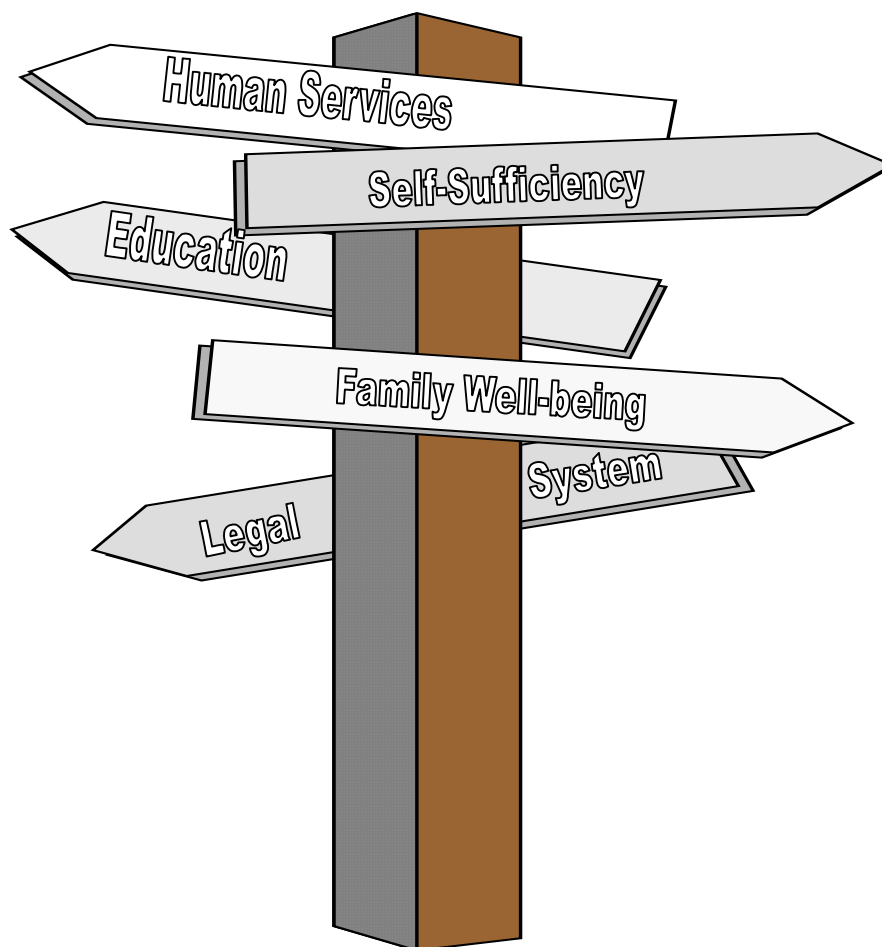


Through the Family's Eyes:



How Families Experience Polk County's Helping Systems

The Neighborhood Learning Partnership is an initiative funded by the Annie E. Casey Foundation to support residents and community organizations to collect and make use of data for positive community change.

The NLP has a governing Board, composed of neighborhood and community organization leaders, to oversee the Partnership's work and identify important data and information needs.



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**Through the Family's Eyes: How Families
Experience Polk County's Helping Systems**

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February 2003

Acknowledgement

The Child and Family Policy Center gratefully acknowledges the families who invited us into their lives for six months through meetings with recorders/storytellers and journaling personal experiences, whether negative or positive.

The Child and Family Policy Center acknowledges the contributions of personnel and referrals made by OSACS, PACE Juvenile Justice Center, and the Neighborhood Circles.

The Child and Family Policy Center also acknowledges the support and funding of the Annie E. Casey Foundation to the Neighborhood Learning Partnership Initiative for the production of this paper. All views, opinions, and conclusions presented in the paper represent those of the author, however, and should not be construed as representing the opinions or policy of the Annie E. Casey Foundation.

Through the Family's Eyes: How Families Experience Polk County's Helping Systems

Introduction

For approximately six months, ten inner-city Des Moines families recorded their experiences in working to get ahead. They noted when and where they had sought help from or become involved with public systems and what help they had received. They shared their experiences in trying to get what they needed to maintain their family economically and to raise their children successfully. Their stories reflect real-life experiences of how public systems function and help or fail to help families, as viewed through the family's eyes rather than through the system's.

Their stories were developed to offer a new picture of public services for Polk County policy makers and administrators, one based not on whether a particular service or program performed its responsibilities but whether the array of services and programs collectively helped meet the needs of those they served.

Methodology

Each family journalled their daily experiences and then shared and discussed their journals with a storyteller, a volunteer from a nonprofit organization in the community who shared race, cultural, and language connections. Journals were kept, and written materials outlining the process for families, in the language the family felt most comfortable using. The storyteller used that language when meeting with the family, helped translate journals into English for the project, when necessary, and amplified on the journal entries by adding additional information from the interviews. Storytellers met with families at least monthly and met with the project director to review the journals and identify additional questions to raise in subsequent meetings with the family. The project director then synthesized the journals for each family into a thousand word story, which the storyteller took back to the family and went through to insure that they accurately reflected the family's views and recollections.

The families themselves were selected through contacts with community-based organizations working in the inner-city — OSACS, PACE, and the Neighborhood Circles Advisory Committee. Families were selected that those organizations knew well enough and in a trusting manner that they believed they could enlist in the project, recognizing that families would have to share intimate details of their lives with the storyteller and the project.

Families also were selected to reflect a range of backgrounds and experiences and levels of system involvement. These families all had significant levels of involvement with public systems, particularly those providing income support or services to qualifying poor

families. It is these families that generally represent the greatest challenge for public systems, and those who face the most difficult barriers in achieving self-sufficiency and whose children are most likely to enter systems.

Not represented were families who were likely to have only occasional need for a particular public service. These families may have different experiences with public systems and also may have additional resources upon which they can draw to meet their needs. Therefore, it is not possible to generalize from these small number of families to how public systems operate with respect to all families.

At the same time, although it is a small number of families, the detailed stories they provided offer a great deal of insight into how systems help, or fail to help, families in need. One strength in this approach is that it is a prospective one — families were not asked to highlight their past experiences with public systems, which could bring selection bias into the findings. Their stories unfolded as the project went on; the project could not predict what these experiences would be and how systems would respond. Therefore, there is strong reason to believe that the stories that emerged are representative of the manner in which public systems respond in Des Moines' inner-city to many families who face challenges to securing economic and social success for themselves and their children.

The Families and the Public Systems

The families telling their stories are described briefly, below. All names are fictitious, in order to protect the confidentiality of the families.

Annette is an African-American high school senior and mother of an infant son, who lives with her mother and sister. She is working to complete school while having enough income to make ends meet.

Susan and Thomas are European-Americans in their late fifties and are the paternal grandparents of nine-year old Lauren, for whom they have custody. Lauren has a learning disability and behavior disorders, in part the result of the traumas he experienced in separation from his parents and their chaotic life.

Reginald, a sixty-eight year old European American man, who shares the childhood home he owns with one of his daughters, Renee, who he feels is making sacrifices to care for him. He wants to be independent, but finds that his social security and other retirement benefits are not enough to let him get by.

Melba is a single African-American mother of four children, who works full-time but earns less than \$15,000 annually. Her children range from 14 to twins, 1 1/2, and she has had to work to secure a variety of types of assistance (WIC, Section 8 housing, subsidized child care, and Medicaid), to get by.

Maria is a Latina working mother of three sons, who immigrated from Mexico without speaking English and is now a U.S. citizen. She makes many sacrifices to support her children's education, including having them attend a private school and insuring they can participate in extra-curricular activities, and she is purchasing a home that requires many repairs.

Juana is a single Latina mother raising three elementary school children. Her children are U.S. citizens, but she is undocumented and trying to obtain a work permit. A survivor of domestic abuse, she has to deal with her children's visitation schedules with their father, although the children also are receiving therapy for dealing with the impacts of prior abuse.

Connie is a forty-two year old African American woman who suffers from schizophrenia and believes she is discriminated against both for her race and medical condition. She has a high school education and some college, but has had difficulty sustaining employment.

Isabela is a single Latina mother raising two elementary school children. Her children are citizens, but she is undocumented. Like Juana, she and her children have experienced domestic violence. She has experienced a great deal of frustration securing counseling and other services she would like for her family.

Karen is a single African American mother of seven children, five of whom are siblings she adopted, with two children still living in the home. Karen has worked full-time, but now is on disability and spends most of her time seeking to deal with the needs of the two children still in her home, 14 year-old Michael and 12 year-old Kisha, both of whom are in alternative schools and have been involved in the juvenile justice system.

Carl and Yvette are a married European-American couple raising eight children. Carl is employed full-time and earns \$35,000 annually. Yvette is a homemaker. The family has an extensive relationship with various agencies.

Taken together, these families have experienced most public service systems designed to help families with their needs and problems. Most families have been involved with multiple systems at the same time. These services and systems include:

Income support and housing services (TANF, food stamps, WIC, Section 8 housing, SSI/disability income)

Health services and funding systems (hospitals and other health providers, Medicaid and Medicare financing systems)

Short-term emergency services (food pantries, emergency relief, and special programs through community agencies)

Schools (general education, special education, counseling services, and alternative schools)

Counseling and treatment services (mental health and substance abuse treatment services, counseling and case management nonprofit organizations)

Employment and training services (Promise Jobs and job search agencies)

Legal, court, and police systems (juvenile justice, child support enforcement, domestic violence, immigration and naturalization, work permit)

While most families are working and most meet federal definitions of poverty, none of the families are economically secure or have reserves that they can easily access in the event of an emergency. In this respect, they are quite representative of the inner-city neighborhoods in which they live.

A Synthesis of Family Experiences

The ideal way to understand the experiences of the families is to examine each of their stories. The stories, however, are sufficiently detailed that, although families have given permission for their use in dialogues and forums, they are not reproduced as complete stories here, as the conceivably could identify a specific family.

The following provides a synthesis of some of the messages that emanate from the stories, with excerpts from some of the stories to illustrate the situations. This synthesis is drawn from the stories themselves and from several discussion groups which carefully reviewed the studies and participated in a session to draw out common themes, lessons learned, and possible action steps.

Work Ethic. Although some of the families were unemployed and most were underemployed, outside circumstances and conditions rather than a desire to work jeopardized their job holding and advancement. In fact, adults generally had strong desires to work and support their families and took multiple steps to sustain employment. At the same time, they tended to be relegated largely to jobs that provided little flexibility to meet their other needs and that lacked career advancement opportunities. Health conditions, including physical or mental disabilities or needs to care for a family member with a serious health condition, made secure attachment to the workforce a challenge.

Connie has held several customer service employment opportunities within the last year. As long as management and co-workers do not realize that she has a mental illness, they treat her with respect. Connie says, “The minute they found out I have a mental illness, I was worked harder than anybody else.”

Isabela is undocumented. Because her work permit is in review with INS, Isabela is prohibited from working. Of her employment situation, she writes, “I want to

have a work permit. I really want to work more than anything for my children. My lawyer tells me not until I can get my papers. However, every time I call immigrations they tell me what my case number is and never do anything more than that.”

Economic Instability. None of the families were economically secure, which is one reason they periodically needed to seek out various government programs, particularly those providing income supports. While families generally saw themselves as “survivors” and took pride in getting through difficulties, they also experienced setbacks and sometimes crises because of their precarious economic positions. This made it difficult for families to make progress and get ahead on any of their goals and objectives.

What might constitute a nuisance for a middle-income family could negate months of progress for one of these families. Having to live so close to the edge financially also meant that families spent a good deal of their time trying to access those resources that could help them for short periods of time until they could resume independence.

Reginald relies heavily on financial support from the Department of Human Services. There are times that Reginald has to ration food. On December 25, 2001, Reginald wrote, “I spent the last \$50 of my food stamps getting a nice roast beef and all the trimmings for Christmas day dinner. I’m sure I’ll have enough food to last the rest of the month.” Six days later he wrote, “So far so good. I still do have plenty of food to last until the next SSA day on January 3, 2002.”

Maria has one of three sons who was diagnosed with Attention Deficit Disorder (ADD) and suffers from other health issues. Maria wrote, “Today, I had to pick up medicine for my son who has ADD that helps a lot to control him, but he feels sleepy when he takes it. I worry because he has to take it forever. It is good because he’s under control for a few hours. But on the other hand, I also worry because today I have medical, but the day I stop reporting my income, they’ll take it away. I don’t know what I will have to do.”

Carl and Yvette’s family that includes eight children barely survive on Carl’s earnings of \$35,000 annually. Because of the family size, Yvette and Carl are still in a low-income bracket. Carl has skills in renovations and remodeling, which could be a self-employment opportunity. He is currently utilizing this knowledge and skills to add onto the family’s small home, which has inadequate space for a family of 10. He also offers his assistance to friends of the family, without pay, because they are also in financial hardships.

System procedural barriers. While some of the government programs families accessed were essential to their stability and growth, few were secured easily, and families faced various barriers in getting what they needed. These included:

- paperwork and regulations that made it difficult to determine what they were eligible for and even produced worker errors that jeopardized receipt of services

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- time frames and delays in workers response that often meant promised or expected supports were not made available in time to avert substantial inconvenience and harm
 - worker turnover or changes in staff assigned to a family resulting in disruptions in service, particularly related to counseling and therapy services

Particularly vexing to these families were instances where their requests for help were treated lightly or dismissed or where promised follow-up actions did not occur. While everyone has similar experiences in routines of daily life for most people these represent irritations or inconveniences that can be worked around. For these families, however, there often is no alternative solution available.

Reginald's food stamps were reduced twice within one month, during the 2001 winter. This resulted in his receiving \$50 in food stamps per month. Reginald was not certain what documents he needed to demonstrate that he was in dire need of assistance. He wrote, "The worker didn't have my water bills on the list so I'll send her a xerox of them to see if that will help."

Melba receives subsidized childcare for the twins, Kim and Kevin. In mid-winter, Melba's participation in the program was cancelled because she had not returned required paperwork. When she followed up with her case manager, she was told simply to reapply. Following her case manager's instructions, Melba reapplied but was denied because of income guidelines. Of the situation, Melba says, "The problem that I have with this is I'm making no more money now than I was at the time I applied. I plan to appeal."

Service fragmentation and system navigation. Although many families had workers assigned to them from a particular system and some of these were case managers, even in these instances families generally were left to navigate complex systems largely by themselves. With several exceptions, case managers served more as gatekeepers to the systems they operated than as advocates for the families they served. While there was very little actual duplication of services, and certainly little duplication of benefits that could be considered to constitute waste, there was a great deal of service fragmentation, which required families to go to multiple sources to secure what they needed or resulted in disruptions in help as families were referred or transferred from one system to another.

Susan's and Thomas's granddaughter is involved in a DHS-funded program to address skill building and therapy issues. The family has had difficulty in accessing services, specifically with the DHS caseworker. At one point, Susan waited for more than three weeks for a return phone call from her DHS caseworker. When the caseworker did contact the family, it was to tell them that Lauren was being removed from the DHS program. The family was trying to get Lauren on medications to balance her mood swings and into the respite care program, while working with three different case workers within a few months. It became very frustrating for the family that they were required "to go through so many hoops to get Lauren services," because they "were not trying to abuse the system, but with all

of the hassles at DHS [were] adding more pressures than needed.” While Susan understands that there will be some turnover because of the cutbacks at the state level, she does not feel that the quality of service should be compromised.

Isabela and her children received counseling for a year. A local agency compensated the counselor. The family had three different counselors within six months. While she receives adequate counseling, Isabela feels that her children are not receiving the care that they need or for which the agency is paying. Of the children’s counselor, Isabela writes, “I really don’t like her too much because she only takes a half-hour with my kids. She will only talk for fifteen minutes to each of my kids. My kids have problems with domestic abuse. The old counselor would spend a whole day with them.”

Juana is a single Latino mother raising three elementary school children. Juana is an immigrant from Mexico and survivor of domestic violence. She is divorcing her husband, who has been court-ordered to pay child support and has not done so. Because the child support payment is substantial, she is not eligible for food stamps or other services. There doesn’t seem to be communication between the different Divisions of DHS responsible for child support and food stamps. Of her need for assistance, Juana says, “I applied for welfare, but they just gave it to me now, in November. They gave me money but not enough for rent. And so here I am just wondering what to do. I need money for the lights and it’s really hard for me. But according to them, they can’t help me any more than that. But it’s been a long time since that time I had told them my problem and they didn’t pay attention to me.”

Individualized help from workers and systems. Some families found workers who recognized their value, listened to them, and helped them set and reach goals. These relationships, which came from workers in schools, community-based organizations, and juvenile justice, were highly valued by the families and generally recognized as what was most helpful to them in moving beyond survival to getting ahead. They also stood in sharp contrast to the types of assistance families generally received from systems. These workers appeared to “go the extra mile” in their responses, often beyond the defined boundaries and expectations of their jobs.

Annette has learned of most of the social services that she accesses as a result of referrals made by her school counselor. The counselor referred her to a young mother’s parenting class and a program that provides financial assistance to students. Annette likens the counselor to a “second mother.” Of the counselor, Annette says, “She is a real funny lady and she’s really strict. She put me in all these programs and activities. But she keeps me on track in school and makes sure I’m coming and keeping my grades up.”

Susan and Thomas feel that Lauren’s school case manager has been very instrumental in identifying and assisting Susan in accessing community-based services and school programs. Accepting the school case manager’s

recommendations and assistance is easy for Susan because she “trust[s] her opinion on how to handle [situations]” and she knows that the school case manager cares about Lauren. Of her interaction with the case manager, Susan says, “she helps me a lot on everything I ask her about, plus if I need to talk and I get a hold of her she always listens to me, no matter what.”

Karen’s two adopted children have extensive involvement in the legal system and are disconnected from the traditional educational system. There has been one teacher who has gone above the call of duty to support her son, by attending court hearings and allowing Karen to call him at home. This connection has proven to be helpful to Karen, particularly in one instance that a judge released her son to the teacher’s custody. Of the situation, Karen wrote, “due to the fact that I had a doctor’s appointment I could not cancel, he was released to his teacher until I got home.”

Public system attitudes. While there were instances of individualized help, most families also experienced significant worker attitudes and language barriers that made their efforts to secure help stressful and even demeaning. They were not recognized as individuals, their opinions were ignored, or they were treated suspiciously. Even when families were able to obtain the help they needed, these negative interpersonal contacts caused pain and worked against some of the healing that families needed to move ahead.

Isabela, escaping from an abusive husband, moved her two children to Des Moines. Unfortunately, her husband located her and the children and attempted to forcefully re-enter their lives. This prompted Isabela to contact the Des Moines Police Department, whose officers abuse Latinos and are racist, according to Isabela. Of her interaction with officers to rectify the situation, Isabela writes, “I called the policemen several times and spoke to them about my problems. They would not do anything and even threatened to take my children away if I didn’t stop bothering them. I don’t speak English very well so I tried to communicate all that my ex-husband was doing to me the best I could. I asked my small daughter who does know English to explain what was happening to the policemen and she did.”

Maria wrote that the Department of Human Services paperwork is very confusing for Maria. Although some documents are in Spanish, the documents are still confusing and misleading. She is worried that she will not complete the paperwork correctly, which will lead to her being ineligible for assistance. This adds additional pressure upon Maria. Considering that medical coverage and prescriptions for her children are through DHS, Maria would face a considerable financial hardship, if any mistakes were made. These realities are always a concern for Maria, subconsciously.

Private system responses. In addition to struggling with public systems, families also had to struggle with private systems — including doctors, merchants, utility companies, and housing — to obtain what they needed and believed they deserved. Families often felt they

were treated differently than others by these private systems, which again added to family stress, frustration, and sense of the lack of fairness with which they were treated.

Melba wrote on December 4, 2001, “I went to shop at Dahl’s while checking out with my items and some WIC items – you would have thought I was the biggest scum. When you use WIC checks at Dahl’s, they make you feel very unwelcome. I feel like if you spend a WIC check it’s just like spending money and the cashier’s attitude and slamming of items is uncalled for.”

Reginald worries that he will not be able to bequeath his childhood home to his family and that it will be taken from them by the state. He has contacted various legal firms and agencies to no avail. Most legal services that are offered to low-income individuals are in the field of criminal justice or domestic violence, which does not apply to Reginald’s situation. Reginald writes, “At the County Office is where I was told what papers I needed to get the place into my name. I met nice people who told me who to go to and what to ask for. However, twice, when I get to that last woman in that last office, she says, “You’ll need to get a lawyer to handle this.” No reason is ever given.”

Maria feels that the medical care that she and her family receives is detrimental to their health and that Iowa’s medical system continually fails her. She knows that there are some health issues, but the health care provider says that any presenting systems are normal. Maria wrote, “The doctors failed me. They sometimes think that a patient is always at a loss for being in this country illegally. They always assume that someone who is undocumented is poor and therefore can’t pay. Because of these assumptions, the patients are abandoned and left getting sicker and sicker.”

Summary

These family stories support the contention that, at least through the families’ eyes, current service systems often are too fragmented, categorical, bureaucratic, reactive, unsympathetic, and unresponsive to provide the help families need to succeed.

While families often resort to strong survival skills to get by, they struggle to get ahead. They often find their efforts to take advantage of opportunities thwarted by the systems that are designed to help them. This can be in the form of regulations, time frames and delays, fragmentation and lack of continuity in helping navigate systems, and simply worker attitudes.

Alternatively, in the several instances where workers in public systems responded more responsively and holistically and treated families individually and with respect, families saw results. Where workers took time to understand and sought to resolve significant family issues and concerns, families were validated. The challenge is to make these responses, if not the norm, at least more frequently and likely to occur.

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