

California State University, San Bernardino

CSUSB ScholarWorks

Theses Digitization Project

John M. Pfau Library

1998

Characteristics related to the overall empowerment of urban female parenting welfare recipients

Glenda Yvonne Boatner

Narda Judge

Follow this and additional works at: <https://scholarworks.lib.csusb.edu/etd-project>



Part of the [Social Work Commons](#)

Recommended Citation

Boatner, Glenda Yvonne and Judge, Narda, "Characteristics related to the overall empowerment of urban female parenting welfare recipients" (1998). *Theses Digitization Project*. 1460.

<https://scholarworks.lib.csusb.edu/etd-project/1460>

This Project is brought to you for free and open access by the John M. Pfau Library at CSUSB ScholarWorks. It has been accepted for inclusion in Theses Digitization Project by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

CHARACTERISTICS RELATED TO THE OVERALL EMPOWERMENT OF URBAN
FEMALE PARENTING WELFARE RECIPIENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Glenda Yvonne Boatner
Narda Judge
June 1998

CHARACTERISTICS RELATED TO THE OVERALL EMPOWERMENT OF URBAN
FEMALE PARENTING WELFARE RECIPIENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

by
Glenda Yvonne Boatner
Narda Judge

Approved by:



Dr. Nancy Mary, Project Advisor, Social Work

6-2-98
Date



Dr. Rosemary McCaslin, Chair of Research Sequence,
Social Work

Abstract

This study utilized the Critical Theory Feminist Paradigm to explore the characteristics related to the overall empowerment of urban female parents receiving public assistance (TANF). This was an initial effort toward decreasing societal stereotyping and the disenfranchisement of welfare recipients and their families.

Quantitative analysis of the Self-Other Scale (SOS) indicated a significant correlation between the women's level of assertiveness, self-esteem, self-concept, self-efficacy, and perception of general empowerment with their overall levels of empowerment. Levels of self-efficacy and assertiveness appeared to have the greatest influence.

Content analysis of qualitative focused-discussion groups pointed to positive self-concept being related to empowerment. Their role as facilitators of family survival was implicated in the development of adaptive coping mechanisms and learned hopefulness. Similar to the SOS findings, the key factors more often reported related to overall level of empowerment were self-efficacy and assertiveness in relation to self-concept.

Institutional barriers, differential treatment, societal prejudices, inadequate employment opportunities, and lack of resources were identified as major impediments to affecting change. Therefore, exploring integrating empowerment interventions into the welfare system may be a

viable means for increasing the likelihood of this population exiting public assistance and maintaining long-term self-sufficiency.

Acknowledgements

The researchers would like to thank the following individuals for their assistance with this project:

Dr. Nancy Mary, for her insight to macro practice, commitment to empowering others, patience, and guidance as the project advisor; Dr. Frank Clark, University of Montana, for the use of and information regarding the Self-Other Scale; Dr. Ruth Parsons, Denver University, for her connections with other empowerment researchers; Melvena Mitchell, Beverly Ederson and Pam Gustavis for their community contacts and support; Chani Beeman, California State University, San Bernardino, for her expertise in formatting the project as the Computer Lab Manager; and Jimmy Imohi, for his computer knowledge and help with the SPSS program.

The researchers also want to thank their families, friends, and Department of Social Work faculty and colleagues for their ongoing support. Glenda Boatner wants to personally thank her research partner, Narda Judge, for giving her an opportunity to share her writing skills and knowledge, and for the fun of working together as a team. Narda Judge wants to personally thank her research partner, Glenda Boatner, for her sense of humor, sisterhood and friendship, and belief in succeeding in accomplishing their goals.

To all women and their families who have been or will ever
need to be welfare recipients.

Table of Contents

ABSTRACT	iii
ACKNOWLEDGMENTS	iv
INTRODUCTION	1
LITERATURE REVIEW	5
RESEARCH DESIGN AND METHODS	23
RESULTS	32
DISCUSSION	41
APPENDIX A: Informed Consent	52
APPENDIX B: Debriefing Statement	53
APPENDIX C: Demographic Survey	54
APPENDIX D: Self-Other Scale (SOS)	55
APPENDIX E: Clark Personal Correspondence/SOS Authorization	57
APPENDIX F: Qualitative Focused-Discussion Group Questions	58
APPENDIX G: Pearson Correlation of the Self-Other Scale (SOS)	59
REFERENCES	60

Introduction

Problem Statement

This study was an exploratory examination of the characteristics related to the overall level of empowerment of adult parenting women who receive public assistance from a county welfare agency. Lack of empowerment is frequently mentioned in the research literature as a major factor in these mothers remaining dependent on public assistance. It has been linked with concerns that being "on welfare" leads to "learned helplessness." There is an interplay between societal and institutional discrimination and oppression of welfare recipients, and their subsequent stigmatization and stereotyping. These act as barriers to their optimizing opportunities for self-determination and financial independence. As the majority of the recipients, in this and other previous studies, are women who are single-parents ,and disproportionately women of color, they have to contend with factors such as sexism and racism, in addition to classism (Alter, 1996; Clark, Trankel, & Brod, 1994; Ensminger, 1995; and Parsons, East, & Boesen, 1994).

However, specific ways to develop empowerment in disenfranchised and culturally diverse populations, such as mothers receiving public assistance, have not been studied adequately. There is a need to "start where the client is" prior to identifying potential interventions they may find helpful. This study attempted to examine what relationships,

if any, exist between characteristics commonly identified with empowerment, specifically self-esteem and self-concept, assertiveness, and self-efficacy, and their impact on the overall level of empowerment of adult female parenting welfare recipients.

Additionally, given the recently implemented federal Temporary Assistance to Needy Families (TANF) legislation which replaced Aid to Families with Dependent Children (AFDC), there is an urgency to identify interventions which can increase the empowerment and self-sufficiency of public assistance recipients. The new legislation contains stricter eligibility criteria, lower benefits ranges, life time limits, and obligatory work requirements. Recipients will be expected to be off of welfare forever within 2 to 5 years. Well-planned, effective interventions can effect the likelihood of their meeting the challenge of the new TANF requirements, accessing resources, retaining employment, and/or needing public assistance in the future.

This study has had significance to the core values of social work which include service, social justice, and the dignity and worth of the person. As articulated in the NASW Code of Ethics, "Social workers' primary goal is to help people in need and to address social problems" (p. 5). Through this study, the researchers have begun to provide their services to mothers receiving welfare benefits, a needy population beset by a myriad of social problems. In

California, the California Temporary Assistance Program (CalTap) legislation places them at increased risk as benefits are reduced and/or denied. Social problems they may face include homelessness and untreated illness. This study was an initial effort toward seeking to affect change in their socioeconomic status thus enhancing their quality of life.

The researchers also recognized their responsibility to seek social justice for disenfranchised people. This study may further reinforce the findings of other researchers which have identified imbalances in power experienced by recipients of public assistance. It supports measures to counteract the undermining effects of institutional discrimination and societal oppression. In the long-term, this initial effort may contribute to catalyzing welfare recipients to take social action, do neighborhood community organizing, and be more self-determinant in affecting social change for themselves and other public assistance recipients.

Also, this study promoted increasing access to structural resources with the intention of influencing how agencies provide social welfare services. Social work ethics emphasize promoting conditions which safeguard equal access to resources, ensure cultural and ethnic sensitivity, and encourage self-determination for all people. These conditions are not present or adhered to throughout the

current welfare system. The research supported previous findings and efforts indicating change is needed in system administration.

Problem Focus

This study utilized the critical theory feminist paradigm, or feminist approach, to address the gap in TANF recipients' empowerment research. It was a "good fit" as the feminist approach requires that "research must be designed and conducted in order to facilitate client empowerment" (Van Den Bergh & Cooper, 1986, p.13). This was consistent with the feminist emphasis on reconceptualizing power, for example "the personal is political", and establishing egalitarian relationships in society.

In keeping with social work practice and the feminist paradigm, the researchers promoted respect of the dignity and worth of families receiving public assistance; this represented a reconceptualization of power. "Welfare mothers" were "renamed" as women receiving public assistance and regarded in terms of their individual strengths and diversity. Gender equality, empowerment, and social change, as well as associated products of self-efficacy, positive self-concept, and self-determination, also were valued.

It is hoped that this research contributed to the knowledge base, especially to help shatter societal stereotypes, misperceptions, and the perpetuation of misinformation about the population studied. The research

data and outcomes could lead to more enlightened social welfare legislation, policies, and programs. Also, it could add to social work clinical practice, influencing how therapy and case management services are provided to this and other similar populations.

Literature Review

Welfare Mothers

The population of U.S. adult women with minor children receiving public assistance through designated governmental welfare agencies most frequently spans the ages of 18 through 47 years with one or more children under the age of 18 years. Their frequency and duration of receiving welfare can vary from first-time through multiple experiences, recent and/or short-term, through multigenerational and/or long-term. In the 1980's, a majority of these women received their benefits for five or more continuous years with approximately 95% having received public assistance at some other time (Goodban, 1985; and Vosler & Ozawa, 1988). As of 1992, national statistics indicated 44.5% of recipient mothers were over the age of 30 years and 47.8% were 20 through 29 years; about 33% were estimated as receiving long-term benefits (on-line source, May 25, 1997).

Other studies characterize adult recipient mothers as primarily single parents, average age of 31 years, with an average of 1 to 3 children. They have an increased likelihood of having been divorced. Often devoted to their

children, they prefer relatives to provide child care as necessary. Most do not have contact with their children's father (Hagen & Davis, 1994; and Thomas, 1994). An increasing percentage of these women have experienced violent physical or sexual abuse, above the 20-40% estimated nationwide (Feminist News, August 28, 1996).

Approximately 19.2% of the total U.S. female population live in poverty and receive public assistance cash aid. A majority of these are adult mothers of minor children who have limited education, limited mobility, limited access to health care, and an average annual income of \$6,000 or less; this is higher in California as the cash benefits level averages \$534/month. Most of these women will have completed 3 or less years of high school education resulting in their concentrated placement in low pay employment through workfare programs (Thomas, 1994). This often results in their cycling on and off of public assistance (Hardina & Carley, 1997). However, there are college graduates and other highly trained and experienced single-parent women who have had to rely on welfare due to job loss and/or the effects of divorce or disability.

According to Ensminger (1995), there is a reciprocal relationship between psychological distress, poor health, receipt of welfare. The research indicates that chronic burdens associated with welfare place women receiving

benefits at greater risk of health problems compared to those who have never received public assistance.

Correspondingly, the longer the duration on welfare, the higher the incidence of illness and psychological distress. This requires dependence on other family members for assistance and may contribute to the increase of recipients and their children living with relatives or other households (Thomas, 1994).

Parenting women receiving welfare benefits are likely to stay poor longer than men. This is particularly true for minority women. African American single female-heads of households and Hispanic single female-heads of households have 10 and 15 times, respectively, the risk of remaining in poverty as white heads of household males. It is estimated that nearly 40% of African Americans, 35% of Hispanics, and 14% of white women live below the poverty rate with the highest proportions single parents (Thomas, 1994).

There is much disparity in the research literature regarding the psychosocial characteristics, and their impact on daily living, of adult women with minor children receiving welfare benefits. Where the literature does agree is that this population is misperceived and misunderstood. Henly and Danziger (1996) have determined that the actual characteristics of welfare recipients differ significantly from commonly held stereotypes. Gender, race, and age biases

were found to negatively influence societal attitudes, welfare policies and programs, and hiring of the poor. Social environmental barriers keep these adult mothers, the majority of public assistance recipients, from accessing employment rather than the lack of values for work and self-sufficiency. Similar information was contained in anecdotal reports of welfare mothers in focus groups conducted by Hagen and Davis (1994).

Studies find there are no indicators supporting the presence of widespread negative duration dependence of adult mothers on public assistance. However, they differed in what accounts for the estimated one third long-term recipients who remain on welfare for two or more years. Neenan and Orthner (1996) identified lack of intrinsic work satisfaction, with negative attitudes toward work prior to their receiving public assistance, as one of the major factors affecting the success of women exiting welfare. Those with positive attitudes, coupled with expectations of leaving the welfare rolls, some formal education, and higher levels of social competence demonstrated increased motivation in maintaining program gains and staying off of welfare thereafter. Personal and social strengths, defined as levels of mastery, depression, and coping competence were found to be less significant in this study. However, the authors suggested that psychosocial factors are directly related to the development of work attitudes, competence,

and other characteristics which lead to getting and maintaining living wage employment.

Other researchers argued that lack of child care, transportation, and most importantly human capital variables characterize a majority of this population and their likelihood of long-term dependence on welfare. Some benefits-receiving adult women with minor children concur with these findings (Hagen & Davis, 1994). Kunz and Born (1996) found that such women characteristically have inadequate education and job experience impeding self-sufficiency. Similarly, Vosler and Ozawa (1988) recognized the need for an environment to support long-term welfare recipients in completing their education and job training. This would be in conjunction with "improving adverse living conditions that currently entrap and immobilize many [welfare recipient] mothers both physically and psychologically" (p.20). Similar findings were identified by Ensminger (1995).

On the other hand, Alter (1996) found the major reason that many of the welfare-to-work and family support programs have not been successful is their emphasis on human capital, employment, and family services. She suggested that programs need to focus on the mothers' psychological and personal characteristics to affect change. Effective programs alleviated the extraordinary stress of daily living by

helping them to develop better coping, competence and self-efficacy, self-confidence, and empowerment to deal with housing, education, and employment needs. This supports an earlier study by Goodban (1985).

Self-Esteem, Self-concept, and Self-Efficacy

In the research literature, self-esteem, self-concept, and self-efficacy are often interrelated but not used interchangeably. In evaluating measures of self-esteem, Gilberts (1983) identified self-worth as integrally related to people being competent and well-adjusted. He linked self-esteem directly with motivation, self-concept, health, and well-being.

According to McBride (1990), overcoming dependency is best achieved through raising self-esteem, self-concept, and thereby the self-efficacy/actualization of women. She indicated that cognitive-behavioral approaches are effective methods for overcoming the internal barriers to emotional and instrumental autonomy.

Ensminger (1995) found that perceptions of class difference and point of entrance to welfare significantly impacted the mother's self-esteem and self-efficacy. Multigenerational adult women with minor children recipients had a self-concept of being lower class. In turn, this created psychological distress resulting in lower self-esteem and decreased competency. This is in contrast to theories of learned helplessness that indicate a pathway of

failure and poor self-esteem leading to higher levels of psychological distress.

Dealing with the chronic burdens associated with poverty decreased recipient mothers' self-efficacy. Often stigmatized by welfare system/institutional and societal attitudes, they respond with self-blame, guilt, and shame. Those who externalized their feelings about being welfare recipients had higher levels of self-esteem, self-efficacy, and empowerment (Goodban, 1985). More egalitarian welfare programs which promoted personal growth activities increased recipients' self-efficacy in regard to competence and long-term self-sufficiency (Alter, 1996).

Other literature indicated that not finding gainful employment increases psychosocial problems by creating role conflict. Remaining on welfare influences self-concept. Many mothers receiving public assistance "valued work not just as a road to economic independence but as a measure of their self-worth and self-esteem" (Hagen & Davis, 1994). This relates to the findings of an earlier study which indicated that sex role identity which limited employment options affected self-esteem and impacted the women's self-concept (Clarey, 1985). Therefore, self-definition as applied to role-identity will greatly influence one's self-concept, overall performance and self-efficacy, and fitting into society (Mainous, 1989).

Feminist Approach

According to Swigonski (1994), the Feminist Standpoint Theory is an approach to research that is more consonant with professional values and goals of social work. It places the life experiences of marginalized groups at the center of the research project, directing the researcher toward the social structures shaping the lives of the group's members.

Client empowerment and social transformation are major parts of the process of the feminist approach and social work practice, including the arena of research. This requires an emphasis on contexts and inclusiveness of all oppressed groups, including women with children receiving welfare benefits. Also included are the following beliefs: development of all human beings through service; the intrinsic worth and dignity of all people; the intrinsic importance of active participation in society; the necessity for removing obstacles to self-realization; the prevention and elimination of discrimination in services, employment, and common human needs; and the assertion that people best realize their humanity through effective social functioning.

Assertiveness and Cultural Sensitivity

Tableman et al. (1982) indicated that psychological distress is much greater when life conditions are characterized by significant ongoing stressors. Women and low-income groups characteristically experience multiple stressors and use coping responses that exacerbate rather

than reduce stress, frequently resulting in depression. The authors suggest that these maladaptive behaviors are ameliorated by an increase in assertiveness.

According to Stake and Pearlman (1994), increasing assertiveness may lead to an improved self-concept and may be an effective means for addressing low performance self-esteem. Alter (1996) reported that building assertiveness skills is a significant component in a successful welfare self-sufficiency program. In another study, Comas-Diaz and Duncan (1985) similarly concluded that assertiveness training for women is a step toward building self-esteem and self-confidence. Their subjects were participants in a welfare-to-work program who reported an increase in self-confidence, feelings of power, and control over their environment after completion of assertiveness training.

Another finding of Comas-Diaz and Duncan (1985) was the dearth of studies on culturally-sensitive or culturally-relevant training for assertiveness. Few studies have involved participants whose cultural norms differ from the dominant society. They were concerned that role conflicts, cultural discontinuities, and incongruities could result from training not modified for their subject population. In their study, they worked with Puerto Rican women and developed training modules which reflected their cultural norms of respect of family and the women's self-sacrificing behaviors.

Empowerment

According to Parsons et al. (1994), women who become welfare recipients are oppressed. The majority of recipients are women and the majority are "disproportionately women of color" (p. 262). Women from groups other than the dominant majority often experience feeling a sense of helplessness. Skodra (1992) interchanged the terms ethnic, minority group and immigrant group as they commonly have characteristics which results in their subjection to political, economic, and social discrimination. She indicated that minority women feel trapped in a society where their multiple private and public positions result in conflict and ambivalence. Skodra suggested that the feminist empowerment approach allows the woman to acknowledge responsibility for herself and her actions, feel an increase in personal power, and a sense of control over her life. Parsons et al. conceptualized empowerment as allowing clients to become strong enough to participate in, have control of, and influence events and institutions which affect their existence.

Zimmerman (1990) suggested that research which focuses on empowerment as an intervention must be context specific. The focus of empowerment interventions must be developmental, involve the participants, and allow them to "tell their story" in their own way. Pinderhughes (1994) indicated that such interventions free the individual from

systematic entrapment and contradictions, as well as related powerless roles.

Zimmerman also advocated the Learned Hopefulness Theory whereby individuals learn to utilize skills enabling them to develop psychological empowerment. In contrast to the Learned Helplessness Theory, Zimmerman's study determined that individuals can gain control over their lives and influence their life events, thus limiting the effects of psychosocial stressors. This theory links self-efficacy with empowerment, especially through public/social action and self-help efforts.

Zimmerman's findings correspond with an earlier study where Dobia and McMurray (1985) found that empowerment skills could be learned through observing or modeling behaviors. Participation in community organizations, activities, mutual help groups and workshops were found to be helpful.

The aforementioned findings appear to be supported by Clark et al. (1994) in their initial evaluation of a model welfare reform project. "The primary goal of Options was to empower women and men receiving AFDC to achieve long-term economic self-sufficiency" (p. 220). The Options group sample empowerment level pre-test mean score of 3.52 increased to 3.68 at post-test, a difference of +.16. The comparison group, who did not receive Option services, had a post-test score which had decreased by -.01 to 3.60.

However, the comparison group sample was limited to only eight participants. The authors indicated that by "recognizing societal problems as forces outside of themselves" (p. 225), Options participants maintained a more positive attitude and level of self-esteem. This is similar to Zimmerman's "Learned Hopefulness" with the recipients not viewing themselves as victims or failures.

Gutierrez (1990) discussed the empowerment of social work clients who are women of color. They are subject to both racism and sexism. She pointed to the need for disenfranchised women developing self-help groups. This would help them to gain personal power to affect change in their lives. Like Zimmerman, she emphasized accepting the women's context, building on their strengths to help them deal with their problems. Also, she indicated that operationalizing the theory of empowerment in working with low-income women of color is not uncommon. However, this area has been ignored as a subject of research. Gutierrez' findings were corroborated by Clark et al. (1994) and Parsons et al. (1994).

Important Content-Specific Terms Defined

The following definitions of terms were derived from the literature:

1. Women receiving public assistance - adult women 18 years of age or older who have one or more children under the age of 18 and are receiving TANF (Temporary Assistance

to Needy Families), also known as cash aid. This replaced the term welfare mothers, commonly used with disparaging connotation;

2. Self-esteem - "Self-esteem refers to the feelings that the woman has regarding her worthiness, adequacy, competence and likeableness" (Ensminger, 1995, p. 351);

3. Self-concept - "Self-definitions which reflect one's salient role-identities" (Mainous, 1989, p. 180). Self-concept defines what the person feels or believes she is and relates it to her relationship to others. Positive self-concept indicates the individual has an internal locus of control;

4. Feminist Approach - the ideological framework for research characterized by viewing the individuals within the contexts in which they live. Within the Feminist Approach to research, the participants are viewed as equals. In other words, there exists an egalitarian relationship between the participants and the researchers. The Feminist Approach recognizes its subjectivity. There is free interaction between the researchers and the participants as change agents. Researchers avoid imposing their own perspectives; participants drive the process.

This approach requires critical examination and re-examination of the research methodology, social constructs, assumptions, and classifications. There is an emphasis on recognizing differences to eliminate discrimination and

marginalization. It is value directed, promoting social change, and recognizes the intrinsic worth and dignity of all people. The focus is on empowerment as integral to eliminating oppression and oppressive systems (Davis, 1986; Roberts, 1990; Sands & Nuccio, 1992; and Swigonski, 1994).

5. Assertiveness - the ability to express oneself forthrightly, with confidence and awareness of the rights of self-expression and to be recognized. Assertiveness increases self-confidence and enhances feelings of power and control over one's life and environment;

6. Empowerment - the process of an individual developing "attitudes, beliefs and values regarding one's ability to make a difference in one's world" (Parsons et al., 1994, p. 264). Empowerment includes personal, interpersonal, and political components whereby the individual gains awareness of available options and choices, access to resources, and some mastery over her circumstances and environment. Empowerment is helping the client to see that she is self-determinant and can shape, influence, and share control over circumstances affecting her life (e.g., events, institutions, others attitudes, etc.). She has and can take responsibility for herself, her own actions, and attainment of individual and collective goals. In this study, overall empowerment was understood to be an integration of self-esteem and positive self-concept with assertiveness and self-efficacy;

7. Self-efficacy - conceptualized as the ability to be autonomous and effective in caring for one's needs. It includes coping with and solving problems, and making decisions which will enhance one's quality of life rather than detract from it;

8. Cultural sensitivity - respecting the ethnocultural perspectives and values of the participants in planning and implementing the research design and tools to meet their needs. For purposes of this study, as stated by Tidwell (1990), cultural sensitivity was further conceptualized as the "application of culture-specific approaches to concerns of [minority] families" (p. 268).

Summary and Findings of the Literature

The literature described the many contributing factors to dependency on the social welfare system. Women remain on welfare due to the lack of child care, limited or no transportation, inadequate education and job training and/or experience. In some instances, they lack motivation due to their feelings of hopelessness and helplessness. There is a need for an environment to support and help motivate long-term welfare recipients in an attempt to get them through job training and/or completing their education. These situations are why so many women find it almost impossible to exit the system.

The literature discussed different approaches to program designs to help women exit and remain off welfare.

There were, however, different opinions as to what kinds of programs work best, when, and how. One suggested intervention mentioned was assertiveness training utilizing the feminist approach. This approach focuses on women helping women to empower themselves as it is integral to eliminating oppression and oppressive systems. It includes components to build self-esteem, self-concept, and self-efficacy. The literature indicated specific empowerment training may be an intervention these women need to begin taking responsibility for themselves and their actions.

However, some of these findings were presented ambiguously and/or are not upheld throughout the literature. They require clarification through this and other new studies. Given the findings of previous research, this study's feminist perspective/philosophical stance, and the personal experiences of the researchers, the following are the fundamental issues which motivated this research:

1. Some parenting women recipients of public assistance may lack the socialization skills to change their circumstances but many do not have deeply-embedded learned helplessness. What is the incidence, likelihood of learned helplessness in this population?

2. Some recipient women have psychological and/or physical problems, primarily due to their poverty. What impact does this have on their levels of self-esteem, self-concept, and self-efficacy?

3. Some researchers indicate that women identified as welfare mothers have self-esteem, are assertive and/or aggressive in their daily struggle for survival. How accurate are those findings?

4. Some of the mothers receiving public assistance have bicultural role conflicts and concerns. How do they affect their empowerment?

5. Women's class, race, gender, and marital status have a negative impact on their lives due to societal values and institutional discrimination. Can increasing opportunities for empowerment lead to positive life changes?

6. It has been stated that the welfare system stigmatizes and disempowers the poor. How accurate is this finding or is it a misperception?

7. It has been proposed by NASW and other social services practitioners that the current welfare reform legislation and program proposals will incur additional social control and hardships, especially on adult single-parent women receiving welfare benefits. How can these concerns be addressed? Given the need to start where the client is, are interventions which emphasize empowerment indicated?

8. The current welfare reform legislation and program proposals appear to reflect societal values which wrongly blame the poor for their condition and view them as unworthy, lazy, minorities taking advantage of the system.

What are the personal strengths of recipients of public assistance?

9. Most mothers receiving welfare benefits want to be gainfully employed and not remain dependent on public assistance. Are empowerment interventions likely to further their reaching their goals?

10. The major reason adult women remain dependent on public assistance is their inability or limited means to negotiate adequately both the welfare and social systems. Can interventions be designed and incorporated within existing systems to increase recipients' abilities to experience positive outcomes from the interactions?

11. Welfare-to-work programs need to focus on empowering these mothers, and not promoting the status quo/agendas of economic and political systems, if women are to become gainfully employed and exit public assistance. How viable is this option?

12. Changes need to occur at individual, family, community, and social institutions levels for recipient adult women with minor children to have increased opportunities for long-term self-sufficiency. Is empowerment the key to these changes taking place?

Research Design and Methods

Research Question and Hypotheses

The research question being asked was: What are the characteristics related to the overall level of empowerment of adult parenting women living in an urban area of Southern California receiving public assistance (TANF)? The researchers hypothesized that as these women experience increasing levels of self-esteem and positive self-concept, assertiveness, and self-efficacy, their overall level of empowerment increases. Their perceptions of their effectiveness as change agents would increase, impacting on how these women interact and intercede in their community.

The researchers expected to find that the likelihood of an interrelationship between self-esteem and self-concept was a mediating factor in the functioning and performance of this population. However, it was expected that self-esteem alone may not be as significant a variable as this population often has a positive perception of their worthiness. The researchers expected to find that learned helplessness, as represented by a combination of low assertiveness and inefficacy, was more significant than low self-esteem alone but greatly impacted by the interrelationship of low self-esteem and negative or poorly-defined self-concept. This was hypothesized to be significant in multigenerational recipient families.

Research Design

The researchers utilized the Critical Theory Feminist Paradigm to do an exploratory study of adult women who are recipients of public assistance. This study utilized quantitative and complimentary qualitative field research methods to explore the phenomonology of this population's empowerment. The researchers specifically examined the characteristics related to the overall level of empowerment of a Southern California urban corridor population of adult women with minor children who receive TANF funds.

The researchers screened potential participants to ensure they met the study criteria. These included being English-literate adult women with minor children who are receiving TANF funding. A brief demographic survey, designed by the researchers to capture salient demographic data as indicated by other studies, and a psychometric scale measuring empowerment were administered.

The women were offered the opportunity to participate in the second part of the study, qualitative focused-discussion groups. The researchers sought to develop thicker background data including capturing responses indicative of the various characteristics and levels of empowerment of the participants. Existing empowerment research was utilized in devising the questions and format of the focused-discussion groups (Parsons et al., 1994).

Strengths and Weaknesses of the Design

Strengths

The aim of the paradigm was to raise the consciousness of participants so they were energized to transform. The researchers reviewed the study proposal with a local resident housing project advisory group board and president prior to implementation. They provided input for participant recruitment and the common view that the study would be useful for planning interventions to assist residents in improving their quality of life. The study motivated support from the resident advisory group.

Another strength was how the paradigm allowed for the acknowledgment of a feminist method of doing research. This paradigm and research design were consistent with the values of social work practice, especially when working with women who are disempowered by an institutional system. Stereotypes, labeling, and cultural sensitivity were addressed in consultation with the residents' group president and VISTA (Volunteers In Service To America) worker. Also, false consciousness was eliminated by rallying participants around what they defined as their common true point of view. Therefore, the contextual and narrative mode of this paradigm and design allowed for focusing on the individual embedded in her complex array of social networks (Davis, 1986).

Weaknesses

The research paradigm had a feminist ideological orientation which allowed values to enter into the inquiry. The researchers' personal bias and orientation could have had an effect on how outcomes were to be measured and viewed. The paradigm required the researchers to have strong assumptions and considerable knowledge of the population or subgroups selected.

Additionally, the researchers questioned whether or not this paradigm and design could concentrate on specifics. There were concerns as to what extent it could give the researchers clear indications of the solution to the problem and possible explanation of the phenomenon of empowerment. Therefore, the feminist approach may be viewed as more social action and ideology rather than as research and scientific inquiry.

Sample

The sample consisted of 25 women who were 18 years of age and older, had one or more children under the age of 18, and were currently receiving TANF funding. They were residents of a low-income housing project from within the urban corridor of the Inland Empire in Southern California.

This urban corridor contains the greatest concentration of welfare recipients within the area with a "high percentage of female householder families below poverty level" (N. Watson, personal communication, September 15,

1997). Therefore, it was expected that they would share many of the same characteristics as the general population of welfare recipients and represent a purposive sample.

Method of Sampling

The researchers attempted to use purposive and quota sampling to ensure there was a subgroup that represented the diversity of adult women with minor children receiving public assistance residing in the urban corridor. The site demographics met the criteria for recruiting such a sample. This included mothers who were 18 years of age and older, had children under the age of 18 years, were single parents or had a significant other in their personal lives, came from a variety of cultural/ethnic backgrounds, and were English-literate in order to consent to and fully participate in the study.

Given the constraints of time and limitations on recruitment of subjects, the sample became participant self-selective. The researchers had arranged for the informed consents and quantitative instruments to be included in the housing project newsletters, however, distribution was delayed. The researchers, with assistance from the President and VISTA worker, recruited participants through door-to-door solicitation. Although not representative of quota stratification, the sample included subjects from various ethnicities, educational levels, ages, and lengths of time as recipients.

Data-Gathering and Instruments

Each participant reviewed and agreed to the informed consent prior to starting the study and received debriefing afterward (see Appendices A and B). The researchers administered a demographic survey (see Appendix C) in order to develop a profile of the 25 participants in the sample. A psychometric scale, the Self-Other Scale or SOS (see Appendix D), was administered to gather data to measure the characteristics related to their overall empowerment. These quantitative instruments were administered to the 25 participants on an individual basis.

The SOS, formerly known as the Montana Empowerment Scale or MES, utilized a Likert format for participant responses to given statements. The researchers analyzed each statement based upon the content-specific definitions derived from the Literature Review. Statements were grouped by their respective characteristic of empowerment, specifically self-esteem, self-concept, assertiveness, and self-efficacy. Another category was added to represent general empowerment. The combined scores of all questions for each participant yielded data to measure the overall level of empowerment of that subject.

According to Clark (personal communication, November 17, 1997; see Appendix E), the Self-Other Scale has a high internal consistency as represented by an Alpha value of .89, determined from use in measuring empowerment with

several diverse populations. When revised, previous administration of the former MES with an AFDC population resulted in Alpha values changing from .91 to .93, indicating reliability of this scale measure and usefulness for this research (Clark et al., 1994).

Eleven participants chose to continue with the second part of the study. The researchers conducted four groups. Four groups had two participants and one group had three participants. They responded to the same 13 open-ended qualitative questions (see Appendix F). This qualitative data-gathering was intended to result in additional data which could not be provided by the quantitative instruments. The researchers sought to observe the responses to the questions and capture the participants' personal experiences, feelings and perceptions, and stories in their own words. The questions asked were in relation to their being welfare recipients and included: circumstances which led to becoming recipients; societal treatment; struggles and coping strategies; self-perceptions as change agents; and feelings and goals toward, and barriers to, exiting public assistance.

Each group met once at a housing project meeting room and followed the same format: a review of the informed consent to participate with review of information about the purpose and data-gathering methods of the study; discussion of the 13 questions; and presentation of the debriefing

statement. Audio taping each group assisted the researchers in more accurately recording discussion responses.

The demographic survey and qualitative questions were reviewed for validity, reliability, and cultural sensitivity prior to use by three California State University, San Bernardino Department of Social Work professors. Questions and categories were revised as suggested prior to and only minimally modified during administration based upon participant feedback. The questions were derived by the researchers from the broad spectrum of studies cited in the literature review.

Protection of Human Subjects

Confidentiality and anonymity of the participants in this study was safeguarded. The participants were provided informed consent and debriefing statements prior to and after engaging in the research study, respectively; they were given a copy of the informed consent for their own reference/records. They were reminded of provisions made for participants to withdraw from the study at any time without penalty or being ostracized.

Some participants chose to identify and introduce themselves to the researchers. Participant addresses and/or phone numbers were recorded manually with permission of and at the request of the participants. This was for the explicit purposes of retrieving incomplete data and/or reminding them of their scheduled discussion groups.

However, neither names nor other means of specifically identifying the participants were required nor included when either recording, analyzing, or reporting on the data.

The participants were assured that any references to their individual identification would be destroyed upon completion of this study. After transcribing the audio tapes, the researchers erased all traces of the discussions by reusing the tapes for other purposes. The completed surveys and scales, consent forms, and discussion group schedules were shredded. The study findings have been reported collectively.

Additionally, the researchers maintained social work ethics in conducting this research. Participants were treated in an egalitarian manner with respect for their uniqueness, diversity, and individual and collective needs. The researchers avoided being coercive or giving false hopes/expectations about the purpose of the research, accessibility of resources, development of future programs, and opportunities for their exiting the welfare system. Information was made available upon request at the completion of each focused-discussion group. The researchers made themselves available to discuss the study findings and provide consultation to the residents advisory group. It is the intention of the researchers to do participatory research in the future to meet the identified needs they want addressed.

Results

Demographic Survey Profile

Frequency distributions were utilized to analyze the demographic survey data. The 25 participants were women who ranged in age from 22-45 years old with the mean age of 32.48 years; 48% were 20-29 years. Only 28% of the women were currently married or living with a partner, therefore 68% were single. Of those 68%, 24% were divorced or separated with another 44% single with no partner. In describing their ethnicity/race, Blacks or African Americans had the largest representation at 52% of the sample, followed by 32% Hispanics/Latinos, 8% Whites or European Americans, and 2% Asians or Pacific Islanders.

Educational levels for this sample varied from no formal education to senior level in college. Fifty-six percent had a high school diploma, general education degree or equivalency certificate; this was higher than expected. Forty-eight percent had attended some technical training. Another 24% had gone on to higher education but with no graduates.

Their age at the time when they first became welfare recipients ranged from 15-40 years with a mean of 21.48 years. Seventy-six percent were 18 years and older with 56% between the ages of 18-29 years. Most of the participants, 68% of them, did not have a family of origin history of having received AFDC.

The length of time they received public assistance varied from 1 to 10 or more years. Sixty-eight percent of the sample have been recipients five or more years with 28% of those recipients over 10 years. Only 12% have been recipients for two or less years. A majority, 72%, had applied for public assistance only once although most have gone through the annual recertification process in subsequent years.

The demographic data were analyzed further. The researchers applied use of scatter graphs and T-tests. No relationships or trends were identified between these demographic variables.

Self-Other Scale

Each participant's responses to the SOS statements were grouped by their representative characteristic, or variable, of empowerment: self-esteem; self-concept; self-efficacy; assertiveness; and general empowerment. The responses for each characteristic were scored in terms of their degree of positive or negative attribution with a mean value derived for that variable. The mean of the respondent's collective scores for all of the characteristics was representative of that participant's overall level of empowerment.

Frequency distributions of the SOS data indicated that participants scored highest in the variables of self-efficacy, assertiveness, and general empowerment; mean

values were 3.91 to 3.99. The means of self-esteem and self-concept were very close in value and significantly lower than the other variables at 3.64 and 3.68, respectively.

The level of overall empowerment of the participants ranged from 3.21 to 4.39 on a scale of 1-5. Frequency distributions revealed that 64% measured above 3.75 while 36% of the participants were above the 4.0 value; the mean was 3.86. Only 54% of those at 3.86 or above had both higher self-esteem and self-concept. In contrast, 77% of that grouping had both significantly higher self-efficacy and assertiveness values which also were above the given means.

The five participants in the sample who had the lowest overall empowerment scores of 3.21 to 3.57, also had the lowest self-concept scores, 2.8 to 3.0. However, although their self-esteem scores tended to be lower, it was especially noticeable in only two cases. Lower assertiveness was noticeable in only one case.

The SOS data also were analyzed using the Pearson Correlation (see Appendix G, Table 1). Correlation was significant at the .05 level between: self-esteem and self-concept; self-concept and assertiveness; self-concept and general empowerment; and self-efficacy and assertiveness. These results indicate a relationship between the previously indicated higher values of self-efficacy and assertiveness. Additionally, there appears a possibility of self-concept

acting as a mediating factor of empowerment as it is closely related to several other characteristics.

Correlation was significant at the .01 level between all of the given characteristics/variables and overall empowerment. These results and the previous correlations indicate strong relationships between the characteristics stated and overall empowerment. These also indicate the reliability and validity of the SOS.

Scatter graphs and paired T-tests analyses revealed no apparent relationships or trends between the demographic variables and overall level of empowerment of the study's participants. In this sample, no one or combination of demographic variables were found significantly related to empowerment (i.e., current age; age when first became a recipient; length of or number of times as a recipient; family of origin as AFDC recipient; marital status; educational background; and race or ethnicity).

Focused-Discussion Groups

Open Coding of Empowerment Categories

The qualitative questions (see Appendix F) yielded many responses and provided thick data about the participants in their own words. The first content analysis applied to this data utilized open coding categories based upon the previously identified characteristics of overall empowerment. The content-specific terms definitions from the Literature Review were used to conceptualize the categories

in regard to their discreet properties. Responses were analyzed within their contexts and placed on a continuum ranging from positive to negative expression of the given characteristics.

The 129 expressions of self-efficacy were nearly twice as many responses as recorded for any other characteristic of empowerment. Of these, 62% represented positive attributions. Similarly, 62% of the 76 statements in the category of self-esteem were positive in content and context. The analysis of the 50 expressions of self-concept and 29 expressions of assertiveness were positive in connotation 86% and 83% of the time, respectively.

The aforementioned findings were similar to those from the SOS. They also indicate possible relationships between self-efficacy, self-concept, and assertiveness. In contrast to the SOS findings, the 44% positive connotations out of 93 statements related to general empowerment was much lower. The 66% negative expressions of general empowerment overwhelmingly related to how the participants felt powerless to affect change in their dealings with GAIN (Greater Avenues for Independence), the local TANF work-readiness agency, and societal differential treatment. This resulted in lowering the overall empowerment to 62% compared to the SOS mean of 3.86 or 77%.

Open Coding of General Phenomena

The second content analysis applied to the qualitative data utilized open coding to name and categorize the general phenomena. For example, one of the qualitative focused-discussion questions asked was: Describe your daily struggles related to being a mother receiving public assistance. The open coding resulted in the following categories: lack of resources (e.g., transportation, child care, employment, housing, medical needs and support systems); parenting concerns; institutional systems issues; and income deficits (e.g., food, bills and other necessities). Another qualitative focused-discussion question asked was: Describe how you feel society treats women receiving public assistance. The categories identified from the responses were: labeling, which resulted in blaming and stereotypes; differential treatment; and ambivalent feelings.

Other questions identified categories related to barriers to exiting the welfare system. These categories included developmental and life cycle changes such as not being "grown up" and having children too early, or having a spouse walk out on the family. Another category was environmental factors which included lack of adequate response from GAIN for job placement and problems with the market-place economy. Communication issues was an identified

category related to concerns such as "not understanding the language that Social Services uses."

Although the participants discussed tangible needs, the preponderance of category responses were affective in nature and scope. For example, in response to the question about how society treats recipients of public assistance, there were many affective statements including: "We get talked down to and it makes me feel like we are nothing;" "We are treated like we're stupid and that takes away from our dignity;" and "Family members treat us differently like we don't belong and I feel like an outcast." This appears to have affected their overall empowerment or the ability to influence change in their lives in spite of how determined they were to succeed in society.

Axial Coding of General Phenomena

Content analysis utilizing axial coding captured the causal condition to explain the participants' circumstances (Strauss & Corbin, 1990). In this study, the qualitative questions revealed that having to go on welfare was the circumstance which arose from the causal conditions of not having any other source of income or support. For example, some became parents too early, were abandoned by significant others, or had no employment opportunities. The resulting phenomena as the result of the circumstance of being a welfare recipient were labeling, differential treatment, and discrimination.

The context explains the when, how, type of, location, intensity, duration, and under what conditions these things occurred. The context of the phenomena labeling, differential treatment, and discrimination was that it occurred regularly in different arenas such as at the supermarket. These women felt that the cashiers became impatient with them when they presented their food stamps. Sometimes the discrimination and differential treatment were very subtle and sometimes blatant.

Intervening conditions explained other influencing factors that acted to facilitate or constrain action. In other words, what had an impact on these women taking or not taking action to facilitate change in their lives. The participants' responses indicated that the overall welfare system was not being compliant with what the GAIN Program was supposed to do in order to help them gain skills to access and retain employment. Their decision to comply or not comply with the GAIN Program affected their attitudes and motivation.

The axial coding results identified that the aforementioned dilemma made them work even harder. The labeling, discrimination, and differential treatment increased their motivation to succeed. However, the results indicated that their daily struggles with system issues made them doubt their power to affect change in their lives. The

feeling that the majority of these women had of no power affected their overall level of empowerment.

From the intervening conditions, further axial coding identified action and interactional strategies. These indicate the actions these women implemented or avoided. Their choice of action tied in with their characteristics of self-esteem, self-concept, self-efficacy, assertiveness, and overall level of empowerment. For instance, all women interviewed complied with the GAIN Program to ensure their families' survival. They stated that if they had refused, they would face the consequence of losing their cash aid and other benefits. GAIN placed constraints upon them, requiring attending many repeated series of workshops, daily job searches when local employers were not hiring, and not being able to accept a job unless it was GAIN approved. In spite of their fears in regard to intimidation from the welfare system, their expressions of positive level of self-esteem, assertiveness, and self-concept were indicated as contributing to their having a higher level of self-efficacy in dealing with these obstacles.

Also, the axial coding revealed a contextual theme that regardless of the struggles they encountered, the participants had an everlasting grasp at empowering their own lives. The coding indicated a pattern of learned hopefulness rather than learned helplessness. Their action/interactional strategies and consequences of taking

those actions also indicated patterns of learned hopefulness rather than learned helplessness.

Discussion

Results

As indicated by the results of the Self-Other Scale and focused-discussion groups, self-esteem, self-concept, assertiveness, and self-efficacy were characteristics related to the overall level of empowerment of this study sample. The research findings supported the hypothesis that as the participants experienced increasing levels of the aforementioned characteristics, their overall levels of empowerment increased. Additionally, the perception of general empowerment impacted on their view of themselves as change agents.

Although there was a correlation between self-esteem and self-concept as hypothesized, it was not found to be a mediating factor in this sample's functioning and performance. It appeared that the combination of self-efficacy and assertiveness had a greater impact or higher correlation. This was exemplified by the responses to the question regarding their daily struggles related to being a mother on public assistance: "The end of the month is a struggle so I do what I need to make it;" "It is hard to make food, money and other necessities stretch but I do it;" "Providing the basic needs and providing for special times makes us swallow our pride and ask for family support."

Their higher level of self-efficacy was related to their role, or self-concept, as needing to be family providers. Their assertiveness increased with self-efficacy in order for them to take action for their survival; this appeared to be a major intervening factor on their overall empowerment. Assertiveness was related to self-efficacy in the participants' taking action.

Questions related to self-esteem and self-concept, further indicated the significance of self-concept as related to overall empowerment. For instance, in response to "Do you see yourself as a successful person?" and other questions about goals and control over their lives, some participants stated, "We fear not being able to overcome failures and obstacles" and "We fear losing our self-worth." However, they continued with many more statements specific to positive self-concept including, "I've done all right," "I am a success, and I have a life." Also, many comments were made about having good-paying jobs in the near future. They perceived themselves in different successful roles such as college graduates, homeowners, and community leaders. Self-esteem alone was not found to be as significant a variable. As previously indicated, there was a greater relationship between self-concept and overall empowerment.

The aforementioned may be explained by their struggle for survival and the role as primary providers for their families taking precedence in their lives; they did not have

time to focus on their worthiness other than at an average level. Therefore, in contrast with the literature, their focus was on their role rather than on the strong perception of their worthiness. This finding was reinforced again in that both the SOS and axial coding indicated the participants had experienced levels of depression, yet they did not allow it to take hold or decrease their overall levels of functioning. This was evidenced by statements such as, "I felt like staying in bed all day with the covers over my head but I got right back up and started again."

Assumptions

All but one of the assumptions were upheld by the research findings. The common theme indicated by the axial coding related to the impact of systems barriers. Institutional discrimination, differential treatment, and stereotypic labeling impacted the participants' effectiveness as change agents. This sample did not appear to be trapped by psychological or physical conditions, but by conditions imposed upon them by a poorly designed and administered welfare system. Recipients indicated frustration with inconsistent program requirements, bogus training, and dead end job placement, "jobs that don't stick."

Based on the findings from this sample, the participants had a strong work ethic, but could not exit public assistance due to the previously stated social

environmental and systems factors. This sample did not fit the commonly held stereotypes of welfare recipients as described by the participants. The axial coding indicated that the phenomena resulted in their being misperceived and misunderstood, and subject to various forms of prejudice and discrimination. This supports the majority of the findings in the literature. It suggested that interventions to increase empowerment and networking should focus on strategies to greatly impact this population's ability to overcome their being stigmatized and disenfranchised. These findings support those of Pinderhughes, 1994 and Zimmerman, 1990, indicating such strategies need to incorporate opportunities for involving the participants in telling their stories and facilitating provision of the services they need to truly exit the welfare system. Networking and empowerment are envisioned as giving recipients of public assistance power over their circumstances and freeing them from "getting stuck in the system."

Bicultural role conflicts and concerns was the one assumption not supported or addressed by the findings. The sample size and lack of ethnic stratification did not allow for exploration of this variable. The SOS and qualitative questions did not capture this information. The SOS and qualitative questions were ethnically neutral; the participants did not talk about it. The researchers needed to develop specific questions to elicit responses from the

participants about issues or concerns related to their ethnic/cultural values and background other than the differential treatment and racism referred to previously.

Contrary to what the researchers hypothesized, the sample did not exhibit any characteristics of learned helplessness. There were more indicators of Zimmerman's Theory of Learned Hopefulness (1990). As previously reported, the participants had higher levels of assertiveness and self-efficacy than was expected or indicated by the literature.

Additionally, in this study multigenerational family history of being recipients of AFDC was found not to be a significant factor affecting empowerment. The literature indicated that internalization of learned helplessness and lower self-concept is the norm for this grouping. In contrast, the 66% percent of the participants responding affirmatively to this demographic question had a score of 3.9 and higher level of overall empowerment.

The incidence of higher self-concept, self-efficacy, and assertiveness and the lack of learned helplessness may be attributed to the sampling procedure. Participants were self-selective with a majority being single parent African American women. They valued being assertive and capable of providing for their families' needs. As indicated by the axial coding, they developed coping mechanisms for survival.

The researchers speculate survival mechanisms developed in response to the participants' long term struggle as welfare recipients. The urban corridor where they reside is a depressed area with a high rate of unemployment and limited resources. This accounts for the significant higher incidence of 68% long-term reciepience of public assistance compared to the 33% found in the literature. Also, it explains why the majority of this sample applied for benefits one time and had to continue recertification for over five years.

Another significant finding was the higher rate of overall empowerment scores for this sample as compared with those in previous studies. Clark et al. (1994) indicated a range of 3.52 to 3.61 for their samples of welfare recipients whereas in this study the mean was 3.86 with a range up to 4.39. In the current study some participants had experience with the residents advisory group and/or being VISTA workers. This corresponds to findings from earlier studies by Dobia and McMurray (1985), Zimmerman (1990), and Clark et al. (1994), that empowerment skills could be learned from participation in community organizations, activities, and mutual interest groups.

Limitations of the Methods

The researchers were limited in the scope of the research due to the nature of the problem and the time frame

available. Nonetheless, the researchers needed to narrow the focus further as the breadth of the inquiry adversely impacted on the degree to which participants could be recruited and the data gathered. The time limit did not allow the researchers to do a series of focus groups, which normally meet several times, to elicit even thicker information. Moreover, the time limitation did not allow for additional research to measure the extent of cause and effect relationships between variables.

The sample needed to be larger, stratified, and randomly selected in order to be more representative of the resident population and that of urban TANF recipients. This could have yielded more reliable and valid results. Also, it may have led to identifying more correlations and relationships between the variables.

The demographics of this sample also may have skewed the results. They varied in some instances from those indicated in the literature. For example, this sample's mean age at the time of entrance to the welfare system was 10 years younger than the 21 years reported in most studies. Also, there was an over-representation of African Americans in this study; they represented 82% of the focused-discussion groups participants.

Other notable findings were the unexpected higher rates of high school graduates and SOS empowerment scores. The researchers were unable to rule out that participant

responses may have been affected by their wanting to appear in the most positive light or placating the researchers by completing the survey and scale. In contrast, perhaps the focused-discussion groups better elicited the nuances of their self-perceptions as well as empowered the participants.

Additionally, the nature of the research question required capturing both quantitative and qualitative data. The data gathering and analysis methods were very time consuming, complex, and required sophisticated skills. The researchers had to be vigilant to adhere to methodologies and avoid biasing the results.

Lastly, although the Critical Theory Feminist Paradigm is a good fit for studying the phenomena of empowerment, participatory research is also indicated here. It could have resulted in developing a larger random sample and stratification through increasing the pool of potential participants. In addition, the researchers would have been able to build rapport with and trust of the residents prior to initiating the surveys and given more time, could have conducted true focus groups. As stated by participants, the residents were resistant to participate in this study due to: embarrassment; concern about being labeled; fear of outsiders; recent welfare fraud investigations; being tired of talk not leading to imminent change; and their negative connotation of social workers as invasive, interfering with

their lives.

Implications

The researchers are hopeful that this study catalyzes mothers receiving public assistance toward acquiring real skills that the welfare system will facilitate. This implementation will truly help these women retain jobs to empower their lives. Interaction in focused-discussion and focus groups increases awareness from participation in the process. As a result of the women's responses to the researchers' questions, further questions could evolve. By the women hearing each other talk about their concerns, they can gain a sense of universality of their experiences, finding they are not alone.

However, this process is not powerful enough. The institutions and those in power positions within the institutions that affect the lives of these women, have not done their jobs. This neglect has kept mothers receiving public assistance trapped in a system they cannot penetrate. The institutions and the people who have the power to give power to these women must play a significant role in the process of empowering this population.

If empowered, adult parenting women receiving TANF benefits can affect change in: their socioeconomic status; any feelings of powerlessness; and their attempts to counteract the undermining effects of institutional discrimination and societal oppression. With adequate

skills, these mothers can start social action in their own communities and neighborhoods. These women can be more self-determinant in affecting social change for themselves and other welfare recipients. Their mentorship can have an ever-increasing rippling effect upon others.

The researchers anticipate that the findings from this study will uphold the core values of social work. It can serve as a reminder to other social workers of the need to do more research encompassing the values of service, social justice, dignity, and the worth of all people. Social workers must be proactive in addressing the possible myriad of social problems and increased risks this population faces as benefits are reduced and/or denied.

It is hoped that this research would stimulate interest in others to do additional research to further explore the phenomena of empowerment. The variables need to be better measured and the various interventions evaluated for their effectiveness. A longer research time period and larger stratified random sample with longitudinal follow-up for future studies are advised. It would be beneficial for investigating correlation between the variables and their effects upon the self-sufficiency of mothers receiving TANF. Also, it would be helpful to see if the findings would be replicated in a second study, especially in application of interventions specific to ethnic/cultural minorities. This could impact service provisions and increase cultural

sensitivity.

If the findings were upheld in subsequent studies, then the theory of learned hopefulness could replace learned helplessness, a concept that tends to demean and stigmatize. This could impact welfare-to-work programs, influence family support services, and case management in social work practice and across other disciplines, and ideally influence social welfare legislation and societal attitudes.

Appendix A

Informed Consent

YOUR HELP IS NEEDED! English-speaking women 18 years or older with minor children receiving assistance from DPSS (cash aid, formerly AFDC) are needed to help social workers learn about these women's feelings about themselves, empowerment, and the welfare system. This study is being conducted by Glenda Boatner and Narda Judge, MSW candidates at California State University, San Bernardino, under the supervision of Dr. Nancy Mary, Associate Professor of Social Work. It has been approved by the Department of Social Work Human Subjects Review Board, _____, President of _____, and the _____ Board at their meeting on February 6, 1998.

If you are willing to participate, please complete the enclosed surveys. Please respond with your first impressions to reflect your feelings and thoughts. They will be collected from you within the next two weeks. Please be assured that any information you provide will be held in strict confidence by the researchers. Information used in the final study results will be reported in group form only. Your identity will never be disclosed. Individual responses will not be reported to any government or other agency.

When the surveys are collected, you may choose to sign-up for a second part of the study. You will have the opportunity to meet with 7-9 other women to talk about what it feels like to be receiving assistance from DPSS. The groups will be held at various times at the _____ Community Center. They should take no more than an hour. You do not need to discuss any subject which is uncomfortable or is too personal for you. Although the groups may be audio-taped to help accurately record the discussion responses, all tapes will be used by the researchers only and erased at the end of the study.

Please understand that your participation in this study is totally voluntary. You may withdraw your participation and any information provided at any time without penalty. The results will be published in a future _____ newsletter. The findings may be used for planning programs to better meet the needs of you and other women receiving assistance from DPSS. Should you have any questions about the study, you may contact Glenda Boatner, Narda Judge, or Dr. Nancy Mary at (909)880-5560.

I acknowledge that I have been informed of and understand the nature and purpose of the study being conducted by Glenda Boatner and Narda Judge, MSW candidates from California State University, San Bernardino under the supervision of Dr. Nancy Mary, Associate Professor of Social work. By placing a mark in the space below, I freely consent to participate and acknowledge that I am at least 18 years of age.. I freely consent to participate. I acknowledge that I am at least 18 years of age.

Give your consent to participate by marking a check or X here: _____
Date _____

Appendix B

Debriefing Statement

The study you have participated in is designed to help the researchers understand the way mothers receiving public assistance feel about themselves. The research collects information through evaluation of answers to the two short surveys and group discussions.

All information collected will be compiled by the researchers only. Confidentiality of all participants will be maintained. The findings will be used by the researchers for future program planning purposes without identifying the study participants.

You may receive the final report by contacting Dr. Nancy Mary, Associate Professor of Social Work and project advisor, at (909)880-5560. You may contact Glenda Boatner and Narda Judge to discuss the findings or any personal issues which may trouble you during or after completing this study. They may be reached by contacting Dr. Nancy Mary at the above number.

Appendix C

Demographic Survey

Please answer the following general information questions by filling in the blank or marking your response in the appropriate space.

1. What is your age today? _____
2. How old were you when you first became a mother receiving assistance (AFDC) from DPSS? _____

3. What is the highest grade level or year of school that you have completed and received credit for? (Check One)

_____ Did not attend school

Elementary/High School

Technical/Vocational School

_____ 1st _____ 7th

_____ 1 year program

_____ 2nd _____ 8th

_____ 2 year program _____ 3rd

_____ 9th

_____ Other

_____ 4th

_____ 10th _____ College

_____ 5th _____ 11th

_____ Freshman

_____ Sophomore

_____ 6th _____ 12th

_____ Junior _____ Senior

_____ Graduate/Professional School

4. Have you received a high school diploma, G.E.D., or equivalency certificate? (Check One) _____ High School Diploma

_____ G.E.D. _____ Equivalency Certificate _____ None

5. How many times have you applied for and received assistance (AFDC)? _____ # of times

6. Please indicate the total time you have ever received assistance (AFDC). (This can be from one or more times):

_____ Less than one year _____ 1-2 years _____ 3-4 years

_____ 5-9 years _____ 10+ years _____ Don't know

7. Before you turned 18, did your family, or the household where you lived most of the time, ever receive AFDC or other cash assistance from the government? (Check One) _____ Yes

_____ No _____ Don't know

8. Are you currently: _____ Married _____ Divorced/Separated

_____ Widowed _____ Single _____ Living with a partner

9. How would you describe your race/ethnicity? (Check One)

_____ American Indian or Alaska Native

_____ Asian or Pacific Islander

_____ Black or African American

_____ White or European American

_____ Hispanic, Latina, or Chicana

_____ Multiracial

_____ Other _____

Appendix D

Self-Other Scale (SOS)

Please answer the following questions as honestly as possible, by circling the response that best describes your reaction to each statement. This is not a test, because there are no right or wrong answers. The combined answers of other LWV participants will be used to look at links between other people.

KEY:
SD= strongly disagree
D= disagree
N= neutral (not sure)
A= agree
SA= strongly agree

1. I have valuable ideas to share with others. (SA) (A) (N) (D) (SD)
2. I am comfortable with the fact that I am sometimes different from other people. (SA) (A) (N) (D) (SD)
3. I feel I can achieve my full potential. (SA) (A) (N) (D) (SD)
4. I find it hard to stay committed to the goals I set for myself. (SA) (A) (N) (D) (SD)
5. I am more aware of my personal power than most people. (SA) (A) (N) (D) (SD)
6. My person strength is a source of strength for others. (SA) (A) (N) (D) (SD)
7. I have my own rights as a person. (SA) (A) (N) (D) (SD)
8. I'm not really sure what I want out of life just yet. (SA) (A) (N) (D) (SD)
9. I feel independent as a person. (SA) (A) (N) (D) (SD)
10. I can say exactly what I feel. (SA) (A) (N) (D) (SD)
11. I have a realistic chance of accomplishing my personal goals. (SA) (A) (N) (D) (SD)
12. I feel strong as a person. (SA) (A) (N) (D) (SD)
13. I can live according to my personal values. (SA) (A) (N) (D) (SD)
14. I inspire others to work towards their goals. (SA) (A) (N) (D) (SD)
15. My feelings are clear to me. (SA) (A) (N) (D) (SD)
16. I frequently feel depressed these days. (SA) (A) (N) (D) (SD)

17. The important people in my life actively encourage me to achieve goals I set for myself. (SA) (A) (N) (D) (SD)
18. Part of my motivation in working to achieve my goals is to make the world a better, more positive place in which to live. (SA) (A) (N) (D) (SD)
19. I think I have a positive influence on others. (SA) (A) (N) (D) (SD)
20. I feel a sense of kinship with women. (SA) (A) (N) (D) (SD)
21. I do not feel there is much discrimination in our society. (SA) (A) (N) (D) (SD)
22. I am not afraid to differ with important persons in my life. (SA) (A) (N) (D) (SD)
23. I feel able to challenge myself to improve previous performances. (SA) (A) (N) (D) (SD)
24. I do not feel threatened by looking at mistakes I have made. (SA) (A) (N) (D) (SD)
25. I feel I will ultimately influence the larger community. (SA) (A) (N) (D) (SD)
26. I am able to express my fears about what happens in my life. (SA) (A) (N) (D) (SD)
27. I feel I can learn from all my life experiences, whether good or bad. (SA) (A) (N) (D) (SD)
28. I can recognize the many strengths in others. (SA) (A) (N) (D) (SD)

Appendix E

Clark Personal Correspondence/SOS Authorization



Department of Social Work
Rankin Hall
The University of Montana
Missoula, Montana 59812-1046
Phone: (406) 243-5543

November 17, 1997

Narda Judge
S.B. Department of Public Health
P.A.L.S.

Dear Narda:

The purpose of this letter is to formally indicate that you have permission to use the Montana Empowerment Scale, now referred to as the Self-Other Scale.

Please note that we have reduced the scale to 28 items, while maintaining high internal consistency. (Alpha = .89)

It would be very interesting to receive a copy of any work you are doing with the SOS and we would love to receive it. Likewise, any data sets would be of interest to work with also, as we look at the structure of the instrument and the way in which other factors (like who is taking the SOS) influence scores.....so let's stay in touch, and perhaps we can add to the knowledge base about this instrument in ways that will make it increasingly valuable for researchers.

Sincerely,

A handwritten signature in black ink, appearing to read 'Frank Clark'. The signature is fluid and cursive, with a large, sweeping 'F' and 'C'.

Frank Clark, Ph.D.
Professor and Chair

Appendix F

Qualitative Focused-Discussion Group Questions

1. What are some of the circumstances in your life that have exposed you to be a recipient of public assistance?
2. Describe how you feel society treats mothers receiving public assistance.
3. Describe your daily struggles related to being a mother receiving public assistance.
4. Describe how you would feel if you were to become gainfully employed and independent of public assistance.
5. Explain your ability to influence change in your life.
6. Do you feel you have the ability to advocate on your own behalf? Explain.
7. Do you see yourself as a successful person? Explain.
8. How much control do you feel you have over your life?
9. What strategies do you use if things do not happen as planned?
10. Do you see yourself exiting the welfare system?
11. What do you think will help you exit the welfare system?
12. What do you think will keep you from exiting the welfare system?
13. Describe a goal you have set for yourself for the next year or more.

Appendix G

Pearson Correlation of the Self-Other Scale (SOS)

		Self Esteem	self-concept	self efficacy	assertiveness	general empowerment	overall empowerment
Pearson Correlation	Self Esteem	1.000	.437*	.017	.235	.285	.583**
	self-concept	.437*	1.000	.155	.418*	.424*	.736**
	self efficacy	.017	.155	1.000	.356*	.277	.542**
	assertiveness	.235	.418*	.356*	1.000	.287	.739**
	general empowerment	.285	.424*	.277	.287	1.000	.678**
	overall empowerment	.583**	.736**	.542**	.739**	.678**	1.000
Sig. (1-tailed)	Self Esteem		.014	.468	.129	.084	.001
	self-concept	.014		.230	.019	.017	.000
	self efficacy	.468	.230		.040	.090	.003
	assertiveness	.129	.019	.040		.082	.000
	general empowerment	.084	.017	.090	.082		.000
	overall empowerment	.001	.000	.003	.000	.000	
N	Self Esteem	25	25	25	25	25	25
	self-concept	25	25	25	25	25	25
	self efficacy	25	25	25	25	25	25
	assertiveness	25	25	25	25	25	25
	general empowerment	25	25	25	25	25	25
	overall empowerment	25	25	25	25	25	25

*. Correlation is significant at the 0.05 level (1-tailed).

**. Correlation is significant at the 0.01 level (1-tailed).

Table 1

References

Alter, C. (1996). Family support as an intervention with female long-term AFDC recipients. Social Work Research, 20 (4), 203-216.

American Psychological Association. (1994). Publication manual of the American Psychological Association (4th ed.). Washington, DC: Author.

Clarey, J. H. (1985). Resocialization: A strategy for moving beyond stereotypes. Journal of Counseling and Development, 64 (3), 195-197.

Clark, F. W., Trankel, M. A., & Brod, R. L. (1994). Development and testing of the Montana Empowerment Scale (MES). In L. Gutierrez & P. Nurius (Eds.), Education and Research for Empowerment Practice: Monograph #7 (pp. 219-234). Seattle, WA: Center for Policy and Practice Research, School of Social Work, University of Washington.

Comas-Diaz, L., & Duncan, J. W. (1985). The cultural context: A factor in assertiveness training with mainland Puerto Rican women. Psychology of Women Quarterly, 9, 463-476.

Davis, L. V. (1986). A feminist approach to social work research. Affilia, Spring, 32-47.

Dobia, B., & McMurray, N. E. (1985). Applicability of learned helplessness to depressed women undergoing assertion training. Australian Journal of Psychology, 37 (1), 71-80.

Ensminger, M. E. (1995). Welfare and psychological distress: A longitudinal study of African American urban mothers. Journal of Health and Social Behavior, 36 (4), 346-359.

Gilberts, R. (1983). The evaluation of self-esteem. Family and Community Health, 6 (2), 29-49.

Goodban, N. (1985). The psychological impact of being on welfare. Social Service Review, 59 (3), 403-422.

Guba, E. C. (1990). The paradigm dialogue. Newbury Park, CA: Sage Publications.

Gutierrez, L. M. (1990). Working with women of color: An empowerment perspective. Social Work, 35 (2), 149-153.

Hagen, J. L., & Davis, L. V. (1994). Women on welfare talk about reform. Public Welfare, 52 (3), 30-43.

Hardina, D., & Carley, M. (1997). The impact of increased allowable work hours on two-parent families receiving welfare. Social Work Research, 21 (2), 101-110.

Henly, J. R., & Danziger, S. K. (1996). Confronting welfare stereotypes: Characteristics of general assistance recipients and postassistance employment. Social Work Research, 20 (4), 217-227.

Kunz, J. P., & Born, C. E. (1996). The relative importance of economic and cultural factors in determining length of AFDC receipt. Social Work Research, 20 (4), 196-202.

Mainous, A. G. (1989). Self-concept as an indicator of acculturation in Mexican Americans. Hispanic Journal of Behavioral Sciences, 11 (2), 178-189.

McBride, M. C. (1990). Autonomy and the struggle for female identity: Implications for counseling women. Journal of Counseling and Development, 69 (1), 22-26.

Miller, D. C. (1991). Handbook of research design and social measurement (5th ed.). Newbury Park, CA: Sage Publications.

National Association of Social Workers (1996). Code of ethics. Washington, DC: Author.

Neenan, P. A., & Orthner, D. K. (1996). Predictors of employment and earnings among JOB participants. Social Work Research, 20 (4), 228-237.

On-line source, May 25, 1997. Available: Internet <http://epn.org/tcf/welfq2.html>.

Parsons, R., East, J. F., & Boesen, M. B. (1994). Empowerment: A case study with AFDC women. In L. Gutierrez & P. Nurius (Eds.), Education and Research for Empowerment Practice: Monograph #7 (pp. 261-274). Seattle, WA: Center for Policy and Practice Research, School of Social Work, University of Washington.

Roberts, H. (1990). Doing feminist research. London: Routledge.

Rubin, A., & Babbie, E. (1997). Research methods for social work (3rd ed.). Pacific Grove, CA: Brooks/Cole.

Sands, R. G., & Nuccio, K. (1992). Postmodern feminist theory and social work. Social Work, 37 (6), 489-494.

Skodra, E. E. (1992). Ethnic/immigrant women and psychotherapy: The issue of empowerment. Women and Therapy, 13 (4), 81-98.

Stake, J. E., & Pearlman, J. (1980). Assertiveness training as an intervention technique for low performance self-esteem women. Journal of Counseling Psychology, 27 (3), 276-281.

Strauss, A., & Corbin, J. (1990). Basics of qualitative research. Newbury Park, CA: Sage Publications.

Swigonski, M. E. (1994). The logic of feminist standpoint theory for social work research. Social Work, 39 (4), 387-392.

Tableman, B., Marciniak, D., Johnson, D., & Rodger, R. (1982). Stress management training for women on public assistance. Journal of Community Psychology, 10 (3), 357-367.

Tidwell, B. J. (1990). Research and practice issues with Black families. In S. M. L. Logan, E. M. Freeman, & R. G. McRoy (Eds.), Social work practice with Black families: A culturally specific perspective (pp. 259-272). New York: Longman.

Thomas, V. (1994). Using feminist and social structural analysis to focus on the health of poor women. Women and Health, 22 (1), 1-15.

Van Den Bergh, N., & Cooper, L. (1986). Feminist visions for social work. Silver Springs, MD: NASW.

Vosler, N. R., & Ozawa, M. N. (1988). An analysis of two approaches to welfare-to-work. New England Journal of Human Services, 8 (4), 15-21.

Zimmerman, M. A. (1990). Toward a theory of learned hopefulness: A structural model analysis of participation and empowerment. Journal of Research in Personality, 24, 71-86.