Acknowledgements

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This report is dedicated to Barbara Sullivan, who died in the spring of 2004. She was an exemplary public servant, and those of us listed on this page miss her greatly.

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Other reports and technical assistance materials from the CalWORKs Project are available at the California Institute for Mental Health website: www.cimh.org/calworks
INTRODUCTION

Research in California counties has shown a high prevalence of mental health (MH), substance abuse (SA), and domestic violence (DV) issues in the CalWORKs population. These issues negatively affect participants’ abilities to obtain and maintain employment. Additionally, they can threaten the well-being of children in the family.\(^2\)

To address these barriers to achieving the goals of CalWORKs, the California Legislature has designated CalWORKs funds to be used for the provision of MH and SA services for CalWORKs participants. Many counties have designated funds for DV issues, as well, and Los Angeles County has been particularly generous in this regard. This funding has enabled counties to develop systems to identify and serve clients with MH/SA/DV problems—collectively called “supportive services” in Los Angeles.

The Department of Mental Health in Los Angeles County, with additional support from funds contributed by the Department of Health, Alcohol and Drug Administration, contracted with the California Institute for Mental Health to work with the county in designing a system to measure the effectiveness of CalWORKs supportive services. Over the past two years, four departments have cooperated with each other and with CIMH to study and improve supportive services in Los Angeles: the Department of Mental Health (MH), the Department of Public Social Services (representing CalWORKs), the Department of Health Services (SA), and Community and Senior Services (DV).

In May of 2003, we issued a first report profiling service outcomes, including client satisfaction and the achievement of work-related goals.\(^3\) This is the second project report. It is presented in different formats for different audiences. This format is for domestic violence system stakeholders. Similar reports are available for SA and MH stakeholders. A combined report is oriented to policy makers. All are available at: www.cimh.org/calworks.

The Interagency Context of CalWORKs Supportive Services

The CalWORKs supportive services—mental health, substance abuse and domestic violence—pose a unique challenge and opportunity. These services rely inherently on interagency cooperation. CalWORKs staff must identify persons with MH/SA/DV problems and provide employment-related supports, but the mental health, substance abuse, or domestic violence agencies provide the services necessary for clients to make use of the opportunities CalWORKs offers.

While service linkage offers an otherwise unavailable opportunity to help CalWORKs participants with MH/SA/DV barriers, developing interagency programs is a challenge.

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\(^2\) These findings are from CalWORKs Project reports. Reports and technical assistance materials from the CalWORKs Project are available at the California Institute for Mental Health website: www.cimh.org/calworks

\(^3\) The CalWORKs Project. (2003). Outcomes of CalWORKs Supportive Services in Los Angeles County: Mental Health, Substance Abuse, Domestic Violence. Sacramento, California Institute for Mental Health.
Los Angeles County has had a strong interagency focus for these services since the initial implementation of welfare reform in 1998. Program managers from all four agencies have met regularly to work out policy, operations, and funding issues. During the past two years, they have cooperated in designing a system for measuring and monitoring service outcomes.

**Supportive Services Outcomes**

We looked at four types of outcomes.

- **Access:** Is the system able to overcome barriers to identification and to facilitate the entry into services of participants with MH, SA, and DV issues?
- **Engagement:** Has Los Angeles County developed services that are relevant, accessible, and offered to the CalWORKs population in ways that enable and encourage participants to become and remain engaged in services?
- **MH/SA/DV Outcomes:** Do the services alleviate the specific MH/SA/DV symptoms or problems that serve as barriers to independence. Persons with these issues are likely to have problems with daily living tasks, parenting, and learning. Improvements in coping with these problems constitute critical “milestones.”
- **Work-Related Outcomes:** Do the services enhance the participant’s ability to be self-sufficient? Although getting a job with a living wage is the ultimate goal, CalWORKs promotes many related objectives—such as getting a general equivalency diploma (GED), obtaining needed training, and learning job search skills.

**Context for Supportive Service Work Outcomes: Employment and Work Activities in the CalWORKs Population Overall**

Because the number of persons using welfare has declined so much since the early 1990s, we tend to think of welfare reform as a success. However, the employment- and service-related outcomes of those who are currently receiving CalWORKs are limited. Below we cite highlights from recent reports regarding Los Angeles County.⁴

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A recent Department of Public Social Services (DPSS) study examined the period 1998-2001.

- Participation in Job Club (the “first step” for most work activities) was very low. A total of 54% of GAIN participants did not attend Job Club at all, and only 25% completed it.

- In the same study, only 12.5% of participants took part in a training activity, and only 34% of these finished.

- However, the study showed that participation in either Job Club or training, when it occurred, was associated with better chances of finding and retaining jobs as well as earning wages over the poverty level.

- The DPSS research report concludes that “only a quarter of all greater avenues to independence (GAIN) participants were able to cross poverty thresholds on the basis of earnings alone and become self-sufficient. Even for participants who obtained stable employment, only about half were able to earn above poverty thresholds.”

Very recent data shows limited welfare-to-work participation.

- California Department of Social Services data for Los Angeles reveal that in the second quarter of FY 2003-04, 28% of adults enrolled in welfare-to-work were employed. A total of 20% were in training or school, and 50% had at least one work-related activity. However, 25% were exempt, and one-third had been sanctioned and only their children received aid.

Since CalWORKs participants having MH/SA/DV problems have more barriers to employment than do other participants, we consider MH/SA/DV service outcomes successful if they show outcomes similar to these results for participants overall.

**What Information Does This Report Present?**

**Outcome information system requirements.** The goal of our efforts is to create an ongoing process to assess the performance of Los Angeles’ supportive services. We have identified three requirements for the Los Angeles supportive services outcome system:

- It must be interagency in nature, using data from the Department of Public Social Services and the MH, SA, or DV agencies.

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6 The DPSS research used data on earnings, job turnover and sustained employment from the Employment Development Department which are not available on a routine basis. We use alternative measures included in GEARS, particularly the number of hours working.
• It must record objective progress on a set of milestones toward the ultimate goal of economic self-sufficiency. These milestones will be specific to both CalWORKs and to the MH/SA/DV problems confronting clients.

• Finally, it must include the perspective and feelings of clients, which represent a significant part of any outcome measurement system. While making progress on objective milestones as a result of receiving supportive services is important, the ultimate goal of services is to improve the quality of clients’ lives and the lives of their children.

2003-2004 Surveys and Linked Administrative Data

Discharged client sample: By implication, an “outcome” occurs at the end of services. Thus we needed to sample a set of clients who had received supportive services in the recent past but were no longer receiving them. The Research, Evaluation and Quality Assurance Division of DPSS (using the GEARS data system) identified 360 participants who had ended a domestic violence supportive service between October 2003 and the end of February 2004. The Domestic Violence Unit of Community and Senior Services, unlike mental health and substance abuse, does not have a management information system that includes data on individual clients. The Domestic Violence Unit was able to match 275 of the 360 clients to its providers. Of these, 189 valid surveys were completed by 26 of the 30 domestic violence CalWORKs providers. Of these 189, 165 were later matched to eligibility and services data from DPSS.7 Thus the employment analysis done using DPSS data is based on 165 cases.

Current client sample: It would have been ideal to obtain the views of the above subset of “discharged” clients themselves. However, access to discharged clients is very difficult to obtain, and recent efforts to use mail or phone follow-up calls have been unsuccessful.8 As an alternative, we have used a survey of a representative sample of “current” clients— that is, clients still receiving services. While their views may not be the same as those of persons who have terminated services, they are valid in themselves and highly useful to service providers seeking to improve the care they provide.9 The 30 domestic violence providers each drew a random sample of clients who received services during a three-week sample period. The numbers of surveys completed by clients at each agency was proportional to the percentage of discharged clients for that agency. A sample of 390 valid current client surveys resulted.

7 The failure to match appears strange since the names originally came from DPSS, but there are a variety of reasons. The most common reason was that DPSS showed the client as a “no show,” while the DV agency had recorded at least some services.
8 In Los Angeles the Didi Hirsch CalWORKs mental health program was highly proactive and attempted such a phone- and mail-based system in 2003. The response rate was far below what is necessary to have any confidence the information was representative of all clients.
9 A second approach to obtaining client views, new in 2004, is to attempt to “intercept” at the welfare office persons who have either been referred to a supportive service and didn’t go, or those who actually went to services but no longer do so. Once intercepted, the participants are asked to fill out a survey about their experiences. The Department of Public Social Services conducted a pilot project in 2004 to determine whether collecting this information on an ongoing basis will be feasible and useful.
How representative are the sampled clients? A major improvement in this second outcome report is the better methodology used to select clients for the two samples. The sample for “discharged” clients included all clients from the sample drawn by DPSS who could be matched with DV agency identifiers. We believe the final sample of discharged clients for which we present outcomes data is highly representative of the DV supportive services population whose services ended between October 2003 and February 2004.

Additionally the “current” clients were randomly selected. This was more objective than the methodology used previously in which service providers gave forms to clients who happened to come to the center during the sample period, leading potentially to a positive bias in the results.


In 2003, the Los Angeles Economic Roundtable published Prisoners of Hope, an extensive analysis of welfare reform outcomes using a combination of data obtained from DPSS and from the state Unemployment Insurance system. CIMH subcontracted with the Economic Roundtable to generate detailed tables on MH, SA and DV service participants using the 1998-2001 data on which their report is based. Even though it is from an earlier period of time, the fact that all supportive service cases are included and that independent information on earnings is available makes this information very useful. We refer to information from this source as “population data from 1998-2001” in order to indicate the different time period and that all domestic violence CalWORKs cases are included—not just a sample.

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Domestic Violence Service Access and Engagement

Access

Referrals and clients served continued to increase during 2003-2004.

Although referrals increased little, the number of clients served each month increased from January 2003 throughout the spring of 2003. Approximately 200 more clients per month were served in early 2004 as opposed to early 2003.

Figure 1: Domestic Violence Referrals and Clients Served, January 2003–March 2004

As shown in Figure 2, the percentage of GAIN participants served increased from 1.8% to 2.5% between January 2003 and March 2004. This increased percentage is partially due to the declining number of welfare-to-work enrollees.
For three-quarters of the clients, this was the first time they had received a service for their domestic violence issue.

Information from both surveys indicated that for roughly three-quarters of the clients, this was the first time they had sought services for their domestic violence issue. (See Table 1.) Since acknowledging domestic violence can be experienced as shameful and seeking services can be fraught with danger, this finding suggests that the CalWORKs domestic violence program is providing the kind of environment in which women feel comfortable enough to seek services for their domestic violence issue.

Table 1: Percentage of DV clients with NO prior services

<table>
<thead>
<tr>
<th>Source of data</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-report on current client survey</td>
<td>379</td>
<td>76%</td>
</tr>
<tr>
<td>Staff record review for discharged clients*</td>
<td>117</td>
<td>75%</td>
</tr>
</tbody>
</table>

*Cases in which staff were uncertain were removed.

Over three-quarters of the clients in the discharge sample had received CalWORKs assistance for more than one year.

Table 2 indicates the length of time that the clients in the discharge sample had been receiving CalWORKs. The data suggests that the sample is primarily made up of persons who have been reliant on public assistance for some period of time rather than being relatively new entrants to CalWORKs.
Table 2: Time Receiving CalWORKs (Discharge Sample)

<table>
<thead>
<tr>
<th>Time Receiving</th>
<th>CalWORKs</th>
</tr>
</thead>
<tbody>
<tr>
<td>(N=148)</td>
<td></td>
</tr>
<tr>
<td>&lt; 6 months</td>
<td>9%</td>
</tr>
<tr>
<td>6 – 12 months</td>
<td>14%</td>
</tr>
<tr>
<td>1 – 3 years</td>
<td>41%</td>
</tr>
<tr>
<td>3 – 10 years</td>
<td>24%</td>
</tr>
<tr>
<td>10 – 20 years</td>
<td>10%</td>
</tr>
<tr>
<td>&gt; 20 years</td>
<td>2%</td>
</tr>
</tbody>
</table>

**Engagement**

*Keeping clients engaged in services is a critical but challenging goal of domestic violence supportive services.*

One of the most important findings from the first year outcome study was that participants who were in services longer or who completed services made greater positive change with regard to domestic violence and were more likely to be working at discharge. This year’s outcome study devoted more attention to both the objective and subjective reasons why the system might have difficulty in retaining clients in supportive services. Unless the service system understands why it is not being successful and is able to organize its services to address these reasons, client engagement will remain relatively low. We have examined more closely some of the objective challenges that must be overcome to assist clients in attending services, as well as reasons why clients themselves say they end services.

**Objective Obstacles to Engagement**

*The service system must be particularly responsive to factors in the lives of domestic violence service recipients that make their regular attendance in services difficult if not properly understood and addressed.*

The following characteristics of the population receiving domestic violence services highlights the challenges that the service system must address if it is to provide services that are truly responsive to its clients.

*Language diversity.* The discharged domestic violence cases sampled by DPSS listed the following as primary languages: English, Cambodian, Korean, Spanish, and Vietnamese.

*Large families.* A total of 18% of the current domestic violence cases sampled had four or more children. If the children are not in school, finding child care while attending services, or arranging transportation is a major undertaking for single mothers with several children.
If children are in school, that limits available appointment times. For those clients who work or go to school themselves, large families make logistics doubly difficult.\(^{11}\)

**Co-occurring disorders.** In recent years, service agencies are recognizing that substance abuse, mental health issues and domestic violence often occur together. Co-occurring disorders require different professional skills, philosophies, and resources.\(^{12}\) Only a few CalWORKs programs around the state have established integrated services that can serve any combination of these problems.\(^{13}\) A total of 37% of the current domestic violence clients acknowledged also having a substance abuse problem. While no data is available on concurrent mental health problems for either of these samples, California Institute for Mental Health epidemiological research in other California counties found that 47% of women judged to need domestic violence services also needed mental health services.\(^{14}\)

**Consequences of having a domestic violence situation.** Attending and participating in services include many of the same activities that are required by work or training—being able to leave the house safely, arranging child care, and using public transportation. So, the very problems that necessitate services may make it difficult to engage clients. Current clients were asked the number of days out of the prior 30 days in which they were “totally unable” to work or do daily activities as a result of the problems for which they sought services. Almost half (48%) of the domestic violence clients indicated that they were totally unable to carry out daily activities at least five days of the prior 30 because of their domestic violence situation.

*While services were easily accessible for the overwhelming majority of current clients, location or time might be problematic for up to 13%.*

A total of 95% of the current domestic violence clients said that services were available at times that were good, and 89% said that the location was convenient. Taken together, however, 13% of the current domestic violence clients said that either the times or the location of services was not convenient for them.

**Satisfaction With and Participation in Services**

*A high 90% of the current domestic violence clients are very satisfied with the services they are receiving.*

Nine out of 10 current service recipients are very satisfied with their domestic violence services. In addition, 99% said they feel that they have been treated with respect, 93% trust the person they work with most, and 96% would recommend the program to a

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11 While CalWORKs pays for job-related transportation, it does not pay for transportation to take children to school.
13 In Los Angeles, the Prototypes and the Shields for Families residential programs are among these.
friend. A higher percentage of the clients receiving outreach services (93%) said they were very satisfied with services than did those served in a shelter (71%). Consistent with this was the lower percentage in the shelter feeling they were treated with respect (91%) than in outreach services (99%); the lower percentage who trusted the staff (82% vs. 96%); and the lower percentage who would recommend the service to a friend (80% vs. 95%).

*Domestic violence providers said that 51% of their discharged clients attended most or virtually all of their scheduled service visits.*

Table 3 shows providers’ ratings of the level of participation in treatment of their discharged clients. The data confirms the difficulties in sustaining regular attendance for about half of the clients.

Table 3: Provider Ratings of Client Level of Participation in Treatment

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
<th>DV</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=181</td>
<td></td>
</tr>
<tr>
<td>VERY GOOD</td>
<td>Participation in virtually all sessions</td>
<td>21%</td>
</tr>
<tr>
<td>GOOD</td>
<td>Participation in most sessions</td>
<td>30%</td>
</tr>
<tr>
<td>POOR</td>
<td>Participation sporadic</td>
<td>23%</td>
</tr>
<tr>
<td>MINIMAL</td>
<td>Participation rare</td>
<td>26%</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

*A total of 80% of the domestic violence clients received services for less than a year.*

The amounts of time in service are similar to that which was reported last year. Over half of the clients received services for less than six months, although 20% remained in services longer than one year. (See Table 4.)
Table 4: Discharged Client Time in Services

<table>
<thead>
<tr>
<th>Time in Services</th>
<th>N=181</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under Two Months</td>
<td>19%</td>
</tr>
<tr>
<td>Between Two and Six Months</td>
<td>34%</td>
</tr>
<tr>
<td>Six to Nine Months</td>
<td>14%</td>
</tr>
<tr>
<td>Between Nine and 12 Months</td>
<td>11%</td>
</tr>
<tr>
<td>12 Months or More</td>
<td>20%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
</tr>
</tbody>
</table>

Among the current clients, older clients tended to stay in services for longer periods of time; 33% of the 18- to 25-year-olds had been receiving services for longer than six months, compared to 56% of those over 45 years of age.

Reasons for Terminating Services

*DPSS categorized 12% of the discharge sample as having completed their DV supportive service.*

The GAIN workers note in the GEARs system the reasons why a supportive service has ended. They indicated that 12% of the discharge sample had completed the DV service component. Nearly half the episodes were rated by the GAIN worker as “not completed, client employed.” Some clients (11%) terminated DV services due to moving or leaving CalWORKs. Almost a third (30%) dropped out (including those who were sanctioned) without employment being noted.

Services for 21% of the 3,482 referrals to domestic violence agencies in the population data from 1998-2001 were rated by GAIN workers as completed. Unfortunately, the categories used by GAIN workers to classify the reasons why services were not completed in the population data from 1998-2001 are not the same as currently used by the GAIN workers on this year’s discharge sample. Most importantly, they do not include the “not-completed-employed” category, which accounted for nearly half the end-codes for the discharge sample. This makes reasons why the service episode ended not comparable. In the population data, 41% of referrals ended in a drop out, and 16% of

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15 Service providers classified 23% of the 189 discharged clients they rated as having completed their services in terms of meeting client goals—which is not necessarily the same criterion used by DPSS in determining whether the supportive service component was “completed.”

16 We excluded cases in which no end code was listed – 30% of all MH/SA/DV service episodes – on the assumption that these cases were still open. We were able to check the mental health “end codes” with mental health administrative data. The number of mental health with no end code almost exactly matched the open cases at the time the study ended; we conclude that virtually all of these referrals were still open at the time the data collection was completed. DPSS staff also confirm cases with no end code were either still open or, in a few cases, were due to error.
referrals ended as no-shows. A variety of other reasons accounted for the remaining 23%.\(^{17}\)

We are unsure why the percentage with a completed component is lower as rated by the GAIN staff on our sample than it is in the population 1998-2001 data (or clinician ratings). It is possible that the large group of persons in the sample categorized as “not complete but employed” might earlier have been categorized as completed.

**Discharged clients who completed treatment received services longer than persons terminating early.**

The length of DV supportive service treatment episodes, as recorded in the GAIN data system, indicated longer episodes for those who completed the service (12.8 months) than those who terminated early but were employed at the time (7.4 months), or those who dropped out (7.8 months).

**Sanctions after referral to a supportive service were low in the population 1998-2001 data.**

Only 3.1% of those referred to a DV supportive service had a record showing a sanction occurring after the referral.

However, sanctions over the entire four-year period were much more frequent. Of persons with a DV referral, 18% had at least one financial sanction recorded some time in the four years. These sanctions may have occurred prior to a referral and may later have been “cured;” they just indicate problems with compliance with CalWORKs' requirements.

Those who dropped out had somewhat higher rates of sanctions than did those completing. We hypothesize that whatever factors contribute to lack of compliance resulting in sanctioning may also interfere with follow-through of supportive services.

**Population data from 1998-2001 indicate limited English does not preclude successful engagement.**

Overall, 18% of clients referred to supportive services in the population data had a DPSS “flag” to denote CalWORKs participants with limited English proficiency. Contrary to expectations, the clients in DV services were somewhat more likely to complete services if their English was limited. This suggests that specialized programs for cultural and linguistic subpopulations are doing a good job at engagement.

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\(^{17}\) The 1998-2001 population data show that a somewhat higher percentage of persons complete the supportive service they were referred for (24%) than complete specific episodes (21%). In other words, some participants entered and left services more than once during the study period and were successful on at least one attempt.
Domestic Violence Outcomes

Service outcomes were assessed from the perspective of both the clients and the service providers. The client ratings were made by the clients currently receiving services, while the provider ratings apply to the set of clients who had been discharged.

*Almost all current clients said the domestic violence services had helped them with issues related to the domestic violence.*

Clients were asked, "Overall, did the services you got at the agency help you to improve your situation or deal with your problems?" A total of 75% said they had received “a lot” of help, 22% said they received “some” help and 2% said they received “a little” help. Virtually the same percentages said that they had received “a lot” or “some” help with domestic violence issues. The amount of help reported for domestic violence issues increased with the length of time the client received services.

*Nonetheless, a significant minority of the current clients (18%) were feeling unsafe at the time they completed the survey.*

A total of 38% of the current clients reported they felt “very safe” at the time they completed the survey with an additional 44% saying they felt “fairly safe.” But 16% reported feeling “somewhat unsafe,” and 2% said they felt “very unsafe.” So while the immediate safety needs of most women were being addressed, there were some who still felt in some immediate danger. As would be expected, 5% of those in shelters felt to some degree unsafe compared to 20% of those who were receiving services in the community.

*Roughly two-thirds of the current clients said they were helped a lot with the more general problems of daily living and their parenting.*

The services provided by domestic violence agencies address a broad range of issues as a result of the violence. As shown in Figure 3, virtually all current clients reported receiving a lot or some help with parenting, with daily living activities, and in dealing with their emotional problems. (If the question was marked as “not a problem for me” the response was not counted.) A total of 59% of those who indicated having problems with substance abuse reported getting “a lot” of help with this issue.

In general, Asian-American clients reported receiving less help in these areas and Latina clients more help. For help with parenting, daily living, and emotional help, the degree of help was positively related to length of time in services, i.e. the amount of reported help was greater the longer the client had been receiving services.
Figure 3: Current DV Client Rating of Help Received

Staff members reported that at least 75% of their discharged clients made positive change on their domestic violence issues.

Staff members rated each of their discharged clients on change they had made regarding:

- Client’s safety and freedom from physical abuse
- Client’s freedom from emotional abuse
- Client’s freedom from harassment or stalking
- Client’s understanding of all options in regard to the abuse

As shown in the following graph, positive change was recorded for 75% or more in each domain. However, staff are less likely than clients to say that change was extensive.
Figure 4: DV Staff Rating of Positive Change During Services

Staff members also reported that 76% of their discharged clients had made positive change in their ability to deal with their daily problems, and 78% made positive changes in parenting.

**Discharged clients who received services for longer periods of time made more positive change.**

For all of the domains rated by staff members, those who received services for longer periods of time were rated as making more positive change. For example, 97% of those who received services for more than one year were rated as making positive change in their physical safety, compared to 64% of those receiving services for less than three months. Current clients in service longer also registered more change on several dimensions, particularly help with substance abuse, parenting, and dealing with emotional problems.

**Work-Related Outcomes**

*Virtually all of the current clients who felt work was difficult for them reported receiving some help with problems related to work.*

Current clients were asked, “How much have the services you have gotten here helped you with work problems?” A total of 40% of the domestic violence clients said that work
was not a problem for them. Table 5 shows how the remaining 60% of the clients who said they had work problems rated the amount of help they had received.

**Table 5: How much help current clients received with work problems, if help was needed**

<table>
<thead>
<tr>
<th>Help with work problems</th>
<th>N=204</th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot</td>
<td>45%</td>
</tr>
<tr>
<td>Some</td>
<td>44%</td>
</tr>
<tr>
<td>A little</td>
<td>11%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
</tr>
</tbody>
</table>

_According to provider ratings, two-thirds of the clients had positive change in their capacity to look for, find and retain work._

Domestic violence providers rated 22% of their clients as having made strong positive change and 40% having made some positive change.\(^{18}\) The amount of positive change was strongly associated with the time receiving services. Strong positive change took place rarely (9%) if services lasted less than six months. It occurred in 24% of cases served between six months and a year, and was even more likely if services lasted over a year (42%). However, successful completion of services was a stronger factor, with 44% of those completing services indicating strong positive change—regardless of time in services.

**Table 6: How much staff believe discharged clients were helped in developing the capacity to look for, get, and keep jobs**

<table>
<thead>
<tr>
<th>Client change in work capacity</th>
<th>N=109</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strong positive</td>
<td>22%</td>
</tr>
<tr>
<td>Some positive</td>
<td>44%</td>
</tr>
<tr>
<td>No change</td>
<td>32%</td>
</tr>
<tr>
<td>Negative change</td>
<td>2%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

_Employment and Participation in the Labor Force_

**Labor Force Status for Month in Which Services Ended**

_According to DPSS data, half of the discharged sample worked or participated in education or training during the month in which their DV supportive service ended._

Earned income is recorded by DPSS for persons receiving CalWORKs, Medi-Cal or Food Stamps or post-employment services. In the month in which DV services ended, 23% of the discharge sample were employed, i.e. had reported earnings in the DPSS data

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\(^{18}\) The providers for 12% of the clients felt work capacity was not relevant to their services, and an additional 29% felt they did not know enough to accurately rate this item. So the figures in the table are for the remaining 59% of the discharged clients.
As noted below, some persons’ receipt of CalWORKs ended in the month in which DV services ended. A higher percentage of these clients (50%) were likely to be working in the month in which DV services ended than those still receiving CalWORKs (21%).

Based on service components noted in the client’s welfare-to-work plan in GEARS in the month in which services ended, 24% received post-employment or enhanced post-employment services, 13% received training or education, 2% received vocational services, 11% received remedial education, and 20% were involved in volunteer work. A total of 48% had at least one of these work-related activities, and 17% had multiple activities.

When these data are combined, a total of 53% were either working or engaged in a work activity in the month in which their DV supportive services terminated.

*A particularly high percentage of those completing DV services were engaged in an educational welfare-to-work component.*

Using staff ratings rather than DPSS data, 64% of those achieving their DV goals were in school in the month in which services terminated, compared to fewer than 15% among those with other reasons for termination. The percentage in school also was directly (and statistically significantly) related to time in service. For those receiving services six months or less, 16% were attending school. For those receiving services 6-12 months 42% were attending school, and for those receiving services over a year, 60% were attending school.

*Earnings were low* for those who worked in the month in which domestic violence services ended.

In the month DV services terminated, only 29% of those working made $900 a month or more, and only one person earned $1,500 or more—according to DPSS data. For those who have left CalWORKs, these average numbers would not be sufficient earnings to support a family. (Those on CalWORKs also have cash aid.)

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19. It should be noted that this percentage working (23%) is less than one would expect based on the high percentage (47%) that had the end-code “not completed-employed.” This data discrepancy will need to be explored in greater depth in next year’s study.

20. A special program proving more post-employment services.

21. Information on earnings is collected by those in CalWORKs, or Food Stamps or Medi-Cal programs. We computed the percentage who worked in any month as equal to the percentage reporting any earnings.

22. Earnings of $1,500 a month equates to $18,000 a year. Clients in this sample had an average of 2.84 dependents. Poverty-level income for 2004 for a family of three is $15,670, and for four is $18,850. (http://aspe.hhs.gov/poverty/04fedreg.htm).
Table 7: Monthly earnings for those employed during the month in which the domestic violence service terminated

<table>
<thead>
<tr>
<th>Monthly Earnings</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1 – 300</td>
<td>5</td>
<td>13%</td>
</tr>
<tr>
<td>$301-600</td>
<td>12</td>
<td>32%</td>
</tr>
<tr>
<td>$601-900</td>
<td>9</td>
<td>24%</td>
</tr>
<tr>
<td>$901-$1,500</td>
<td>11</td>
<td>29%</td>
</tr>
<tr>
<td>&gt;$1,500</td>
<td>1</td>
<td>2%</td>
</tr>
</tbody>
</table>

Labor Force Status Six Months After DV Services Ended

Receipt of CalWORKs by persons in the discharged sample declined by more than one third in the six months following the DV service termination month; Medi-Cal eligibility remained much higher.

As shown in Figure 5, during the month in which DV supportive services terminated, CalWORKs receipt dropped from 165 to 144. Participation in welfare-to-work activities was somewhat lower (primarily due to exemptions) while Medi-Cal receipt remained very high. Use of food stamps was intermediate.

Over the succeeding six months, all measures of participation went down. By the seventh month, only 101 of the 165 clients in this sample remained on CalWORKs.

Figure 5: Receipt of CalWORKs, Medi-Cal and Food Stamp programs during the month in which domestic violence services ended and in the six following months
The overall percentage of those working remained about the same, but persons who left CalWORKs were somewhat more likely to earn income in succeeding months\textsuperscript{23} than those who remained eligible for welfare-to-work activities.

The percentages of persons in the discharge sample with earnings did not change appreciably in the six months following the end of the DV service episode. The differences between those no longer eligible for CalWORKs and those still on GAIN continued. In the seventh month, only 18\% of the 101 who remained eligible for GAIN worked, compared to 41\% of those no longer receiving CalWORKs.

The fact that up to 60\% of those who had left CalWORKs reported no earned income is a matter of concern—both in this sample and nationally.\textsuperscript{24} One encouraging result is that 73\% of those who dropped out of DV services (but remained enrolled in GAIN) were engaged in volunteer, education, or training activities at some point during the six months following the termination of their DV services.


*Population data from 1998-2001 show that persons referred for domestic violence services are less likely than the general CalWORKs population to find employment.*

Epidemiological studies have found significant effects of DV status on employment.\textsuperscript{25} No studies to date, however, have analyzed long-term effects for the population actually referred to DV supportive services.

Persons given a domestic violence supportive services referral at some time between the first quarter of 1998 and the fourth quarter of 2001 are much less likely to have earned income compared to persons in GAIN not referred for a domestic service.\textsuperscript{26} In early 1998 the differential is 6\%, but by the last quarter of 2001, those with a domestic violence service referral are considerably less likely to have earned some income (32\% vs.47\%).\textsuperscript{27}

\textsuperscript{23} One to two percent of the discharged sample received no public benefit during the termination month and six months following, so we do not know whether they had earned income or not. For participants receiving one or more of these benefits, we have information on whether income was earned in a month and how much was earned.


\textsuperscript{26} This same pattern applies to MH and SA referrals.

\textsuperscript{27} It would be more revealing to show the percentage working before, during, and after receiving services. With these data this was not possible.
Population data from 1998-2001 show that a higher percentage of persons referred to domestic violence services work if they complete the service. Those for whom service episodes were still open worked least.

As shown in Figure 7, the relatively small increase in Figure 6 for those with DV service referrals hides very important differences between subgroups. The overall increase over time for those completing a DV service is encouraging. By the end of the study period, 43% were working (vs. 47% of those with no DV services). Those who start services and then do not complete them (which may be after months or even years of service) also show an overall increase, though not quite as high as those completing services (37% in the last quarter of 2001). “No shows” at the referral show somewhat less gain than dropouts (31% in the last quarter of 2001). As would be expected, those who are still receiving services are not doing as well, with a decreasing percentage working over time (21% at the last quarter). Although we do not know how long these participants have been receiving their services, this does provide evidence that those in treatment may be more impaired in their capacity to work.

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28 Note that the referral to supportive services may have come at any time in the four years. It was not possible to show earnings “before” and “after” supportive services referrals.
Among population clients with earned income in 1998-2001, those completing a domestic violence service earned a bit more than those with no supportive service referral.

The figures above show the percentage of different groups who worked at all during each quarter. A second question is: for those who do work, are earnings different depending on supportive service status?

Figure 8 shows the quarterly earned income for three different groups of CalWORKs participants (with persons who did not work omitted). The top line shows the persons who were active in CalWORKs at some time during this period of time (1998-2001) who did not have a DV supportive services referral. Below them appears the income of individuals who were referred to a supportive service and completed it. By the fourth quarter of 2001, little difference occurred between these groups: $3,757 for those with no DV referral, vs. $3,937 for those completing the service. The bottom line shows the earned income for all who were referred to supportive services ($3,180). Although not shown, the average in the final quarter for those with no recorded end code (that is, still receiving DV services) is only $2,214 per month, compared to the $3,937 of those who completed. Those who dropped out or were no-shows were in between ($3,107 and $3,471, respectively).
Although those individuals completing domestic violence services do much better than others referred to but not completing services, without a controlled study, we are not able to say whether the difference is due to the effects of treatment or that this group differs—in ways related to their earnings—from those who don’t complete services.

**Summary**

- **Access:** Domestic violence service referrals from GAIN continued to increase in the 2003-2004 period. Domestic violence services provided through CalWORKs are reaching individuals who have not received these services in the past.

- **Engagement:** Engaging and retaining clients in service continues to be a challenge. Only 23% of clients served remained in service until their service goals were achieved, according to DV agency staff; and GAIN staff classified only 12% as having completed the DV component. Staff members reported that attendance at scheduled sessions was minimal or poor for almost half of their discharged clients. Despite this, satisfaction with service as reported by current clients was very high.

- **DV outcomes.** Outcomes related to their domestic violence issues were consistently higher for those who remained in services longer. For all of the domains rated by staff, those who received services for longer periods of time were rated as making more positive change. Current clients in service longer also registered more change on several dimensions, particularly help with substance abuse, parenting, and dealing with emotional problems. Overall, 75% of the
current clients said the services had helped them “a lot” with their domestic violence situation, and roughly two-thirds said they were helped “a lot” with more general problems of daily living and parenting. Staff reported that at least 75% of their clients made positive change on their domestic violence issues.

- **Work-related changes.** Almost 90% of those having difficulty with work reported receiving help. Agency staff felt about 60% of clients had made positive changes related to their capacity to find and retain work; these changes were much more likely among those completing services.

- **Labor force status when services ended.** In the month of termination, 48% participated in education, training or other work-related activities. Those completing DV services were especially likely to be pursuing an education. About one-fourth of the participants had earned income that month.

- **Labor force status in the six months following the end of services.** Six months after services ended, only half of the former clients were still active in GAIN. These persons were more likely to be earning income than those no longer in GAIN. The fact that up to 60% of those who had left CalWORKs reported no earned income is a matter of concern. However, a high 73% of service dropouts were involved in volunteer, education or training activities in the subsequent six months.

- **Population data from 1998-2001 show:**
  a) Employment of persons identified and referred for DV services is much lower than among the general CalWORKs population—indicating that DV is an extremely important barrier to meeting CalWORKs goals.

  b) The rate of employment is higher for those who have completed their DV service than for dropouts or no-shows or those still in treatment, but lags behind those not referred for DV services.

  c) For those who do work, however, the average monthly earnings for persons who completed services are actually slightly higher than the earnings of those who were never referred for DV services.

In summary, although identification and engagement can be improved, CalWORKs domestic violence supportive services address a real need and do so in ways that have helped clients achieve their employment-related CalWORKs goals.
Methodological Appendix

Sampling Methods

A major change between the first year’s study and this one was in sampling methodology. For both the sample of clients whose services had already ended and the current client sample extensive efforts were made to define samples representative of the populations described above.

Clients whose services had ended

- The Research, Evaluation and Quality Assurance Division of DPSS used GEARs data management system to identify all of the participants who had ended a supportive service between October 2003 and the end of February 2004. For domestic violence, this was 360.
- The community and senior services domestic violence unit was able to match 275 cases with the domestic violence contractors indicated on the DPSS data file. Of these, however, only 189 staff reports were deemed valid, drawn from 26 (of 30) providers.

Clients currently receiving MH/SA/DV services

In the first year’s study, current clients were randomly sampled at the participating agencies on several consecutive days. Because this method could potentially bias the sample—if clients who are less satisfied with services attend less regularly—we made extensive efforts this year to select a representative sample.

- The community and senior services domestic violence unit did not have a MIS-based list of current clients. Therefore all 30 of the agencies serving CalWORKs clients were instructed on how to draw a random sample from the clients currently enrolled who were in residence in a shelter or had an appointment during the three weeks of the sampling period. The number of cases in each agency was assigned proportionately to the number of discharged cases they had been assigned. From the 30 agencies, a total of 390 current clients completed survey forms.
- Survey forms were available in English and Spanish.

1998-2001 population data

The persons included in this analysis are 11,548 individual parents who were active in Los Angeles GAIN 1998-2001. "Active" means having one or more referral to a supportive service (or clinical assessment). A total of 2,936 persons were referred to DV services in this time period. Information on GAIN domestic violence services is matched with Unemployment Insurance data on number working and earnings in each quarter during the 1998-2001 period. This information was available for the entire time period, regardless of how long the person received GAIN services. For employment and earnings analyses, the participants referred for supported services are contrasted with all GAIN participants not referred, a total of 178,113 persons.
The California Institute for Mental Health is a non-profit public interest corporation established for the purpose of promoting excellence in mental health. CIMH is dedicated to a vision of “a community and mental health service system which provides recovery and full social integration for persons with psychiatric disabilities; sustains and supports families and children; and promotes mental health wellness.”

Based in Sacramento, CIMH has launched numerous public policy projects to inform and provide policy research and options to both policy makers and providers. CIMH also provides technical assistance, training services, and the Cathie Wright Technical Assistance Center under contract to the California State Department of Mental Health.