

TANF Workers' Responses to Battered Women and the Impact of Brief Worker Training

What Survivors Report

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Battered women (n = 159) report on their experiences with their Temporary Assistance to Needy Families (TANF) caseworkers. Workers most often ask about physical harm, feelings of fear, and police involvement. They least often create a safety plan, give information about work exemptions, and ask whether the partner had a gun. Women's major reasons for not talking about abuse are that the worker did not ask and a fear of negative outcomes. Workers who attended a 1-day training are more likely than untrained workers to discuss the women's fear and physical harm, to help develop a safety plan, and to be viewed as generally helpful.

Keywords: *battered women; TANF; TANF caseworkers*

Little information is available on welfare caseworkers' responses to clients with a domestic violence history. In particular, few studies of victims' perceptions of caseworker responses exist, and no studies were found of victims' perceptions of the effectiveness of caseworker training on domestic violence. Concern about caseworkers' responses was heightened recently because of research

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showing that battered women constitute a high percentage of their caseloads (General Accounting Office [GAO], 1998; Tolman, 1999; Tolman & Raphael, 2000). Lifetime rates of domestic violence among women on welfare range from 34% to 65% (Tolman & Raphael, 2000). Concern about caseworkers' responses was also heightened following a national shift in policy with the passage of the 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA). This act ended welfare as a cash entitlement program for families living in poverty and replaced it with Temporary Assistance to Needy Families (TANF). The act sets strict work requirements for maintaining benefits, with a benefit limit of 2 consecutive years and a 5-year lifetime limit. The act also requires cooperation with child support enforcement (Griswold, Pearson, & Thoennes, 2000).

Advocates raised concerns that the new requirements would keep survivors in abusive relationships because domestic violence would interfere with employment and benefit compliance. Income from employment or welfare is often crucial in helping survivors leave and remain out of violent relationships (Davis, 1999; Rhodes & McKenzie, 1998). There is growing evidence that offenders interfere directly with their partners' work or work training by harassing, stalking, abusing, and intimidating them, even to the point that some women lose their jobs (GAO, 1998; Lyon, 2002; Moore & Selkove, 1999; Sable, Libbus, Huneke, & Anger, 1999). In addition, abuse interferes indirectly with employment because battered women are at an increased risk for depression, anxiety disorders, substance abuse, and other psychological problems (Brush, 2000; GAO, 1998; Tolman & Raphael, 2000; Tolman & Rosen, 2001). These psychological problems can interfere with work and work training (California Institute of

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Mental Health–CalWORKS [CIMH-CalWORKS], 2002b), so battered women risk losing employment and benefits (Moore & Selkove, 1999). Some authors note that rigid work requirements without adequate safeguards could increase abuse because many offenders feel threatened by their partners' independence and escalate abuse to keep them isolated and dependent (Raphael, 2000). The Family Violence Option (FVO), adopted as an amendment to PRWORA, attempts to address concerns about battered women's well-being under welfare reform. It allows states the option of waiving federal work requirements temporarily for renewable 6-month periods when domestic violence is a barrier to meeting requirements (Raphael, 1999).¹

If domestic abuse is undetected by workers, the economic and physical risks to adult victims and their children can increase. However, it is important that caseworkers not only detect the abuse but also respond properly. Caseworker responses can include referrals, work requirement waivers, and brief interventions, such as safety planning (Davies, 1998a). These responses might make the difference between safety and increased danger to battered women and their children. A lack of disclosure on the part of victims can be related to worker discomfort or lack of skills or can arise from victim reluctance to disclose. Recent studies, reviewed below, provide information on rates of victim disclosure, reasons for nondisclosure, and the response of caseworkers once disclosure occurs.

By 2004, all but 10 states had adopted the federal FVO, with others planning to do so or adopting similar policies of their own (Administration for Children and Families, Office of Family Assistance, 2002; Legal Momentum, 2004; Raphael, 1999; Sachs, 1999).² In 1998, state representatives and domestic violence advocates reported that most states requested written verification of the abuse but accepted a written affidavit from the victims if written documentation was not available. About three fourths of the states were using or planned to use a formal assessment instrument to aid detection. Some states notified all applicants, verbally or in writing, about the problem of domestic violence and why it might be useful to disclose it.

Michigan, where this study was conducted, adopted its own version of the FVO. Legislation taking effect in October 1998 mandated that the Family Independence Agency (FIA) "screen and

identify individuals . . . who have a history of domestic violence," refer those individuals to counseling and supportive services, and waive program requirements if compliance would make it more difficult to escape domestic violence, if it would penalize victims, or if an individual was at risk of further domestic violence. The FIA policies adopted by Michigan in January 1999 allowed a waiver of work requirements for 3 months. The temporary waiver is renewable indefinitely with supervisory approval. Clients were notified of the work requirement waiver during a work program orientation and with a brochure.

Data from states that first used the FVO policy ($n = 12$) revealed extremely low rates of domestic abuse disclosure of 1% to 3% (Raphael, 1999). Other studies also report low detection rates. For example, workers in a New York study reported that only 2% to 4% of their clients were battered women (Hagen & Owens-Manley, 2002). Detection rates were also very low in a study in Texas (0.5%), even when a domestic violence specialist was available (Lein, Jacquet, Lewis, Cole, & Williams, 2001). In two states with many years of experience using intensive case management, the rates of detection were much higher, 13% to 21%. Advocates in the Raphael (1999) study who monitored FVO implementation in a few states found that policies were implemented inconsistently.

The general orientation of welfare caseworkers may help explain their response to battered women. Many were trained to provide income support and are not accustomed to responding to complex cases with case management and supportive counseling (Hagen & Owens-Manley, 2002; Levin, 2001). Domestic violence cases may be especially difficult for caseworkers because they must listen nonjudgmentally to traumatic incidents. At times, their discomfort in dealing with violence may turn to hostility (Levin, 2001) and negative attitudes toward clients (Postmus, 2002). Furthermore, for caseworkers who are survivors of domestic violence, the experience undoubtedly makes some more sensitive but seems to make others more callous (Levin, 2001). Caseworkers revealed that they have difficulty understanding the many women who repeatedly leave and return to abusive partners (Hagen & Owens-Manley, 2002). Workers reported being more likely to grant waivers if women took actions on their own, such as going to a shelter or obtaining a restraining order. A few workers believed that some clients lied about being victims to

receive special services (Brush, 1999; Hagen & Owens-Manley, 2002).

Worker attitudes may lead to ineffective actions when abuse is identified. Only a fourth of the TANF clients in a Wisconsin study who were battered women were referred for counseling (Moore & Selkove, 1999). Less than 10% were told that part of their work activities could include getting help for abuse or that child support enforcement rules could be waived, despite a fourth of the women saying they were afraid of harassment from the abuser if the state attempted to collect support (Moore & Selkove, 1999).³ In a study in two California counties, researchers found that only about half of the seriously abused women reported receiving help from a professional (CIMH-CalWORKS, 2002b); 14% were estimated to have unidentified service needs. A study of employment training staff showed that most of the staff understood the obstacles presented by domestic violence for at least some of their clients, and they accurately estimated the prevalence of violence (Brush, 1999). However, they were unlikely to recognize the risk markers for domestic violence.

Most women do not want work rule waivers or referrals to shelters but instead want comprehensive case management for various practical problems (Lein et al., 2001; Postmus, 2002). However, referrals to domestic violence specialists may not occur if caseworkers see themselves solely as eligibility screeners and if there is no feedback from the specialist to the caseworker on the progress of the case (Levin, 2001).

Many of the above findings were also derived from in-depth case studies of seven counties in five states (Burt, Zweig, & Schlichter, 2000). Some specific tools seemed to help foster disclosure, including antiviolence posters and service brochures, one or two screening questions about current or past abuse or needs for safety, and an extensive screening after initial indication of abuse. Clients may have several reasons for being reluctant to disclose abuse. Despite statements about confidentiality, clients might fear that the abuser will learn of their disclosure. They may also fear being pitied by the caseworker (Tolman & Raphael, 2000) or losing child custody if a report is made to the child protection unit (Brandwein & Filiano, 2000; Postmus, 2002). They may not want to recall traumatic memories, and they may feel ashamed about being a victim (Brandwein, 1999). In a survey of Wisconsin

welfare recipients, only 32% of the victims disclosed their abuse to a caseworker. Many of those who did not disclose felt that "it was not the caseworker's business" (32%), or they felt ashamed (24%; Moore & Selkove, 1999). A smaller percentage (5% to 10%) thought that the caseworker would not have time or would not be sensitive or that they would lose their benefits.

In-depth interviews with 10 battered women (Busch & Wolfer, 2002) revealed several themes related to disclosure: (a) Women anticipated that they would disclose abuse yet often decided not to based on situational factors, such as fear of losing child custody under failure-to-protect statutes; (b) positive experiences included hearing personal or professional histories about domestic violence from workers; (c) negative experiences were attributed to the workers' judgmental attitude or the complexities of the system; and (d) suggestions for improved services included more training of workers on the trauma experienced by victims and their children and shelter advocates acting as brokers.

Once domestic violence is detected, it is possible to offer a waiver for TANF requirements in states with the FVO. Waivers help women by giving them time to attend court hearings, obtain restraining orders, and seek medical and psychological help (Lein et al., 2001). However, in a survey of six California counties, only about half of the clients who were receiving domestic violence services said that the staff had informed them of the FVO (CIMH-CalWORKS, 2000), and in two of these counties, only two people reported receiving the option (Meisel, Chandler, & Rienzi, 2003). A New York study using case vignettes showed that exemptions are likely to be given to the clients in the most danger (Hagen & Owens-Manley, 2002). A New York City study showed that most applicants and recipients did not receive a domestic violence screening form as required and, if identified, most did not receive a waiver (Hearn, 2000). Many of the findings regarding welfare workers' response to domestic violence are consistent with findings regarding other professionals. For example, child protection workers often do not ask about domestic violence and often do not detect it (Magen & Conroy, 1997; Magen, Conroy, Hess, Panciera, & Simon, 1995; Shepard & Raschick, 1999).

Although welfare caseworkers may not differ from other professionals in their responses to domestic violence, training may provide a way to increase the effectiveness of their responses.

However, very little is known about the outcomes of training. We found only one quantitative study on the effects of training welfare workers about domestic violence (CIMH-CalWORKS, 2002a). Eligibility workers and employment counselors in five California counties received between 3 and 19 hours of training, with the hours varying by county. Most of those trained (62% to 90% across the counties) rated the trainings as moderately or very helpful. Those with training were much more likely to make referrals for service than those not trained.

One purpose of this study was to evaluate a 1-day training. The goals of the training were to help workers learn to assess and detect domestic violence, understand its dynamics, increase empathy toward survivors, learn about brief interventions, recognize employment barriers, and learn the newest policies on domestic violence waivers. Another purpose of the study was to determine what victims reported in general about the responses of caseworkers: Were they asked about abuse? Were they believed? Were they offered exemptions from work requirements? Were the workers perceived as being helpful? We predicted that the effects of training would be positive but weak because it was only 1 day and did not have a follow-up booster session or include a standardized screening protocol. It also occurred at a time when it seemed to be difficult for workers to focus on the trainings. There were large turnovers in the staff, and staff members were receiving training on many different topics.

METHOD

TRAINING PROCEDURES

Welfare managers and workers were encouraged to attend a 1-day training on domestic violence aimed at helping them identify and understand domestic violence, develop safety plans, and make referrals. There were approximately 3,172 FIA specialists and managers in the state at the time of the training. Excluding Wayne County (for reasons described below), there were approximately 2,150 caseworkers and managers in the state. There were 1,889 workers who attended one of the initial trainings we evaluated.

A highly experienced domestic violence specialist conducted 63 trainings at 10 sites throughout the state. One of the authors (Pahl) observed a training and was able to discuss it with some of the participants. The caseworkers were very interested in the topic of domestic violence, and their questions revealed that their clients were experiencing domestic violence-related problems. However, caseworkers felt that they were too swamped to give much individual attention to clients, and thus, it was very difficult to assess for domestic violence. The caseworkers believed that they would be able to spend more time helping clients if they had fewer clients and did not have to spend so much of their time on paperwork. Some caseworkers were adjusting to the new role definitions for TANF workers, from eligibility functions to case management functions. These perceptions were found in two interview studies with Michigan caseworkers and managers that highlighted problems during this time period, including excessive paperwork and role transitions but also computer system problems, loss of the most experienced staff because of early retirement plans, "too many trainings," and new requirements to conduct home visits (Seefeldt, Danziger, & Anderson, 1999; Seefeldt & Peters, 2000).

SAMPLING OF COUNTIES

Domestic violence training programs were selected based on their location in counties with varying levels of trainee participation, demographic characteristics, and regions of the state. The state government divided the state into four operations regions. We selected at least two counties from each of the four regions. Differing levels of trainee participation (from a low of 43% to a high of 100%) could reflect the attitudes of managers and caseworkers. Therefore, we selected counties with both low and high participation rates. We also included counties that were predominantly urban or rural, relatively wealthy or poor, and relatively high or low in rates of Whites in the population. The final sample consisted of 15 counties with shelters; some shelters served more than these primary counties. We did not evaluate the training in the most populous county (Wayne County), which includes Detroit, because it was used for pilot trainings and because it used its own domestic violence trainers.

DESIGN

A post-only evaluation was conducted because almost all of the trainings had occurred after the evaluation process began. Responses of women with trained and untrained workers were compared. Post-only evaluations have the advantage of pretesting not being able to influence the posttest responses.

SAMPLE OF SURVIVORS

Surveys were sent to the 14 domestic violence agencies serving 23 counties that agreed to participate in the study. There were a total of 580 surveys sent to the shelters between February 2000 and August 2001. The number sent to each shelter was determined through discussion with the shelter staff member designated as the project contact person. Between 10 and 25 surveys were sent at a time. We did not ask shelter staff to record the number of women who were asked or who refused to participate because we did not want to add to their administrative burden. We asked that women receiving nonshelter services, such as support groups, be given priority because shelter residence would be an obvious indicator to TANF workers that a woman was battered. Seven of the 14 shelters received multiple mailings of surveys. Many of the shelters requested additional surveys for multiple workers. However, many shelters reported needing additional surveys because they lost the surveys and, in one case, because the surveys were lost in a shelter fire.

A woman was eligible to complete the survey if she was staying in a domestic violence shelter, participating in a domestic violence support group, or receiving other services from a domestic violence program. In addition, to be eligible, she must have experienced domestic violence within the past year and received financial aid services from the FIA or had contact with her FIA caseworker within the past year.

Surveys were returned between March 2000 and December 2001. Ten of the shelters returned surveys, ranging from 2 to 29 surveys from each shelter ($Mdn = 16$). Of the 580 sent, 171 were returned, and 159 were usable for data analysis. The primary reason that surveys were not usable was that they were incomplete ($n = 6$). However, additional surveys were unusable for the following reasons: two women did not have a caseworker, one

woman reported that she was not eligible to receive assistance, and four participants reported that at the time of the survey, they had not talked with their caseworkers.

The range of the average age in the shelters that returned the surveys was 27 to 32. For seven shelters, the Caucasian population was between 30% and 40%, and for another, it was 67%. The percentage of women having children was 56% (median across shelters). Severe victimization was revealed as follows: 60% choked, 52% stalked, and 6.5% shot at or stabbed (median across shelters).

At the time of the survey, 68% were staying in a shelter, 54% were in a support group, and 47% were receiving other services. A third of the women (33%) had contact with their abuser in the past week, and another third (35%) within the past month; 23% had contact between 1 to 6 months. For only 9% of the women, the contact was longer than 6 months. The majority of women (57%) had talked with their caseworker within the past week; for another 26%, it was between a week and a month ago. For only 4%, more than 6 months passed since talking with their worker.

MEASURES

A self-administered survey for survivors was constructed by the first four authors for this study. The survey included questions about survivors' perceptions of their caseworkers' ability to detect abuse, caseworker comfort, validation of domestic violence, safety planning, referrals, lethality assessment, and open-ended questions on the helpfulness of the caseworker's response. Demographic, background, and violence history questions were not asked because they were not central to the evaluation and because we also did not want to risk breaching confidentiality or the perception that it could be breached. Two items asked about policy issues: "Please check if your FIA caseworker informed you that: You could continue to receive benefits for a longer time, without returning to work, if domestic violence was getting in the way of your ability to work" and that "You could keep the identity of the father of your child private (not establish paternity) if identifying him would put you in danger."

The surveys were distributed by shelter workers and took about 5 minutes to complete. The women were offered a \$5

incentive in the form of cash or a gift certificate for completing the survey. During a pilot implementation, it was apparent that women were eager to talk about experiences with their workers and often elaborated verbally beyond the responses on the survey. Completing the questionnaire stimulated conversations among clients and generally seemed to be an empowering experience for them. In some cases, it was the first information that they received about waivers from work requirements.

To determine if a woman had a worker who participated in the FIA caseworker training, she was asked if her most recent FIA caseworker's name was on a list attached to the survey. The women had to choose among three answers: Yes, my worker's name is on the list; No, my worker's name is not on the list; and I don't know if my worker's name is on the list. If the worker's name was on the list, then the individual was an untrained worker. There were 68 in the trained group and 51 in the untrained group; 18 did not know their worker's name, 13 had workers outside of the counties chosen in the study, and 7 did not answer the question. We also excluded the responses of two women who had not seen their workers in more than 6 months.

We asked three open-ended questions: (a) "What did your FIA caseworker do that was helpful for you as a victim/survivor of domestic violence?" (b) "What could your FIA caseworker have done to help you more?" and (c) "Do you have other comments or reactions on your experiences with your FIA caseworker?" Because of the nature of the questions, considerably fewer answered the second and third questions. The responses to these questions were rated on a 5-point Likert-type scale by three of the trainers. The trainers did not know which responses were for trained or untrained workers. The scale categories were as follows: 1 = *not helpful at all*, 2 = *somewhat unhelpful*, 3 = *neither helpful nor unhelpful*, 4 = *somewhat helpful*, 5 = *extremely helpful*, and U = *uncodeable*. Rating of the second question was sometimes confusing because a negative response, such as "nothing," would mean that the caseworker had done everything to help. Interrater reliabilities were calculated using the percentage agreement across raters. Perfect agreement on the same scale category across all three raters was 65%, 41%, and 54% for Questions a, b, and c, respectively. These agreement levels are not too low considering that five categories and three raters were being used. When

perfect agreement by at least two out of three raters was calculated, the percentage agreements were 94%, 93%, and 92% for Questions a, b, and c, respectively. Agreement was also excellent when calculated counting the next nearest category as agreement.

The responses were also used qualitatively to provide a deeper understanding of the types of actions and attitudes the survivors viewed as helpful and unhelpful. A brief list of the illustrative examples of helpful and unhelpful responses was extracted and included in the results and the appendix.

RESULTS

Seventy percent of the abuse survivors reported talking with their TANF worker about the abuse. Rates for trained and untrained workers did not differ significantly (71% vs. 74%). Among those who disclosed their abuse, 84% said they "brought up the abuse," and 16% said the worker did, with no difference by training status. The most commonly discussed topics were the physical harm from one's partner (45%) and feelings of fear (45%), followed by control over money (38%), partner jealousy (28%), and what happened when disagreements occurred (20%; see Table 1). Trained workers were reported to have been significantly more likely to discuss fear and the physical harm of the clients.

For a set of topics related to lethality assessment, the most common topics were whether the police had been called (45%) and whether her partner abused drugs or alcohol (40%; see Table 1). Whether the violence had become frequent or severe and whether the partner had a gun were not discussed at high rates (14% to 15%). About a third of the women (34%) had discussed whether their partners had hurt their children. The rates for discussing these topics did not differ by whether the worker was trained.

The most common action of the workers was an attempt "to connect the women with other people who could help" (31%; see Table 1). Other actions were much less common: development of a safety plan (14%), referral for joint counseling (9%), and asking about the abuse each time they were seen (9%). Trained workers were significantly more likely to develop a safety plan than were untrained workers (18% vs. 2%).

Almost three fourths (73%) of the women agreed or strongly agreed that their workers believed what they said about the

TABLE 1
Responses to Survivors Who Disclosed Abuse:
Discussion Topics and Worker Actions (Questions Answered by
Survivors Who Told FIA Workers About the Domestic Violence)

	Total	Trained	Untrained	Chi-Square
<i>"Please Check if You Have Discussed Any of These Topics With Your Caseworker"</i>				
<i>n</i>	108	48	35	
If you have been physically hurt by your partner	45%	54%	37%	2.4*
If you have felt afraid of your partner	45%	52%	28%	4.6**
If you have money of your own to spend	38%	40%	34%	0.2
If your partner is very jealous	28%	31%	23%	0.7
What happens when you and your partner disagree	20%	17%	20%	0.2
<i>"Please Check if You Have Discussed Any of These Topics With Your Caseworker"</i>				
<i>n</i>	117	50	40	
If the police were called because of the violence	45%	40%	45%	0.2
If your partner abuses drugs or alcohol	40%	36%	40%	0.1
If the children have been hurt by your partner	34%	32%	27%	0.2
If your partner has a gun or can get a gun	15%	14%	15%	0.0
If the violence has become frequent or severe	14%	10%	10%	0.0
<i>"Please Check if Your FIA Welfare Worker Did Any of the Following"</i>				
<i>n</i>	117	50	40	
Tried to connect you with other people who could help (shelters, hotlines)	31%	34%	27%	0.4
Helped you develop a safety plan (e.g., hiding money and papers, escape routes)	14%	18%	2%	5.4***
Asked you about the abuse each time you met	9%	8%	10%	0.1

NOTE: FIA = Family Independence Agency.
 * $p < .06$. ** $p < .05$. *** $p < .01$.

violence (see Table 2). Slightly less than half of the women agreed or strongly agreed that their workers helped them figure out ways to be safer (43%) and seemed to understand how bad the violence was (45%). A fourth agreed or strongly agreed that the worker "seemed uncomfortable talking about the abuse." Trained workers were perceived by the women as being more

TABLE 2
Responses to Survivors Who Disclosed Abuse: General Worker Responses

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Chi-Square
<i>"Please Rate How Much You Agree With Each Statement About Your FIA Welfare Worker"</i>						
My worker believed what I said about the violence						
Total (n = 96)	28%	45%	20%	3%	4%	
Trained (n = 42)	29%	47%	21%	2%	0%	
Untrained (n = 30)	20%	50%	17%	3%	10%	5.0
My worker seemed to understand how bad the violence was						
Total (n = 99)	17%	28%	30%	13%	11%	
Trained (n = 44)	11%	32%	32%	18%	7%	
Untrained (n = 32)	16%	25%	31%	9%	19%	3.8
My worker helped me figure out ways to be safer						
Total (n = 95)	17%	26%	25%	17%	15%	
Trained (n = 41)	12%	20%	34%	22%	12%	
Untrained (n = 3)	20%	23%	27%	13%	17%	2.1
My worker seemed uncomfortable talking about the abuse						
Total (n = 95)	7%	16%	18%	38%	21%	
Trained (n = 42)	7%	12%	17%	50%	14%	
Untrained (n = 29)	3%	21%	21%	21%	35%	9.0**

NOTE: FIA = Family Independence Agency.

***p < .05.

TABLE 3
Reasons for Nondisclosure: Questions Answered by
Those Who Did Not Tell an FIA Worker About Domestic Violence

	<i>Percentage</i>
<i>"What Are the Reasons That You Have Not Told Your FIA Caseworker?" (n = 47)</i>	
Caseworker did not ask	55
It would be hard to talk about	30
Fear of bad things happening after I told the worker (such as losing kids or benefits)	21
Wrong setting (no privacy, not enough time)	17
No help was needed	15
Did not meet with caseworker	13
Did not think that worker would believe me	13
Fear that my abuser would find out and become more violent	4
Other: For example,	
"Didn't feel it was necessary" (n = 3)	
"He's a man and it's easier to talk with a woman"	
"No personal relationship with worker"	
"Not the most comfortable with him"	
"She wouldn't do anything anyway"	28

NOTE: Comparison between trained and untrained was not conducted. It was not as appropriate without disclosure and small sample size. FIA = Family Independence Agency.

comfortable to talk to about the abuse. Nine percent of the women said that their workers suggested that the women get counseling together with their partners; this rate did not differ significantly between trained and untrained workers.

Two questions were asked of women who did not talk about the abuse with their workers. First, 4% of the women said the worker asked if they had experienced violence, even though the women did not bring it up. Second, when asked for the reasons they did not tell their workers about the abuse, the majority (55%) said that the worker had not asked. Other reasons were as follows (see Table 3): It would be hard to talk about (30%); fear of bad things happening after telling the worker (such as losing kids or benefits; 21%); wrong setting (no privacy, not enough time; 17%); no help was needed (15%); did not think the caseworker would believe me (13%); and did not meet with caseworker (13%). Other reasons were given by 28% of the women and included the following: "it's easier to talk with a woman," "no personal relationship," "did not feel it was necessary," "she wouldn't do anything anyway," and other responses. Comparisons between trained

and untrained workers were not made because the sample size was small and a comparison was not as appropriate without disclosure of abuse.

All respondents were asked several questions, regardless of whether they disclosed abuse to their caseworker. Twenty-one percent said that their workers had asked directly if they were being hurt physically; there were no effects of training. About half agreed or strongly agreed with the following statements: "My worker seemed to understand my situation" (57%) and "My worker respected my right to make decisions" (57%; see Table 4). About a fourth neither agreed nor disagreed with these statements. Training did not affect these results. Only 18% said that the worker informed them that they could continue to receive benefits if domestic violence was getting in the way of their ability to work. Only 12% were told that they could keep the identity of their children's father private if it meant they would be placed in danger. None of the responses differed by training status.

Among women who disclosed the abuse, the trained workers were perceived to be significantly more helpful than the untrained workers on the first and third open-ended questions about helpfulness (see Table 5). Among women who did not disclose, there were no significant differences between trained and untrained workers. Examples of helpful and unhelpful responses to these questions are shown in the appendix. The responses indicated that the women needed help with both material needs and emotional needs, as in the following examples:

"[Worker] was understanding during a difficult conversation and directed me to different services to help myself and my children financially, WIC [special supplemental nutrition program for Women, Infants, and Children], Medicaid, FIP [Family Independence Program] Grant. I did not feel looked down on or judged, which was something I feared in revealing the domestic violence.

Gave information also about the shelter. Talking to her also helped. She was understanding and empathized with me.

Transferred my case quickly, got food stamps and . . . was kind and courteous and helpful with directing me as far as social security.

Unhelpful responses were revealed in comments such as the following:

TABLE 4
General Worker Responses (Questions Answered by All Respondents)

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Chi-Square
<i>“Please Rate How Much You Agree With Each Statement About Your FIA Welfare Worker”</i>						
My worker seemed to understand my situation						
Total (n = 155)	24%	23%	29%	10%	13%	
Trained (n = 66)	24%	23%	33%	9%	11%	
Untrained (n = 50)	24%	30%	20%	10%	16%	3.1
My worker respected my right to make decisions						
Total (n = 155)	25%	32%	25%	10%	8%	
Trained (n = 65)	26%	34%	28%	6%	6%	
Untrained (n = 50)	22%	36%	20%	12%	10%	2.6

NOTE: FIA = Family Independence Agency.

She could have lent an ear to hear me and could have showed me respect . . . could try harder to help me without giving me a hard time. She could stop being lazy and racist to me and look at me as a person and not as a nobody.

She said I didn't qualify for food stamps, that I had to go to the Workfirst program right away, and I have a baby under 3 months old. She also did not believe I wasn't living with my boyfriend, that I needed to give her proof of the assault and a no contact order by the judge. She has been absolutely awful.

Being honest with you, she is a dumb [expletive deleted]; she didn't help me at all in the other county. I was not getting food stamps, so that should have gotten my food stamp case open quicker, it would seem. She still hasn't got my case going so I could pick them up.

The hostility noted in other studies is apparent in these responses. Also apparent are perceptions of racism and the insistence that women prove they were assaulted.

DISCUSSION

More than two thirds of the women obtaining help at domestic violence programs said that they had discussed their abuse with their TANF worker. However, more than 80% of these women said that they, not their worker, brought up the topic. Trained workers were not more likely to initiate the discussion. Physical harm and fear were more often the topics of discussion than topics focusing less directly on the violence. Women were asked the most about whether the police were called. They were rarely asked if the partner had a gun or whether the violence was escalating. In a survey of social workers in diverse settings, inquiry about access to weapons was also less routine than inquiries about other topics (Danis, 2003).

A third of the women said that they discussed with their case-worker whether the children were hurt by their partners. Workers were reported to be most likely to connect the women with help in general, whereas actions such as safety planning were much less common. In contrast, safety planning was routine among almost half of the workers in a survey of social workers in diverse settings, and referrals for specialized domestic violence services

TABLE 5
 Comparisons of Trained and Untrained Workers on Helpfulness Scales: Means and Standard Deviations

	Trained			Untrained			t Value	p Value
	M	SD	n	M	SD	n		
What did your FIA caseworker do that was helpful for you as a victim or survivor of domestic violence?	3.2	1.6	40	2.5	1.6	33	1.96	.03**
What could your FIA caseworker have done to help you more?	2.6	1.4	33	2.1	1.2	29	1.30	.09
Do you have other comments or reactions on your experiences with your FIA caseworker?	3.0	1.7	29	2.1	1.4	22	2.16	.02**

NOTE: FIA = Family Independence Agency. Analysis here included only women who disclosed abuse. Differences were in the same direction with the total sample but were not as great. Scale values were as follows: 5 = extremely helpful, 3 = somewhat helpful, 1 = neither helpful nor unhelpful, 2 = somewhat unhelpful, and 4 = not helpful at all.

**p < .05.

were even more common in that survey (Danis, 2003). The most common reason that women gave for not talking about abuse was that the worker did not ask. Similar to Moore and Selkove's (1999) study, other common reasons for not disclosing the abuse were that it was hard to talk about and that they feared negative outcomes.

One area of concern was that only a small percentage of women said they were informed about policy exemptions for battered women, specifically exemptions from work requirements and from giving the name of the child's father. The rates were about the same as those in a Wisconsin study (Moore & Selkove, 1999). Although some women choose not to use these exemptions, they may still be very important options in severe cases of abuse (Lyon, 2002).

There were only a few significant differences between trained and untrained workers, but the areas showing differences seemed to be among the most important. Trained workers were more likely than untrained workers to discuss the women's fear and physical harm and were more likely to help them develop a safety plan. Trained workers were also perceived to be more comfortable talking about the abuse and more helpful on two of the general questions about helpfulness.

Several weaknesses in the methods we used reduce the strength of our conclusions. First, the sample comprised those seeking help at domestic violence agencies. We do not know how responses would differ from other survivors. Second, the measures were developed for the study, and their validity and reliability were not established. Third, a nonexperimental design was used, and thus, any of the differences between trained and untrained groups could be attributed to factors other than the training.

Despite these limitations in methods, the results suggest the need for trainings that will improve detection rates, lethality assessment, assessment of dangers to the children, and give information about policy exemptions. A number of methods for improving training effectiveness can be considered. Future evaluations can assess the effects of longer trainings and booster sessions. Other states have used trainings of 2 to 4 days and booster sessions (Ganow, 2001). Changes in the content of training,

method for delivering the content (e.g., more experiential learning), or other changes in the training might have also produced more significant results from the training. The list of direct quotes from survivors of the helpful and unhelpful responses of TANF workers (see appendix) can be an effective training tool, as similar lists have been used effectively in training other professionals. The responses to these questions revealed extremely helpful and extremely unhelpful responses that seemed to be nearly evenly divided between emotional and material issues. The responses also revealed perceptions of racism, which indicate the need for training in cultural sensitivity.

In particular, we recommend testing a brief screening instrument to help guide domestic violence identification and to help workers feel more comfortable talking about abuse. The use of brief screening instruments in child protection worker training has been shown to increase detection rates (Magen & Conroy, 1997). Screening instruments of two to four questions for use by TANF workers or advocates in TANF offices have been implemented in several states (Burt et al., 2000; Ganow, 2001). If these screening instruments are adopted, thorough training is necessary, and procedures for protecting confidentiality must be in place (Assistant Secretary for Planning and Evaluation [ASPE], 1997; Burt et al., 2000; Davies, 1998b; Ganow, 2001; Lyon, 2002). Many programs go beyond screening to a more extensive assessment, focusing in particular on different forms of violence the women experience, how their lives are affected by it, and specific barriers to finding safety for the women and their children (ASPE, 1997).

Davies (2000) provides detailed recommendations for training TANF workers. Among the basic skills she recommends for TANF workers are (a) communication in a positive and supportive manner; (b) knowing how to explain all resources and options in the TANF system, not only those related to domestic violence; (c) knowing how to provide meaningful referrals; and (d) avoiding increased risks to battered women and their children by keeping information from the abuser and allowing for flexibility in planning with her. Davies stresses the importance of providing information to workers that is relevant to their TANF role and thus can be integrated with it. She cautions against the use of one-time trainings and provides advice for increasing the credibility

of the trainer. She also recommends ways to respond to workers who are victims of domestic violence.

Although attempts to improve training are important, it is likely that more extensive intervention is needed to fully address the needs of survivors in the welfare system. Therefore, we also recommend that state policy makers become familiar with innovations and keep abreast of research on their effectiveness. As we reviewed in the introduction, there is some empirical support for (a) direct questioning for screening rather than indirect methods, such as brochures; (b) intensive case management; and (c) the availability of a domestic violence specialist. Other innovations and approaches that appear promising are described in several recent reports. Because most battered women generally want to work, they need help with work supports, such as child care and transportation. Our qualitative findings also point to these needs. Many women may also need help with mental health problems, substance abuse, and the emotional trauma of domestic violence—problems that are usually intertwined (CIMH-CalWORKS, 2002b; Ganow, 2001). Some agencies count help seeking for these problems as allowable work activities (Burt et al., 2000). A focus on client strengths can occur at the same time that these problems are being addressed (Postmus, 2000). Future research, services, and TANF training for these services will also need to address differences among clients, including differences in the women's age, race, ethnicity, and immigration status. Ultimately, what may be needed to further women's and children's safety, while helping women become more economically independent, is a culture change in each agency (Burt et al., 2000). Such comprehensive change would increase the agency's overall climate of helpfulness, have full administrative support, provide extensive staff training, and assess all barriers to independence. Positive incentives and supports, rather than fear of sanctions, are most likely to assist women toward independence and increased safety for themselves and their children (Burt et al., 2000).

APPENDIX

EXAMPLES OF HELPFUL AND UNHELPFUL WORKER RESPONSES

HELPFUL RESPONSES

- Helped me with information I was unaware of. Gave information also about the shelter. Talking to her also helped. She was understanding and empathized with me.
- Transferred my case quickly, got food stamps and FIP reinstated quickly and was kind and courteous and helpful with directing me in as far as social security.
- Got in touch with [name of shelter] and informed me of my rights.
- My caseworker is [name of worker], she has been more than understanding and helpful, she has not given up on me and shows I am more than just a client.
- She really helped me out a lot. She got day care started for me so I could start my job. She also set up transportation for my children and me.
- Was understanding during a difficult conversation and directed me to different services to help myself and my children financially—WIC, Medicaid, FIP Grant. I did not feel looked down on or judged, which was something I feared in revealing the domestic violence.
- She said to be careful and never accept anyone hurting me and that there was help out there.
- After finding a job, I could get my rent and deposit paid for relocation. This helped out.
- She was kind and compassionate to my situation. She also has gone out of her way to help me get certain programs going for me to help me become independent. (For example, my car wasn't working, and I couldn't afford to get it fixed, and she was able to get a large grant to get my car fixed.) But that's not all. She has been one of the nicest people I have met that works for FIA.
- [Name of worker] has been a wonderful worker and should be commended for all the support she gives her clients.
- Provided me with info on what assistance I could get from the state to help me regain stability in my life, i.e., food and cash assistance, Medicaid, Bus Passes, Grant for a vehicle.
- She is a very caring and supportive and a positive person. Who shares positive views in life to help me stay focused.
- She gave me assistance quickly to get funds to relocate my family to a safe environment.

- I don't think she could have done much more because she already knew I had an open CPS [Child Protective Service] case. She is always very helpful and courteous.
- I think [name of worker] is a wonderful person who takes her job seriously. She has done everything she could to help me. I will always remember how nice, courteous, and helpful she was.

UNHELPFUL RESPONSES

- She said I didn't qualify for food stamps, that I had to go to the Workfirst program right away, and I have a baby under 3 months old. She also did not believe I wasn't living with my boyfriend, that I needed to give her proof of the assault and a no-contact order by the judge. She has been absolutely awful.
- She could have been more sympathetic. She was insulting. I believe she could have been fair. I left Aug 17th, and I have gotten no help, not even with food for my children and me.
- Being honest with you, she is a dumb [expletive deleted], she didn't help me at all in the other county. I was not getting food stamps, so that should have gotten my food stamp case open quicker, it would seem.
- Stop being nosy about something that has nothing to do with my case and listen to what I have to talk about. What happen to me she didn't remember.
- I don't think she should be working in the FIA field. I am not trying to be rude, but she needs some more training.
- Nothing was addressed about the abuse.
- I think that there should be shortcuts to the system for women to help them get out of domestic abuse situations. There should also be more help available, food, clothing, shelter, etcetera. Independent living with support.
- I told my worker flat out that I was fleeing a domestic violence situation, and she said "um-hum," for someone who is extremely vulnerable, that response could send them to their death.
- She curses at me and procrastinated a whole lot; until I got a hold of her supervisor.
- She could have lent an ear to hear me and could have showed me respect. . . . She could stop being lazy and racist to me and look at me as a person and not as a nobody.
- She needs help understanding that race shouldn't be an issue; just helping people should be her main concern.
- She did nothing to help. She and her supervisor told me that the FIA does not pay wives to leave their husbands. The subject was dropped, and I received no benefits.
- I think that she is rude and cruel hearted.
- Has not returned any calls, has not returned any calls from social worker at D.V. shelter!

- Doesn't return calls. Not available. Not supportive. Not helpful.
 - They didn't work closely enough with me to identify things she doesn't even know. I'm just another welfare mom, another statistic.
 - Listen to my whole story. Tell what help is available. Instead, she is overworked, and I'm lucky to get a call back within a week, let alone 24 hours.
 - Everyone's situation is different. Listen, I mean really take time to listen and advise accordingly. Don't judge.
 - They are supposed to help us, and I feel as if I am wasting my time doing this with the case; they have not helped me at all, and I went in there 2 weeks ago.
 - [Should have given] me a list of subsidized housing. Been more concerned.
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NOTES

1. Policies have also been developed nationally and in particular states to grant exemptions from requirements regarding child support enforcement, if doing so would place a victim in danger (Pearson, Griswold, & Thoennes, 2001).

2. The FVO was not wholeheartedly endorsed by victim advocates. Some feared that disclosure would mean that all cases would be reported to the child protection unit because the mother would be held responsible for exposing the children to abuse, that the abuser might retaliate, or that overgeneralizations about the traits of battered women would make workers think that victims could not work and thus did not need any assistance (Davies, 1996).

3. Wisconsin did not adopt the federal FVO but has other pertinent policies. This state is held as an example of early and successful welfare reform.

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