WELFARE-TO-WORK IN NEW HAMPSHIRE:

A Preliminary Analysis of a Family Life Skills Program

Presented by: Mary Anne Wichroski, PhD
Department of Social Work
University of New Hampshire, Durham, N.H.

Co-Presenter: Elizabeth Forshay, MSW

Co-Authors: Sharyn J. Zunz, DSW
Suzann E. Knight, MOE, MS, CFP
Susanne Hebert

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This paper reports the preliminary findings of an evaluation of a lifeskills program called Lifeskills for Employment, Achievement, and Purpose (LEAP), a job readiness program developed by the New Hampshire Cooperative Extension, being implemented statewide as part of the New Hampshire Employment Program initiative. Using a quasi-experimental pre-test post-test design, survey data, ethnographic data, and a 90-day follow-up survey, data on the first 148 participants from the twelve program sites were analyzed. Significant improvement was found in the three curriculum areas -- Food and Nutrition, Money Management, and Balancing Work and Family (which includes parenting and personal skills), as well as self-esteem and perceived social support. Reduced barriers to employment reported were coping/managing, anger/stress management, concerns about childcare, and money management. Continued barriers at posttest included childcare, stress/anxiety, medical problems, transportation, and lack of training/qualifications/skills. Personal internal issues notably decreased at posttest, but some external/structural and medical concerns persist. Forty-one percent of the follow-up sample were employed in low-wage, service-sector jobs with few benefits; 46% are engaged in another NHEP activity; and 14% in an AWEP activity (Alternative Work Experience). While participants appear to be moving on to employment or some form of approved work activity, a larger follow-up sample is required for more conclusive long-term findings on the impact of the program.
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Introduction

Welfare-to-work job training programs are not new. In fact, over the last 40 years we have had at least one such initiative per decade under the auspices of such legislation as the Manpower Development and Training Act of 1962, The Comprehensive Employment and Training Act (CETA) of 1973, the Job Training Partnership (JTPA) Act of 1982, and the Job Opportunity and Basic Skills Training Program under the Family Support Act of 1988 (Axinn & Levin, 1997). Such programs all met with some success in moving the "most employable" welfare recipients (i.e. those with a high school education, past work experience, and fewer family problems), into jobs. All of these programs were criticized, however, for a wide variety of shortcomings including: only enrolling the most employable to enhance their success rates ("creaming off the top"); low program completion rates; poor matching of job skills training to available jobs in local marketplaces; inability to overcome unfavorable general economic conditions for the employment of low skilled workers; a paucity of built in support services to address employment barriers such as child care, physical and mental health concerns, and lack of reliable transportation; the lack of comprehensive pre- and post-placement job coaching; and job placements in "make work," low paying, or "dead-end" jobs that had no hope of raising a family out of poverty (Jansson, 1997).

Our most recent attempt at welfare-to-work began on August 22, 1996, when President
Clinton signed into law the Personal Responsibility and Work Opportunity Reconciliation Act (P.L. 104-193), declaring an "end to welfare as we know it." Under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), both Aid to Families With Dependent Children (AFDC) and the Job Opportunities and Basic Skills program (JOBS) were abolished and replaced by Temporary Assistance for Needy Families (TANF) (Mandell, 1997; U.S. Dept. of Health & Human Services, 1997). What makes the welfare-to-work component of this current effort different from those attempted in the past are two key provisions: First, TANF is a block grant program under which the federal government supplies a fixed amount of matching funds to each state who design their own, individual plans. These state plans include flexibility to tailor their welfare-to-work programs to address their state’s particular population, although they all must include some initial assessment of recipients’ skills through the development of individual "personal responsibility plans." Secondly, as its name suggests, TANF is a temporary program that is equipped with very specific time limits and requirements. The need to be successful in acquiring a job is intensified by the clear message that welfare cash benefits are not indefinite and that vocational and higher educational options are very limited. Although states may exempt 20% of their caseload from time limits for reasons of hardship, all other recipients, with very few exceptions, are required to do some form of paid or unpaid work after receiving benefits for 24 months. Failure to comply with such work requirements can result in either a reduction or termination of cash benefits. TANF benefits also have a lifetime cap of five years (Administration for Children and Families, 1998, 1999; Mandell, 1997; U.S. Dept of Health & Human Services, 1997).

This paper will present preliminary findings from an evaluation of a job readiness program.
currently being offered as part of New Hampshire’s plan to implement a welfare-to-work strategy that meets the current TANF provisions. We will begin by describing this program, entitled Lifeskills for Employment, Achievement, and Purpose (LEAP), which was developed by the state university’s Cooperative Extension program, explaining how LEAP fits into the state’s overall welfare-to-work initiative. After a brief review of the literature on the successes and challenges of similar past initiatives, we will then present the evaluation methodologies employed and the results to date. Finally, we will discuss the implications of our findings for future policy and program planning.

**Welfare-to-Work in New Hampshire**

The State of New Hampshire has assigned its TANF recipients to two different programs: the New Hampshire Employment Program (NHEP), which is for adult or minor heads of household receiving assistance and deemed able to work, and the Family Assistance Program (FAP) for adults currently judged exempt from the work requirement. The NHEP program features two components: a job search/job readiness component and if necessary, a work for benefits component. The following summary provides an outline of the program’s major features as described under the current law (N.H. Dept. of Health & Human Services, 1999):

**Participation Requirements:** NHEP is mandatory for all individuals receiving cash assistance, with the exception of individuals who are unable to work due to physical or mental disabilities and parents with children under 2 years of age. However, those individuals can volunteer to participate in NHEP if they wish. Individuals participating in an approved education or training program and those experiencing significant temporary barriers to employment (i.e., homeless, impending eviction, substance abuse, domestic abuse, physical or mental disability) are temporarily exempted from the program’s job search requirement, although the latter must participate in barrier resolution activities.
Job Search Component: Recipients begin the welfare-to-work process with an initial job search and assessment period that includes one or more of the following: an individual assessment of their job readiness, making arrangements for child care and transportation, employment counseling, employment preparation and employer contacts. Following this initial four-week period, participants who do not have their high school diploma have the option of completing their GED. All others who have not obtained employment move into job readiness programming (of which LEAP is a sanctioned activity). The LEAP program is open to both mandatory and voluntary NHEP participants.

Work for Benefits Component: Those who are still unemployed after completion of the job readiness component (including those who have completed LEAP) are required to participate in the work for benefits component. The activities here include some form of subsidized or unsubsidized employment, on-the-job training, or the Alternative Work Experience Program (AWEP) in the public and non-profit sector. In addition, any of the above may be accompanied by a single course of training, vocational skills training, post-secondary education, or a self-initiated job search.

Transitional Support Services: Support services available while an individual is participating in NHEP may include child care assistance, transportation(mileage and auto repairs), earned income disregard, the ability to save up to $2,000 while on financial assistance, necessary fees and supplies, and tuition. Payments may also be authorized for dental care, car registration and insurance, work clothing or other items that may remove obstacles to employment.

Post-Employment Support Services: Even individuals whose TANF case is closed due to employment are eligible for the following support services: Extended medical assistance
for up to 12 months, Healthy Kids-Gold medical coverage for children with net family income not higher than 185 percent (300 percent for infants up to age 1), child care assistance up to 190 percent of poverty level, earned income tax credit, and case management services for 90 days.

LEAP Curriculum

The curriculum for LEAP was developed by the University of New Hampshire Cooperative Extension. Cooperative extension programs have traditionally engaged in community based educational activities on behalf of the land-grant universities with which they are affiliated. Many cooperative extension groups are collaborating at local and state levels on welfare to work programs and services in 40 other states (Fitzgerald & Pippidis, 1997), providing educational information on nutrition, parenting, leadership, financial management, and personal development, playing a vital role in linking families with communities and resources, reducing duplication of services, opening channels of communication and linking clients with community services. In New Hampshire, the Cooperative Extension's role is comprehensive in that it is delivering state-wide services such as LEAP in a collaborative effort with the New Hampshire Employment Program.

LEAP’s curriculum consists of three components: Food and Nutrition, Money Management, and Work and Family (which includes two subsections - Parenting skills and Personal skill development). The program is delivered monthly in a four day a week, three week cycle, thus making a complete program 12 sessions (75 hours). LEAP was initially delivered in three test sites throughout the state (one metropolitan, one suburban, and one rural), then was expanded to five sites, and is now offered in the twelve statewide NHEP locations. The program is delivered by Cooperative Extension staff, who are specifically hired and trained for LEAP. Instructors are not only trained in the curricular areas, but have also received instruction in the current NH TANF system and its recipient population. They work out of the district offices in order to be in close proximity with TANF recipients. Often the
instructors are from the local area where the training takes place, but they also receive instruction on how to familiarize themselves with specific community resources and how to build links with existing community networks.

The curriculum has a lecture\discussion and applied learning format which includes "hands on" activities and field trips; for example, to a local supermarket. Applied learning and individualized attention are emphasized, as well as reinforcement of the client's ability to be successful. Participants receive a binder notebook in which to keep their handouts and other printed materials; receive supplies like a date book, pocket calculator, and cooking aids; and receive a certificate on completion of the program. LEAP also includes an expectation of, and discussions about, such job preparation skills as attendance, punctuality, reliability, and proper grooming; how to participate in group activities; managing conflict, anger, stress, and time; and effective communication skills.

Review of the Literature

Evaluations of welfare-to-work programs designed to enhance employability and/or to bridge the gap between welfare dependence and self-sufficiency, have helped to identify some of the essential components of these programs. Strawn (1998), for example, evaluating secondary data from the JOBS Program in five cities across the U.S., emphasized the need for a unified employment goal, incorporating a job skills/work experience component and Lesher (1997), commenting on welfare in Wisconsin, attributed their success to the work requirement or community service as necessary in building a work ethic. Melendez and Harrison (1998), in their evaluation of the CET Program in San Jose, California, also emphasized the need for a work-place based, job oriented environment.

Because the welfare population includes many who have multiple barriers to employment, the importance of lifeskills classes, in conjunction with job search, has also been well documented in the
literature; for example by Rangarajan (1996;1998) in studying the PESD Program, DeBord et al. (1997), in their evaluation of the North Carolina Work First Program, and Woods & Paulsell (1995) in their study of the GAPS initiative. Previous literature also suggests that in addition to lifeskills help, other important program components include social supports, self-esteem, human capital, and motivation. In evaluating the JOBS Program in 15 North Carolina counties, Neenan and Orthner (1996:8) found that one of the most significant predictors of higher post-program earnings was the characteristics and/or attitudes of participants before entering the program, underscoring the need for high levels of participant motivation to help a family move out of poverty. Similarly, an evaluation of the JOBS Program in Mississippi (Southward and Baird, 1997) reported that social support and personal motivation were mentioned as most important strengths by clients, case managers, and service providers. In their evaluation of the North Carolina Work First Program, DeBord et al. (1997) reported that in addition to job preparation, the most effective things were emotional support, internal positive attitudes, access to resources, and personal support, with the latter being the single most valuable aspect of the program. Rangarajan (1996) also found personal attention as extremely important.

Motivation and attitude may also be directly related to self-esteem. Elliott (1996) found that receiving welfare correlates directly with the lowering of self-esteem, exacerbated by becoming a mother and having low basic educational skills. Previous evaluations have found that the principal mission of lifeskills classes has been to build self-esteem (Pavetti et al., 1996) on the theory that self-esteem promotes motivation (DeBord et al., 1997), promotes needed lifestyle changes and the ability to face challenges (Pavetti et al., 1996), and ultimately attitudes towards self-sufficiency (Olson & Pavetti, 1997).

Clearly, in addition to more pragmatic job readiness and lifeskills instruction, personal attention,
self-esteem, social support, and motivation emerge as important features of past programs. On the other hand, an evaluation of the GAPS initiative developed by the Pittsburgh Foundation, showed that participants had benefitted from supportive counseling, self-esteem building, housing help, money management, conflict resolution, work behavior issues, and supportive networks, but follow-ups showed that the program was not useful in helping them stay employed. Participants needed more specific help in finding jobs, childcare, and transportation (Woods and Paulsell, 1995:5).

We might conclude, then, that while job-search and work-related skills, including resume writing and interviewing skills, are important (Woods and Paulsell), research indicates that preparing a person to be "workforce ready," also includes developing a work ethic, solving childcare and transportation problems, and finally, addressing family situations, personal attributes, and self-esteem (O'Brien, 1998). As Kalil et al (1998:25) point out, however, work and parenting conflicts are especially difficult for low income parents with limited resources and stressful living conditions. In addition, there are a number of confounding issues that have been identified; for example, Olson and Pavetti (1996) using data from the National Longitudinal Survey of Youth, provider surveys, case record reviews, and recent welfare-to-work evaluations, identified a variety of problems, such as low basic skills, learning disabilities, substance abuse, housing, child welfare, mental illness, domestic and sexual violence, and physical illness/disability as barriers to employability. Most clients had at least one barrier, with the most common being lack of basic skills, and notably, of the samples reviewed 16.6% to 30.8% had physical health problems. Barusch et al (1999) corroborates this in that 34.9% of long-term welfare recipients in Utah had physical health problems that prevented work; 42.3% scored positively for clinical depression and 23% had learning disabilities. Kramer (1998) added legal issues, criminal records, and poor work histories as common problems. In summary, many welfare recipients face the work world with multiple obstacles that sometimes go beyond attitude variables and often even
beyond basic skill limitations. In some cases, client barriers may not be considered severe enough for exemption from the current welfare-to-work requirements.

These findings highlight the need for a personalized, individualized approach to resolving these barriers and early identification of needed resources. In their evaluation of the Mississippi JOBS Program, Southward and Baird (1997) found that in addition to social support, personal motivation, support services, and assistance with transportation and childcare costs, that "respect for clients” was stressed by both clients and service providers, highlighting the "need to recognize the strengths, resilience and determination of individuals on public assistance and structure a program to enhance those characteristics" (p.3).

As an initial referral for almost all New Hampshire Employment Program clients, the LEAP program was designed to incorporate those components identified by the former literature as important. The LEAP Program attempts to create a work-oriented environment as part of a unified employment goal, drawing upon and developing the strengths of participants and identifying and addressing employment barriers early in the welfare to work transition process.

What follows is a description of evaluation methodology and findings on the first fourteen months of the LEAP Program.

**The Evaluation Plan - Methods & Procedures**

The evaluation of LEAP was conducted independently from Cooperative Extension by personnel from the University of New Hampshire’s Department of Social Work, who developed the evaluation strategy and appropriate instruments. Evaluation activities began when the program was implemented in March, 1998. Data reflected in this paper represents available data as of June 30, 1999 on 148 participants from the 12 NHEP sites.
The goals for the LEAP evaluation were as follows:

1. To measure the effectiveness of the LEAP program in transmitting information in the three curriculum areas: Food and Nutrition; Money Management; and Parenting/Family Skills.

2. To assess the LEAP program’s success in enhancing the social support systems and self-esteem of participants.

3. To assess where LEAP participants are on the welfare-to-work continuum at three months after participating in the program; to what extent they feel that the LEAP program has assisted them in the welfare-to-work process; and if not yet working, what barriers they are still facing in becoming fully employed.

4. To gather demographic and other background information on participants to determine whether any particular factors would influence the outcomes of the three goals listed above.

There were three different components of the evaluation. First, a quasi-experimental pre-test post-test design was employed to measure participants’ knowledge and practices in the three program curriculum areas (Food and Nutrition; Money Management; and Balancing Work and Family), as well as self-esteem and social support. Demographic and background information was also collected at the time of pre-test. Secondly, three-month follow-ups were conducted by telephone (and by mail for those without telephones) to get information on employment and/or enrollment in other welfare-to-work programs. Questions were also asked to assess the ways in which the LEAP program had assisted them in their current activities and if not working, what barriers they were still facing in making the transition from welfare-to-work. Finally, ethnographic data was collected by on-site researchers based on observations and conversations with both participants and instructors at the completion of each 12-session program.
cycle. Each of these program evaluation components are discussed in more detail below:

1. **Administration of Pre and Post-tests**: A member of the evaluation team attended the first and last meeting of each of the groups at a majority of sites each month. At pre-test participants were informed of the purpose of the research, assured that their participation was voluntary, and told that any data they provided would be anonymous and confidential. Those agreeing to participate were given a written explanation of the research goals with phone numbers of the research team and given a consent form to sign. Demographic and background information was then collected from those who agreed to participate, including household composition and types of assistance they were receiving.

The instruments used for the pre and post-tests consisted of five sections. The first three sections covered the three curriculum areas by using a list of indicators reflecting knowledge and practices in the areas of food and nutrition, money management, and balancing work and family.

A 5-point Likert-scale was used to measure knowledge in each of these areas. The fourth section measured social support using ten selected items from the Social Provisions Scale developed by Cutrona and Russell (1987). This scale has been found to have high reliability (alpha of .91) and construct validity which is supported by findings showing the negative relationship between social support and measures of loneliness (Cutrona, 1996). The final section measured self-esteem using Rosenberg’s Self-Esteem Scale. This scale has been used extensively with a variety of populations and yields high reliability and construct validity (Royse and Thyer, 1996:218). We also included a qualitative question asking participants about the things they were most concerned about in making the transition to work.

The post-test consisted of all of the above, but also included a section asking participants whether they felt their sources of support had increased since they first began in LEAP and if so, to explain what
those were. The post-test instrument also included an evaluative, consumer satisfaction section, asking for feedback on how prepared they felt for work, what they saw as the positives and negatives of the program, and their perceptions about reduced barriers to employment, if any.

2. Follow-ups. Approximately three months after completion of the program, participants were contacted by telephone, and through the mail for those without telephones. The instrument developed for this asked for employment and/or welfare-to-work activity information, assistance being received, and questions about barriers to employment for those not working. Also included were some evaluative questions on the LEAP program, including their satisfaction with the program and its utility in terms of increased sources of support and resources, preparation for work, managing on a budget, preparing nutritious meals, parenting, and improving communication and conflict resolution skills. These variables were measured using a 5-point Likert scale from "Definitely Not Helpful" to "Very Helpful." Suggestions for improvements in the program were also solicited.

3. Ethnographic information. Qualitative data was collected by on-site researchers during the pre and post-tests. At post-test, the person on-site spent time after the end of the last class with participants and the instructor to collect additional information on the program. Attendance information was provided by the instructors, as well as any other information relevant to the success or weaknesses of this particular class cycle. Field notes were submitted by each researcher, then coded and summarized each month to add qualitative data from both participants and instructors to the more structured data collected from participants during pre, post, and follow-up phases.

Sample

As previously described, participants were recruited for enrollment in the LEAP classes
through their district N.H. Employment Program (NHEP) office. As of May 31, 1999, the LEAP program was conducted at the 12 statewide sites (32 groups) and had enrolled 148 participants, 127 of whom actually completed the program (a completion rate of 86%). Ninety-one percent of those agreed to participate in the evaluation (116) and signed consent forms. This analysis is based on complete data from 116 cases, as well as 37 follow-ups; any variation in sample size on some reported variables occurred because of missing data (incomplete surveys, for example). The LEAP groups ranged in size from two to twelve members, with the average being five.

In terms of geographic regions, using the U.S. Department of Agriculture classification system (which classifies counties as metropolitan, non-metropolitan, or rural, based on the population and sizes of cities/towns), the LEAP participants can be categorized as follows: 68.9% Metropolitan (consisting mostly of residents of Manchester and those living within commutable distance to Boston); 18.9% Non-Metropolitan (consisting of those living around Concord and suburban/ex-urban areas); and 12.2% Rural (mostly in the northern part of the state).

The vast majority of participants were women (three males attended) with a mean age of 31.84 years (range = 19-62 years, s.d. = 7.19). Almost seven out of eight (86.5%) of the sample were white, 5.3% Hispanic, 3.8% Black, and 3.0% Native American with two persons reporting "other" but not specifying their ethnicity/race. This sample generally reflects the overall ethnic distribution of New Hampshire’s welfare-to-work population (NH DHHS - WRBL, 1999).

Most of the sample had at least a high school education or better (79.3%) and 90.5% reported having had some work experience (46.6% reporting having worked full time, 42.7% reported having worked both full and part time, and 7.6% having worked part time only). Respondents had an average
of 5.02 years of work experience mainly at jobs in the service sector (56.5%), in factories or as laborers (21.8%), in clerical positions (12.9%) or in sales (8.8%). Again, this respondent profile may not be found in most states but is fairly typical of NH’s TANF welfare-to-work population.

Almost half (47%) of the sample had children under the age of six (note that NH does not have mandatory public kindergarten); 68.2% of the sample had at least one child between the ages of 6 to 12 and 32.6% had children over the age of 12. Respondents were fairly evenly divided between those with one child (38.6%) and those with two children (34.8%). Slightly over twenty percent (21.2%) had three children; with only about 5% having between four and seven children. Slightly less than half (45.2%) reported being single (never married), 31.9% were divorced; 11.1% were separated; 7.4% were married; and 2.2% were widowed. Only 2.2% of the sample reported currently living with a partner, but about one-third (35%) said they lived in a household with where another adult was present (family member, friend, etc.) However, the vast majority (64.5%) of the respondents lived alone with their child or children.

All the participants were receiving TANF and 91.7% reported receiving Food Stamps. Other types of assistance reported were Fuel Assistance (16.3%); Child Support (19.5%); WIC (30.3%); SSI (6.0%); and/or SSDI (1.5%). Over one-third (37.8%) said they had attended lifeskills programs in the past. Of those, 21.4% reported being sent to a parenting program; 8.9% a food and nutrition program; 7.9% being sent to a work skills program; 1.8% attended one on money management, and 50% said they had participated in programs including more than one of these curriculum areas.

In summary, most participants were white females with at least a high school education, living alone with one or two young children, most of whom have worked part time or full time in service
sector or factory jobs for 3 to 5 years in the past. All are receiving some type of government assistance with minimal additional sources of financial support and over one-third reported some previous involvement in similar types of programs. Overall, the demographic profile of participants is generally reflective of the current welfare-to-work population in the New Hampshire (cf., for example, UNH School of Health & Human Services, April, 1999:7-13).

**Analysis of Data**

Pre- and post-tests yielded both quantitative and qualitative data. Quantitative data included the scores on each section reflecting the three curriculum areas (Food and Nutrition; Money Management; and Work and Family), as well as Self Esteem and Social Support Scales. Paired t-tests were used to look for significant differences between pre- and post-test scores. Individual indicators used for each of these five variables were also analyzed, to examine which indicators did or did not change from pre- to post-test. Gain scores were then calculated for each of the five major variables and these were run against the demographic variables previously discussed to look for any relationships between improvement and other background factors.

Categorical variables on both pre- and post-tests which asked for closed-ended responses were summarized using percentages. Open-ended questions were coded and summarized. In addition, to supplement the data from pre and post-test instruments, field notes were kept by site researchers, providing more qualitative data to assess the goals of the program. Finally, descriptive statistics were compiled on the three month Post-LEAP follow-up data.

**Findings**

**Food and Nutrition.** Mean scores for each of the items in the Food and Nutrition Section are
listed below for both pre-tests and post-tests. Negative statements were reverse scored so that a
higher score indicates higher perceived knowledge of food and nutrition and desired behaviors
facilitating nutrition and health. Each item had a possible score of from 1-5, with a total score range of
8 to 40.

Results of paired t-tests showed that overall scores on food and nutrition, as well as individual
indicators, increased significantly between pre- and post-test. There were no statistically significant
differences in gain scores by any of the demographic variables (education, marital status, race, or
region). However, Native American and Hispanic participants showed slightly lower gains than African
Americans and Whites, while the urban and suburban respondents gained slightly more than those from
rural districts.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Pre-test Mean&amp; St. Dev.</th>
<th>Post-Test Mean &amp; St. Dev.</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I feel able to plan healthy meals for my family.</td>
<td>4.26(.85)</td>
<td>4.74(.44)</td>
<td>.000***</td>
</tr>
<tr>
<td>2. My family members get exercise daily.</td>
<td>3.53(1.26)</td>
<td>3.98 (.92)</td>
<td>.000***</td>
</tr>
<tr>
<td>3. Knowledge about food and nutrition is important to me.</td>
<td>4.44(.66)</td>
<td>4.69(.56)</td>
<td>.001***</td>
</tr>
<tr>
<td>4. My family is getting healthy meals.</td>
<td>4.12(.79)</td>
<td>4.52(.55)</td>
<td>.000***</td>
</tr>
<tr>
<td>5. It is hard to plan meals ahead of time.</td>
<td>3.02(1.28)</td>
<td>3.40(1.10)</td>
<td>.005**</td>
</tr>
<tr>
<td>6. My knowledge about food and nutrition is good.</td>
<td>3.80(1.02)</td>
<td>4.40(.67)</td>
<td>.000***</td>
</tr>
<tr>
<td>7. My own food and nutrition needs are being met.</td>
<td>3.41(1.16)</td>
<td>3.98(1.06)</td>
<td>.000***</td>
</tr>
<tr>
<td>8. The food and nutrition needs of my family are being met.</td>
<td>3.89(.95)</td>
<td>4.34(.72)</td>
<td>.000***</td>
</tr>
<tr>
<td>Overall Food and Nutrition Scores</td>
<td>N=116</td>
<td></td>
<td>.000***</td>
</tr>
</tbody>
</table>

*significant at .05 level; **significant at .01 level; ***significant at .001 level
Money Management. Mean scores for each of the items on the Money Management Section are listed below for both pre- and post-tests. An overall score is also included. Items were scored so that a higher score indicates better understanding of money management and use of desirable practices for managing money. Any negative statements are reverse scored. The overall scale score had a possible range of 5-25, while individual indicators ranged from 1- 5.

All of the indicators showed statistically significant gains from pre- to post-test. There were no significant differences in score gains by any of the demographic variables.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pre-test Mean &amp; St. Dev.</th>
<th>Posttest Mean &amp; St. Dev.</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I have a spending plan for my family.</td>
<td>3.27(1.19)</td>
<td>4.11(.90)</td>
<td>.000***</td>
</tr>
<tr>
<td>2. I understand the deductions from a paycheck.</td>
<td>3.90(1.18)</td>
<td>4.45(.68)</td>
<td>.000***</td>
</tr>
<tr>
<td>3. I understand how my sources of income would change when I get a job.</td>
<td>4.23(.74)</td>
<td>4.68(.52)</td>
<td>.000***</td>
</tr>
<tr>
<td>4. I find it hard to balance my income with my expenses.</td>
<td>2.28(1.13)</td>
<td>2.79(1.31)</td>
<td>.001***</td>
</tr>
<tr>
<td>5. I feel confident that I can make decisions about money management.</td>
<td>3.59(1.19)</td>
<td>4.37(.77)</td>
<td>.000***</td>
</tr>
<tr>
<td>Overall Money Management Scores</td>
<td>N=116</td>
<td>17.27(3.48)</td>
<td>20.39(2.76)</td>
</tr>
</tbody>
</table>

*significant at .05 level; **significant at .01 level; ***significant at .001 level

Balancing Work and Family. There were 11 indicators used on the Work & Family section. These were looked at individually, as well as summarized in an overall score, with higher scores indicating greater perceptions of knowledge on how to balance work and family and behaviors that facilitate better handling of work and home responsibilities. Pre- and post-test means on each item, as well as on the overall scores are reported below. The overall possible score range was 11 to 55, while
each individual indicator had a possible score of from 1 to 5.

Negative statements were reverse scored.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pre-test Mean &amp; St. Dev.</th>
<th>Posttest Mean &amp; St. Dev.</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I feel I can balance the demands of work and family.</td>
<td>3.53(1.01)</td>
<td>4.12(0.80)</td>
<td>.000***</td>
</tr>
<tr>
<td>2. I know where to look for help in balancing work and family.</td>
<td>3.45(1.00)</td>
<td>4.26(0.69)</td>
<td>.000***</td>
</tr>
<tr>
<td>3. I feel comfortable making child care decisions.</td>
<td>3.78(1.12)</td>
<td>4.36(0.78)</td>
<td>.000***</td>
</tr>
<tr>
<td>4. I give my child(ren) encouragement every day.</td>
<td>4.32(0.85)</td>
<td>4.54(0.77)</td>
<td>.016*</td>
</tr>
<tr>
<td>5. I have people I can turn to when I have family problems.</td>
<td>3.91(1.13)</td>
<td>4.34(0.85)</td>
<td>.000***</td>
</tr>
<tr>
<td>6. I am satisfied with how my family deals with anger.</td>
<td>2.95(1.12)</td>
<td>3.57(1.08)</td>
<td>.000***</td>
</tr>
<tr>
<td>7. I am satisfied with how my family deals with change.</td>
<td>3.25(1.12)</td>
<td>3.96(0.87)</td>
<td>.000***</td>
</tr>
<tr>
<td>8. I am happy with how I discipline my children.</td>
<td>3.68(1.08)</td>
<td>4.22(0.81)</td>
<td>.000***</td>
</tr>
<tr>
<td>9. I am satisfied with life at home.</td>
<td>3.20(1.29)</td>
<td>3.86(1.10)</td>
<td>.000***</td>
</tr>
<tr>
<td>10. I feel that I don’t cope with stress well.</td>
<td>2.45(1.18)</td>
<td>3.07(1.26)</td>
<td>.000***</td>
</tr>
<tr>
<td>11. I feel confident about going to work.</td>
<td>3.76(1.01)</td>
<td>4.16(0.95)</td>
<td>.000***</td>
</tr>
<tr>
<td><strong>Overall Work and Family Scores</strong></td>
<td><strong>N=114</strong></td>
<td><strong>38.28(7.31)</strong></td>
<td><strong>44.46(6.12)</strong></td>
</tr>
</tbody>
</table>

*significant at .05 level; **significant at .01 level; ***significant at .001 level

All items went up between pre and post-tests and all indicators showed a statistically significant improvement. The overall score for Balancing Work and Family showed a statistically significant improvement at post-test (p<.000), indicating that the program has helped to improve people’s perceptions about and/or satisfaction/confidence with issues of work and family. Scores on coping
were lower than other items at both pre and post-test, but did increase significantly. The least
significant improvement was in "giving children encouragement;" however, this indicator had the highest
score at both testing times. There were no significant differences in score gains by education level,
marital status, or region. Although the number of non-white respondents in this sample was very small
(less than 20), there were statistically significant differences by race\ethnicity in that the Hispanic group
actually scored a loss (-.80), while whites(6.39) and Native Americans (6.25) had roughly the same
gains, African Americans gained less (3.50), and those reporting "other" gained the most (13.00) at
post-test. However, the Hispanic group scored higher than all other groups at pre-
test(m=42.71st.dev.6.05).

**Confidence\Concerns about Work.** In answer to the question of how much more prepared
for work participants felt, 66.4% said they felt much more prepared, 30.2% said somewhat more
prepared, and 3.4% said no more prepared. A higher percentage of those with an 8th grade education
(100%) and those with some college(70.4%) or 2-year college degrees (85.7%) -- that is, those at the
lowest and highest education levels -- reported feeling more prepared than those with some high school
(68.8%) or with high school diplomas (59.6%). There were no significant differences in how prepared
for work respondents felt by race\ethnicity, geographical region, or marital status, except that more
single persons said "very prepared" (79.2%) than any other group.

As mentioned above, the question of feeling confident about going to work did improve
significantly and roughly two-thirds of the sample reported feeling "much more prepared" for work at
completion of the program. To explore this further, the pre and post-test open-ended questions
regarding participants’ concerns about entering the workforce were analyzed. Answers from both pre
and post-tests were coded by theme and then compared. Of the 85 pre-test respondents (many of whom gave multiple responses), the most commonly cited concerns were: childcare (40%), stress (35%), anxiety about job performance (22%), medical problems (15%), transportation (15%), and lack of training/qualifications/skills (13%). At post-test, 17% fewer respondents indicated that they had concerns. Of the 53 people who did express concerns, the top five were: childcare (36%), stress (23%), anxiety about job performance (10%), medical/health issues (19%), transportation (17%), and lack of training/qualifications/skills(9%). While the percentage of people mentioning childcare dropped slightly from pre-test to post-test, it remained the number one concern of participants. Stress and anxiety about job performance dropped in frequency, while medical problems and transportation remained as prime concerns. Lack of qualifications and skills dropped slightly at post-test.

Participants’ worries about moving from welfare-to-work were categorized as either internal/personal issues or external/environmental/structural concerns. For example, while some respondents expressed their personal fears about work related stress, meeting new people, and lack of self-confidence, other more external concerns centered around their actual lack of training, experience, and job skills and whether they could find and keep a decent paying job in their local communities. The external or structural problems also included fears about finding reliable childcare and transportation, with some citing fears about being treated unfairly (being discriminated against) and being stuck in a job with no future that would not provide for their families. Of those who cited child care as a worry, it became clear from their qualitative responses that people are not only worrying about getting proper quality care, but have some overriding fears about leaving their children with unrelated caretakers; that is, not "being there" for them. Some of these fears seemed to be based on their own past negative
experiences of "trusting the wrong people who seemed nice on the outside."

Overall, there seemed to be fewer personal issues (notably a reduction in stress/anxiety) mentioned at post-test, indicating that some factors might be less of a worry; however, other factors, may remain such as their lack of skills, qualifications, and training for "decent" jobs. Not surprisingly, medical problems were also a consistent problem for some participants.

Social Support. The Social Support Scale consisted of 10 items chosen from the Cutrona & Russell Social Provisions Scale (1989). Each of the 10 items were analyzed separately, as well as combined into a total social support score. The higher the score, the more perceived social support participants have. The scale has a possible range of 1 to 3 for each item and 10-30 for the total score. Pre and post-test means on each indicator, as well as for the overall scale scores are reported below.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pre-test Mean &amp; St. Dev</th>
<th>Posttest Mean &amp; St. Dev</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. There are people I can depend on to help me if I really need it.</td>
<td>2.46(.61)</td>
<td>2.70(.52)</td>
<td>.000***</td>
</tr>
<tr>
<td>2. There are people who enjoy doing the same things I like to do.</td>
<td>2.47(.64)</td>
<td>2.69(.57)</td>
<td>.001***</td>
</tr>
<tr>
<td>3. I have groups of people who I feel close to.</td>
<td>2.22(.82)</td>
<td>2.43(.73)</td>
<td>.006**</td>
</tr>
<tr>
<td>4. I have people who give me a feeling of security and well being.</td>
<td>2.37(.73)</td>
<td>2.57(.66)</td>
<td>.002**</td>
</tr>
<tr>
<td>5. There is someone I can talk to about important decisions in my life.</td>
<td>2.45(.73)</td>
<td>2.71(.57)</td>
<td>.000***</td>
</tr>
<tr>
<td>6. I have people in my life who recognize and respect my skills and abilities.</td>
<td>2.34(.75)</td>
<td>2.68(.51)</td>
<td>.000***</td>
</tr>
<tr>
<td>7. There are people I can count on in an emergency.</td>
<td>2.51(.67)</td>
<td>2.74(.51)</td>
<td>.000***</td>
</tr>
</tbody>
</table>
8. I feel a strong emotional bond with at least one other person.  
2.63(.69)  2.80(.52)  .000***

9. If I was having a problem, I have people I can ask for advice.  
2.51(.72)  2.79(.47)  .000***

10. There are people who think I am capable and able to get things done.  
2.61(.60)  2.83(.42)  .000***

Overall Social Support Scores  
N=114  
24.57(5.22)  26.93(3.94)  .000***

*significant at .05 level; **significant at .01 level; ***significant at .001 level

All 10 indicators on the social support scale improved significantly at post-test. Reliability coefficients (alphas) were .9053 for the pretest and .8886 at post-test, indicating high reliability of the scale. Overall, social support scores improved significantly, indicating that the program was successful in boosting the perceptions of participants about their means of social support.

While there were no statistically significant differences in social support gains by education, marital status, or region, there were differences by race/ethnicity in that the Hispanic group reported significantly lower gain scores (2.00), yet their per-test scores were comparable with other groups. This finding warrants further investigation, particularly given the extremely small Hispanic sample size. One explanation worth exploring may be that this group is more likely to adhere to a cultural norm which relies on sources of support through family and friends rather than through meeting people in a class.

Of the respondents who answered the question of whether they had made new friends since entering the program, almost all (94.2%) responded "yes." Seven out of eight (86.7%) reported that they expected to keep in contact with their co-participants and 82% perceived developing increased sources of support through the LEAP program. Of those who felt they had
gained support, 68%(83) offered explanations and their responses were categorized fairly evenly
between "emotional" and "instrumental" support; that is, more than half (53%) reported that they had
gained instrumental supports through available resources in their community and through the LEAP
instructor, while 42% said they gained in their ability to find and use the emotional social supports
available through friends and family. In addition, 10% stated that they gained in their ability find sources
of support through improved confidence in themselves (self-support).

**Self-Esteem.** To measure self-esteem, the Rosenberg Self-Esteem Scale, consisting of 10
indicators, was used at pre and post-test. Using a Likert scale, responses were assigned a score
ranging from 1 to 4. Items 3, 4, 7, and 10 are reverse scored so that the higher the score, the higher the
self-esteem. This procedure yields possible total scores ranging from 10 to 40. This scale is purported
to be highly reliable; for example, a Cronbach alpha of .88 and test-re-test correlations of .82 were
reported by Fleming and Courtney (1984) and Rosenberg (1965) presented much evidence of
construct validity (cited in Royse & Thyer, 1996:218). The alphas for this sample on pre and post-test
were .8659(n=119) and .8924(n=116) respectively, indicating a fairly high reliability for the scale.

Pre and post-test means on the self-esteem scale showed a statistically significant increase with
the mean pre-test score of 26.54 (s.d.= 5.77) compared with 31.26(5.40) at post-test (p<.000). It
appears that the self-esteem of participants increased significantly by the end of the program (see below
for a look at the individual indicators).

<table>
<thead>
<tr>
<th>Item</th>
<th>Pre-test</th>
<th>Posttest</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. On the whole, I am satisfied with myself.</td>
<td>2.56(.75)</td>
<td>3.23(.70)</td>
<td>.000***</td>
</tr>
<tr>
<td>2. At times I think I am no good at all.</td>
<td>2.42(.91)</td>
<td>2.74(.96)</td>
<td>.003**</td>
</tr>
</tbody>
</table>
3. I feel that I have a number of good qualities.  3.09(.64)  3.44(.58) .000***
4. I am able to do things as well as most other people.  3.17(.69)  3.36(.68) .015*
5. I feel I do not have much to be proud of.  2.63(.91)  3.13(.75) .000***
6. I feel useless at times.  2.34(.84)  2.85(.91) .000***
7. I feel like I am a person of value and worth.  2.64(.86)  3.39(.62) .000***
8. I wish I could have more respect for myself.  2.22(.93)  2.60(.91) .001***
9. Overall, I feel like I am a failure.  2.77(.94)  3.28(.74) .000***
10. I take a positive attitude towards myself.  2.69(.89)  3.23(.70) .000***

<table>
<thead>
<tr>
<th>Self-Esteem Score</th>
<th>N=98</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>26.54(5.77) 31.26(5.40)</td>
</tr>
</tbody>
</table>

*significant at .05 level; **significant at .01 level; ***significant at .001 level

All indicators showed statistically significant change at post-test. There were no statistically significant differences in self-esteem gain scores by education, marital status, region, or race. However, there were two trends worth monitoring as the sample size increases. The first was that those with less than a high school education showed greater gains in self esteem (7.33) than those with other educational levels (sample mean = 4.71). Secondly, those from rural counties gained more (5.13) compared with those from metropolitan (4.76) and non-metropolitan/suburban (4.33) districts.

**Correlations.** There were weak to moderate positive statistically significant correlations between gains in all three curriculum areas, as well as self-esteem and social support gains; that is, those who did well in one area tended to improve in others and were also more likely to show greater improvement in self-esteem and social support as well. The two strongest correlations were between balancing work and family and money management gains, and between balancing work and family and self-esteem.
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Food &amp; Nutrition</td>
<td>1.00</td>
<td>.506**</td>
<td>.516</td>
<td>.344**</td>
<td>.397**</td>
</tr>
<tr>
<td></td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
</tr>
<tr>
<td>Money Management</td>
<td>.506**</td>
<td>1.00</td>
<td>.597**</td>
<td>.212*</td>
<td>.499**</td>
</tr>
<tr>
<td></td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.023</td>
<td>.000</td>
</tr>
<tr>
<td>Work &amp; Family</td>
<td>.516**</td>
<td>.597**</td>
<td>1.00</td>
<td>.402**</td>
<td>.546**</td>
</tr>
<tr>
<td></td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
</tr>
<tr>
<td>Social Support</td>
<td>.344**</td>
<td>.212*</td>
<td>.402**</td>
<td>1.00</td>
<td>.403**</td>
</tr>
<tr>
<td></td>
<td>.000</td>
<td>.023</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>.397**</td>
<td>.499**</td>
<td>.546**</td>
<td>.403**</td>
<td>1.00</td>
</tr>
<tr>
<td></td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
<td>.000</td>
</tr>
</tbody>
</table>

*Correlation significant at the .05 level; **significant at .01 level; ***significant at .001 level

**Perceptions of Participants about Program at Post-Test**

In addition to the feedback previously discussed, participants were asked several questions about their satisfaction with LEAP and their suggestions for improving the program. Almost ninety percent (89.7%) of respondents reported that they were very satisfied with the LEAP program, while 6.8% were satisfied, and 3.4% were "undecided." Almost all (97.4%) of those responding said that they would recommend the program to others because it offered practical/useful information, increased one’s success of gaining employment, and/or improved personal coping skills.

Answers from 111 participants who gave multiple responses to the question of what they specifically found most helpful were analyzed and coded to determine the frequencies and percentages of emergent categories. These categories were: curriculum related (179); group discussion/format (20); and "all" aspects of the program (16). Of the curriculum related responses, the most complimented content areas were money management(49%), food & nutrition(45%), and parenting(22%).
Anger/conflict management, handling stress, time management, and problem-solving were also mentioned by 10-18% of respondents. Of the group dynamics responses, camaraderie, mutual support (the sharing of problems)(16), and a positive relationship with the instructors(4) were the most common responses.

Ninety-two(92) respondents wrote answers to the question of how LEAP could be improved; however, 40% (38) then stated they really had no complaints/suggestions. Feedback from the other 60%(54) showed comments in two general areas: curriculum(30%) and class structure/time(70%). In curricular areas, some participants requested more time be given to information on time\stress management, parenting teens, financial planning, and/or entering the job force. Class structure comments centered around wishing there was more time, wanting a few more people in class with them, wanting more field trips, and wishing the class met at a different hour, in an air-conditioned room; or that their classmates were more polite to each other. It is worth noting that the most frequent criticism (39%) was that more time was needed and 15% requested more depth in many areas of the curriculum.

In addition, respondents were asked what specific information and/or skills they would suggest be included in the future. Responses included the following: Resume writing and how to find a job; how to get a GED; information on teen eating disorders; buying clothing on a budget; communication skills including how to talk to your children about going to work; and wanting more information on various support groups open to low income families in their area. The curricular suggestion reflected in the answers to the last two questions might be helpful for future curriculum planning by LEAP or by other NHEP job readiness program components.
In answer to the question of how much more prepared for work participants felt at post-test, 66.4% said they felt much more prepared, 30.2% said somewhat more prepared, and 3.4% said no more prepared. A higher percentage of those with an 8th grade education (100%) and those with some college (70.4%) or 2-year degrees (85.7%) -- that is, those at the lowest and highest education levels -- reported feeling more prepared than those with some high school (68.8%) or those who had graduated (59.6%). There were no significant differences in how prepared for work people felt by race, geographic region, or marital status, but more single persons said "very prepared" (79.2%) than any other group.

Respondents were also asked what they felt less worried about now that they had attended LEAP. Responses from the 76 people who answered this question were categorized and percentages of respondents mentioning each are reported here (hence percentages will not equal 100%). The top responses fell into these four categories: more confidence in themselves\less self-esteem issues (29%); less concern about juggling all their life responsibilities\better time management (28%); less concern about their knowledge around childcare (25%), and better knowledge of money management (17%).

Although these responses show that the program is helping participants to learn how to cope and feel more competent at handling life stressors (which corroborates the decrease in stress and anxiety between pre and posttest discussed previously), the earlier section on what they are worried about reflects that structural stressors continue to exist. While 25% reported feeling less worried about childcare after LEAP, which is an encouraging sign of the utility of the program, childcare also remained the number one concern of many participants, as indicated earlier. We might conclude, then, that the LEAP program is successful in helping people to eliminate the more personal, internal roadblocks
associated with transitioning from welfare to work, and has had some success in promoting knowledge about optimal childcare, but the realities of the structural/practical concerns, such as transportation and the more difficult childcare issue of feeling forced to leave children to go to work and feeling bad about that, are more difficult to address. They continue to be problems perhaps best addressed by the wider system venues, rather than any particular job readiness course offering.

**Ethnographic Data**

From field notes taken by researchers on site, the following themes based on observations were noted:

1. Consistently, a distinctive change in atmosphere from pre- to post-test was noted. Participants appeared to be happier, more familiar/comfortable, and more engaged in the program at the last session in most of the sites.

2. Camaraderie and mutual support/cohesiveness of groups were noted. This was evidenced by the offer of rides and the exchanges of phone numbers and addresses that were initiated by group members.

3. Discussion of child-rearing problems showed evidence that participants had developed interest in each other’s children, including the sharing of stories about, and pictures of, children as well as stressing concerns to each other about child safety measures (like making sure your children know where to find you at all times).

4. Empowerment and self-esteem was evidenced by group-initiated activities, such as pride in how they had shaped their own rules for the class and the ability to voice dissent in a positive (sometimes jocular) way.
5. Excellent role modeling by instructors through a demonstrated understanding of group dynamics and conflict management. Instructors drew on participant’s strengths, even when conflict management techniques were necessary, for example reframing a vocal and negative participant’s comments by saying she would be an "excellent debater."

6. Small group size allowed for individual attention and a way for all to be engaged -- a sense of intimacy, not an impersonal "classroom" atmosphere, was evident.

**Follow-up Data**

As of June 15, 1999, we have follow-up data on 37 LEAP participants. They represent about 35% of those participants on whom we have complete data and who were also 3 months post-LEAP completion as of that date. Two-fifths (41%) of the follow-up sample reported that they are now working; 14% are participating in an AWEP work activity, and 45% are enrolled in another NHEP activity. Those not working reported that the most difficult problem/obstacle in finding a job was: lack of training, experience or skills; transportation; health problems; childcare; inability to find or keep a job that pays enough; and not wanting to give up schooling.

A large percentage of past LEAP participants, including many of the 41% who reported they are working, are still receiving some type of government aid. The following are the percentages still receiving assistance: TANF - 74.2%; Food Stamps - 86.2%; Fuel Assistance - 27.6%; WIC - 24.1%; SSI - 6.9%; and/or SSDI - 3.4%. Other types of financial assistance received include: employment earnings; child support payments; Medicare, Medicaid, and/or other subsidized medical care; Section 8 Housing; child care subsidy; and Social Security (child’s father deceased).

**Data on Those Working**

-31-
Of those now working for wages, most are working in retail (28.6%) or food services (28.6%), followed by finance/insurance/real estate (21.4%); health services (14.3%), and education (7.1%).

Past participants reported now working from 12 to 40 hours per week, with a mean of 30.11 (s.d. = 8.16) hours. Half are working full time (35 hrs per week or more) and the other 50% are working part time. Salary ranges are as follows: 7% earn between $51-100; 35.7% between $101-150; 14.3% between $151-200; 14.3% between $201-250; and 28.6% over $250 a week. Most said they did not have job benefits: 84.6% do not get health care, 83.3% do not have pension/retirement benefits and only 46.2% are getting vacation time, only 23.1% are getting sick/personal time and only 15.4% are covered by disability insurance. These low salary and benefit figures are obviously correlated with the number of respondents still entitled to governmental benefits.

Although the sample size on this question was quite small, the following chart illustrates how satisfied respondents were with benefits, wages, child care, their jobs overall, and their life overall at three months post-LEAP:

<table>
<thead>
<tr>
<th>N=12</th>
<th>Very Dissatisfied</th>
<th>Dissatisfied</th>
<th>Neutral</th>
<th>Satisfied</th>
<th>Very Satisfied</th>
<th>Mean &amp; St. Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Benefits</td>
<td>41.7%</td>
<td>58.3%</td>
<td>2.00(1.28)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adequacy of Wages</td>
<td>8.3%</td>
<td>16.8%</td>
<td>33.3%</td>
<td>33.3%</td>
<td>8.3%</td>
<td>3.08(1.31)</td>
</tr>
<tr>
<td>Childcare Arrangements</td>
<td>16.6%</td>
<td>8.3%</td>
<td>50.0%</td>
<td>8.3%</td>
<td>16.8%</td>
<td>2.92(1.44)</td>
</tr>
<tr>
<td>Your Job overall</td>
<td>8.3%</td>
<td>25.0%</td>
<td>41.7%</td>
<td>25.0%</td>
<td>3.75(1.14)</td>
<td></td>
</tr>
<tr>
<td>Your life overall</td>
<td>16.7%</td>
<td>41.6%</td>
<td>16.7%</td>
<td>25.0%</td>
<td>3.33(1.37)</td>
<td></td>
</tr>
</tbody>
</table>

The greatest dissatisfaction was with job benefits and wage adequacy but 2/3 reported satisfaction with working overall. It will be interesting to see if these findings are confirmed with a larger sample; particularly given the number of people who reported neutral in some of these categories.
Almost half (46.7%) of working past LEAP participants reported that their relationships with people at work, (including both peers and employers), were "excellent"; with another 13.3% rating these as good. Of the others, 20% reported their work relationships as "fair" and 20% "poor." More than half (53.3%) reported that they were still experiencing some problems related to balancing work and family. It will be interesting to look at any qualitative responses which shed light on these concerns as well as to examine the literature to see how these findings compare with those of middle class families who have problems balancing work and family.

**Consumer Satisfaction at Follow-Up**

On a scale of 1 to 10, post-LEAP participants gave the program a mean score of 8.34 (range = 1-9; s.d. = 2.34). They did not feel as favorably about how well things were going in their lives; with a mean of 4.78 (range = 1-9; s.d. = 2.34). Over half the past participants (58.1%) said they have kept in touch with at least 1 or 2 of their LEAP co-participants; with almost 1/3 (32.4%) of these reporting they see each other once a week or more. Respondents overwhelmingly (80.6%) credited the instructors with encouraging these relationships and 65.5% said that LEAP had helped them find new sources of support or resources that they would not have had otherwise.

**Preparation by LEAP**

The following table reports the different areas, as well as the extent to which, LEAP had helped past participants feel more prepared. Scores ranged from 1 to 5.

<table>
<thead>
<tr>
<th>Area</th>
<th>Rank</th>
<th>Mean &amp; St.Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparing you for job/work activity(N=31)</td>
<td>6</td>
<td>3.45(1.23)</td>
</tr>
<tr>
<td>Helping you to feel better about yourself and abilities(N=29)</td>
<td>3</td>
<td>3.66(1.45)</td>
</tr>
</tbody>
</table>
Balancing the needs of work and family (N=32)  
Managing on a budget (N=32)  
Preparing nutritious meals for your family (N=32)  
Parenting your children (N=31)  
Improving your ability to communicate with others (N=31)  
Improving your ability to resolve conflicts (N=29)  
Increasing your sources of support from others (N=29)  

<table>
<thead>
<tr>
<th>Activity</th>
<th>Mean Value</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balancing the needs of work and family</td>
<td>3.50</td>
<td>1.27</td>
</tr>
<tr>
<td>Managing on a budget</td>
<td>3.91</td>
<td>1.33</td>
</tr>
<tr>
<td>Preparing nutritious meals for your family</td>
<td>3.97</td>
<td>1.28</td>
</tr>
<tr>
<td>Parenting your children</td>
<td>3.65</td>
<td>1.23</td>
</tr>
<tr>
<td>Improving your ability to communicate with others</td>
<td>3.39</td>
<td>1.41</td>
</tr>
<tr>
<td>Improving your ability to resolve conflicts</td>
<td>3.07</td>
<td>1.36</td>
</tr>
<tr>
<td>Increasing your sources of support from others</td>
<td>3.45</td>
<td>1.43</td>
</tr>
</tbody>
</table>

These findings are consistent with some of those reported at post-test which indicate that food and nutrition and money management are viewed as the most useful elements of the program, followed by self-esteem building and parenting. All other scores fell slightly above the mid-range, with the lowest score being for conflict resolution.

In order to explore the possible connection between the LEAP program and subsequent employment, gain scores in the three curriculum areas, as well as self-esteem and social support were compared between those working at follow-up and those who were not. Although the sample numbers are small at this time and none of the findings were statistically significant, it was noted that those who are now working had higher gain scores on four out of the five major areas of the program; that is, food and nutrition, money management, work and family, and self-esteem. However, it is noteworthy that non-working participants scored higher on gains in social support.

**Mean Gain Scores by Work Status at Follow-up**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Working</th>
<th>Non-working</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food &amp; Nutrition</td>
<td>4.67(n=12)</td>
<td>3.95(n=22)</td>
<td>4.21</td>
</tr>
</tbody>
</table>
While we cannot definitively assume that getting a job was solely facilitated by the gains made through the LEAP program, it was noted that 86.7% of those working at follow-up reported that they felt "much more prepared for work" after completing LEAP compared to 57.1% of those who were not yet working at follow-up. This may indicate that there was some influence. Social support showed more gains among the non-working participants, although there was no statistically significant difference between working and non-working groups on the self-reported question of whether they felt they had increased their sources of support through the LEAP program. All of these findings warrant further corroboration with a larger sample.

**Conclusions and Implications**

The LEAP program was developed as a first step activity for TANF recipients whose individual NHEP welfare-to-work plan indicated a need for skill development through job readiness activities. The goals of the program are to help participants not only gain skills and knowledge through the curriculum covered, but to find the process of participation useful in assisting them to make gains in their own lives as individuals and parents. The hope is that by the end of their participation in LEAP, they will feel positively about their experience with the program and will be able to move on to further work preparation activities or to an actual job.

The findings of this study on the curricular areas covered were extremely positive. Participants
showed statistically significant improvement in perceived knowledge between per- and post-test in all three curricular areas. In addition, these findings did not vary in a statistically significant way by the demographic characteristics of those enrolled on almost all indicators. Thus, the majority of participants were able to show knowledge gains regardless of factors like age, marital status, family composition, or education. The only exception was the significant difference found in the Work and Family content area by race/ethnicity. Although the minority sample numbers are very small, this finding may reflect differences in cultural norms about work and parenting which need to be addressed. The program has also improved its ability to supply participants with curricular and evaluation materials in Spanish which may be reflected in changes in these results in the future. In general, the possible effects of instrumentation on the Hispanic sample, as well as the general effects of testing in a pre/posttest design within a short time period, should be considered in interpreting results.

The program also had impressive outcomes in the areas of self-esteem building and social supports with statistically significant improvements on all indicators at post-test across most demographic variables. Improved social supports were also indicated by the large number of respondents stating that they kept up with at least 1-2 of their LEAP co-participants even at three months after the classes were completed. The only statistically significant differences in social supports were found with Hispanic respondents making smaller gains than other racial/ethnic groups, but with comparable scores on social support at per-test. There were also some non-significant variations in self-esteem gains by education and geographic regions. These differences will be monitored as the sample size increases.

In addition to the above successes, the program showed a high degree of participant’s
consumer satisfaction both at post-test and at three month follow-up after program completion. Participants seemed to be especially complimentary about the money management; food & nutrition, and parenting components. Their suggestions for additional curriculum content included some areas that might best be covered through other NHEP activities; i.e. GED information and resume writing. Suggestions that might be considered for inclusion or improvement in the LEAP curriculum include more information on parenting teens (including information on teens with eating problems); information on buying clothes on a budget; and how to talk with children about family changes wrought by new welfare-to-work requirements. Finally, the recommendation of more time for more in-depth coverage of many topics has been noted and resulted in expansion of the program to 90 hours in the Fall of 1999.

It was not surprising to find that those participants who made gains in one program area also made gains in others. An interesting finding for future program planning and further statistical analysis was that a somewhat stronger correlation was found between those who gained in the work and family area and concurrent gains in both money management and self-esteem. Whether there is something pivotal in this curriculum content warrants further study.

At post-test, 17% fewer participants listed concerns about going to work. It is noteworthy that concerns persisted in areas like child care (including feeling forced to leave their children due to welfare-to-work requirements), medical/health problems, and balancing work and family responsibilities, as well as concerns around the availability of, and their preparation for, good paying jobs. These responses reflect legitimate concerns that need to be addressed, but it is unrealistic to expect that these issues will be solved within the realm of a three week job readiness class experience. LEAP may have had some success in helping participants confront their "internal" job readiness
roadblocks by improving their skills to handle life stressors, but policy and system changes will also be required if their "external" roadblocks are to be addressed.

Three months after the last LEAP class, 41% of follow-up respondents reported being in the workforce, 45% in a NHEP work activity and 14% in an alternative work experience. Employed participants reported feeling the most prepared to work at the end of the classes. These past participants who were working reported overall satisfaction with their jobs and generally good relationships with their work colleagues and employers. They were, however, dissatisfied with their wages and the job benefits since half were working part-time and many were working in low wage service sector jobs. This dissatisfaction is validated by the large percentage of past LEAP participants who are still receiving some form of government assistance, including those currently working. These findings seem to back up those trends cited in the current welfare-to-work literature which indicated that many ex-TANF recipients are moving from being the "welfare poor" to joining the "working poor" (Hebert, 1998; Newman, 1999).

It is unclear at this stage to what extent having participated in LEAP is a factor in employability; however, all of those contacted at follow-up are either working or participating in some form of sanctioned work activity and many attribute their progress to their experience at LEAP. Two-thirds of the follow-up sample reported that LEAP had helped them find needed sources of support and resources. While there is compelling evidence that the program has seen results in improving the self-efficacy of clients and increasing their sources of support and resources, follow-up data is very limited, and therefore tentative at this time. Continued monitoring of participants as the program progresses should provide a more definitive evaluation of LEAP's effectiveness in promoting long-term
employment. It should also be noted that while the unemployment rate in New Hampshire is low at this
time and the welfare recipient caseload has dropped about 35% between January, 1996 and June,
1999 (USDHHS Administration for Children & Families, April, 1999; NHDHHS Division of
Transitional Assistance, August, 1999), the population being served by LEAP is among the most
challenging to serve. While programs

such as LEAP can prepare people for the transition into the workforce by helping them eliminate some
of the personal roadblocks to sustained employment, the areas of specific skill building, job training,
and work experience need to supplement such programs. Finally, reliable transportation, childcare, and
medical problems are major obstacles, even if all else is in place.
References


