



CHAPTER I: CONTEXT

The case study approach for this project was chosen because the particular set of circumstances in each county had a pervasive impact on the way in which the county designed and implemented its program to identify and serve participants with AOD/MH/DV barriers to employment. This chapter discusses some of the variations in circumstances and environment within which each county designed its efforts to assist TANF participants with AOD, MH, and DV barriers to employment. These variations – as in unemployment rates – may also directly affect the extent to which AOD/MH/DV issues are a barrier to employment in a given county. The chapter describes county variations in the following areas:

- Demographic factors
- AFDC/TANF patterns
- Planning processes
- DSS approaches to implementation of CalWORKs
- Prior interagency collaborative relationships

Influence of Demographic Variations on County CalWORKs Programs

Effects of Population Size, Percentage on Welfare, and Unemployment Rate

The demographic variations among the six study counties had a major impact on the challenges they faced in implementing CalWORKs in general and the AOD/MH/DV support services in particular. The larger the population, the greater the proportion on welfare, and the higher the unemployment rate, the greater are the obstacles to achieving the goals of CalWORKs, and the greater the challenge in developing programs to assist those with AOD, MH, and DV barriers.

Project staff noted the following challenges of implementing welfare reform in the larger counties like Los Angeles and Alameda:

- Consistency in the implementation of rules and regulations is more difficult. More discretion is given to the managers of each welfare office resulting in variable interpretation of policy and follow-through in practice. This impacts the AOD, MH, and DV part of CalWORKs, where some DSS offices are more welcoming of co-located specialized staff than others, and some place more emphasis on these issues with their staff than others.
- Developing collaborative relationships at all levels in agencies is more difficult. In the large counties, directors of agencies may develop a good working relationship but this



may not translate uniformly down all levels in the organization. We found, for example, variable levels of relationship between welfare offices and AOD, MH, and DV systems in different areas of Los Angeles. In small counties the total number of staff in all agencies is small enough for relationships to develop at all levels in collaborating agencies.

- Large counties often have larger and more impersonal office settings. These counties face a greater challenge in transforming their DSS culture where the office environment retains more of the feel of the old welfare system.⁶ The identification of AOD, MH, and DV issues is enhanced where the setting is more conducive to CalWORKs building relationships thereby putting these counties at a disadvantage.

The counties face different challenges in regards to the percentage of their population on CalWORKs and the unemployment rate. The large urban counties – Los Angeles and Alameda – in this case have a better situation with both relatively low rates of unemployment and a low percentage of their total population on CalWORKs. Kern, and to a somewhat lesser extent Shasta appear to face the largest challenges, with both high unemployment rates and high percentages of their populations on CalWORKs. Monterey and Stanislaus face a mixed pattern with high unemployment rates but not-so-high percentages of their population on CalWORKs. These two counties are noted below as having the greatest amount of decline in their CalWORKs populations over the last three years.

All four of the non-urban counties report sizeable seasonal variations in unemployment resulting from a reliance on agriculture and/or tourism as significant economic sectors. Some CalWORKs participants rely on cash assistance during only part of the year, making it more difficult for CalWORKs to engage participants in a long-term plan towards self-sufficiency.

Population, Persons on CalWORKs, and Unemployment Rates

County	Population 1/99	Persons on CalWORKs 1/99	Percent of Population on CalWORKs	Unemployment Rate Calendar Year 1998
Alameda	1,433,000	71,080	5.0%	4.1%
Kern	648,000	57,970	9.0%	12.1%
Los Angeles	9,757,000	661,220	6.8%	6.5%
Monterey	391,000	15,610	4.0%	10.8%
Shasta	165,000	13,320	8.1%	9.1%
Stanislaus	433,000	29,990	6.9%	12.3%

⁶ Los Angeles County undertook a major remodeling of some of their CalWORKs district lobbies/work areas in an effort to make the environment better suit the goals of welfare reform.



Effects of Ethnic Diversity

Ethnic diversity creates additional challenges to making AOD, MH, and DV services culturally and linguistically appropriate. Almost two-thirds of the CalWORKs adults in Monterey and half of those in Los Angeles are Hispanic. The predominant group in Alameda is African-American, but this county also has the largest percentage of Asian and Pacific Islander recipients. Shasta is the only county with a predominantly white CalWORKs population. The lack of bilingual human service professionals with Asian/Pacific Islander culture and language backgrounds may affect all the counties except for Kern.

Race/Ethnicity of CalWORKs Population (Adults 7/98)

County	White	African American	Hispanic	Asian/Pacific Islander	Other
Alameda	17.3%	54.3%	13.8%	13.2%	1.4%
Kern	41.1%	14.3%	42.6%	0.9%	1.0%
Los Angeles	15.0%	29.3%	50.0%	5.2%	0.6%
Monterey	24.1%	7.7%	63.5%	3.3%	1.3%
Shasta	86.4%	1.9%	2.8%	4.9%	4.0%
Stanislaus	51.3%	6.5%	32.2%	9.2%	0.8%

Variations in AFDC/CalWORKs Caseloads in Study Counties

Decline in Caseloads

The drop in welfare rolls varies substantially by county, making the challenge of welfare reform much greater in some counties than others. The six counties varied in their rates of decline in the AFDC/CalWORKs caseloads both immediately before and after implementation of CalWORKs.

Percent Decline in Adult AFDC/CalWORKs Caseloads

County	Percent Decline 7/96 to 7/97	Percent Decline 7/97 to 7/98	Percent Decline 7/98 to 6/99	Percent Decline 7/96 to 6/99
Alameda	12.4%	14.2%	20.1%	39.9%
Kern	13.4%	10.0%	8.2%	28.4%
Los Angeles	11.6%	14.2%	13.3%	34.3%
Monterey	19.4%	20.8%	20.5%	49.3%
Shasta	6.8%	15.0%	22.6%	38.8%
Stanislaus	18.8%	25.1%	18.1%	50.2%



Two of the counties – Monterey and Stanislaus – continued what had already been a significant drop in their adult AFDC caseloads before CalWORKs implementation began, resulting in a 50 percent reduction of their adult caseloads over the three-year period from July 1996 to June 1999. Shasta showed a more sizeable decrease in adult caseload following CalWORKs implementation than before, but the trend may have begun even before CalWORKs. The decline in adult caseload has been the smallest in Kern.

Prior Welfare-to-Work Efforts

The Welfare-to-Work concepts incorporated in the Federal welfare reform legislation had been partially implemented in many states, including California. While California's 1985 GAIN program was the nation's largest, the effort was not equally or fully funded throughout California. As a consequence, counties differed in the percentage of their AFDC caseloads that were enrolled in GAIN and in the timing of their adoption of a work-first philosophy. While the requirements of GAIN do not match those of CalWORKs, they are similar enough in orientation to give those counties that had a more fully implemented GAIN program a head start on the conversion to CalWORKs.⁷

The table below shows the difference among the six counties in the percentage of their AFDC caseloads enrolled in GAIN prior to the implementation of CalWORKs. Those counties with lower percentages faced a more daunting challenge in meeting the requirement to enroll all non-exempt participants into CalWORKs. Kern and Stanislaus already had roughly half their adult caseloads enrolled while Los Angeles and Alameda had one-quarter or less enrolled.

Percent of Adult AFDC Enrolled in GAIN

County	Percent Enrolled in GAIN 12/97
Alameda	25.7%
Kern	57.6%
Los Angeles	18.4%
Monterey	31.2%
Shasta	35.7%
Stanislaus	45.7%

⁷ RAND reports that implementation was easier and faster for those counties that had large GAIN programs prior to CalWORKs. Klerman, J.A., Zellman, G.I., Chun, T., Humphrey, N., Reardon, E., Farley, D., Ebener, P.A., & Steinberg, P. *Welfare Reform in California: State and County Implementation of CalWORKs in the Second Year*. Santa Monica: RAND, 2000.



Variations in CalWORKs Planning Process

The counties differed in the way they approached the planning activity. Some – like Shasta and Stanislaus – used the time to undertake a major planning effort that included a wide spectrum of community participants. In some counties – like Kern – extra effort was put into the framing of the welfare reform issue. By not defending the old welfare system and by talking about welfare reform as a way to enhance the health of the whole community, they were able to gain the support for a wide range of services for TANF participants from their Boards of Supervisors. In other counties the planning effort was more confined to the county departments who would have responsibility for the actual implementation. The Boards of Supervisors and the Chief Executive’s Office (CEO) had varying roles across the counties with some – like Stanislaus – playing an active role, while in others – like Los Angeles – they were less directive.⁸

CalWORKs Planning Process

County	Breadth of Planning Effort	Leadership Role
Alameda	County departments for general CalWORKs plan	DSS
Kern	Broad, including county departments, business, community agencies, educators, and faith community	DSS
Los Angeles	County departments on central planning group with broad representation on the 12 subcommittee planning committees, one of which was for AOD, MH, DV issues	DSS
Monterey	County departments	DSS
Shasta	Broad, including county departments and community representatives	DSS
Stanislaus	Broad, including county departments and community representatives	CEO

The planning for the AOD/MH/DV component of the CalWORKs program occurred within this overall CalWORKs’ planning effort. The counties varied in who led the process and who was involved. For example, in Los Angeles, the planning was led by DSS and had very broad representation, including the relevant county departments, private providers, and consumer organizations like the Human Services Network and Legal Aid. In Shasta, the process was led by the director of the AOD division within the Department of Mental Health and included primarily representatives of county government.

⁸ While the Los Angeles Board of Supervisors played a fairly “hands-off” role during the planning, it has been one of the more active Boards in terms of legislating specific changes to the program once it was up and running. They have mandated home visits with new TANF applicants and asked DSS to develop a plan for participants to be informed about AOD, MH, DV services before they are questioned about their own status.



Planning For AOD/MH/DV Component

County	Breadth of Representation	Leadership	Focus of Planning
Alameda	Two separate groups: <ul style="list-style-type: none"> ▪ AOD & MH Planning group ▪ DV planning group Both included county staff and CBO providers	DSS	<ul style="list-style-type: none"> ▪ How to work around union issues ▪ AOD/MH: How to adapt current system to accommodate new population ▪ DV: How to implement FVO and how to enhance services
Kern	Mostly AOD and MH county staff reporting to combined interagency planning group	<ul style="list-style-type: none"> ▪ MH System of Care for AOD and MH ▪ DSS for DV 	Adaptation of vocational program serving severely mentally ill
Los Angeles	<ul style="list-style-type: none"> ▪ One of 12 planning subcommittees reporting to the central planning committee ▪ Included county staff, CBO providers, consumer advocates 	DSS	<ul style="list-style-type: none"> ▪ Focus on “support services” taken broadly ▪ Development of a screening instrument ▪ Development of flow chart indicating where/how participants with barriers would go ▪ Development of specialized eligibility workers to expedite process for participants with barriers
Monterey	<ul style="list-style-type: none"> ▪ County staff only ▪ DV separate from AOD/MH planning 	<ul style="list-style-type: none"> ▪ Department of Behavioral Health for AOD and MH ▪ DSS for DV 	<ul style="list-style-type: none"> ▪ An EAP-model service to be co-located ▪ Focus on new services, especially residential service for substance abusing mothers
Shasta	County, CBO providers, other CBOs	AOD division within Department of Mental Health	<ul style="list-style-type: none"> ▪ Roles/responsibilities of co-located BHS team ▪ Extension of prior collaborative relationships
Stanislaus	County staff, DV provider, and other CBOs	Department of Mental Health	<ul style="list-style-type: none"> ▪ AOD/MH/DV focus on employment barriers ▪ Planning of three service tracks to be used by the AOD/MH/DV integrated team



Variations in DSS Approaches to Implementation of CalWORKs

Philosophy and Emphasis Placed on AOD/MH/DV Services

Each county’s welfare system brought a somewhat different overall orientation to the implementation of CalWORKs and the AOD/MH/DV supportive services component. The most important philosophical issue in relationship to the AOD/MH/DV supportive services is the department’s attitude toward potential barriers to employment *in general*. Where the work-first approach is most strongly embraced, the identification of any barriers to employment prior to an actual failure is not encouraged. Every participant is assumed to be able to work until s/he has demonstrated by failure that there were barriers.

Philosophy and Approach

County	Overall Philosophy and Approach
Alameda	DSS leadership supportive of identifying any participants with AOD/MH/DV which might be barriers to employment
Kern	<ul style="list-style-type: none"> ▪ Strong work-first approach with entry into AOD/MH/DV via self-disclosure or failure ▪ Focus of AOD/MH/DV services to be clearly on overcoming barriers to employment
Los Angeles	<ul style="list-style-type: none"> ▪ Identification of barriers to employment prior to failure is encouraged; screening for supportive service needs takes place prior to any activity assignment ▪ Stronger work-first orientation in GAIN offices than in those with combined GAIN and eligibility ▪ Early identification and intervention strongly encouraged by Board of Supervisors
Monterey	<ul style="list-style-type: none"> ▪ Major effort to re-orient system towards a more consumer-friendly agency ▪ Major initiative to enhance morale within DSS
Shasta	Strong emphasis on identifying and serving all with AOD/MH/DV problems
Stanislaus	<ul style="list-style-type: none"> ▪ Very strong work-first approach with referrals for AOD/MH/DV based on a “reasonable suspicion” or past or current failure to obtain or keep a job or to participant in WTW activities ▪ Applicant required to attend four-week job search before receiving cash assistance ▪ Referrals for AOD/MH/DV services must go through employment counselor ⁹ ▪ One of few counties in the state to have already implemented community service requirements

⁹ Stanislaus has since changed this policy to allow direct referrals to the Behavioral Health Team from Welfare-to-Work service providers.



Variations in DSS Policies on Sanctions and Exemptions

DSS policy on sanctions and exemptions set the framework for the identification of AOD/MH/DV issues with these populations. As will be noted below in Chapter II, both CalWORKs participants exempt from CalWORKs work-related activity requirements and those who are in the sanctioning process are potential sources of CalWORKs eligibles who could benefit from AOD, MH, or DV services in their efforts to ultimately gain employment. Thus the county DSS policy regarding exemptions and sanctioning are important elements to consider in designing and implementing a supportive services strategy.

There are six general categories for exemptions under CalWORKs. The standards for exemption allow for some county flexibility in interpretation and implementation, but the categories are more stringent than they were under the old GAIN program. Under federal regulations, only 20 percent on the total caseload can be exempt at any one time. As a consequence, counties are developing more methods for assuring that the situation of exempt participants be more carefully and routinely reviewed. Since having a “verified disability” is one of the exempt categories, the county’s interpretation of this will be relevant to the efforts to deal with AOD, MH, and DV issues.

Sanctions can be applied by DSS whenever a CalWORKs participant fails to fulfill one of the requirements of the program. This can occur early in the process if a TANF eligible fails to attend any part of the four-week job search activity that is generally the first part of each county’s Welfare-to-Work process. Or, it can occur later if a participant fails to fulfill any of the work-related activity that is included in the participant’s CalWORKs Welfare-to-Work Plan. While all counties face high no-show rates, they differ in how quickly and assertively they move towards an active sanctioning practice. Counties also differ in their proactive efforts to prevent sanctions by intervening more assertively during the sanctioning process to obtain a resolution that would avoid the sanction. And some counties are working towards re-contacting prior CalWORKs eligibles who have been sanctioned to try to resolve whatever caused the sanction. AOD, MH and/or DV specialists can assist at any step in the sanctioning process. This is discussed further in Chapter II. The following table describes the DSS approach to sanctioning since it provides the framework within which AOD, MH, or DV efforts might occur.



Sanctions and Exemptions

County	Sanctions	Disability Exemptions
Alameda	Making a major effort to contact participants before and after sanctioning by giving CBOs lists of participants to try to find and engage	Beginning active review of exemptions by SSI disability social workers
Kern	Pre-sanctioning efforts include home visits on cases where there was some engagement followed by dropping out	No review, but researching need to review exemption process
Los Angeles	DSS to review a sample of sanctioned cases to find out why the adult failed to comply with requirements	<ul style="list-style-type: none">▪ Disability exemption can be obtained with a regular doctor's letter with no additional review by a county unit▪ Referral made to Department of Rehabilitation on every medical exemption with a duration over 30 days
Monterey	Slow to develop an active sanctioning effort because of workload and approach ¹⁰	Beginning more active review of exemptions by SSI disability unit ¹¹
Shasta	Active effort to sanction families for children's non-attendance at school	Behavioral Health Team reviews all exemptions for AOD/MH issues
Stanislaus	<ul style="list-style-type: none">▪ Sanctioning process begun early in CalWORKs implementation▪ Use vendor payments for 2nd and subsequent sanctioned cases▪ Beginning process of family resources conferences with potential sanctioned families ¹²	<ul style="list-style-type: none">▪ A Disability Assessment Team reviews requests for exemptions dealing with medical, psychiatric and/or need to be at home▪ The Behavioral Health Team reviews all requests with behavioral health issues

¹⁰ Since the Project's last visit Monterey has developed a pilot project using social workers to make home visits on pre-sanction and sanction cases with the goal of precluding or removing participants from sanctions. Plans are to expand the project to the entire county.

¹¹ Monterey will initiate in 2000 a Disability Assessment Team program to provide desk reviews of disability cases by contract physicians to assure that participants are moving toward employment where possible.

¹² Stanislaus has initiated a StanWORKs Interdisciplinary Team (SW unit) to engage sanctioned families since the Project's last visit.



Effects of DSS Size and Organizational Structure

DSS size and organizational structure constrain the design of AOD/MH/DV services. The larger counties face additional challenges in obtaining consistent implementation, developing collaborative relationships at all levels, and in changing the atmosphere of the welfare environment. Counties vary in the way that they deal with large and/or dispersed populations. Some have maintained as much centralization as possible, which heightens consistency but may interfere with a change to a more user-friendly atmosphere. Others have moved towards greater decentralization, which has impact on the ability of specialized AOD, MH, and DV staff to be co-located all or most of the time on-site.

Each county DSS organizes differently to provide the many functions that need to be performed in relationship to a CalWORKs participant. Since more participants are engaged in more activities, the involvement of other DSS or other county departments or contract agencies has increased.

Each county DSS has struggled with how to minimize the number of people that the participant relates to while ensuring that all the required functions are performed by staff who are well trained in that activity. Some (e.g. Stanislaus) have placed the most emphasis on reducing the number of people that the CalWORKs recipient must deal with, while others channel recipients to eligibility and employment counselors who have specialized expertise in whatever special barriers are anticipated. The different ways in which these functions have been constructed provides the framework within which the AOD/MH/DV program operates and determines the critical players with whom that program has to develop liaisons.





Organizational Structure

County	Centralization	Other Relevant Features
Alameda	Decentralized – offices	<ul style="list-style-type: none"> ▪ DSS organizationally split between welfare unit and unit that contracts for employment-related services ▪ Significant reliance on contracts with CBOs for employment related services
Kern	Decentralized – three offices in Bakersfield and six outside Bakersfield	A major part of the employment counselor function (case management of the WTW plan) contracted to a private company
Los Angeles	Decentralized – 23 district offices and eight GAIN offices	<ul style="list-style-type: none"> ▪ Significant differences among offices, particularly those that are GAIN only vs. combined eligibility and GAIN ▪ Specialized eligibility workers for anyone with potential AOD, MH, or DV issue
Monterey	Decentralized – four offices	New leadership in DSS working on implementation of major change in orientation of department
Shasta	Decentralized – three offices	Employment counselor caseloads ballooned
Stanislaus	Largely centralized – One large DSS office in Modesto	<ul style="list-style-type: none"> ▪ Major re-organization of welfare moving towards a combined eligibility and employment counselor worker ▪ Most services provided by county staff ▪ Efforts underway to provide services in more locations including another site in Modesto and in One-Stops

Welfare Employee Attitudes about CalWORKs and Welfare Reform

Welfare reform has brought dramatic changes for eligibility workers and employment counselors, most importantly in an increase in their workload and the demands of their jobs. As will be noted in the next chapter, strategies for the identification and referral of CalWORKs participants with AOD, MH, and DV issues have relied to a large extent on the eligibility workers and employment counselors within county welfare offices. How these employees view welfare reform generally as well as their jobs within CalWORKs has a strong influence on their capacity to fulfill the expectation that they will identify and refer participants with AOD, MH, and DV issues that are barriers to employment.

The two most important functions performed by the welfare staff are determining eligibility and activity leading to employment. Each CalWORKs recipient has an eligibility worker who



performs the tasks of establishing and re-determining as necessary the person's eligibility for cash aid and amount of cash aid. Counties organize the responsibilities of their eligibility workers differently – some have eligibility workers devoted solely to CalWORKs and some have more generic eligibility workers who are responsible for other welfare programs such as Food Stamps and Medi-Cal. Some divide the roles of eligibility workers into those determining initial eligibility, and those who are responsible for ongoing eligibility.

The employment counselor¹³ is responsible for developing (with the participant) and monitoring the Welfare-to-Work (WTW) Plan that specifies the work-related activities the participant will do in order to move from Welfare to Work. Not only have the number of CalWORKs participants needing an employment counselor increased under CalWORKs, but so also has the function of that staff who must now develop the WTW plan and then track the work activity hours of each participant against that plan.

The director of the statewide CalWORKs evaluation being conducted by RAND recently attributed much of the slow implementation of CalWORKs services to the greatly increased workloads for DSS staff.¹⁴

Our survey data from eligibility workers and employment counselors indicates clearly that CalWORKs brought change for the welfare system, but that workers are not uniform in thinking it resulted in a more positive orientation towards CalWORKs participants. These findings are relatively consistent across the five counties that completed DSS worker surveys.

- Only a minority of workers – 14 percent of the eligibility counselors and 16 percent of the employment counselors – agreed that “nothing much has really changed with CalWORKs”
- Workers were divided on whether the change had created a “more positive orientation towards participants” since CalWORKs – overall 46 percent of the eligibility workers and 57 percent of the employment counselors agreed

Overall, a higher percentage of employment counselors rated their office morale as high (42%) than did eligibility workers (24%). There were sizeable differences in these ratings across counties, however. Among employment counselors for instance, the number rating morale “high” was as low as 16% in one county, and as high as 56% in another.

Both eligibility workers and employment counselors in all counties agreed that their jobs were more difficult now than before welfare reform. Both groups reported higher caseloads, more to do, and more to know. For some workers (about one-third on average) the increased difficulty

¹³ We use the generic term “employment counselor” understanding that each county calls the staff who perform this general function by a different name, e.g. “GAIN worker,” “employment and training worker,” “employment coordinator,” etc.

¹⁴ Jacob Alex Klerman, “The Pace of CalWORKs Implementation,” testimony presented at a hearing of the California State Senate Committee on Health and Human Services, December 8, 1999.



was offset at least in part by an increase in interest in their jobs. The sometimes substantial variation between counties indicates that workload and interest in the job are strongly affected by local climate and decisions.

Eligibility Worker Views on Changes in Job, by County

Percent Who Say Increased:	Kern Percent	Los Angeles Percent	Monterey Percent	Shasta Percent	Stanislaus Percent
Caseload	52	54	50	14	84
Amount to do per case	92	78	82	84	99
Complexity/number of regulations	100	88	88	95	99
My interest in job	32	44	35	35	22

Employment Counselor Views on Changes in Job, by County

Percent Who Say Increased:	Kern Percent	Los Angeles Percent	Monterey Percent	Shasta Percent	Stanislaus Percent
Caseload	45.4	40.7	53.8	61.9	95.2
Amount to do per case	45.4	80.0	100.0	85.7	50.0
Complexity/number of regulations	56.6	87.9	92.3	90.5	70.0
My interest in job	31.8	36.8	50.0	23.8	10.0

Continuity of Social Services Staffing in Study Counties

The DSS worker surveys asked each respondent if s/he had held the same job prior to the implementation of CalWORKs, roughly in January of 1998. Overall, in October of 1999, twenty-eight percent (28%) of the eligibility workers said they had not. Counties varied a great deal in this dimension, however. Shasta had the least new staff (14%), followed by Monterey (16%), Los Angeles (29%), Stanislaus (30%) and Kern (36%). In offices in Los Angeles, it ranged between 6% and 44%.¹⁵

The proportion of employment counselors new to their jobs since the start of CalWORKs is quite a bit higher than among eligibility workers (56% vs. 28%). This is to be expected given the need for more increased staffing of the employment counselor than the eligibility worker function.

¹⁵ Turnover in eligibility staff reflects in some counties the fact that some move into the employment counselor role as a career advancement.



New staff ranged from a low of 28% for Shasta to a high of 63% for Kern (which contracted much of this function out). However, Los Angeles and Stanislaus also had similarly high rates.

The potential advantages of having high continuity in staff are that the participant is more likely to be able to remain with the same workers, and that the staff are more knowledgeable about the program. Potential liabilities are that they may carry over “old welfare” attitudes toward CalWORKs and its customers.

Unique Elements that Influence CalWORKs

A major dispute with the union in Alameda County had an impact on the way in which the AOD/MH/DV component of CalWORKs was implemented. Challenges that had to be overcome included the following:

- Eligibility workers have not been able to talk to participants about any AOD, MH, or DV issues
- No non-DSS staff with expertise in AOD, MH, and DV have been able to be co-located at DSS sites ¹⁶
- No training of DSS staff on AOD, MH, or DV issues has occurred on other than a voluntary basis
- The system has accommodated to these constraints by expanding the number and role of social workers employed by DSS and by contracting with local providers for an aggressive case finding initiative

Variations in Interagency Collaborative Relationships in Study Counties

Close co-ordination among multiple county agencies is needed if the AOD, MH, and DV supportive service component of CalWORKs is to operate smoothly. Each county’s history of collaborative efforts set the stage for the CalWORKs co-ordination efforts. Some of the particulars for each county are noted in the table that follows.

In general,

- In none of the counties were there strong pre-existing collaborative relationships among all of the relevant organizations.
- While MH and AOD had the most history of prior collaboration and were located within the same department in five of the six counties, the history of these relationships has not been easy in some counties. The AOD system has often been concerned about its needs not being addressed within combined departments.

¹⁶ County Behavioral Health staff have been co-located at some DSS sites since the time of the Project’s last site visit.



- The DV agencies, being private and separate from the county, had generally the least amount of co-ordination with the other major players.
- There had been little relationship between AFDC and child welfare even though they were located in the same department in most counties.
- The prior DSS relationships with AOD or MH were mostly around child welfare issues or general assistance and had developed within the last few years.
- Only one county DSS, Stanislaus, had a significant relationship with domestic violence providers.

History of Prior Collaborative Relationships

County	Relationship of AOD to MH Agencies	Relationship of DV to County Agencies	Relationship of DSS to AOD, MH, or DV Agencies
Alameda	<ul style="list-style-type: none"> ▪ Combined Behavioral Health Department ▪ AOD providers still feel alienation from county department 	<ul style="list-style-type: none"> ▪ No formal relationships with county ▪ Informal relationships with AOD providers 	Many initiatives around child welfare issues involving AOD, MH, CPS, probation, education, courts
Kern	Combined Behavioral Health Department	Use as a referral agency	Existing Childrens' Network that included all major agencies used as foundation for collaborative planning process
Los Angeles	<ul style="list-style-type: none"> ▪ Two separate departments ▪ Relationships improving at top levels but lag at the SPA level 	Division within a county department provides staff for DV Coordinating Council and provides training for county staff	<ul style="list-style-type: none"> ▪ Relationships formed during implementation of an AOD screening and mandatory services program for the GA population. ▪ MH workers co-located at DSS offices for the purpose of assisting in SSI determination ▪ DV unit has done training for DSS staff for many years
Monterey	Combined Behavioral Health Department since 1996	DSS an active member of the DV Coordinating Council ¹⁷	Active beginning efforts to meet the AOD needs of parents in the child welfare system
Shasta	AOD part of Mental Health Department but maintains a separate identity	AOD had contract with DV provider	Board of Supervisors emphasis on collaborative programs
Stanislaus	AOD part of Mental Health Department	DV agency had provided training for county staff	<ul style="list-style-type: none"> ▪ Strong close collaborative relationship between directors of DSS and MH ▪ History of Job PASS (AOD assessment) program where AOD co-located at AFDC site

¹⁷ DSS currently chairs the Council and provides staff support.



Summary

The factors described in this chapter have constituted a powerful set of conditions that have influenced both:

- The complex interagency planning and implementation that CalWORKs has come to require, and
- CalWORKs participants' chances of getting AOD/MH/DV services, and then finding and retaining employment that may enable family self-sufficiency

There is a surface similarity to the AOD/MH/DV components of CalWORKs programs in different counties that stems from the uniform planning requirements required by the State Department of Social Services. The Project's site visits and surveys have shown us the variation that lies under the surface. The remainder of the report lays out the ways in which constraints and context have contributed to very different ways of organizing the identification, assessment and provision of AOD/MH/DV services in each county – and the consequences for CalWORKs participants.

