current or most recent relationship. I report the proportion of enrollees reporting each specific obstacle at least "once or twice." The interview itself was brief, typically lasting

15 minutes. Internal consistency among items on the enrollee survey was lower than on the staff survey, but high enough to justify grouping items into the four sets. Cronbach's α was .67 for both the four help-seeking behaviors and for the seven nonviolent sabotage items, .75 on the six work-specific gender conformity items, and .78 on the four violence and injury items.

FINDINGS

Providers overwhelmingly agreed that battering is a problem for at least some of their clients. When asked in a general question whether they thought violence or control from intimate partners or family members presented problems for any of the women in their program, 96 percent of 103 staff who answered the question—84 percent of the 118 staff who returned surveys—said “yes”.

When asked to estimate the percentage of their clients for whom violence or control were problems, there was considerably more variation. For the 92 staff who gave an overall estimate, the mean was 30 percent (std dev = 20), as was the median. The large standard deviation highlights the wide range and variability in estimates. At the same time, most of that variation is among low estimates. The bottom quartile of estimates were under ten percent. The top quintile was at fifty percent. One respondent in six gave very low estimates, that is, below five percent of clients. Twenty-six respondents (22 percent) gave no percentage estimate at all.

Table 1 displays the 21 items, grouped into four sets. The first column includes the number of staff respondents. The second arrays the cumulative percent of staff with very low estimates; the items are ranked within sets by this value. The third displays the percent of the enrollee population reporting at least one occurrence. There are two key patterns to note. The first is the variation in both the number of respondents and estimate levels in the staff survey, and the strong relationship between them. The second is the correspondence between the staff estimates and the enrollee reports.

Fewer staff answered the violence and injury items (grouped in the top panel of Table 1) than any of the other items. Across

Table 1

Staff estimates and enrollee reports of obstacles to welfare-to-work transition

<i>Potential obstacles to program participation (N staff)</i>	<i>Percent staff estimating "none" or "a few"</i>	<i>Percent enrollees reporting "once or twice" or "often" (N = 122)*</i>
<i>Violence and Injuries</i>		
Threats with knife or gun (N = 103)	85	11
Physical injury from abuse (N = 104)	77	27
Forced sex (N = 104)	73	22
Hit, kicked, or threw something (N = 105)	63	38
<i>Nonviolent Sabotage</i>		
Took, wrecked books, homework (N = 111)	83	14
Took or wrecked clothes (N = 110)	79	6
Withheld car keys or ride (N = 109)	72	16
Picked Fights (N = 113)	47	47
Distracting pleas (N = 110)	45	24
Verbal put downs (N = 112)	45	32
Sabotaged child care (N = 113)	44	44
<i>Work-Specific Gender Conformity</i>		
Must keep up with housework (N = 108)	79	8
Harassed at work or training site (N = 106)	74	20
Working moms bad moms (N = 107)	67	12
Financial threats related to work (N = 110)	66	5
Physical threats related to work (N = 106)	62	7
Jealous about work (N = 110)	51	46
<i>Self-Protection and Help-Seeking</i>		
Avoided harassment sites (N = 108)	67	24
Sought help (N = 107)	56	43
Sought shelter, moved (N = 113)	51	53
Sought protective order (N = 111)	46	24

*On the violence and injury set, enrollees N = 121; one respondent refused to answer the item about forced or coerced sex.

the 21 items, the number of staff responding is inversely proportional to the cumulative frequency of very low estimates ($r = -.62$, $p = .002$). That is, there were higher response rates for the items staff in the aggregate perceived as affecting more of their clients. The variation among staff in both response rates and the frequency of very low estimates is moreover patterned. First, staff are especially reluctant to give estimates of physical violence and injury. Second, the vast majority of staff give very low estimates for those items (violence and injury) that are among the most obvious markers of battering for the purposes of FVO implementation. At the same time, staff somewhat less frequently give extremely low estimates on items that measure more subtle (nonviolent) dimensions of battering.

Third, fewer staff give extremely low estimates of three types of items. The first is those they are most likely to be able to observe directly, such as absence from the program due to a court appearance to seek a PFA. The second is those they hear about directly in the form of a client's excuse, for example sabotaged child care. The last is those they attribute stereotypically to welfare recipients' problematic relationships or lifestyles, for instance verbal put downs or distracting pleas for help when intimates are drunk, high, or in trouble.

How closely do these patterns in staff estimates match the reports of program enrollees? The good news is that overall, a larger proportion of staff give very low estimates on those items on which enrollees report relatively fewer incidents ($r = -.69$, $p \leq .001$), and significantly more staff responded on those items that had higher levels of enrollee reports ($r = .43$, $p = .050$). In the aggregate, staff respondents' relative sense of the frequency of violent acts, for example, quite accurately reflects the difference between the frequency of enrollee reports of being hit, kicked, or having something thrown at her (38 percent) compared to being threatened or hurt with a knife or gun (11 percent).

More disconcerting are the exceptions, that is, the items on which a relatively high proportion of responding staff give very low estimates and there is a nontrivial level of enrollee reporting (20 percent or more). For instance, Table 1 shows that the vast majority (roughly three-quarters) of staff perceived the frequency of forced sex and injury from abuse as very rare. Yet while one

in five enrollees report having been coerced or forced into sex and one in four report having been cut, bruised, or choked in her current or most recent relationship. The vast majority of staff who give very low estimates on the violence and sexual coercion items are also out of line with the findings of violent battering from other studies of the general, working, and welfare populations (Russell, 1984; Lloyd, 1997; Murphy, 1993; Raphael, 1997). Similarly, two-thirds of staff basically dismiss threats and harassment at work and training sites as a problem for more than "a few" clients, but 20 percent of enrollees reported experiencing this type of battering, and 24 percent of enrollees reported they had tried to avoid places abusers might find them.

Exceptions in the other direction—that is, items on which more than half of staff perceived the problem as relatively widespread when it in fact was reported by relatively few enrollees—are few. However, the comparison of estimates and reports of *sought protective order*, *distracting pleas*, and *verbal put downs* reinforces the interpretation above that staff are both more willing to make an estimate (measured by relatively high response rates) and less likely to give an extremely low estimate when the behavior is one they can observe directly or readily attribute to stereotypes about welfare recipients' dysfunctional relationships.

Variation in provider estimates

Congruent with the results of previous studies (e.g., Kenney & Brown, 1996), I found wide variation in provider estimates of the prevalence of battering as an obstacle in their clients' welfare-to-work transitions. Unlike previous studies, I sought to establish empirical grounds for at least a preliminary explanation of this variation. The variation in staff estimates was not significantly associated with the most obvious explanatory variable, position in the organization. Directors, job developers, instructors, clerical workers, interviewers, and case workers did not differ significantly in their estimates (data not shown; see Brush, 1998). The anonymity conditions of the BPE-IRB approval precluded identification of staff by site, so I cannot construct or assess explanations based on site-specific organizational culture, structure, or practice.

Qualitative observations offer some empirical if impressionistic ground for explaining variation in staff estimates. Discussions after survey administration revealed differences in provider attitudes toward clients and issues related to battering. Some providers worried that the emphases on professionalism and a work-like setting in employment training contexts could deter disclosure and prevent battered clients from requesting and receiving help. In sharp contrast, others were deeply troubled by the possibility of fraudulent abuse claims and malingering by welfare recipients. More than one staff member, for example, indicated that if *they* could obtain a classification as disabled or claim exemption from work requirements "just by getting beat up," they would have someone give them a few well-placed bruises expressly for that purpose. They assumed their clients would not hesitate to do the same. These pre-existing views of welfare recipients and their motives probably explain staff members' different assessments of abuse as an obstacle in their clients' lives.

Further evidence comes from the fact that forty staff (one-third of the respondents) wrote in additional categories of battering-related problems their clients encounter. They listed a total of 20 different issues, ranging from pragmatic transportation-related issues such as "boyfriend took the battery out of the car" to the five who invoked the "head games" or "guilt trips" intimates and family members use to control, confuse, or otherwise undermine clients. These results suggest that enrollees occasionally disclose the battering in their lives to staff. Moreover, such disclosures sometimes make an impression on listeners. That impression may be strong enough to increase staff estimates irrespective of position in the organization, although they may not be strong enough to counter pre-existing views of welfare recipients. Staff who did not give a write-in answer were significantly more likely than those who did to leave blank or give a very low (0 to 9%) estimate on the general percentage question [$\chi^2(1, N = 118) = 10.40, p = .001$].

Discrepancy between staff estimates and enrollees reports

"Many women," notes one advocate, "keep their battering a deep secret and, for very good reasons, a government agency is the last entity with which this fact would be shared" (Raphael,

1997: 133). In fact, clients are probably very selective about disclosure, and most employment training program staff have little systematic access to information about battering in their clients' lives. Therefore, they have no empirical basis on which to move beyond impressionistic estimates or personal prejudices. Confidentiality concerns mean all the evidence they might accumulate is anecdotal. Moreover, employment training program staff (like other experts, including mental health personnel; see Gondolf, 1998) are seldom trained to elicit and respond appropriately to accounts of battering. Given the combination of the system's confidentiality concerns, the staff members' lack of the training required to notice symptoms or elicit disclosure, and the enrollees' reluctance to share stigmatizing personal information, the surprising good news is that the disconcerting discrepancies between staff estimates and enrollees reports are so few.

IMPLICATIONS AND QUESTIONS FOR FUTURE RESEARCH

Responding to the realities of woman battering will be one key to the success of welfare reform, especially as time limits expire and recipients with multiple obstacles (including battering) make up an increasing proportion of those on the rolls. This research documented the baseline of staff estimates that form the foundation of responses to woman battering in the context of welfare-to-work transition. The method facilitated comparisons between staff estimates and enrollee reports. The findings revealed variation in provider estimates (although within a smaller range than previous "key informant" studies). While there are some important behaviors which the vast majority of staff basically dismiss which are reported by a nontrivial percentage of enrollees, such cases are the exception. However, staff appear to minimize precisely those aspects of woman battering—sexual and physical abuse—treated most skeptically by mainstream culture.

The Family Violence Option (FVO) provides state and local welfare administrators with a tool for serving clients who may face multiple obstacles to welfare-to-work transition. The tool FVO provides is only as effective as its implementation, however. Implementation in turn rests in part on the extent to which program staff understand both the accommodations FVO allows

and the actual experiences and needs of welfare recipients. To the extent that FVO-related definitions of battering are weighted more heavily toward violent than nonviolent dimensions of battering, the apparent reluctance of employment training staff to make estimates about the prevalence of violence in their caseloads could result in underestimates of need. Moreover, the fact that staff estimates are sometimes apparently based in stereotypes about welfare recipients' problems with the law and relationships means the rhetorical packaging of FVO as an exemption from work requirements may be perceived by program staff and welfare reformers as special pleading on behalf of welfare recipients already stigmatized as cunning, shiftless troublemakers. These perceptions can stymie effective implementation and turn FVO into yet another punitive intrusion of government bureaucrats into the lives of poor women.

Successful FVO implementation, these findings suggest, can usefully direct training about woman battering to staff in all positions. Training for FVO implementation can fruitfully build on the concerns staff voice both for preventing fraud and for their clients' wellbeing. However, successful FVO implementation may have to go beyond training and exemptions as an tool for administering welfare through block grants. Welfare-to-work program contractors may need incentives as well as staff training in order to assess and respond to woman battering. Many questions remain. For example, how, in the spirit of "reinventing government," can welfare administrators foster innovations in addressing woman battering? Research on the local work cultures in specific employment training sites and the personal histories and ideological orientations of staff can provide the answer. Empirically-informed answers can in turn guide advocates and administrators in efforts to take creative advantage of FVO and the opportunity it provides for states to respond to woman battering not by punishing welfare recipients but by helping them move toward self-sufficiency.

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