

**FAMILY EMPLOYMENT PROGRAM - TWO PARENT:  
AN ANALYSIS OF UTAH'S TWO PARENT PROGRAM**

Social Research Institute  
College of Social Work  
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Submitted to the Utah Department of Workforce Services  
August 21, 2003

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## **EXECUTIVE SUMMARY**

Welfare policy is in a period of tremendous transition. This study of Utah's two parent program represents a commitment by Utah's Department of Workforce Services (DWS) to better understand the participants in this program as changes are initiated at the local and national level. By understanding the composition of this population and their unique needs and attitudes, future programs can be tailored to meet these needs.

Two parent families are not generally thought of as "typical" welfare recipients. Indeed they are not. A vast majority of those receiving public assistance are single parents (usually women) and their children. Yet two parent families with dependent children also face health and mental health issues, economic problems and periods of simply bad luck. When such barriers occur, families that have experienced long term stability and even a degree of prosperity can find themselves in difficult straits, sometimes needing to choose between medical care and feeding the family. Understanding these families and their situations better informs policymakers as to what needs to happen to move the family back toward self-sufficiency.

This study provides a "snapshot" of Utah's Family Employment Program - Two Parent (FEP-TP) participants from September 2002 to February 2003. All families who participated in this program at anytime during these months qualified for the study. Of the possible 125 families, 91 were ultimately contacted and interviewed. Researchers conducting the study had also gathered years of data with single parent families. From the beginning it was clear FEP-TP families were generally very different. A majority of the couples have been in long term, relatively stable relationships. This stability provides an important element of family life that is not typically found in the single parent family.

While FEP-TP families were different from former long term recipients, there were also distinct groups within the FEP-TP population. This program serves all two parent families in which both partners are capable of earning at least \$500 per month and share a child in common. During the interviewing process it became clear that some specific traits separate the couples into unique groups. These groupings often defined a unique set of needs that might or might not be met by a single program. In this study, the subgroups recognized include *refugees*, *young couples*, and *other*. The current program seemed to work best for young couples who were generally new to the job market and needed support to stabilize a new family situation.

Respondents were generally appreciative of assistance provided for education and other job preparation activities. Unfortunately, only a small portion of respondents participated in such activities. The majority were engaged in job search and at work sites. Work sites were generally viewed negatively due to the lack of opportunity for skill building and gaining employment. Respondents more often referred to these sites as "community service" which interfered with efforts to seek employment.

While many couples struggled with the program, most expressed gratitude for the help as "something that was better than nothing" in their time of greatest need. Most couples would prefer to be caring for the family themselves and were taking steps to make this happen.

## KEY FINDINGS

1) The typical FEP-TP participant has received 6 months or less of any form of public cash assistance - two parent, single parent or single adult. These families have sustained extended periods of self-sufficiency and have many skills to build on to move toward self-sufficiency again.

2) FEP-TP couples are typically in long term relationships. In this sample 57 (62%) of the couples were married. The average married couple has been together for 9 years. There were also 24 (26%) couples who were living in long term domestic partnerships. These relationships have lasted for an average of 6 years.

3) The FEP-TP population is diverse. In this sample of 91 couples, 13 were refugee families, 9 were couples where both partners were under age 22, and 69 formed an “other” category. The structure of FEP-TP was most successful with young couples who were often just entering the work force as well as struggling with many other responsibilities of starting a family.

4) Study participants generally had strong work histories. Only 11 (13%) of primary recipients and 22 (26%) of secondary participants had “less than 6 months of work history at any one job in the past 5 years,” indicating a poor work history. There was just one couple where both partners had a poor work history. None of the primary respondents and only 18 (21%) of secondary respondents had not worked at any time in the past 3 years.

5) Respondents were less likely than long term recipients to report and screen positively for severe personal barriers such as depression and post-traumatic stress disorder and more likely to report barriers related to employment opportunities and the economic environment. When asked about the *greatest* barrier to employment, the one most commonly chosen by both primary and secondary respondents was “lack of good jobs available.”

6) Job search and work sites were the most common employment plan activities listed in both the customer self-report and DWS administrative data. Very little was offered for education and training. Services typically offered to other job seekers not receiving welfare assistance were generally not part of the plan.

7) Participation in a work site was part of the employment plan for 46 (51%) of primary respondents and 35 (39%) of secondary respondents. Work sites often consisted of helping out at food pantries, doing maintenance/yard work for government buildings and day care. When asked about what skills were learned at these sites very few respondents listed work skills which might lead to future employment. Only 29 (32%) of primary respondents and 16 (47%) of secondary would recommend the work site to another program participant. Respondents often referred to the work sites as “volunteer work” or “community service.” Sites were generally not viewed as preparation for work but as a way to fill time as a requirement for assistance.

## RECOMMENDATIONS

- 1) **Conduct an immediate assessment of the situation which led the family to FEP-TP as the foundation for developing a plan for moving toward self-sufficiency.** Because FEP-TP families have often functioned well up to this point, the sooner their needs can be assessed and supports put in place, the less likely they are to experience further crises. Issues often include such things as losing housing, getting behind on bills thus incurring more debt, and increased insecurity for children.
- 2) **Provide appropriate employment support services (based on information gained in the assessment) which start at the customer's level and move them forward.** Given the work history of a majority of respondents, a clear focus on employment-related services would support a rapid return to the work force. Additional skills training and educational resources could be used by those who have demonstrated an ability to obtain and retain employment, but who need assistance due to changing job markets, economic downturns and other factors beyond their control.
- 3) **Evaluate the effectiveness of current work site locations for FEP-TP families.** If the stated goal of work sites is to provide skill development and work preparation opportunities, then current and potential sites need extensive evaluation to determine whether these sites are indeed serving this purpose. Assignment of work sites should be based on the needs and strengths of each customer and what will move the individual forward in their career path.
- 4) **Expand usage of current program components, such as training and education, to better prepare participants to enter/reenter the job market.** Job search, work sites and "other activities" are the most commonly used program components. More usage of on-the-job training, skill building, acculturation and education aspects of the current program could answer some of the concerns expressed by current and former program participants who do not view FEP-TP as employment focused.
- 5) **Evaluate the appropriateness of current FEP-TP policy for the diverse population enrolled in the program.** Current policy works well for customers who are new to the job market, lack basic employment skills or need a structured support system (for example young families). Other program participants such as refugees and skilled workers have barriers to success which are generally not being met.
- 6) **Structure the FEP-TP program to support family unity and stability.** Program requirements should be evaluated for the effect of policy on the family as a whole. Respondents listed specific areas such as availability of child care, transportation, overlapping work schedules and lower benefit levels for two parent families.
- 7) **Build on the strengths of FEP-TP families.** For most FEP-TP families self-sufficiency is the norm. Generally well developed work histories, strong family relationships, and experience with budgeting and managing family life, are typical strengths which support the families efforts. When these strengths are recognized and used as a foundation for building a plan families are more likely to quickly return to self-sufficiency.

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## INTRODUCTION

The passage of the Personal Responsibility and Work Reconciliation Act (PRWORA) of 1996 signaled a new direction for our Nation's social welfare policy. Welfare was no longer an entitlement program. Implementation of a time limit on the number of months one can receive assistance, participation requirements, the emphasis on "welfare to work" and a significant focus on family formation were foundational elements of this new policy.

Early in the discussion regarding welfare reauthorization, concerns were raised regarding the disparities between single and two parent programs within individual states. Discussions focused on possible disincentives that work against the formation or retention of two parent families. It was feared that some elements of public assistance policy were unintentionally encouraging couples to separate or remain living apart so they could receive the necessary benefits to care for their children. Currently, proposed legislation requires single parent and two parent programs to have identical requirements and benefits to rectify this problem. The potential matching of these programs and a desire to learn more about the composition of participants in the two parent program led to this study.

Policy regarding Utah's Family Employment Program - Two Parent (FEP-TP) states, "The Family Employment Program for Two Parents serves unemployed and underemployed households where a child (or unborn child in the third trimester) has at least two parents who resided in the household, and those parents are both capable of earning at least \$500 a month." It is primarily a short term assistance program with strict participation requirements. It is a "pay after performance" program, therefore determining participation activities quickly is important. Participation includes activities such as community work sites, job search activities, short-term skills training and basic adult education.

FEP-TP, rooted in the Aid to Families with Dependent Children - Unemployed Parent (AFDC-UP) of 1961 and later called the Emergency Work Program (EWP), was first funded by the Utah State Legislature in January 1983. The primary focus of this program was to use limited state funds to develop a time-limited, work-oriented program that would require job search and enhance participation in the regular labor market. Critical to the EWP design were the 40-hour per week performance requirement, the combination of employment activities, pay after performance, short-term assistance, expectations of securing employment and emphasizing the supportive role of the spouse. (Janzen, 1983) Many of these elements still exist in FEP-TP today.

In September 2002 the Social Research Institute (SRI) of the University of Utah College of Social Work, contracted with the Department of Workforce Services (DWS) to conduct a study of participants in Utah's Family Employment Program - Two Parent (FEP-TP). The purpose of this study is to provide: 1) a general description of FEP-TP participants and their families, 2) detailed information regarding barriers to employment, and 3) insights into the participants' experiences with the department and this particular program. Where possible, comparisons will be made between this data and information gathered from research with the long term TANF customers.

## METHOD

The protocol for this study was modeled after the previous and ongoing studies conducted by SRI for DWS. While a majority of the aspects of data collection were identical, a few significant differences do exist and will be commented upon as needed.

### Respondents

Participants in this study were required to have received cash assistance through FEP-TP at some time between September 2002 and February 2003. There was no requirement regarding how long they had received assistance, only that two parent cash assistance had been open at some time during that period. Participants were also required to be currently living in the state of Utah. Cash assistance could be open or closed at the time of the interview. During this six month time period there were 135 families who qualified for the study. While gathering locating information for the families it was discovered that 9 families had moved out of state and were thus immediately disqualified, leaving 127 qualified to participate.

Of the 127 families, an additional 5 (4%) had moved out of state, 13 (10%) were not interested in participating, 12 (9%) made no response to our inquiries, 3 (2%) were not able to be located and 3 (2%) did not speak English and no translator could be secured to assist with the interview. The remaining 91 families were contacted and interviewed, resulting in a 72% response rate.

Each couple that participates in FEP-TP must identify a *primary* and a *secondary* participant. There are specific responsibilities for each person and the couple decides who best fits each role. The initial intent was to interview both members of the couple from each family. It was soon discovered that while all had participated as a couple in FEP-TP, some couples were no longer together. Of the 91 families, both partners were present for 79 (87%) of the interviews. In the remaining 12 cases, 5 (6%) were completed with the primary participant alone and 7 (8%) were completed with only the secondary participant. When one partner or the other was not present, the participating partner was asked to provide only the basic demographic information for the partner not present.

### Data Collection

The 127 potential respondents were contacted by mail in early March 2003. The letter explained the research and invited the couple to call and make an appointment. If the couple had not responded after one week, three attempts were made to contact them by phone. If these efforts were unsuccessful, up to three home visits were completed. Participants who chose not to participate were immediately removed from the contact list.

Interviews were conducted across the state, generally in the couples home, and lasted between 60 and 90 minutes. Each member of the couple was paid \$20 for their time. Coordinating the schedules of both members of the couple and the interviewer was more difficult than in previous studies. More interviews were conducted in the evening to accommodate work schedules. In nine cases a translator from outside the home was used to complete the interview. This translator was paid \$10 as a token of appreciation for her/his time.

The study instrument consisted of questions regarding many areas of family life, child well-being, individual health and mental health issues, employment history, education, income levels and experience with FEP-TP. Participants could decline to respond to any question they did not feel comfortable answering, although this very rarely occurred. All names of study participants remain strictly confidential.

## FINDINGS

The findings from this study reflect the characteristics and attitudes of participants in Utah’s FEP-TP. The sample consists of 91 families (170 individuals), all interviewed between mid-March and mid-May 2003. Unless otherwise noted, for all tables N = 91. When possible, comparisons will be made between participants in FEP-TP and former participants in single parent FEP who were nearing or had come to the end of their cash assistance by reaching the 36 month time limit.<sup>1</sup> The sample size for the long term study was N = 1484.

The FEP-TP sample came from throughout the state. The regional divisions outlined in Table 1 compares participants in the study to the overall average distribution of all FEP cases and all FEP-TP cases for the qualifying time period, September 2002 through February 2003.

**Table 1: Regional Divisions**

REGIONS	Central	Eastern	Mntainland	North	Western
Study Breakdown	43 (47%)	15 (17%)	1 (1%)	28 (31%)	4 (4%)
Monthly average All FEP cases	3898 (45%)	605 (7%)	996 (11%)	2442 (28%)	813 (9%)
Monthly average FEP-TP cases	25 (49%)	8 (16%)	.17 (.3%)	12 (24%)	5 (10%)

These results show that, in general, the regional distribution of the participants in the FEP-TP sample closely follows the overall regional distribution during the same time frame. There is a small over-sample in the North region and a small under-sample in the Western region. Larger differences can be seen when comparing the prevalence of FEP-TP participants to the overall FEP population. During the six months of the study the Eastern region accounted for 7% of the FEP cases but 16% of FEP-TP cases. A swing in the opposite direction is found in the Mountainland region which contained 11% of the FEP cases and only .3% of the FEP-TP cases.

The small number of cases in the Mountainland region has been consistent since March 2000. From that time to present there has never been more than one FEP-TP case in the region at any one time. As this region contains the third largest regional caseload and there is no reason to

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<sup>1</sup>Data for these comparisons can be found in “The Dynamics of Leaving Welfare: A study of Long-Term Welfare Recipients in Utah” - This study can be found at <http://www.socwk.utah.edu/pdf/dynamics.pdf>.

believe there are fewer two parent families in need of assistance in this area, these differences are significant. Perhaps there are other significant resources to assist such families. DWS also might have found new ways to assist such families that do not include use of FEP-TP. Whatever the reason, because of the small number of participants from this region, regional comparisons will not include reference to this region. As the two parent program is reshaped, workers from this region may be able to provide insights as to how they were able to serve two parent families in different ways.

The findings for this study will present information in a variety of areas including basic personal and demographic characteristics of the respondents and their families, personal histories, family composition and characteristics, employment and household income, family well-being, child well-being, barriers to self-sufficiency and experiences with DWS policy and personnel.

### **Personal and Demographic Characteristics**

As previously mentioned, FEP-TP families must indicate one adult as the *primary* participant and another as the *secondary* participant. Specific differences in each role as defined by policy will be discussed later. For now it can be simply defined as differences in the amount of time required for participation in program related activities. The primary person is typically required to participate for 40 hours per week while the secondary person participates for 20 hours per week. This role can be switched by the couple at any time. Respondents were asked to identify the role for each participant when the cash assistance closed (or currently if the assistance was still open). Data was then gathered accordingly.

Creating a profile of a “typical” FEP-TP family presents an interesting challenge. Families enter this program from many different life situations. Some enter as very young (teenage) first time parents on their own. Others are well established in both their work and family lives but have come upon hard times. Some are refugees seeking assistance to settle in a new land. These various life situations will be noted throughout this report where significant.

As recorded in Table 2, general characteristics of both the primary and secondary participants are identified and compared to long term FEP participants (N=1484). In many areas the results are strikingly similar. Data for the long term respondents often falls between the primary and secondary. However, some notable differences can be seen.

In the area of race, long term respondents had a higher percentage of Hispanic participants while the two parent families had more Blacks (non-Hispanic). It is important to remember that the FEP-TP program is often used by refugee families as they settle in the area. Thirteen of the 91 families surveyed arrived in the United States as refugees. Eight of the 17 respondents who reported “Black” as their race are refugees from Africa.

Another area of difference is in education. The males in the two programs have similar education levels while FEP-TP female respondents have a 8% higher rate of not completing a high school diploma or GED than do long term female respondents. It can also be noted that both FEP-TP primary and secondary respondents are attending school at a higher rate than long term respondents. Of the 32 FEP-TP respondents attending school at the time of the interview,

ten were females working on a high school diploma or GED certificate.

**Table 2: Primary and Secondary Participant Personal Characteristics**

	<b>Primary N = 91</b>	<b>Secondary N = 91</b>	<b>Long Term N = 1484</b>
Average Age	31.5	30.2	32.6
Place of Birth		N = 89	
Utah	37 (41%)	34 (37%)	
Another State	37 (41%)	36 (40%)	-----
Outside U.S.	17 (19%)	19 (21%)	
Gender			
Male	61 (67%)	30 (33%)	53 (4%)
Female	30 (33%)	61 (67%)	1431 (96%)
Race/Ethnicity			
White (non-hispanic)	57 (63%)	61 (67%)	914 (62%)
Black (non-hispanic)	8 (9%)	7 (8%)	48 (3%)
Hispanic	11 (12%)	11 (12%)	302 (20%)
Native American	8 (9%)	3 (3%)	122 (8%)
Asian - Pacific Islander	2 (2%)	1 (1%)	18 (1%)
Other	2 (2%)	2 (2%)	20 (1%)
Mixed Race	3 (3%)	4 (4%)	59 (4%)
Are you a member of any religion?	62 (68%)	65 (73%)	1031 (70%)
Of those who are, are you active?	27 (44%)	30 (47%)	482 (47%)
Education	N = 91	N = 89	
High School	50 (55%)	38 (42%)	649 (44%)
GED	8 (9%)	9 (10%)	265 (18%)
Neither	33 (36%)	42 (46%)	570 (38%)
Education by Gender	Male N = 89	Female N = 91	M=53 F=1434
High School	48 (53%)	40 (44%)	53% 43%
GED	8 (9%)	9 (10%)	15% 18%
Neither	33 (36%)	42 (46%)	32% 39%
Average level of education obtained	11.5 yrs	11.0 yrs	11.6 yrs
Currently in school	N = 91 15 (17%)	N = 89 17 (19%)	139 (9%)
Learning Disability Indicated - Payne	N = 83 14 (17%)	N = 85 16 (19%)	333 (26%)

## Personal History

A review of some areas of personal history helps provide a better understanding of the current situations of families in FEP-TP. Historical data regarding family background, relationships and child bearing, employment, and criminal activity provides an individual and family context in which to frame the current situation.

The family composition respondents experienced as children and the educational level of their parents described in Table 3 was very similar between primary, secondary and long term respondents. In gathering information for this section the most significant factor seemed to be whether or not respondents had continued to live at home during their teenage years. Those who had moved from home to home or who had lived on the streets during this time often reported many barriers resulting from dropping out of school, abuse, trauma and general instability.

**Table 3: Family Background**

		<b>Primary N = 91</b>	<b>Secondary N= 89</b>	<b>Long Term N = 1484</b>
Type of home life as child:	Two Parent	61 (67%)	55 (60%)	948 (64%)
	Single Parent	19 (21%)	25 (28%)	382 (26%)
	Foster Care	5 (6%)	5 (6%)	31 (2%)
Education level of:	Father: HS/GED	54 (59%)	49 (54%)	828 (56%)
	Don't know	11 (12%)	12 (13%)	270 (18%)
	Mother: HS/GED	48 (53%)	48 (53%)	881 (59%)
	Don't know	8 (9%)	3 (3%)	132 (9%)

## Relationship/Parenting History

**Table 4: Initial Relationships and Parenting**

	<b>Primary</b>	<b>Secondary</b>
Average age at first marriage (or domestic partnership if no marriages):	21 Range: 13 - 40	20 Range: 12 - 30
Average age at start of this relationship:	23.5 Range: 16 - 41	22 Range: 13 - 40
Average age of first giving birth to or fathering a child:	22 Range 13 - 37	20 Range: 13 - 36
By gender:	Male: 22.5 Range: 13 - 37	Female: 18.8 Range: 13 - 27

Whether married or not, welfare recipients are typically assumed to have been teenage

parents. While a few respondents were indeed teenage parents, the average primary respondent did not become a parent until age 22 and the average secondary respondent was not a parent until age 20. (This is very similar to long term respondents who averaged 21 years of age at the birth of their first child.) In both cases, the average age of entry into their first marriage or domestic partnership was the same or younger than their first child, indicating that they were likely in a serious relationship when the child was born.

### Employment History

One of the outstanding features of the FEP-TP group was the generally well-developed work histories of at least one if not both of the respondents. The general exception to this would be very young couples who were just beginning their work experience. Table 5 provides information about the work history of study respondents.

**Table 5: Work History**

	<b>Primary N = 88</b>	<b>Secondary N = 85</b>	<b>Long Term N = 1484</b>
Average of “Most months worked at one individual job in past 5 years”:	21	19	16
Never worked in past 5 years: Never worked in past 3 years:	-0- 2 (2%)	11 (13%) 19 (22%)	20 (1%) 191 (13%)
Highest hourly wage in past 3 years:	\$8.45	\$8.96	\$8.12
Work history barrier: Less than 6 months at any one job in past 5 years	11 (13%)	23 (27%)	20%
Less than 6 months at any one job in past 3 years	16 (19%) N = 86	34 (40%) N = 86	-----

Probably most striking is that no primary respondents reported having not worked at all in the past 5 years and only 2 had not worked in the past 3 years. While wages may have been low or hours few, employment had been a part of the family’s life. Larger numbers of secondary respondents had “no work history” as the focus of the question was on paid employment. These respondents were often the ones who work at home caring for children and the household. They were probably able to do so because there was another person whose employment helped support the family financially.

### Criminal History

As noted in previous reports, having a criminal history is often an underreported and unrecognized barrier to employment. In this study 29 (33%) of primary respondents and 20 (22%) of secondary respondents reported a criminal history. As significant as the mere presence of a criminal background, is the person’s view of whether this criminal history has an impact on their ability to obtain employment. Table 6 presents the data relative to criminal background.

**Table 6: Criminal Background**

	<b>Primary</b>	<b>Secondary</b>	<b>Long Term</b>
Criminal history	28 (33%)	20 (23%)	513 (35%)
Felony	10 (36%)	11 (55%)	---
Misdemeanor	20 (71%)	11 (55%)	---
Believes criminal record affects or prevents work	14 (50%)	13 (62%)	249 (49%)

**Family Composition and Characteristics**

As in previous studies, the composition of families in this study is defined by the specific program being studied. The FEP-TP program is for two-parent families with at least one child in the home under age 18. Given that the interviews could have been completed up to 6 months after the family participated in the program, these defining characteristics may no longer be true. Family composition data reflects the situation at the time of the interview.

**Marital Status**

By program definition a majority of the respondents in this study are married or living in domestic partnerships. Table 7 highlights these figures and the differences between this group and the long term FEP population. As significant as the high percentage of couples who are married or living together, is the length of time these relationships have lasted. An average of 9 years in marriage and 6 years in domestic partnerships speaks to the general stability of these

**Table 7: Marital Status**

<b>Current marital status:</b>	<b>FEP-TP families</b>	<b>Long Term</b>
Married	57 (62%) Range: 1 mo to 28 yrs averaging: 9 yrs	179 (12%)
Domestic Partnership	24 (26%) Range: 1yr to 22 yrs averaging: 6 yrs	167 (11%)
Separated	9 (10%) 6 indicated permanent sep. 3 indicated trial separation	185 (13%)
Divorced	1 (1%)	468 (32%)

couples over time. These long periods reflect the level of commitment of each partner to the family as a whole. As will be detailed later, some couples choose not to continue participation in FEP-TP because they felt it pulled the family apart and was not supportive of the efforts they had made to remain together in difficult times.

## Children

Data regarding children of welfare recipients consistently challenge social stereotypes of this population. Each member of the couple was asked to report the total number of children for whom they are a biological parent. For both sets of respondents the average was less than 3. When asked about children shared in common, 40 (44%) of the families indicated that all children of each parent are shared in common.

**Table 8: Children**

	<b>Primary</b>	<b>Secondary</b>	<b>Long Term</b>
Number of biological children - total	2.6 Range 0 - 11	2.9 Range: 1 - 11	2.9 Range 1 - 8
Number of children shared in common	2.2 Range: 0 - 11		
Number of children living in home now	2.3 Range: 0 - 10		2.4 Range: 0 - 6
Average age of oldest child in home	7.3 yrs		10.5 yrs
Average age of youngest child in home	3.4 yrs		6.4 yrs
Families with child under 6 in home	85%		45%
Currently Pregnant	Females only -11 (12%)		62 (5%)

The average age of the oldest and youngest child was each about three years younger than the average for the long term respondents. This is to be expected, as most of the FEP-TP families are new to assistance and the long term respondents, by definition, have received assistance for at least 24 months. Since the children are in general younger it is not surprising that 85% of these families have a child under the age of 6 living in the home.

## Employment and Household Income

### Current Employment

It was clear from data regarding respondents' entry into FEP-TP that reduced hours and loss of employment income were major reasons for deciding to seek assistance. Many factors such as physical and mental health issues, a downturn in the economy, needing to move and losing employment all contribute to the couple's employment situation. Table 9 outlines the

employment situation for the respondents at the time of the interview. This employment situation includes only paid employment and not work at work sites developed as part of FEP-TP. Of the 35 families whose FEP-TP cash assistance was open at the time of the interview, 10 (29%) families had someone employed while participating in FEP-TP.

**Table 9: Current Employment**

	<b>Primary</b>	<b>Secondary</b>	<b>Household</b>	<b>Long Term</b>
Employed part or full time	20 (22%) - pt 19 (21%) - ft 39 (43%) - total	9 (10%) - pt 17 (19%) - ft 26 ( 29%) - total	25 (28%) 32 (35%) 52 (57%)	741 (50%)
Months at current job	7 months	3 months	---	8 months
Average hourly wage	\$7.15	\$7.47	---	---
Average hours per week	30	34	---	33
Monthly earned income (Includes only households with earned income)	\$944 (N = 39)	\$1096 (N = 25)	\$1235 (N = 52)	\$1078

Of the FEP-TP families, 25 (28%) had at least one person employed part time and 32 (35%) had at least one person employed full time. Combined, 52 (56%) families had at least one partner employed at the time of the interview. Regional breakdowns show that the Eastern region had the highest percentage of families, 73%, with at least one person employed to some degree. This was followed by North at 61%, Central at 47% and Western at 25%.

### **Household Income and the Poverty Threshold**

As in past reports, total household income was calculated by gathering data on all sources of earned income with any other sources of regular (monthly) income received by the family. Respondents were asked specifically about monthly income from housing, Unemployment Compensation, Workers Compensation, SSI/SSDI, child support, Food Stamps, State child care assistance, tribal dividends, all forms of cash assistance and any “other” regular sources.

As mentioned above, 40 (44%) of the FEP- TP families are made up of two parents and all their biological children so child support is not an issue. Long term recipients were also much more likely to have child care resources. As will be discussed later, it is unclear as to whether child care is a benefit available for FEP-TP recipients. FEP-TP families were also more likely to be receiving food stamps. This difference was statistically significant. There were 9 families who received income from “other” sources such as regular family help, income from children’s employment and help from church groups. The average monthly “other cash” income was \$750 dollars per month. There were 8 families who received no outside income from any source.

**Table 10 : Income Beyond Earned Income**

	FEP-TP		Long Term	
	Usage	per month	Usage	per month
Housing Assistance: (Section 8, Public housing, other transitional housing)	22 (24%)	\$499	599 (40%)	\$422
Unemployment Compensation	3 (3%)	\$233	---	
Workers Compensation	-0-		---	
SSI/SDI	5 (5%)	\$696	140 (10%)	\$544
Child Support	2 (2%)	\$120	493 (33%)	\$223
Food Stamps	73 (80%)*	\$369	1019 (69%)	\$263
State Child Care Assistance	5 (5%)	\$227	256 (17%)	\$514
Tribal Dividends	1 (1%)	\$375	---	
Other Regular Income	9 (10%)	\$415	297 (20%)	\$402
FEP/FEP-TP/GA cash assistance	35 (39%)	\$460	---	

\* -  $z = 44.3$   $p < .001$

Combining the earned income and other regular sources of income provides the data for Table 11 which shows the range for the FEP-TP sample and compares these figures to those obtained from the long term sample. It is clear that a majority of the families are still struggling financially. While 52 (57%) of the households have some amount of earned income, only 30

**Table 11: Poverty Level Using All Earned and Regular Monthly Income**

	FEP-TP	Total Sample
Below 50% of Poverty	18 (20%)	407 (28%)
Between 50% and 100% of Poverty	43 (47%)	424 (29%)
Between 100% and 150% of Poverty	16 (18%)	314 (21%)
Between 150% and 200% of Poverty	8 (9%)	164 (11%)
Above 200% of poverty	6 (7%)	173 (12%)
Below the Poverty Threshold	61 (67%)	831 (57%)
Above the Poverty Threshold	30 (34%)	651 (44%)
Total	91 (100%)	1484 (100%)

(34%) have household incomes above the poverty line.

Families were also asked to report any expenses, other than regular household expenses, that they were obligated to pay each month. This might include expenses such as child support, court fines, student loans, etc. Of the respondents, 28 (31%) reported regular monthly expenses over \$100 per month. Child support was being paid by 16 of the respondents. An additional 5 respondents were ordered to pay child support but were financially unable to pay at this time.

### Family Life

For those working with people in crises, the goal of intervention is to stabilize the immediate situation. In this section family well-being is measured by several factors which contribute to family stability. The living situation, food security and access to additional non-monetary resources will all be discussed.

### Living Situation

The high rate of marriage and long term domestic partnerships reflects a degree of stability in the parental relationship within the family situation. The stability of the living situation also contributes to the well-being of the family. A majority of respondents in this study, 72 (79%) reported their current living situation as “renting.” There were just 5 (6%) who owned their home, while 9 (10%) were currently living with extended family. Three (3%) of the families were living in a shelter. Families who reported being together for at least the past two years reported moving an average of 2.3 times in the past 2 years. They also reported living at their current residence for an average of 12 months.

### Food Security

**Table 12: Food Security Scale**

<p><i>Food Secure:</i> Households show no or minimal evidence of food insecurity.</p> <p><i>Food Insecure without hunger:</i> Food insecurity is evident in household members’ concerns about adequacy of the household food supply and in adjustments to household food management, including reduced quality of food and increased unusual coping patterns. Little or no reduction in members’ food intake is reported.</p> <p><i>Food insecure with hunger (moderate):</i> Food intake for adults in the household has been reduced to an extent that implies that adults have repeatedly experienced the physical sensation of hunger. In most (but not all) food-insecure households with children, such reductions are not observed at this stage for children.</p> <p><i>Food insecure with hunger (severe):</i> At this level, all households with children have reduced the children’s food intake to an extent that the children have experienced hunger. For some other households with children, this already has occurred at an earlier stage of severity. Adults in household with and without children have repeatedly experienced more extensive reductions in food intake. (Bickel, et al. 2000)</p>
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One degree of need among these families can be viewed through a measure of food security for the family during the past year. In this study the Food Security Supplement used by the U.S. Census Bureau was used to determine the level of food security for respondents and their families. This tool uses a series of questions to determine four levels of food security. To understand the data as reported, each of the categories used by the Food Security Supplement is defined in Table 12 above.

Given these definitions and the data in Table 13, it is clear that a majority of respondents have experienced a degree of food insecurity in the past year but the percentage for which the situation can be labeled *severe* is relatively small. Comparing the results of this measure with the 80% who receive food stamps shows no significant relationship.

**Table 13: Measure of Food Security**

<b>FOOD SECURITY LEVEL</b>	
Food Secure	31 (34%)
Food Insecure without hunger	38 (42%)
Food insecure with hunger, moderate	19 (21%)
Food insecure with hunger, severe	3 (3%)

### **Additional Non-Monetary Resources**

Many struggling families must rely on a variety of community agencies and additional government programs to help meet their needs. The number of respondents who used such programs in the 6 months prior to the interview is recorded in Table 14.

**Table 14: Additional Resources**

<b>RESOURCE</b>	<b>FEP-TP</b>	<b>Long Term</b>
WIC*	51 (56%)	344 (23%)
Food bank/pantry	35 (39%)	686 (46%)
Thrift store (Clothing or other goods)	44 (48%)	751 (51%)
Homeless shelter	4 (4%)	38 (3%)
Help from church or religious organization	28 (31%)	422 (29%)
Drug or alcohol treatment	13 (14%)	135 (9%)
Mental Health Services	24 (26%)	445 (30%)

\* - This large difference is likely due to the average age of the youngest child in FEP-TP being three years younger than that of the long term sample.

When comparing FEP-TP and the long term study populations it is important to remember that over a third of the families interviewed for FEP-TP were currently still open for cash assistance. While benefit levels may be fairly low, that income could certainly influence the family's need to use additional outside resources. In addition, FEP-TP respondents in general did not seem as knowledgeable of resources available in the community. Several spoke of just learning these "systems" as they have never had need to use such resources in the past.

### **Children's Issues**

The respondents in the FEP-TP study are the biological parents of 301 children. Of this number, 214 were part of this study and are currently or have very recently lived in the respondent's home and were part of the cash assistance case. Table 15 presents the living situation for all children at the time of the study. Note that some children included in the study were not currently in the household but had been living there in the recent past.

**Table 15: Living Situation - Children**

Total number of children for parents	N = 301
Living situation of all children:	
In home	209 (69%)
On own	33 (11%)
With other parent	28 ( 9%)
With extended family	15 ( 5%)
In state custody	6 ( 2%)
Other	10 ( 3%)

Respondents were asked whether any of their children had left the home to live somewhere else for a month or more in the past year. (It was made clear this was an actual move, not an extended vacation.) Almost half of the 19 children who had left the home for a month or more in the past year were removed by a state agency. Two of the 9 children removed by a state agency were older teens removed because parents could not control their behavior. The remaining 7 were younger children from 3 families removed by Child Protective Services for mental health issues, an unstable household and drug related activity.

**Table 16: Children Leaving Home**

Reasons for child leaving home for month or longer in past year:	N = 19
Removed by state agency	9 (47%)
Establish own household	3 (16%)
Went to live w/ other parent	2 (11%)
Need better environment	2 (11%)
Can't afford to care for child	1 ( 5%)
Other	2 (11%)

Questions regarding the impact of welfare reform on children have surfaced during recent discussions of welfare reauthorization. Information regarding the well-being of children in this study was gathered to gain understanding in this area. The questions used reflect studies which have measured child well-being over time and can provide comparisons for future analysis. Table 17 presents some of the data gathered in the area of child well-being.

**Table 17: Measures of Child Well-Being**

	<b>FEP-TP Children N = 214</b>
Child in very good or excellent health	153 (71%)
Children with physical disability lasting longer than 3 months	30 (14%)
Children with mental issue lasting longer than 3 months	21 (10%)
Children needing extra help in school: including resource, tutoring, special education, ESL	35 (36%) Ages 6 - 17 N = 98
Children 5 and younger being read to 4 days a week or more	73 (66%) N = 111
Primary form of health insurance in the past year:	
Government	198 (93%)
Private	10 (5%)
None	5 (2%)
No health insurance for a month or more in the past year	74 (35%)
Child had no health insurance at time of interview	18 (8%)
Parent could not afford medical services for child at some point in past year	54 (25%)

### **Child Care**

When both parents need to work, child care can be as much of a barrier to family self-sufficiency for two parent families as for single parents. Of the 214 children in the home at the time of the study, 48 (22%) were 12 or older and legally not required to receive child care and were generally in school full time. There were 83 families with a child under 12 needing supervision if left home. Table 18 gives the activities of all children under age 12.

Only 4 families (9 children total), reported leaving a child home alone or in the care of a sibling under 13 on a regular basis, and no child was home alone more than 5 hours a week.

Of the 83 families with children who might need child care, 59(71%) had no problem with child care. Either they did not need/want it or they had satisfactory arrangements. The

**Table 18: Children’s Activities**

	<b>Children under 12 N = 166</b>
Children under age 6	111 (67%)
Child care in family home	25 (15%)
Child care in another family member’s home	33 (20%)
Daycare facility; pre-school; Pre-K	6 (4%)
Head Start	3 (2%)
Kindergarten	6 (4%)

remaining 24(29%) families reported a lack of child care. These families represent 52 children for whom child care is a problem. Table 19 details the reasons lack of child care is an issue.

**Table 19: Reasons for Lack of Child Care**

<b>Those reporting child care problems:</b>	<b>N = 24</b>
Can’t afford care	12 (50%)
Don’t trust anyone else	6 (25%)
Age of Child	2 (8%)
None in the area	2 (8%)
Transportation	1 (4%)
Closed during work hours	1 (4%)

Several families who spoke of “not trusting anyone” had personal experiences with childhood sexual abuse and were very fearful for their children. Also, several families had received assistance after moving to the area and did not know anyone well enough yet to leave children in their care. As will be seen in self-reported barriers, over one-third of those who report child care as barrier say it prevents work for at least one member of the couple.

The most pressing questions regarding child care surfaced as respondents were asked about their experience with the FEP-TP program as a whole. A few customers reported receiving help with child care, but the majority who had comments were frustrated because child care was not available to them. Several said that employment counselors told them to set up their schedules (whether for work, training or school) opposite of each other (one working days and the other evenings or weekends etc.) so that there was someone home with the children at all times. Couples felt this was not good for the family as a whole and made finding work to meet these scheduling needs very difficult.

## Barriers to Employment

The shift in welfare reform has moved the country from an entitlement based view to a vision of welfare as a pathway to employment. Given this primary focus, it is important to identify barriers that might affect a person or family's ability to secure and retain employment. This section discusses barriers from two perspectives. First, individuals were asked to report their view of potential barriers to work. Second, a series of indicator scales and screening tools were used to determine the possible presence of barriers to employment. These scales are the same as used for the long term study and comparisons will be made where possible.

### Self-Reported Barriers

In this section each member of the couple was presented with a list of 23 barriers to employment. If the individual indicated that a particular barrier was present they were then asked to indicate if the barrier *prevents work*, *affects work* or *doesn't affect work*. Research completed in the previous study indicated that a person's perception of a barrier is almost as significant as the mere presence of the barrier.

The self-reported barriers "lack of good jobs available, wages too low, lack of education, lack of job skills, physical health problems and lack of transportation" all had more than 50% of couples who reported these barriers. There are some barriers that are not reported as often, but when they are reported, they are more likely to be perceived as preventing work. "Language barrier" is a good example of this. While only 19% of families reported this barrier, 71% of those who reported it as a barrier said that it prevents work. "Homelessness," "spouse or partner objects" and "criminal record" were also quite high. "Lack of job skills" is an example of a barrier that occurs often and when it does, has a high rate of those who say it prevents work. This combination of factors makes this barrier particularly important to notice.

Primary respondents self-reported an average of 6 barriers per person (range: 0 to 13). The secondary respondents averaged 7 per person (range: 0 to 15). More than a third of the families had an additional "other" barrier to work. These included such things as being in school full time, living in a rural area and a lack of work experience. Respondents made note of a need for on-the-job training experiences to help them gain the work experience many employers require before hiring someone.

Respondents were also asked what barrier they perceived as the *greatest* barrier to employment. Given all 24 options, the one most often chosen by both primary (17%) and secondary (16%) respondents was "lack of good jobs." The economic climate during the time of this study could have been a factor. Regional differences begin to surface when looking at barriers that might be effected by the economic downturn. The barrier "lack of good jobs" was reported by 100% of respondents in the Mountainland, Eastern and Western regions. "Wages too low" was cited least often by both primary and secondary respondents in the central region.

Table 20 presents the prevalence of each barrier for the primary and secondary person as well as for the couple together.

**Table 20 : Self-Reported Barriers and their Impact**

<b>BARRIER</b>	<b>Primary n= 85</b>	<b>Prevent Work</b>	<b>Secondary n = 86</b>	<b>Prevent Work</b>	<b>Couple N = 91</b>	<b>Prevent Work</b>
Child health/behavior	20 (24%)	1 (5%)	24 (28%)	2 (8%)	24 (26%)	3 (13%)
Alcohol / Drugs	6 (7%)	1 (17%)	6 (7%)	-0-	10 (11%)	1 (10%)
Family Illness	11 (13%)	1 (9%)	13 (15%)	1 (8%)	15 (17%)	2 (13%)
Homelessness	4 (5%)	2 (50%)	4 (5%)	2 (50%)	4 (4%)	2 (50%)
Read/Write problems	23 (27%)	7 (30%)	26 (30%)	6 (23%)	35 (39%)	9 (26%)
Physical Health	36 (42%)	6 (17%)	35 (41%)	10 (29%)	49 (54%)	15 (31%)
Mental Health	27 (32%)	2 (7%)	28 (33%)	4 (14%)	38 (42%)	5 (13%)
Care for elderly relative	3 (4%)	1 (33%)	3 (4%)	-0-	5 (6%)	-0-
Lack of Education	36 (42%)	8 (22%)	44 (51%)	13 (30%)	58 (64%)	18 (31%)
Lack of job skills	36 (42%)	12 (33%)	41 (48%)	15 (37%)	50 (55%)	19 (38%)
Criminal Record	28 (33%)	9 (32%)	21 (24%)	10 (48%)	37 (41%)	15 (41%)
Current legal issues	20 (24%)	2 (10%)	17 (20%)	2 (12%)	27 (30%)	4 (15%)
Spouse/partner objects	5 (6%)	1 (20%)	3 (4%)	3 (100%)	8 (8%)	3 (43%)
Wages too Low	66 (78%)	5 (8%)	58 (67%)	5 (9%)	68 (75%)	6 (9%)
Caring for infant	28 (33%)	3 (11%)	27 (31%)	6 (22%)	31 (34%)	8 (26%)
More than 3 children	16 (19%)	1 (6%)	19 (22%)	1 (5%)	19 (21%)	2 (11%)
Language Barrier	14 (17%)	9 (64%)	16 (19%)	11 (69%)	17 (19%)	12 (71%)
Lack of transportation	39 (46%)	5 (13%)	42 (49%)	12 (29%)	48 (53%)	13 (27%)
Lack of telephone access	11 (13%)	-0-	13 (15%)	-0-	13 (14%)	-0-
Lack of good jobs	65 (77%)	13 (20%)	70 (81%)	23 (33%)	76 (84%)	25 (33%)
Lacks medical coverage	25 (29%)	1 (4%)	26 (30%)	2 (8%)	29 (32%)	2 (7%)
Lack child care	21 (25%)	4 (19%)	24 (28%)	6 (25%)	28 (31%)	10 (36%)
Choose to stay home	16 (19%)	14 (88%)	20 (23%)	19 (95%)	32 (35%)	30 (94%)
Other Barrier	21 (25%)	8 (38%)	22 (26%)	7 (32%)	32 (35%)	13 (41%)

## Barriers Indicated by Measure

As in past studies, scales and indicative measures were used to determine the presence or possible presence of a number of barriers to employment. Barriers identified in this section are seldom transitory. They are severe, persistent and when present, often the most significant issue facing the person. The following is a list of barriers and the measures used to gather this data.<sup>2</sup>

- **Depression:** Depression is the most common mental illness in the United States. Clinical depression is far more serious than normal sadness or “the blues.” It is a chronic condition of abnormal sadness, causing marked functional impairment, disabling psychological symptoms, and paralyzing fatigue. Clinical depression can cause reduced capacity to experience pleasure, excessive irritability, or negative thinking which can lead to self-defeating or suicidal behavior. Clinical depression may also interfere with concentration, learning, and decision-making. (Taylor, 2002) For this study the CES-D (The Center for Epidemiological Studies-Depression Scale) was used. This scale does not provide a clinical diagnosis but offers a reliability indicator of depression risk. The CES-D is a continuous measure of the symptoms of depression. A score of 16 or above on this measure is generally used to indicate high risk for clinical depression.

- **Post-Traumatic Stress Disorder (PTSD):** PTSD involves exposure to a traumatic event in which a person witnessed or experienced events that involved actual or threatened death or serious injury. The person persistently re-experiences the event through recollection or dreams. A person with PTSD might try to avoid thoughts or activities associated with the trauma. He or she may also have feelings of detachment, restricted emotional range, or diminished interest in activities. While less common than depression, PTSD can be every bit as disabling. (Taylor, 2002) The scale used to measure PTSD is based on the DSM-III, and results in a dichotomous measure indicating the presence or absence of the condition.

- **Anxiety:** This measure has not been used in recent studies but was added as a measure due to the large number of respondents in previous studies who have self-reported the presence of anxiety. As with the PTSD measure, questions were based on the DSM-III diagnostic criteria and resulted in a dichotomous measure indicating the presence or absence of the condition.

- **Physical Health Issues:** This barrier screen involved the respondent rating their physical health from “excellent” to “poor”. An individual who reported their health as “fair” or “poor” is considered to have a physical health barrier. This global measure is known as the Self-Reported Health Status and has been widely used as an indicator of physical health. It’s predictive value is well established.

- **Substance Abuse:** Respondents were asked to indicate if they had considered cutting down on the use of alcohol or other drugs in the past year. A positive response to consideration of cutting down on alcohol or drug use was used to indicate the presence of a drug or alcohol issue.

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<sup>2</sup> The measures used here are identical to the ones used in the long term study. Additional information regarding the measures can be found in the previous reports as referenced in footnote 1.

- **Work History:** Work history was determined by asking the respondent “what is the longest time you have worked at a job in the past 5 years?” Those whose answer was less than 6 months were indicated to have an employment barrier.

- **Education Barrier:** The education barrier was calculated by separating those who had received a High School diploma or GED and those who had not. Not having a high school diploma or GED constitutes an education barrier.

- **Learning Disabilities:** Respondents in the study answered questions from the Payne scale as a way to identify those with potential learning disabilities. The scale uses a series of 14 questions asking respondents if they have difficulty with issues such as memorizing numbers, filling out forms, spelling simple words they know, etc. The scale is not a clinical indicator but a screening tool to identify individuals who may be at high risk for learning disabilities.

- **Child Physical Health Problems:** Respondents were asked to report serious medical needs of their children. This would include physical or medical conditions that have lasted for three or more months.

- **Child Behavior Problems:** Child behavior issues were determined by using a screening tool called the Child Behavior Checklist. This tool is typically administered to parents or an adult living with the child. A total of 47 problem behaviors related to aggressive behavior, delinquent behavior, and anxious behavior were examined. The tool is not diagnostic but used as an indicator of potential problems that should be investigated further. A score in the “clinical” range was used to indicate a child with a “severe behavior problem.” These are children for whom professional intervention is strongly advised. In this study the screen was completed on the oldest child in each household. (Taylor, 2002)

- **Child Protective Services (CPS) Referral:** Respondents were asked whether, since becoming a parent, CPS had ever investigated their families. They were also asked to indicate if the report was substantiated.

Data regarding the above 12 barriers is presented in Table 21 indicating the prevalence of each barrier for both the primary and secondary respondents. To provide a family profile results are presented to indicate the number of families where one or both persons have a particular barrier. This data is compared to data gathered among long term respondents when using identical measures.

### **Health/Mental Health Barriers**

There were three mental health areas screened in this study: depression, PTSD and anxiety. The results for each mental health area are shown in Table 21. Of the primary respondents 46 (51%) had an indication of one or more of the mental health barriers. For results for secondary respondents were similar with 47 (52%) screening positive for one or more such barrier. Both depression and PTSD results were higher for the long term group than participants in the two parent program. It should be noted that for 1/3 of the two parent families depression was a clinical issue for both respondents in the couple. Clearly this degree of depression in the household would have a significant impact on family functioning and the lives of the children.

**Table 21: Barriers: Comparative Data**

Barrier	FEP-TP Respondents				Long Term Sample	General U.S. Population
	Primary	Secondary	Couple One	Couple Both		
<b>Health/Mental Health Barriers</b>						
<b>Mental Health</b>						
CES-Depression	45 (54%)	43 (51%)	28 (31%)	30 (33%)	62%	
Post-Traumatic Stress Disorder	8 (10%)	9 (11%)	9 (10%)	4 (5%)	14%	3.6% §
Anxiety	14 (16%)	12 (14%)	12 (13%)	7 (8%)	---	
<b>Physical health problems</b>	24 (29%)	33 (38%)	27 (30%)	15 (17%)	44%	19.9% £ (Utah only)
<b>Drug abuse</b>	6 (7%)	8 (9%)	4 (4%)	5 (5%)	----	
<b>Alcohol abuse</b>	11 (13%)	9 (11%)	14 (15%)	3 (3%)	----	
<b>Work/Education Barriers</b>						
<b>Work History</b> - less than 6 months at one job in past 5 yrs)	11 (13%)	22 (26%)	31 (34%)	1 (1%)	20%	
<b>Education</b> (No HS diploma or GED)	33 (36%)	42 (47%)	33 (36%)	21 (23%)	38%	12% □
<b>Learning Disability</b>	14 (17%)	16(19%)	20 (22%)	5 (6%)	23%	
<b>Family Barriers</b>						
<b>Physical health problems - child</b>	N/A	N/A	25 (28%)		32%	
<b>Severe child behavior problems</b>	N/A	N/A	8 (17%)		21%	
<b>Child Protective Service referral</b>	N/A	N/A	33 (36%) reported 9 (27%) substantiated		50% reported 28% substantiated	

‡ - NIMH - National Institute of Mental Health: <http://www.nimh.nih.gov/publicat/depression.cfm>

§ - NIMH - National Institute of Mental Health: <http://www.nimh.nih.gov/publicat/ptsdfacts.cfm>

£ - Utah Department of Health - Utah Health Status Survey - 1996 - Utahns ages 35 - 39

□ - 2000 Census data for people 35 - 39 <http://www.census.gov/population/socdemo/education/p20-536/tab01a.pdf>

Recall that only 27 (32%) of primary respondents and 28 (33%) of secondary respondents self-reported a mental health barrier, a near 20% difference for each group between self-report and indicator results. This is similar to the difference for the long term respondents. What is different is the *perception* of the barrier. Long term respondents who reported a mental health barrier were nearly twice as likely as FEP-TP respondents to report that the barrier prevented them from working.

The physical health issues of FEP-TP respondents were less common than among long term respondents but more common than that found in the average population in Utah. Physical health issues were present for both members of 17% of the couple. These numbers are important relative to the availability of health insurance for parents. Respondents were asked about access to health insurance in the past 6 months. There were 46 (53%) primary respondents and 39 (45%) secondary respondents who had gone without health insurance in the past 6 months. These are significant percentages given the prevalence of mental and physical health issues.

Drug and alcohol issues were present in a small minority of respondents. Changes in the study questions make comparison with the long term respondents impossible. Only one respondent indicated that drug or alcohol use prevented them from working.

### **Work/Education Barriers**

The presence of a work history (6 months or more of employment at any one place in the past 5 years) has been closely connected with moving toward self-sufficiency. From the data it is interesting to note that long term respondents fall in the middle between primary and secondary participants in FEP-TP. Long term respondents were often serving as “mom and dad” to the children in their care. Primary respondents have generally been the one employed and financially supporting the family while the secondary participant has either been a traditional “stay at home mom” or one that works more irregular jobs to supplement income. This ability to rely on one person to care for the children while the other is employed is important to the financial and overall success of the family. Only one family reported neither participant having worked 6 months or more at any one place in the past 5 years. This couple openly admitted intense drug use during this time - they are currently in treatment and moving toward employment.

Lack of education is certainly an issue for FEP-TP participants. Over one third of primary respondents and nearly one half of secondary respondents had no high school diploma or GED. For almost a quarter of the couples “lack of education” was a barrier for both members of the couple. While the work histories indicate that many of the respondents have been able to work, this lack of education has limited their ability to obtain better paying employment that has career potential. The screening test for learning disabilities indicated that 14 (17%) primary respondents and 16 (19%) secondary respondents should be screened further for learning disabilities.

Following up on a potential learning disability is an important step, as identifying this issue may qualify the person for assistance through such programs as Vocational Rehabilitation. Connecting with this type of resource would be helpful in meeting the respondent’s educational needs and assist in attempts to improve the person’s employment potential.

## Family Barriers

Barriers in this section are not based on individual responses but on the experience of the family as a whole. The presence of physical disabilities for any child and severe child behaviors for the oldest child were both slightly lower for FEP-TP respondents than long term respondents. The percentage of Child Protective Services referrals was lower for FEP-TP respondents but the substantiation rate was very similar. Recall from Table 16 that almost half of the children who had left the home for a month or more in the past year had been removed by the state.

Typically this section on barriers would contain information on domestic violence. Because of the method of data collection, speaking with both members of the couple at the same time, domestic violence questions were not asked. This is consistent with the long term study when, if a spouse or partner is present at the time of the interview, domestic violence questions are skipped. This is of course not to imply that domestic violence is not potentially an issue for these couples but reflects an effort to keep all persons safe.

## Experience with Dws and Fep-tp

One of the primary purposes of this study was to discover more about respondents' experiences with and attitudes toward DWS and FEP-TP. This data provides information regarding these customers' overall experience on assistance, their attitudes toward various aspects of the department and FEP-TP and specific elements of the participation plan and how it worked for them.

### Time on Assistance

The information in Table 22 was gathered from the DWS database Pacmis. By study definition, all respondents received some months of FEP-TP cash benefits between September 2002 and February 2003. In reviewing information back to January 1997, respondents received an average of only 3.6 months of FEP-TP cash assistance. When looking at regular FEP months

**Table 22: Number of Months Receiving Cash Assistance**

Experience on Assistance		Average # of months
# of months on FEP - TP since 1997	N = 91	3.6
Of families with FEP - TP months before 1997 (83 families (91%) had no months before 1997)	N = 8	6
Of families with months on regular FEP since 1997 (51 families (56%) had no FEP months since 1997)	N = 40	10
Of families with months on regular FEP before 1997 (72 families (79%) had no FEP months before 1997)	N = 19	19

during that same time, 40 families received cash assistance, averaging just 10 months per family. Before 1997, 8 families received FEP-TP for an average of 6 months and 19 families received regular FEP for an average of 19 months.

The averages presented regarding the numbers of months on assistance can be deceiving due to the tremendous range of total months used, from 1 to 74 months. In reality, more than 50% of the families have received 6 months or less of any type of cash assistance. These data make it clear that in regards to the amount of time receiving cash assistance, FEP-TP families are very different than long term single parent recipients.

As shown in Table 23 , 35 (39%) of the families were receiving cash assistance at the time of the interview. Only 13 (23%) of those families whose cash assistance was closed do plan on reapplying.

**Table 23: Status of Cash Assistance**

	<b>FEP - TP</b>
Cash currently “Open”:	35 (39%)
Of those open (N=35): Type of cash assistance:	
Two Parent	20 (57%)
Single parent AF	13 (37%)
General Assistance	2 (6%)
Cash currently “Closed”:	56 (61%)
Average # of months closed:	3 mo (Range: .25 - 7 mo)
Of those closed (N=56):	
Plan on reapplying for cash assistance:	13 (23%)

### **FEP-TP Subgroups**

The FEP-TP program was designed to assist two parent families who were struggling financially to become self-sufficient. During the course of gathering data for this study it became clear that this program services a wide variety of families and thus a diverse set of needs. These families could be broken down into any number of groupings but for purposes of this report the breakdown will reflect the family types that stood out most clearly to the interviewers.

As has been noted, the FEP-TP families are generally different than the long term welfare population due to stability and length of parental relationships, work experience and a long history of “making it on our own.” Differences within the FEP-TP population were also evident. In order to investigate these possible differences the FEP-TP group was broken down into three groups. Group 1 includes those who came into the program as refugees. Group 2 consists of families where both of the parents are under 22 years of age. Group 3 retains the remaining respondents in the sample.

The group sizes vary greatly making statistically significant comparisons difficult, but some trends regarding these groups have surfaced. Table 24 provides comparative information useful in discovering unique qualities of each group.

**Table 24: FEP-TP Subgroup Comparisons**

	<b>Refugees N = 13</b>	<b>Young Couples N = 9</b>	<b>Other N = 69</b>	<b>Total</b>
Education level: Both members of couple have HS Diploma/GED	7 (54%)	3 (33%)	27 (39%)	37 (41%)
Depression indicated for at least one respondent in family	4 (31%)	5 (56%)	49 (71%)	58 (64%)
Health barrier indicated for at least one respondent in family	4 (31%)	2 (22%)	36 (52%)	42 (46%)
At least one person in household employed full or part time	10 (77%)	4 (44%)	38 (55%)	52 (57%)
Neither member has “poor work history” - less than 6 months continuous work - in past 5 years	5 (39%)	4 (44%)	50 (73%)	59 (65%)
“Food secure”	7 (54%)	4 (44%)	20 (29%)	31 (34%)
Currently receiving food stamps	10 (77%)	5 (56%)	58 (84%)	73 (80%)
Income below poverty line	8 (62%)	5 (56%)	48 (70%)	61 (67%)
Couple felt completely able to care for family while on FEP-TP	0 (0%)	4 (44%)	9 (14%)	13 (15%)
Couple would recommend this program to another family	9 (75%)	9 (100%)	46 (67%)	64 (71%)

### **Refugees**

There were 13 couples in the study who are refugees to the United States. All live in the Central region. There were 4 other refugee families who were eligible for the study but were not interviewed. Two of the families declined to participate. For the other two, no translator could be found to assist with the interview. Nine of the 13 interviews were conducted with the help of a translator. Language is clearly a primary barrier for a majority of refugee families. Table 24 above presents data on how the refugee families compare with the rest of the sample. These results are consistent with the personal stories told by many of the refugees.

Refugee families often come from the more educated segment of their societies. While their degrees are not generally recognized here, they have often had more education than the

typical two parent family here. The refugee group had the highest employment rate and in general were very anxious to be self-supporting. There was often frustration expressed that the type of employment respondents were able to get here did not match their skills and experience.

While depression is generally lower, PTSD is higher reflecting some very traumatic war situations and persecutions that led to their eligibility to immigrate as refugees. The families are typically tightly structured with little or no behavioral problems or legal involvement. Since most are very new to the United States these families are struggling to learn basic skills such as language, how to get around and how to use service systems in general. Food security is less of an issue, as these families have been accustomed to making little stretch for days.

Because of the lack of language skills and the dependency on a few people who know their language, the refugee population in general is very susceptible to a variety of scams. Families spoke of predators promising legal aid for things that are unnecessary. Others promised help in working with government systems “for a price.” Since this method of barter may be common in other counties, the families can easily be made to believe this is “normal” in the United States as well.

One issue often overlooked is that sometimes the conflict which drove a family from their country continues after they arrive in the United States. The political groups, classes and sects are all represented here as well. One respondent reported being assigned to a work site where someone who tortured him in his homeland was the site supervisor. The trauma of the torture made it impossible to work for this person. The employment counselor interpreted his refusal to attend as non-participation even when he tried to explain the situation through a translator.

### **Young families**

Another group that stood out as unique were the very young couples. There were 9 couples in which both members were under age 22. Four of these couples were from the Eastern region, 3 from North and one from both Central and Western regions.

As with the refugee families, the distinguishing characteristics for this group were highlighted by the selection criteria. These couples were “young” not just chronologically but in other important ways. Many were facing adult life and family responsibilities for the first time. In a third of these families neither partner had a high school diploma or GED. This group was the least likely to have one or more persons working. They also were the least likely to be receiving food stamps. None of these families had a child old enough to be screened for child behavior issues (age 4).

The attitudes of this group seemed most influenced by the events which led them to seek assistance. Several of these couples started receiving assistance when they chose to get married or live together and/or their families “kicked them out.” Having no social supports to fall back on, the couples came to the State for help. Appreciation for this help was reflected in the way several spoke of their work sites as places to learn work skills and how to retain employment. When asked how well the program met the families needs 4 (44%) responded “completely.” This was much higher than the other groups. In addition, all 9 of the young couples said they

would recommend this program to another family. Because these couples were just starting out and in need of basic skills and resources, this program met their needs well.

### **All “Others”**

This group, the remaining 69, contains all those not in the previous two categories. In some ways this group proved to have some of the most difficult challenges to self-sufficiency and the greatest struggles with FEP-TP. Respondents in this group are used to working. This group has the highest percentage of families for whom “lack of employment history” was not a barrier. But for members of this group, another barrier appeared and moved them from their normal course.

This “other” group shows the highest prevalence of depression and physical health barriers. They were also the most likely to be under the poverty line and not report being “food secure.” On the other hand they had the highest use of food stamps of all groups. The 5 families in the study who were actually receiving child care assistance were from this group.

Members of this group were least likely to recommend the program to others. The strong work histories and prevalence of significant barriers seemed to make this program less suited for this group. Most families here are accustomed to living comfortably on their own, and not using any form of government assistance. For this group a downturn in the economy, a medical problem or a temporary family crisis brought them to the point of needing assistance. While a few have been in and out of various government programs for years, most have been self-supporting most of their lives and find it very difficult to both ask for and receive assistance. This is especially difficult when they feel their skills and experience are not recognized and used to move the family back toward stability.

### **Reasons for Entering and Leaving Assistance**

For participants in FEP-TP, situations regarding loss of employment or reduction in income due to fewer hours was the primary reason a majority, 46 (51%) respondents *first* applied for cash assistance. “Moving to a new area” or out “on their own” was the primary reason for 27 (30%) of the families.

“Moving” was a typical answer for two types of families. Refugee families often seek assistance when first moving into the area. In addition, very young couples who move out (or are forced out) of a parent’s home often need help getting started. These couples typically have little or no work experience, lower levels of education and a new baby.

While there were a wide variety of reasons for the first closure of cash assistance, the most common reason again related to employment. For 44 (48%) of the families “increased income through work” was the primary reason their cash assistance closed. The next most common reason was that the couples simply decided the program was not working for them and they choose not to participate. For 17 (19%) of the respondents cash assistance had never closed.

A majority of the families, 63 (69%), only experienced one episode on assistance. Of those who did return, 18 (65%) again experienced reduction in hours or job loss that prompted



Those who move into the area are sometimes fleeing a depressed economy elsewhere and are trying to find work in a new area. Others come in an emergency to help family members and end up staying long term but have few resources in this area. Refugee families typically have no resources but fare much better if they are connected to others from their native land who are willing to lend them a hand getting settled and learning the basics of life here.

Job loss was often due to medical problems, usually of the primary recipient. However, sometimes severe illness in the family caused the primary support person to become unemployed. Medical needs, in addition to loss of employment and thus medical insurance, become a devastating combination. Debilitating injuries to the primary financial support person might make schooling or retraining necessary and thus the family needs help to live during the transition process.

A very different picture comes from families where one parent returns from prison to a household currently receiving FEP. The returning parent makes the family ineligible for single parent FEP and often struggles to find employment. There are many challenges for such families that need to be addressed while they seek employment. Young families also form a unique group. Very young couples (sometimes both under 20) living on their own often face challenges simply because of their age. Lack of work experience, lack of education, and often a very young child in the home makes it difficult for them to get started in the workplace. While these couples would appear in Table 20 in the category “moved out on own,” clearly there are a host of other issues that are part of their need for assistance. This is true with many of the families. One difficulty could be managed, but the combination of crises pushes families beyond their means and into the situation of needing to ask for assistance.

## **Employment Plans**

The role of the employment plan is especially significant in FEP-TP because payment is based on participation in required activities. DWS policy number 322 outlines the participation requirements for FEP-TP:

1. One parent must participate 40 hours each week - One parent referred to as the **PRIMARY** parent (the primary parent does not have to be the primary wage earner of the household) must participate as follows: **16** or more hours weekly in apprenticeships, on-the-job training, public or private internships, or paid employment. **AND 16** or remaining hours a week in a combination of adult education, short-term skills training, or acculturation activities for refugees. **AND 8** hours in a Job Search assistance activity = **40** hours weekly participation for the **PRIMARY** parent.

The Employment Counselor may reduce the job search requirement to allow increased participation in community work, adult education or skill training, when it is decided that the parent has explored all local employment options.

2. The other parent must participate 20 hours each week. The other parent referred to as the **SECOND** parent must participate 20 hours a week in a combination of paid employment, work site learning, job search, adult education or short-term skills training unless excused for good cause by the employment Counselor Case Manager. The hours spent in job assessment and interviewing count as part of this requirement. (DWS Policy Manual - #322 - FEP-TP Employment Focused Case Management Rules)

With these criteria as a guide, the employment plans created for the time period of the study were examined to determine if the plans contained the components described above. Some families had multiple plans due to participation in other FEP programs. There were also 11 couples who reported changing who was primary and who was secondary during their time on assistance. The plans used for this analysis were drawn from the most recent time when the respondents were participating in the FEP-TP program only. Table 26 below provides the breakdown of the 91 sets of employment plans:

**Table 26: FEP-TP Employment Plans**

Both Plans follow FEP-TP guidelines	Only primary or secondary plan followed guidelines	Neither primary or secondary followed guidelines
16 (18%)	28 (31%)	47 (52%)

**Plans that follow TP guidelines:**

Table 27 below outlines the activities as prescribed on the employment plans of those whose plans matched FEP-TP guidelines. Each set of numbers lists the number of hours required followed by the number of participants required to do the given number of hours.

**Table 27: Employment plans meeting program guidelines**

	<b>Primary N = 16</b>	<b>Secondary N = 16</b>
Apprenticeships Public or Private Internships	32 - 11 20 - 1	16 - 1 20 - 3 15 - 1 12 - 2 16 - 3
On-the-Job Training		
Paid Employment	40 - 3	
Adult Ed	16 - 1	16 - 2 3 - 1
Short-term Skills Training		
Acculturation		20 - 1
Job Search	20 - 1 8 - 12	20 - 4 8 - 2 4 - 5 2 - 1

**Plans where either primary or secondary participant plan followed guidelines:**

For 28 of the respondent families one participant had a plan that met policy guidelines and one participant did not. For primary participants, an incorrect number of hours (too many, too few, or an incorrect distribution) was the only reason a plan did not meet the guidelines. For

secondary participants the reasons were more varied. Reasons included no FEP-TP plan, activities listed but no hours designated, not enough or too many hours to meet policy, or hours in other activities instead of those outlined in policy.

**Table 28: One Participant Plan Meets Guidelines**

Total Families 28	No plan for the TP program	No hours indicated at all	Hours incorrect	Activities outside guidelines
Primary 11	0	0	11	0
Secondary 17	4	3	7	3

**Neither primary Nor secondary had plan matching policy:**

For these 47 families neither participant had a plan that fit department guidelines. The same types of issues were raised here as in the previous group.

**Table 29: Neither Two Parent Plan Meets Policy**

Total Families 47	No plan for the TP program	No hours indicated at all	Hours incorrect	Activities outside guidelines
Primary	8	2	29	8
Secondary	8	2	25	12

Because of the vital role employment plans play for FEP-TP customers, concerns were raised regarding participants for whom no employment plan could be located. How could a family receive benefits based on hours worked if there is no plan defining participation activities? DWS personnel who are very familiar with department data systems were asked to assist in the search for these plans. Several reasons were discovered for the non-existence of plans. One person had no social security number and was not in UWORKS. Two others had social security numbers but were not in UWORKS. A major question was raised regarding the policy guidelines for work with those who are undocumented.

A review of both FEP-TP and regular FEP plans shows an inconsistency in the way those who are undocumented receive services. It is clear that the department can offer no employment related services or require employment related activities however there are undocumented persons with and without employment plans. Some customer records can be accessed in UWORKS while others cannot. It is the understanding of the researchers that new policy in this area is being developed to address some of these concerns.

Regional breakdowns show that about half of the cases reviewed in each region had neither respondent with a plan that matches policy. One fourth to one-third of the cases had one

respondent with a plan matching policy and another one-fourth to one third with both plans meeting policy. Thus, among the four regions actively using FEP-TP no particular area had more problems than any other. Within specific regions there were also no particular offices with more problem plans than others.

**Additional activities outside FEP-TP guidelines**

**Table 30: Additional FEP-TP Activities**

Objectives	Hours for participation as listed on plan →	40	32	25	20	16	12	10	8	5	4	3	2	1	0	Total number of participants in each activity
Assessment	Initial/Comprehensive Assessment								1		2	1	9	5		18
	Formal Assessment	1			1			2		4	1	1		2		12
	Assessment Review								1	1		1	2	2		7
	Problem Solving Assessment													1		1
	DWS Social Worker Assessment - New												1	2		3
Life Skills	Family Counseling							2						1		3
	Life Skills (other)	1	1		1	1		1				1	1	1		8
	Housing Issues									1			2	3		6
	Transportation Issues							1		1				1		3
	Child Care Issues												1			1
	Court/Legal Issues							1								1
	Child Support Enforcement													3	1	4
Job Search Assistance	Pre-Employment Skills Training Workshop					2			2		2		3		1	10
	Job Retention Skills Training Workshop							2								2
	Job Connection Act.									3	2	1				6
	Child Care														12	12
	Other Support Svcs														10	10
	Needs-Related Pay													1		1
Treatment	Physical Treatment	1		1	1			2		3	2			2	2	16
	Mental Health Treat.									2				1		3
	Family Violence							1								1
Partner Programs	Voc. Rehab Services						1						2			3

Many respondents had activities on their plans which were not covered by department policy, but this does not necessarily mean the activities were inappropriate for a particular family. Many employment counselors seemed to recognize that there were other needs of the family and used the employment plan to help the family organize and accomplish other important activities such as securing child care, housing, or completing mental health counseling. Table 30 presents a list of additional activities which were part of the employment plans for study participants.

### Employment Plan Activities

The structure of FEP-TP employment plans as defined in department policy, include several components. Table 31 reflects the prevalence of each possible element of the employment plan as reported by program participants and as reflected in the employment plans on record with DWS. From this summary it is clear that job search is the most prominent activity both reported by participants and present on the employment plans. Work sites and “other” activities were also very common. The differences between the self-report data and the administrative data from DWS reflects some lack of understanding of program participants about what is contained in the employment plan. Interviewers were trained extensively to understand each element of FEP-TP as respondents often did not know what the particular activity was called, but could describe what they did. Even with these explanations there are still significant differences between the two data sources.

**Table 31: Participation Distribution in Employment Plans**

Elements of the employment plan	Primary Self report	Primary - DWS data	Secondary- Self report	Secondary- DWS data
Paid Employment	21 (24%)	12 (13%)	11 (12%)	6 (7%)
Public/Private Internship (work site)	37 (41%)	44 (48%)	28 (31%)	29 (32%)
On-the-job training	3 (3%)	2 (2%)	3 (3%)	1 (1%)
Adult Education	16 (18%)	10 (11%)	22 (24%)	15 (16%)
Short term skills training	4 (4%)	3 (3%)	1 (1%)	3 (3%)
Acculturation Activities	3 (3%)	10 (11%)	3 (3%)	7 (8%)
Job Search	61 (67%)	48 (53%)	44 (48%)	41 (45%)
Other	9 (10%)	38 (42%)	19 (21%)	49 (54%)

### Work Sites

A significant element of FEP-TP is the work site. This activity is also sometime referred to as public or private internships. The purpose of this activity is to provide an environment where skills are learned, work habits developed and participants are prepared to return or move into work. Because this activity is a core element of FEP-TP and because it is potentially an activity that will be greatly used with the reauthorization of welfare, several questions were asked

regarding participants’ experiences with this activity. Table 32 provides information regarding respondents experience with work site activity.

**Table 32: Work Sites**

	<b>Primary N = 90</b>	<b>Secondary N = 89</b>
Participate in work site:	46 (51%)	35 (39%)
Did it lead to employment?	2 (4%) (N = 46)	1 (3%) (N = 35)
Would you recommend this site to another?	29 (32%) - yes	16 (47%) - yes
Who found site for you?		
Employment Counselor	31 (34%)	24 (26%)
Self	10 (11%)	5 (6%)
Job Coach/Other	5 (6%)	5 (6%)

As mentioned earlier, respondents were often unfamiliar with department terminology for various activities. It was common for respondents to refer to work sites as “community service” or “volunteer work”. The idea of this being a place to learn skills or prepare for future employment was generally missing. This might have been due, in part, to the types of sites where customers were placed.

A review of work sites shows that 30 of the respondents were at work sites which primarily serve the poor. Food banks were most common. Homeless shelters, day cares, clothing closets and senior centers also served as sites. Others included janitorial services and yard work at city buildings and work with children in school settings. Some respondents were frustrated that they were required to engage in these “volunteer” activities when they felt they should be learning skills, going to school, doing intensive job search, etc.

When asked what skills were learned at the work site, of the 81 work site participants, 37 (46%) reported learning nothing. Of the remaining respondents, 20 (25%) spoke of learning maintenance, yard care, janitorial and hard labor, 9 (11%) reported learning how to hand out food to poor people, stock shelves and fold clothes. There were 13 (16%) who reported learning things such as computer and other office skills, how to work with children and some food preparation and service. Those who said they would recommend the site to another program participant generally did so because they found it to be a pleasant environment (nice people, flexible hours, easy work) and not necessarily because it would move them toward employment.

**General Experience with FEP- TP**

Respondents were also asked a set of open ended questions to learn about their views of FEP-TP. When asked to describe “*what had been the most helpful part being on the two parent program?*” 18 respondents could find nothing helpful. Of those who did find something helpful 34 said that the short term financial assistance was indeed helpful. As one respondent said, “The fact that we had help getting through a month with no work or resources served us well.” While

many felt the money was helpful, others felt like one respondent who said, “FEP kept us in gas and diapers. It was just a little money - it was helpful but not enough.” Other helpful aspects included comments by 16 respondents regarding helpful case workers who assisted them in learning about and using DWS resources. As one respondent said, “Our employment counselor helped us the most through everything. He listened, he understood us.” Additional helpful areas included: food stamps (12), increase in self-esteem and motivation to look for work (7), good work site (6), lead to employment (4) and language/ESL skills (3).

When asked “*what was the hardest part of being on the two parent program?*,” respondents most frequently (30) talked about the hassles of paperwork and reporting requirements. One respondent commented, “Endless paperwork! There’s nothing really easy about it. Being required to log all the activities ten days before receiving the actual cash AND you have to sign saying the entire month’s estimated activities is hard! There’s no sense of success - the drudgery continues every month.” Other comments included frustration with difficult or unhelpful DWS workers (25). One respondent said, “DWS was a bottleneck to me getting a job. I finally had to ignore what they said and go out and do what I felt was best for two weeks and got a job. The worker was constantly unavailable, wouldn’t call back to give times and dates of appointments and we’d have to miss, and then she’d blame it on us.” Such communication problems between workers and customers were common. There were several comments (20) regarding the low benefit level and the feeling that the money would never be enough to help the family. Frustration over child care problems was named by 13 respondents. Some reported being able to receive child care while others said they were forced to work opposite hours of their spouse as no child care could be provided.

Respondents were asked “*was there anything that you thought should have been part of the program that was not offered?*” For 34 (40%) of the couples nothing more was needed in the program. The remaining 51 (60%) felt there were important elements missing. These couples described things such as improved training programs, work sites that would lead to employment and generally more help in getting a job (17). Improved service delivery was an issue for 14 respondents. This included such areas as better trained workers, being treated with basic respect and workers being more available. As one respondent commented, “They should explain things better. Just told us what to do - didn’t explain or ask for our input. Found out later we broke a rule and got in trouble.” An additional 13 respondents, generally those new to this country, asked for more help with learning English. There were 10 respondents who specifically mentioned the need to increase the benefit level. Six respondents also spoke of the need to include child care as part of the plan. This was particularly a problem when the couple had work activities that overlapped but no child care was provided.

The division of comments relative to family type provided some interesting insights. While each of the subgroups (refugee, young parent and other) reported between 55% and 60% in favor of adding something else to the program, the types of items listed were very different. Young couples commented on the need for parenting classes and more support from their employment counselors. Refugee families asked for English classes and enough financial support to survive until they find employment. Often they have no other family to turn to as they get started with their lives here. The “other” group also commented on low benefit amounts but most often their comments regarded the need for skill building, education, job training, day care and other employment related concerns.

Regarding the method of payment, couples were asked *“What method of payment of your cash benefits would you prefer - once a month, twice a month or some other way?”* “Twice a month” was preferred by 55 (60%) couples, while “once a month” was the preference of 32 (35%) couples, and 4 couples had another suggestion for payment. When asked why they supported a particular method, the majority choosing “twice a month” felt that this method best modeled real life. These families were often accustomed to twice monthly paychecks and knew how to budget and make money last when it came this way. Those who supported “once a month” spoke of needing a lump sum at the beginning of the month in order to pay rent. A majority of responses favoring either method focused on the family’s need to budget their money. Respondents seemed to choose the method of payment with which they were most familiar.

The role of the employment counselor was also discussed. Respondents were asked to think specifically about their employment counselor (distinctions were made so as not to confuse this with the eligibility worker or any other DWS personnel). They were asked, *“In what way was/is your last (or current) employment counselor most helpful to you?”* A great majority, 82%, found something positive to say about their interactions with their employment counselor. Many respondents expressed appreciation for workers with an understanding attitude, workers who were pleasant, supportive and willing to work with them. Help with obtaining specific resources such as education, clothing for work, transportation, H.E.A.T., food stamps and Medicaid was mentioned by 18 respondents. Help with finding a job was specifically mentioned by 8 respondents. When speaking of the helpfulness of their worker, one couple said she was “helpful in every way. Tries (works hard) to get what we need. Kind and respectful. Helps with what we need. Responsive. Quick to call, quick to fix things.”

There were 16 (18%) respondents who could find nothing positive to say about the interaction with their employment counselor. Their comments generally focused on poor personal treatment from the worker. There were also problems with communication, understanding policy, and frustration over delays in service.

Another way this worker-customer relationship was manifest was in the development of the employment plan. As was previously mentioned, some employment counselors included “extra” activities in the plan to help the family focus on immediate needs. It is clear that many of the activities listed were important aspects of managing family life and caring for the needs of both the participants and their children. This may be reflected by respondents answer to the question “who was part of developing the employment plan?” A majority of respondents (65%) said that both the couple and the employment counselor worked to develop the plan. There were 28 (31%) respondents who said the employment counselor simply told them what they must do and 2 couples who said they developed the plan on their own. Of the 30 respondents who were “told what to do” or who did their plans on their own, 14 (47%) reported a “poor” or “fair” relationship with their employment counselor. For those who reported working with their employment counselor to develop the employment plan only 13 (22%) reported a “poor” or “fair” relationship.

### **Overall Family Success and FEP-TP**

Couples were also asked several general questions regarding their experience with the program. Table 33 presents these findings.

**Table 33: Family Success and FEP-TP**

Question:	FEP - TP N= 91	
While you were on FEP-TP - to what degree were you able to provide for the needs of your family N = 85	Completely	20 (24%)
	Mostly	13 (15%)
	Somewhat	42 (49%)
	Not at all	10 (12%)
Have you ever separated so you would be able to care for your family by receiving more benefits?	Yes	9 (10%)
	No	82 (90%)
Has anyone ever suggested that separating would be a good way to help the family financially?	Yes	23 (25%)
	No	68 (75%)
Who suggested this? N = 23	Family/friends	13 (57%)
	DWS personnel	5 (22%)
	Decided ourselves	3 (13%)
	Others	2 ( 9%)
How successful do you feel you were in accomplishing the goals of FEP-TP - for example: moving toward self-sufficiency, becoming employed, meeting program requirements?	Very Successful	20 (22%)
	Somewhat Successful	31 (34%)
	Somewhat Unsuccessful	18 (20%)
	Very Unsuccessful	22 (24%)
Would you recommend this program to another family? N = 90	Yes	64 (71%)
	No	26 (29%)
Since you stated receiving FEP-TP would you say your overall situation has:	Improved	48 (53%)
	Stayed the Same	30 (33%)
	Become Worse	13 (14%)

As reported in Table 33 above, 64 (71%) couples said they would recommend the program to another family, while 26 (29%) said they would not. They were then asked to explain why or why not they would recommend FEP-TP to another couple. Those who would recommend the program spoke of the help it gave them when they had no other resources. As one respondent said, “It’s a good program to help you get on your feet and get motivated to get a job.” Another couple commented, “It was something you could count on being there at the end of two weeks. It gave you something to do during the day - we just can’t sit there all day.” While the positive response toward the program was high, more than a third of the comments indicated that they would recommend the program only if the family was *really* desperate, that the program should only be used as a last resort. Those who had other family supports were able to supplement these supports with the help from the program.

Those who would not recommend the program spoke of frustration over the low benefit levels. Many also felt it did not help them move toward employment but kept them tied to the system. Several also commented that it created stress in the family and put strain on the couple’s relationship. One couple said, “It was not very beneficial to us. If it stays the way it is, it won’t

benefit anyone who is trying to help themselves.” Another commented, “The entire program needs to be scrapped and rebuilt from the ground up. It’s not structured to help real life families. It’s not grounded in any kind of reality I’ve ever heard of. It’s not structured to get people off welfare.”

Couples were asked to rate their overall situation since they started receiving benefits as a couple. Table 33 gives the results of this question. In addition, respondents were asked to describe what was *better* or *worse* about the family situation. For the majority life has indeed become better. This improvement was usually credited to one or both partners securing employment. Others mentioned working together as a couple to solve problems, dealing with mental health issues, and more overall stability in the family situation. For those who said life was worse, lack of financial security was most often the problem. The couples who had separated during or shortly after being on FEP-TP often sited the stress of money problems as a central issue.

### **Success with FEP-TP**

The diversity of the families who are eligible for FEP-TP makes administration and ultimate success with this program quite challenging. FEP-TP customers report the greatest satisfaction when they feel the employment counselor has really worked to understand their situation and made every effort to provide all the resources possible for the family to return to self-sufficiency. The diversity of the FEP-TP population makes it extremely important for a worker to learn about the strengths and experiences of the customer while developing a plan (within department policy) that most quickly moves that family toward stability.

### **References**

Janzen, F., Bartlome, J., and Cunningham, P. (June 1987) *Emergency Welfare Work and Employment: An Independent Evaluation of Utah’s Emergency Work Program*. Social Research Institute. University of Utah.