The Relationship Between Self-esteem and Demographic Characteristics of Black Women on Welfare

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THE RELATIONSHIP BETWEEN SELF-ESTEEM AND DEMOGRAPHIC CHARACTERISTICS OF BLACK WOMEN ON WELFARE

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“Something that has puzzled me all my life is why, when I am in special need of help, the good deed is usually done by somebody on whom I have no claim.”

- William Feather -
TABLE OF CONTENTS

List of Tables ................................................................. ix
Abstract .................................................................................. x
Foreword .................................................................................. xii

CHAPTER ONE – INTRODUCTION ........................................ 1

Theoretical Base ................................................................. 4
Self Esteem: Background ....................................................... 6
Statement of the Problem ..................................................... 7
Purpose of the Study ............................................................. 8
Significance of the Study ....................................................... 9
Research Question............................................................... 11
Definitions.............................................................................. 11
Limitations.............................................................................. 13
Summary................................................................................ 14

CHAPTER TWO – REVIEW OF THE LITERATURE................. 16

Self Esteem: Early Theoretical Contributions ...................... 16
Key Theories of Self Esteem and Recent Conceptual Themes .... 19
A Conceptual Definition of Self Esteem............................... 19
Major Theories of Self Esteem Relevant to This Study .......... 22
Self Esteem and Social Problems......................................... 30
Social and Political Implications of Self-Esteem.................... 31
An Historical Overview of Welfare Aid in the US................. 33
The Origins and Myths of Welfare....................................... 36
Welfare Reform................................................................. 39
A Look at the Welfare Dependent Population ...................... 40
Welfare Status: Perception versus Reality......................... 42
Socio-demographic Factors............................................... 44
Summary of the Literature Review...................................... 54

CHAPTER THREE – METHODOLOGY.................................. 56

Participants............................................................................ 56
Description of the Career Quest Program......................... 58
Research Question and Hypotheses.................................... 58
Research Design.............................................................. 60
Data Analysis for Hypotheses............................................ 61
LIST OF TABLES

1. Means and Standard Deviations for Gender and Ethnicity of the Coopersmith Self-Esteem Inventory ................................................................. 65

2. Frequencies for the Predictor and Criterion Variables .......................... 72

3. Descriptive Statistics for the Criterion, Predictor and Control Variables . 74

4. Pearson Correlation Matrix .................................................................. 75

5. Summary of Multiple Regression Analysis Predicting Self-Esteem from Predictor and Control Variables .......................................................... 76

6. Summary of Analysis of Variance (ANOVA) Predicting Self-Esteem from Parents’ and/or Grandparents’ Dependency on Welfare ................... 77

7. Summary of Analysis of Variance (ANOVA) Predicting Self-Esteem from Perceived Barriers to Employment ................................................ 78

8. Listing of Types of Internal/External Barriers to Employment Indicated by Participants ................................................................. 78

9. Summary of Analysis of Variance (ANOVA) Predicting Self-Esteem from Completers and Non-Completers .................................................. 80

10. Summary of Analysis of Variance (ANOVA) Predicting Self-Esteem from Marital Status .............................................................................. 81
ABSTRACT

Extant literature suggests that the psychological construct referred to as self-esteem is, by virtue of its illusiveness, ambiguity, and multidimensional nature, a variable that remains difficult to conceptualize, operationalize and measure, thus the absence of a consensus among researchers regarding its true meaning and causal effects on aspects of daily living. More importantly, the debate continues about the differences between self-esteem of Blacks and that of Whites, and the impact of welfare dependency on the self-esteem of Black women. Self-esteem is generally viewed as how an individual feels about himself or herself. Data on the link between self-esteem and welfare characteristics seem to be limited and fragmented, hence the need for further research.

This study explored the relationship between self-esteem and demographic characteristics of Black women on welfare. The researcher tested for a correlation between self-esteem and (a) Time spent on welfare, (b) The age of first motherhood, (c) Number of children, (d) Parents and/or grandparents on welfare, (e) Perceived barriers to employment, and (f) Completion and non-completion of the Career Quest program held at Florida State University during 1992 – 1996, sponsored in part by The Florida State Department of Employment and Labor. Data were extracted from information available in files previously compiled by African American women who participated in the Career Quest program. Data analysis was conducted through Analysis of Variance and regression. Three control variables (Education, Participant’s Age, and Marital Status) were factored in as covariates. The goals of this study were: (a) To expand the pool of available research in this field, (b) to stimulate further interest in self-esteem by students and researchers, and (c) to increase the awareness of professionals and others in the healthcare, education and social work systems who are in a position to influence intervention programs and policies, of the need for greater attention to be given to the psychological impact of welfare dependency in relation to Black women.

The findings of this study concluded, in general, that self-esteem was not significantly related to characteristics of welfare participation by the population of Black women. This appears to call into question (and possibly debunk) the stereotype of Black women on welfare as having low self-esteem. The results suggested a strong link between some predictor variables and a positive relationship between self-esteem and marital status. Single participants were
found to have a higher self-esteem than their married, divorced or separated peers. Overall, the findings of this study suggest that the relationship between self-esteem and welfare characteristics of Black women is inconclusive. It is recommended that the implications for practice and research be noted and further research be conducted in this area.
FOREWORD

For several years this researcher has held strongly to the belief that welfare dependency is a resonant of poverty created primarily by multiple barriers – a view influenced in part by personal observations of some women on welfare and informal discussions with several of these individuals regarding how they came to be welfare-dependent, and how they feel about being dependent on economic aid from the state. Information gleaned from these experiences, as well as personal experience with the system one summer when a fellow student and friend shared some of her food stamps with the researcher, also helped convince the researcher of the need to pay closer attention to the connection between poverty and welfare dependency and the psychological impact of welfare dependency on women (the larger group of aid recipients). Additionally, this author found it troubling that some women experienced much difficulty in trying to get off welfare. Barriers to employment, either due to internal or external locus of control, complacency, family history, low self-esteem and other factors tied to poverty seemed to feature prominently as contributing factors in explanations presented by many of the individuals encountered.

The researcher has also had a profound interest in the concept of self-esteem which has grown over the years through exposure to professionally-oriented books and programs on the topic. Personal observation of and interaction with students and other individuals also contributed to the researcher’s curiosity and intrigue with this human phenomenon. Given what obtains in literature about the critical importance of self-esteem in the development of psychologically healthy individuals, the researcher has come to view this construct as a human characteristic that is desirable, necessary and vital for the overall improvement of society. Consequently, the researcher felt motivated to conduct a study on the topic of women on welfare, with a focus on self-esteem and its correlation to welfare dependency variables. So much for the genesis and unfolding of this study.
CHAPTER 1

INTRODUCTION

The U.S. welfare state as it is known today came into existence to meet the material needs of the poor, its creation having been in response to the great depression and the political agitation of the poor for income security (Patterson, 1981; Piven and Cloward, 1971). Over the past two decades, however, the welfare system has come under constant scrutiny and attack by both politicians and economists. There have been a slew of stereotypes generated over the years regarding welfare recipients, many of which have been perpetuated by groups with political agendas. For instance, persons on welfare are labeled as lazy, able-bodied individuals who prefer to freeloard on government programs while other citizens work hard to earn a living. There are those critics who espouse that welfare is a culture – a way of life passed on within families. There is also the popular perception that welfare mainly supports minority families, notably Blacks (Albelda & Tilly, 1997), although statistics presented by the U.S. Department of Health and Human Services (1997) suggest that the percentage of Whites receiving welfare aid is almost equivalent to that for Blacks.

Empirical studies have consistently shown that women have been in the majority in terms of welfare dependence, a disproportionate number being women of color. For many women on welfare, receiving Aid to Families with Dependent Children (AFDC) is a negative personal experience in addition to being a negative economic experience because they feel humiliated and degraded. The maze of paperwork that must be completed when applying for public assistance, as well as how they think they are perceived by those who serve them at the welfare office contributes to further humiliation for many welfare dependent individuals. The woman’s former identity is often publicly destroyed as she becomes known as a “welfare mother,” with the connotations of illegitimacy associated with her situation (Grella, 1988). She is further humiliated by the experiences and interactions engaged in throughout the community, for example when she attempts to cash a welfare check, pays for purchases at the grocery store with food stamps, or seeks to gain acceptance for subsidized housing.

Changes in family or household composition, often brought about by death or incapacity of a parent, divorce, separation, out-of-wedlock births, unemployment and reduction in income
have been cited as key factors leading to welfare dependency (Schneiderman et al. 1987b, 79-80). Currently, there appears to be limited empirical research and a void in extant literature in reference to examination of the link between self-esteem and welfare characteristics (aspects of social class) and this researcher is of the opinion that this gap needs to be addressed. The most significant analysis of social class and self-esteem was conducted by Rosenberg and Pearlin (1978). In their findings, they argued that individual experiences of self-evaluation are conditioned by both psychological and situational considerations (Wells, 2001). Also, research conducted by Steffenhagen and Burns (1987) have identified low self-esteem as the underlying psychodynamic mechanism that gives rise to all behaviors that violate social norms.

This is not to say that self-esteem is the sole culprit. From a correlational perspective, as noted by major researchers such as B.F. Skinner, establishment of cause and effect can be extremely difficult because of the large number of interactions of a multitude of other variables. To illustrate, the relationship between self-esteem and time on welfare may be mediated by other variables such as motivation to work and presence of personal goals and aspirations; the relationship between self-esteem and the age at which the individual first becomes a parent may be mediated by educational level, the benefits of remaining unemployed based on barriers to employment, and family values that lead to modeling. However, the significant role played by self-esteem in major social problems as indicated by the many atheoretical empirical work suggests that this construct demands greater attention.

Studies have consistently failed to address the contextuality of welfare dependency in reference to time, history and parenting experience, or attributions of barriers to gaining employment. Although these sociodemographic variables may be perceived as non-traditional measures of social class, they have meaning for the individual, has a bearing on how the individual interacts with his or her environment, and impacts the person’s self-esteem. Hence, conducting research in this area is likely to provide information that may be beneficial to further understanding of the psychological effect of welfare dependency on women and assist in establishing, in a scientific way, a link between individual self-esteem and welfare dependency. This researcher agrees with Mruk (1999) who posits that understanding self-esteem and its relationship to behavior will lead to enhancement of this construct, thereby making a big difference in people’s lives and in society as a whole.
One must not overlook the fact that deviant behaviors such as dropping out of the education system, substance abuse, teenage pregnancy and dependence on welfare aid are all interwoven, because one inadvertently contributes to the other. To illustrate, dropping out of school means the individual is not equipped with the knowledge and skills required to enter the occupational system; and having children out of wedlock and teen pregnancy are likely to set the stage for economic hardship for the unemployed teenage parent, especially the mother, and possibly the grandparents (in many cases the grandmother being the one who ends up having to assist with caring for the newborn). Consequently, persons in these situations are, for the most part, forced to turn to welfare aid and unfortunately for some, they become chronically dependent on government assistance. A vicious cycle may be perpetuated for several generations of one family if there is no intervention. This ultimately is a social problem in the sense that this behavior is perceived by those in the workforce as a violation of one of the social norms that dictates (rightly or wrongly) that all able-bodied, healthy individuals should be gainfully employed and contributing to the tax coffers of the country.

Additionally, one cannot ignore the element of economic and social cost that must be borne by the working population and the psychological cost to the children born to the uneducated and unskilled teen parents as well as to the recipients of welfare aid (Reasoner, National Association of Self-Esteem, 1999). According to Vasconcellos et al., (National Association for Self-Esteem, 2000), “A longitudinal study of all the children born in the UK in 1970, with follow-ups every five years thereafter, found that low self-esteem was a strong indicator of unemployment in adults. Boys with high self-esteem as young children had a reduced likelihood of unemployment as adults.” Studies have also indicated a link between life events and depression, and the intermediary role of self-esteem and other resources prior to undesirable life events occurring (Paykel, 1978; Lakey, 1988; Murrell & Norris, 1984; Roy, Breier, Doran & Pickar, 1985).

As persons in the workforce become increasingly resentful of those they perceive to be in violation of cultural and social norms (hence an injustice to taxpayers), pressure is brought to bear on policymakers to take reformative measures to improve the social ill. Unfortunately, those clamoring for social reform often fail to examine or address the psychological impact of welfare dependency on persons receiving welfare aid. In view of some research findings about the correlation between self-esteem and many social ills and ailments such as stress, anxiety and
depression in women, one can assume that some individuals who perceive welfare dependency as a negative experience may gradually begin to view themselves as failures and persons who are “less than” others in society, thus beginning to experience a decline of their self-esteem. Some individuals who find themselves on welfare may experience difficulty getting into the workforce either because they lack the education and skills needed for employment, or due to a variety of other barriers, some beyond their control. Although employment assistance programs may be helpful to some, there are those who either fail to complete the programs due to personal obstacles or lack of motivation. Either way, the issue of welfare dependency continues and along with it, the psychological impact.

This researcher believes that there is a dire need for research addressing self-esteem as it relates to welfare dependency by women, since women constitute the larger group of welfare recipients. The researcher is assuming that the negative feelings an individual harbors about him or her “self” are manifested in his or her “self-esteem” (i.e. the attitude about the self). In this study the researcher focused on women because of the dominance of this group in terms of welfare dependency and poverty. However, only Black participants were focused on because this group dominated the makeup of the population that attended the Career Quest program.

**Theoretical Base**

The theoretical framework underlying this study comes from a conglomeration of theories relating to self-esteem, notably four separate yet related fields: self theory, social identity theory, social comparison theory, and attribution theory. However, social identity theory and social learning theory will serve as the foundation for the study. The other theories will provide the study with the critical orientation that helps to evoke questions about what makes for high or low self-esteem.

**Self Theory**

Some researchers (e.g. Purkey and Schmidt, 1987, p. 32) define the “self” as “the totality of a complex and dynamic system of learned beliefs that a person holds to be true about his or her personal existence and that gives consistency to his or her personality.” “Philosophers, theologians, psychologists and simple folks alike have struggled to define and elucidate the nature of the self” (Levin, 1992). From an historic perspective, theorists and philosophers such as Rene Descartes, John Locke, David Hume, Immanuel Kant, Friedrich Hegel, Karl Marx, William James, Sigmund Freud, Carl Jung, George Mead, Erik Erikson and Rosenberg are some
of the individuals who have played a key role in helping us gain a better understanding of the “self.” People develop their concept of “self” from their experiences and from interactions in the various social contexts of life, such as their family, the school system, the community at large, and cultural, racial and socioeconomic factors. Consequently, self-esteem, of which self-concept is an aspect, bears relevance in the study of welfare dependency, one of the main social problems in our society.

It is important to note here that the term “self” has eluded a clear definition and conceptualization for centuries, as has the construct of self-esteem. Notwithstanding, there appears to be consensus among many researchers that “the person’s evaluation or esteem of himself plays a key role in determining his behavior” (Gergen, 1971). Mecca, Smelser and Vasconcellos (1989) point out that “one of the important functions of self-theory is to help maintain self-esteem and to organize experience in a manner that enables one to cope with it effectively…..The perspective from which the concept of self is seen obviously influences the ways in which we attempt to deal with social problems.” Epstein (1973, p.107) states that self-theory is “a mechanism that serves to optimize the pleasure/pain balance of the individual over the course of a lifetime” (Mecca, Smelser & Vasconcellos, 1989). Like Epstein, Bandura (1977) also focuses on how feelings about oneself influence the way he or she behaves or acts in social situations.

Mecca, Smelser and Vasconcellos (1989) point out that four sources give rise to the formation of self-esteem: Cooley’s theory of the “looking glass self” (1902) and Mead’s (1934) concept of “role-taking” are highlighted as one of the sources, referred to as reflected appraisal. The premise is that a person’s sense of “self” stems primarily from his or her perception of how he or she is regarded by others. Mead (1934) contends that self-image surfaces in social interaction as a result of a person’s concern about other people’s reaction to him or her.

Festinger’s (1954, pp.117-140) social comparison view is presented as another important source of self-esteem. According to Festinger, we are more likely to engage in social comparison in situations where ambiguity and uncertainty of information and standards exist. This involves individuals comparing themselves to others in the process of trying to assess their own abilities and virtues. He contends that people have an ongoing need to ensure that their beliefs and attitudes are correct. Thus, they try to compare their perceptions of the world around them with those held by others to determine the plausibility of their views.
Another source linked to the formation of self-esteem is self-attribution (see Heider, 1958), which proponents of the attribution theory claim has more to do with how individuals interpret or explain their actions or behaviors than to their actual behaviors. To illustrate, when asked to explain why he or she is unemployed, an individual may claim, “Because no one wants to hire me.”

Social identity, which has to do with a person’s social class or status, race, religion, or group affiliations (i.e. socially recognized belonging), is also cited as being linked to self-esteem (see Gergen, 1971). In this case, it must be noted that low social status does not necessarily lead to low self-esteem. As indicated by Rosenberg (1981), in order for self-esteem to be negatively impacted, the individual must first become aware of his or her lower status in relation to significant others in the environment, such as when children of minority groups find themselves in places of higher learning that are dominated by the majority group. Rosenberg points out that “the impact of any given stimulus depends on its centrality in the individual’s cognitive structure.”

This researcher believes that no one theory holds the key to the understanding of self-esteem, thus the continued controversy. However, some premises seem to be more readily acceptable because they rest on a combination of abstraction and empirical findings. The theoretical base for this proposed study will be elaborated on in Chapter 2.

**Self-Esteem: Background**

The variable of self-esteem is generally considered to be a favorable dynamic personal attribute, while the absence of a healthy sense of self-appreciation appears to be one of the indications of a dysfunctional personality. Thus, there is a critical need to understand the concept of self-esteem and how it is associated with welfare dependency.

Despite the efforts that have been made by researchers over the years to arrive at a consensus on conceptualization, operational definition and methods of measurement, the psychological variable referred to as self-esteem continues to be presented as a phenomenon that is illusive, ambiguous, and poorly defined. In a review of thirty dominant self-esteem instruments (Robinson & Shaver, 1973), there were few consensus findings among the tests to allow for a unilateral definition. Self-esteem, often perceived to be a key factor of people’s self-concept, may be viewed as a person’s global positive or negative feelings toward himself or herself (Rosenberg, 1979). A person’s perception of himself usually has an impact on how he or
she interacts with the environment. Thus, individuals with low self-esteem are likely to view their environment as threatening and experience difficulty interacting with it (Roy, 1976). Persistent low self-esteem has been found to have a harmful effect on individuals, affecting the social, emotional, psychological and behavioral aspects of their lives (Rosenberg & Owens, 1992). On the other hand, persons with high self-esteem tend to interact more actively with their environment, meet environmental demands more successfully, and feel more secure in who they are (Coopersmith, 1967; Zejdlik, 1992).

Self-esteem involves a person’s view about his or her own worth (Battle (1992) and comprises cognitive, affective and social components. This construct is thought to evolve over time as individuals mature, as a result of personal interactions with significant others and life experiences. Therefore, maintenance of self-esteem is dependent on the individual being continuously successful in his or her interactions with the environment (Marini, Rogers, Slate & Vines, 1995). Branden (1980) postulated that once developed, self-esteem becomes fairly stable and resistant to change unless a person experiences a long period of constant failure, lack of productivity, and/or evading decisions. He defines self-esteem as “the disposition to experience oneself as being competent to cope with the basic challenges of life and being worthy of happiness.” Mruk (1999) refers to this as the one sound definition that has “withstood the test of time.”

Coopersmith (1967) defined self-esteem as “the extent to which the person believes himself to be capable, significant, successful, and worthy.” The many and varying definitions of self-esteem presented by researchers suggest that the definitions depend largely on the individual researcher’s discipline or orientation. For purposes of this study, this researcher elected to define self-esteem as the psychological perception that individuals have of themselves based on their experiences in society, which affects their level of self-confidence and self-worth and ultimately impacts on their behaviors and responses to situations. Based on the afore-mentioned about self-esteem in terms of definition and association, one could safely conclude that self-esteem is one of the most critical and at the same time one of the most elusive factors in understanding the personal behaviors that lead to society’s major social problems.

**Statement of the Problem**

There is no shortage of assessment instruments or scholarly work about self-esteem, obviously because this phenomenon has been found to possess saliency, psychological and
otherwise, for individuals. Politicians, educators, mental health professionals and other front-line service providers concur that self-esteem plays a critical role in the development of healthy and responsible individuals who are motivated to take control of their lives and claim ownership for their behaviors. In addition, it has been documented that a strong positive correlation exists between self-esteem and social problems such as crime, mental health issues such as depression, suicide, and welfare dependency. As noted by Mecca, Smelser and Vasconcellos (1989, p. 3), research has consistently indicated that self-esteem is connected to social deviances such as dropping out of school, teenage pregnancy, childbearing behavior, holding a job, substance dependency, and chronic welfare dependency.

Despite the plethora of literature and measures that abound pertaining to self-esteem, research examining the relationship between self-esteem and characteristics of women on welfare is almost non-existent. While there are a few studies available that shed light on the degree of relationship between self-esteem and variables such as race, gender and teenage mothers on welfare, investigative work specifically examining the correlation between self-esteem and demographic characteristics of women on welfare is lacking. A void also exists in terms of studies exploring the link between self-esteem and barriers to employment as perceived by the women receiving welfare aid, and the characteristics likely to determine potential for completion of an employment assistance program.

Women have consistently been found to form the larger percentage of persons on welfare and those classified as “poor.” Many who try to climb out of poverty find themselves faced with multiple barriers to employment, thus remaining stuck in the welfare system. A large number of those women have certain demographic characteristics in common. For example, many were high school drop-outs and teenage mothers; some have had parents and/or grandparents who were on welfare; many face either internal or external barriers to gainful employment, some becoming depressed eventually, or adopting the “learned helplessness” attitude. Given the significance and critical nature of self-esteem, one must wonder how it is impacted by such characteristics. Therefore, this study attempted to address this question with a view toward expanding on available research and creating greater awareness of the need for further research.

**Purpose of the Study**

The primary purpose of this study was to investigate the relationship between self-esteem and demographic characteristics of women receiving welfare aid. The researcher attempted to
achieve three goals. The first goal was to expand on existing literature and research in this field and to stimulate research interest. Another goal concerned the researcher’s effort to draw awareness to the need for more attention to the psychological impact of welfare dependency, especially in reference to women. It is hoped that mental health professionals, educators and others in institutional systems that have some relationship with women on welfare will be motivated to lobby on behalf of this group and help policymakers develop appropriate policies mutually beneficial to persons on welfare and to society in general. The third task of the study was to generate greater interest among students, professionals and other members of the reading audience in the topic at hand, in light of the vast amount of literature and theories that currently exist on the topic of self-esteem.

**Significance of the Study**

As indicated by Bowen, Desimone and McKay (1995), today, many single mothers and their children experience a level of psychological and economic distress that incurs both direct and indirect costs to society. The indirect costs include not only a loss of tax revenues and national income, but also a waste of human resources (Sankofa-Amamhere, 1999). The knowledge likely to be gained from this study has utility for improving society, in that the social problem being addressed (welfare-dependency) and its relationship to self-esteem is linked to people’s psychological well-being or mental health. Mecca, Smelser and Vasconcellos (1989) point to the social significance of self-esteem by stating, “The well-being of society depends on the well-being of its citizenry….. [M]any, if not most of the problems plaguing society have roots in the low self-esteem of many of the people who make up society.” The findings of the study should contribute to the knowledge base for persons in the investigative field interested in self-esteem, issues related to poverty, welfare dependency and its implications for women and society.

Shalala (1993, p. 5) points out that “Aid to Families with Dependent Children is a 22 billion-dollar-a-year system that too often penalizes work, stigmatizes recipients, and many times locks families into a cycle of dependency.” As more households continue to be headed by single females the risk of poverty increases word-wide. This phenomenon prompted the Commission of the European Communities to initiate a drive toward the latter part of the 1970s aimed at investigating the extent of poverty and the composition and characteristics of the member countries’ poor (Kamerman, 1984). In relation to race, researchers (e.g. Organista, Munoz &
Gonzalez, 1994; Warheit, Holzer & Arey, 1975) have found Blacks and Latinos to have the highest depressive symptoms. However, they were careful to note that when the socioeconomic status (SES) was held constant, there were no differences found between Whites and Minorities.

In addressing the issue of urban poverty, Wilson (1987, 1996) posits that, while large-scale economic and structural factors are mainly responsible for the continuation of urban poverty, at the same time there are other contributing factors, notably cultural and psychological processes that determine how people react to the condition of poverty. As noted by Wells and Marwell (1976),

…(S)elf-esteem seems to us to be a vital and broadly relevant conceptual tool for both psychological and sociological perspectives. (H)ow people think of and evaluate themselves, both as a consequence of basic social conditions and as a predisposition for subsequent behaviors, is an essential behavioral construct for interpreting human conduct….Self-esteem seems to be emerging as one of the key “social indicators” in current analysis of social growth and progress (p.250).

Hence, by addressing the issue of self-esteem this study could contribute to the emergence of greater awareness of the role of self-esteem in social behaviors and help serve as a base for the creation of more appropriate and effective strategies for public policy.

In reference to professional significance, the study has several implications for practice. Its findings can help mental health practitioners improve their training and intervention programs and delivery of service. Awareness of the degree of relationship between self-esteem and variables such as perceived barriers to employment, time on welfare, or history of family welfare dependence may encourage more appropriate and greater therapeutic and community intervention. It may also facilitate social workers, psychologists, counselors, educators and persons in the healthcare system in determining the most appropriate network of supportive social work services and resources for attempting to steer teenage welfare mothers on the road to self-sufficiency in different life areas. These professionals may, through intervention and lobbying efforts, influence the policymakers and the rest of society to consider the impact of welfare dependency on the psychology of the recipients, the majority of whom are women. Hopefully, such awareness will play a pivotal role in the legal policies and reformative measures being implemented by politicians for improvement of this problem.
Research Question

The following research question was selected for exploration in this study:
What is the relationship between self-esteem and demographic characteristics of women on welfare?

(a) What is the relationship between self-esteem and the number of years women spend on welfare?
(b) What is the relationship between self-esteem and the age at which women on welfare had their first child?
(c) What is the relationship between self-esteem and the number of children born to women on welfare?
(d) What is the relationship between self-esteem and parent and/or grandparents’ dependency on welfare?
(e) What is the relationship between self-esteem and barriers to employment as perceived by women on welfare?
(f) What is the relationship between completers and non-completers of an employment assistance program (EAP) for women on welfare?

Definitions

The following definitions were utilized for purposes of this study and to facilitate a common understanding of key terms among readers:

Poverty: From a social perspective, this implies social isolation. The poor are persons who are materially deprived because their income level falls below the level required for social participation. In U.S. policy and research, the definition of poverty focuses on absolute rather than material deprivation in the population, thus being a baseline for physical survival (Tomaskovic-Devey, 1988).

Social Class: Broadly speaking, this concept refers to the unequal distribution of social advantages, resources, opportunities, power and esteem across categories of people or families based on where they are in the society’s economic structure (Owens, Stryker and Goodman, 2001).

Welfare Program: A specific provision established by the federal government for meeting the material needs of poor people in the society who meet certain criteria and for certain disadvantaged groups of individuals, such as the disabled.
Welfare Clients, AFDC Recipients, Welfare Recipients, Persons Assisted by Welfare Aid: These terms refer to persons who receive public or social assistance and they were used interchangeably in the study.

Psychological Construct: This refers to a concept, e.g. self-esteem that is based on mental processes and behavior and is capable of influencing a person’s mind and emotions.

Self-Esteem: Researchers are yet to arrive at a common definition for the psychological construct known as self-esteem and many self-esteem investigators continue to struggle with the different methodology present in the psychology of self-esteem, their definitions seeming to depend on their theoretical leanings. To illustrate, Pope, McHale and Craighead (1988, p. 4) describe self-esteem as a type of “measuring up” that a person does in different aspects of life. Hewitt (1998) posits that self-esteem is an emotion that depends heavily on culture. In the absence of a unilateral definition, and based on the various theoretical underpinnings guiding the conceptualization of this variable, this researcher defined self-esteem as the psychological perception that individuals hold of themselves based on their experiences in society which affects their level of self-confidence and self-worth and ultimately impacts on their behaviors and responses to situations. Coopersmith’s (1967) definition should also be borne in mind in reading this study, in view of utilization of the Coopersmith Self-Esteem Inventory, Adult Form (SEI, 1981) in this study to measure participants’ self-esteem. Coopersmith (1967) defines self-esteem as “the extent to which the person believes himself to be capable, significant, successful, and worthy.”

Length of Time on Welfare: This measure was determined by the number of months spent on welfare as indicated by each participant who completed the Career Quest Workshop demographic questionnaire.

Motherhood/Age at Which First Child was Born: This refers to the subject’s age at the time she gave birth to her first child and was determined by the number of years (age) indicated by the participant on the Career Quest Workshop demographic questionnaire.

History of Intergenerational Welfare Dependency: This refers to the subject having had a parent(s) and/or a grandparent(s) on welfare and was determined by the response provided by the participant on the career Quest Workshop demographic questionnaire.

Relevant Assumptions
This study was conducted based on the following assumptions made by the researcher in reference to the participants and to the use of regression as a statistical method of analysis:

1. Every participant in the Career Quest (JOB) Program had the capacity to read, understand and complete the questionnaires issued to them truthfully.
2. The instruments employed to measure the variables in this study were reliable and valid and they were valid indicators of the constructs of interest in the study.
3. Participants could determine with accuracy their internal and external locus of control regarding reasons for their unemployment.
4. For statistical purposes, in this study it was assumed that the residuals were both normally and independently distributed for each combination of the independent variables with a mean of zero and constancy of variance, and that there was no error of measurement in the independent variables.

**Limitations**

1. Participants in this study consisted of a convenience sample. Therefore, generalizability of the results of this study was limited to women on welfare in Tallahassee, Florida, who are similar to participants in reference to demographic characteristics identified.
2. Participants in this study were residents of Tallahassee, Florida. Hence, results of the study may not be generalized to women on welfare residing in other geographic locations.
3. The racial make-up of the sample population was predominantly African American. Research suggests there are more Whites on welfare than Blacks, although Blacks form a disproportionate number of those on welfare. Therefore, the sample was restricted and this impacts on generalizability of results.
4. Participants differed from the general population in terms of socioeconomic status, non-inclusion of males, and racial similarity. Thus, the sample was further restricted due to demographic homogeneity among participants.
5. The use of self-reports as done in this study is more susceptible than other methods of assessment to issues such as distortions, social desirability, attributional errors and the participant’s relative self-awareness (Groth-Marnat, 1997).
6. Criterion validity is an issue, given that self-reports have the potential for some level of false reporting to occur. Some participants may deliberately wish to present a fake-good
or fake-bad image, or may unintentionally provide incorrect information. For example, some individuals may have forgotten certain life events, some may not have kept an accurate record of how long they (or their family) have been on welfare, or even the age at which they first became a parent. Some individuals may also offer inaccurate information if they view questionnaires as an invasion of their privacy. Consequently, uncorroborated data can result in erroneous or inconclusive findings. This limitation is pointed out by some researchers (e.g. Wells & Marwell, 1976).

7. As indicated by Smith and Glass (1987), the goal of correlational studies is to understand the patterns of relationships that exist among variables. Regression was employed in this study to facilitate understanding of the relationship between self-esteem and demographic characteristics of women on welfare. Consequently, the study was limited in terms of causal inference since existence of a correlation does not necessarily suggest causation.

**Summary**

What initially started as a struggle among philosophers and theologians (among others) to define, elucidate and conceptualize the “self” as a construct eventually turned to interest in and the conduct of empirical studies on the phenomenon known as “self-esteem.” Over the years, psychologists and sociologists have developed several measures and have presented a host of theories to explain this phenomenon, their continued interest in self-esteem being peaked by the research findings that continue to show a link between self-esteem and key social problems. One of the main problems affecting the U.S. today is welfare dependency. Although there is a gap in research addressing self-esteem as it relates to welfare clients, the findings of studies of self-esteem in relation to social class, academic achievement, depression, and some other social ills seem to suggest the need for investigation into the possibility of an association between self-esteem and welfare behaviors.

The study utilized data that already existed from information gathered from a sample of women on welfare in the city of Tallahassee, Florida. The data were analyzed to explore the relationship between self-esteem and demographic characteristics of women on welfare. The characteristics of interest to the researcher were: (a) Number of years the participant has been on welfare; (b) Age at which the participant had her first child; (c) Number of children born to the participant while on welfare; (d) Parent and/or grandparent was on welfare; (e) Barriers to employment as perceived by the participant; (f) Completion or non-completion of an
employment assistance program for women on welfare. The ultimate goal of this study is to generate greater interest in the psychological impact of welfare dependency on women, with a view to encouraging professionals and institutions to develop appropriate interventions and policies aimed at amelioration of the problem of welfare dependency.
CHAPTER 2

REVIEW OF THE LITERATURE

The study of the phenomenon referred to as self-esteem has, for decades, generated much interest and debate among theologians, theorists, psychologists and laypeople, and has been gaining tremendous press in the psychological literature in recent years. This variable (self-esteem) also continues to attract its fair share of controversy among professionals such as educators, social workers, mental health personnel and politicians due to its practical implications, elusiveness, and the absence of a universal definition to facilitate conceptualization. Before addressing the issue of unemployment, welfare aid and implications relating to self-esteem, it is necessary to review the contributions of early researchers to the concept of self-esteem.

Self-Esteem: Early Theoretical Contributions

In attempting to understand self-esteem and its process of development, one must first conceptualize the variable called ‘self’ and focus on some of the main theories of self. William James (1890, p. 296), a social scientist and one of the early theorists, adopted the position that people are capable of modifying their self-esteem because they can be active in choosing their goals. He described the self as everything that an individual can claim as his or her own, namely the physical self, psychological traits, feelings, family, significant others, possessions, vocation and avocation. James noted that “……Our self-feeling depends on what we back ourselves to be and to do. It is determined by the ratio of our actualities to our supposed potentialities; ………thus, self-esteem = successes / pretensions.” He points out that self-love can be increased by either increasing the successes or decreasing the pretensions to which we aspire.

Cooley (1902) added the concept of the “looking-glass self,” based on the premise that by seeing ourselves in a mirror we become more conscious of how others see us, and these perceptions affect us. Although his work does not say much about changing or improving self-esteem, he notes that the more people understand themselves and value their abilities, the more likely they are to risk performing in public, with the assumption that their assessment of themselves will be reflected in others’ eyes. Hall and Lindzey (1957) attempted to distinguish between two different meanings of self in modern psychology. One meaning described “self” as
a person’s attitudes, feelings and evaluations. A second meaning defined “self” mostly as a cognitive process – thinking, remembering and perceiving. These seem to tie in with the Johari Window concept presented by Luft (1969) which describes the self as comprising of areas known and not known to the self, as well as aspects known or unknown by others. Luft postulates that the Johari Window represents the whole self and involves our thoughts, feelings and behaviors.

Another early theorist associated with the concept of “self,” Alfred Adler (1979), believed that individuals create their own view of reality through the “creative self.” Adler posited that “early in life the creative self chooses a style of life, a window, through which it interprets events throughout life in order to reach its final goal. …..If one mistakenly chooses goals of domination, overweening dependency, isolation, and so forth, the search for a sense of completion and security will be in vain.”

According to Bednar, Wells and Peterson (1989), the concept of self-esteem is not addressed by Adler. However, given his responsibility for and focus on the term “inferiority complex,” it may be safe to assume that he would view self-esteem as a source of neurosis if it were to be an individual’s self-absorbing goal; thus, the issue of coping versus avoidance. Adler’s view seems to be that all human beings must deal with inferiority feelings that stem from two main sources: immaturity and observation of those we perceive as more competent than us. Hence, perhaps it can be assumed from this view that appropriate self-esteem involves the individual’s acceptance of the right to belong to humanity and a willingness to contribute to the social interest of the group.

Carl Rogers (1951), a psychotherapist inclined toward phenomenology, conceptualized the self as being composed of the real self, the ideal self, and the perceived self. He believed that the more congruent these are, the more well-adjusted is the individual. For Secord and Backman (1964), self is viewed as a person’s attitudes toward self. They believe that social learning (primarily role and identification learning) was responsible for the development of one’s self-concept.

George Herbert Meade (1934), a sociologist, appears to have extended Cooley’s (1902) view of the looking-glass self. Language and society are viewed as critical components in the development of the “self.” Significant others are thought to have significant influence on one’s self-esteem. Mead proffered that social groups and communities could not function in the
absence of a socializing process. One can imply from Mead’s theory that in order to have high self-esteem people must have been held in high esteem by the significant others in their lives. As noted by Mead (1934), “individuals do not become complete ‘selves’ until they can take the attitude of the group they belong to as their own, including the attitude of the group toward themselves.”

If women receiving welfare aid are viewed from this perspective, we can hypothesize that they will, through interaction with a society that views them as “lazy,” and communicates feelings of disvalue and derogation toward them, perceive themselves as such and consequently have low self-esteem. “.....Systematic conditions of disadvantage and degradation lead to low performances in instrumental social roles, lack of positive role models, incomplete and dysfunctional families, subcultures of poverty and learned helplessness, and eventually to low self-esteem” (Wells, 2001).

In summarizing the views of early theorists mentioned above in relation to self, one can say that each theory speaks to the issue of self-esteem even if indirectly. James’ view appears to be that the individual chooses an identity (or self) and matches successes to hopes. To him, self-esteem depends on setting goals and reaching them. To Adler, the individual is a reflection of what appropriate parenting and personal development have prepared him or her to be. Self-esteem is dependent on the person accepting his imperfections and continuing to strive for achievement of goals he has set for himself. Alport (1961) recognizes the part played by our psychological defenses. He believes that the person becomes psychologically healthy by coping with difficulties, not by avoiding them. For Rogers, self-esteem depends on the individual’s courage to become and to stay authentic despite how others may label him or her.

According to Frey and Carlock (1989), low or deficient self-esteem may be viewed as a correlate of the unstable self, and vice versa. They note that possibly a causal relationship exists between the two constructs: People who lack self-esteem are likely to be highly influenced by their environment, while those with high self-esteem are less likely to be influenced by their environment.

It can be concluded from this review of self that the self-theory is a necessary prelude to the understanding of self-esteem as a construct with implications for welfare dependency. A review of the main theories and recent conceptual themes related to self-esteem serves to shed further light on this matter.
**Key Theories of Self-Esteem and Recent Conceptual Themes**

The research that has focused on self-esteem represents a wide range of theoretical orientations (Jackson, 1984), all seemingly rooted in the early theoretical contributions. The psychodynamic, sociocultural, behavioral, humanistic and cognitive approaches to self-esteem all have the potential to show us the different dimensions of this variable, hence their value and utility (Mruk, 1994). There seems to be a general consensus among researchers that self-esteem is important to the development of a normal, well-adjusted individual, hence its social implications. This takes us to a fundamental question: What is self-esteem? Before this question can be answered, it is necessary to note that this phenomenon is elusive. Self-esteem is a concept that is ambiguous in meaning (Hewitt, 1998). We all have a good grasp of what is meant by self-esteem as indicated by our observations of other people’s behaviors (Smelser, 1989, p. 9). However, it is difficult to verbalize our understanding of self-esteem due to the “problem of perspectivity,” suggesting that absolute knowledge on any given topic is not humanly possible and that every theory is incomplete (Mruk, 1994)

**A Conceptual Definition of Self-Esteem**

The elusive and multi-dimensional nature of self-esteem, combined with the differences in theoretical perspectives, makes it difficult for researchers to arrive at one common definition for this construct. For example, Wells and Marwell (1976, p. 62) contend that there are four fundamental ways to define self-esteem. First, it is viewed as an attitudinal approach. Second, it is defined as the relation between different sets of attitudes. Third, self-esteem is defined as the psychological response one holds toward oneself which may be positive or negative, accepting or rejecting. Fourth, self-esteem is viewed as part of the “self” that is concerned with motivation and/or self-regulation. Hewitt (1998, p. 125) argues that self-esteem is an emotion involving bodily responses and sensations triggered by human experiences.

Branden (1994), a noted author and expert on the subject, describes self-esteem as “the experience of being competent to cope with the basic challenges of life and of being worthy of happiness.” He points out that life’s fundamental challenges comprise the ability to earn a living and take independent care of ourselves in the world, and notes that self-esteem is the underlying cause of most individual problems dealing with life in our society. According to Branden, the way we think and feel about ourselves is critical to our mental health. Generally speaking, self-esteem refers to how we as individuals feel about ourselves and/or how we value ourselves.
(Branden, 1992). Purkey (1988) distinguishes between self-concept and self-esteem (both of which are ways in which we think about the self). Self-concept is the “totality of a complex, organized, and dynamic system of learned beliefs, attitudes and opinions that each person holds to be true about his or her personal existence,” while self-esteem generally refers to how we feel about or value ourselves. Self-concept and self-esteem are related in the sense that individuals who possess good self-esteem tend to have a self-concept that is differentiated. When people know themselves, they can maximize outcomes because they know what they can do and what they cannot do (Franken, 1994, p. 439).

Chronologically speaking, William James, one of the renowned American psychologists, may be viewed as one of the “founding fathers” in reference to contributions made to the understanding of self-esteem. James (1890) posited that every individual is born into a set of social roles based on the person’s history, culture, family and circumstances. As time passes, the individual develops one self more than another, and this becomes the center of the person’s self-regard (Mruk, 1999, p. 116-117). James also points to the connection between self-esteem, values, success and competence. Although James’ work in relation to this construct seems to be based primarily on introspection, it is worth noting that his view is utilized in therapeutic methods for enhancing self-esteem. From James’ perspective, self-esteem is a phenomenon that is fairly constant yet open to change. This change can be brought about either by what the individual values or the frequency of success at satisfying aspirations (Mruk, 1999, p. 117).

The key theories undergirding the concept of self-esteem encompass primarily humanistic, psychodynamic, and what may be viewed by some researchers as “synthetic” perspectives. To illustrate, Maslow (1950, 1971) conceives of self-esteem as an aspect of the process of self-actualization. Maslow (1954) postulates that as human beings, we have basic biological and social needs that guide our actions. Another humanistic clinician, Branden (1969, p. 110), posits that self-esteem is “the integrated sum of confidence and self-respect. It is the conviction that one is competent to live and worthy of living.” Like Maslow, Branden views self-esteem as a basic human need which affects all our behaviors.

White (1963, p. 134), a follower of the psychodynamic school of thought, describes self-esteem as a phenomenon resulting from an intricate developmental framework “characterized by primitive impulses that are modified into the higher functions of the self over time.” White’s view of the psychodynamic proponents is that “they presuppose that ego ideal and superego are
at least partly separate institutions of the mind. The ego ideal becomes the repository of the original narcissistic omnipotence, and the ego enjoys self-esteem to the extent that it matches its ideal in actuality” (p. 128). The writings of Sigmund Freud (1900) should also be considered one of the milestones in the development of theories of self-esteem/self-concept in that he gave researchers a new understanding of the importance of internal mental processes. Although self-esteem/self-concept was not a prominent psychological unit in Freud and his key followers’ theories, Freud’s daughter, Anna (1946) highlighted the importance of ego development and self-interpretation.

Rosenberg (1965, p. 65), characterized self-esteem as an attitude of approval/disapproval that entails cognitive as well as affective components. In his study of adolescent self-esteem, Rosenberg (1979) claims that there are three classes of selves: 1) The extant self – how an individual privately perceives himself; 2) The desired self – how the individual would like to be; and 3) The presenting self – the self that the individual allows others to see. Rosenberg believes that this classification is very similar to that hypothesized by Higgins (1983) and Higgins, Klein and Strauman (1985). Higgins and his associates posit that there is the “actual” self and the “ought” self. “Any discrepancy between these categories results in discomfort and leads to a pervasive sense of negative self-esteem.”

Self-esteem is connected to the feedback we receive from society; thus, it has a social development theme and a socio-cultural base. Coopersmith (1967, pp. 4-5), in presenting a behavioral approach to self-esteem, described it as “……a personal judgment of worthiness that is expressed in the attitudes the individual holds toward himself. It is a subjective experience which the individual conveys to others by verbal reports and other expressive behavior.” Bednar and Carlock (1989, p. 117) believe that a person’s “feelings of personal worth are highly responsive to authentic, consistent feedback from either the social environment or self-evaluation. Favorable internal feedback is more potent, with longer-lasting benefits than is social approval.”

Mruk (1994, p. 135) presents a phenomenological theory of self-esteem based on the premise that this phenomenon (self-esteem) is created by the interaction of competence and worthiness and may be qualitative or quantitative. Mruk believes that continuous experiences of high competence and worthiness tend to result in high esteem as a developmental role. Mruk’s view is that when people have a strong sense of ability and positive worth, this protects them
from the trials of life. They are better prepared to face life’s challenges and can stand up for themselves. This view seems to be supported by some studies that have examined the role of self-esteem in buffering other stressors (such as unemployment and receiving welfare aid), (e.g. Fernandez et al., 1998; Rector and Roger, 1997). However, as noted by Fisher and Shaw (1999), results have been mixed (e.g. Kliewer & Sandler, 1992; Lakey, 1988; Rosario et al, 1996).

**Major Theories of Self-Esteem Relevant to This Study**

Researchers (e.g. Mruk, 1999) indicate that a good theory (of self-esteem) is one that includes a focus on the construct being reviewed, maintains a high degree of consistency with a major theoretical perspective in the social sciences, is systematic in movement from abstract to concrete offering recommendations for improvement, and is either persistent or significant over time. For purposes of this study, the researcher is interested in five (5) main social science perspectives as they relate to self-esteem and welfare dependency.

**The Psychodynamic View**

From White’s (1963) perspective, self-esteem has its foundation in efficacy. Thus, it is viewed as a developmental construct that spans the life cycle from infancy to adulthood. He argues that self-esteem is linked to competence and the individual’s ability to cope effectively with anxiety and reality (i.e. ego strength), because the relationship between anxiety and competence is reciprocal. Connecting self-esteem to competence allows White (1963, p. 140) to address the clinical significance of this psychological construct in reference to the development of psychopathology and treatment, thus the importance of his contribution. This theoretical perspective seems to converge on Bandura’s (1997) view of self-efficacy. It will pave the way in this study for a better understanding of the dynamics at work regarding women on welfare.

One could surmise that many of the women receiving public assistance (welfare aid) view themselves as lacking the skills and competence (i.e. mastery) required to obtain gainful employment. Some may not have had good role models to imitate, while others may have been used to receiving negative feedback from their environment. These experiences could have led to an intertwined mass of pathology, thereby contributing to low self-efficacy. For these women, notably those who are single parents, welfare is a means of survival (hence their reality), which brings on some anxiety and mental health issues for those who would rather be part of the workforce.
The Sociological View

Morris Rosenberg (1965) has been credited with being one of the leading experts on the topic of self-esteem. His theory (much like the Cooley-Mead view that the self is a social phenomenon) is based on the assumption that the self is a social entity, and that values developed about the self stem from an inter-play among certain social factors such as culture, society and family. Rosenberg’s framework presents self-esteem as a “function of the social environment” (Mruk, 1999, p. 123) and attempts to show how self-esteem impacts on attitudes and behaviors deemed to be of social significance. Rosenberg (1965, p. 30) describes self-esteem as “a positive or negative attitude toward a particular object, namely, the self.” He points out that people’s attitudes about their worthiness as individuals make them prone to experiences and related behaviors that may be either positive or negative. His view is that self-esteem is the outcome of comparison that includes discrepancies and certain core values. Rosenberg notes:

High self-esteem……expresses the feeling that one is “good enough. The individual simply feels that he is a person of worth; he respects himself for what he is, but does not stand in awe of him. He does not necessarily consider himself superior to others.
……Low self-esteem, on the other hand, implies self-rejection, self dissatisfaction, self-contempt. The individual lacks the respect for the self he observes. The picture is disagreeable, and he wishes it were otherwise. (1965, p.31).

According to Rosenberg’s theory, “the smaller the gap between the so-called ideal self and the current, actual, or real self, the higher the self-esteem.” On the other hand, the greater the gap the lower the self-esteem, even if other people have a positive view of that individual (Mruk, 1999, p.123). His theoretical approach focuses on social forces and subcultural influences that impact self-esteem, for instance religion and social class. One can infer from Rosenberg’s social perspective that some of the women on welfare who have a low self-esteem may be lacking respect for the “self” they observe and feel dissatisfied with their social status. An improvement in their social conditions through gainful employment may result in enhancement of their self-esteem. At the same time, if we consider that there are “consonant contexts” (situations in which significant others are very similar in or indifferent to social class) and “dissonant contexts” (situations where persons of low status have to interact with those of a higher status), then we can assume that the correlation between self-esteem and one’s social class is dependent on the social context in which the individual evaluates himself (see Wells, 2001).
For individuals who view work as a basis for their personal identity, occupational achievement will play a vital role in self-evaluation and self-esteem. For those who attach greater importance to and have a high personal investment in their family accomplishments and communal activities, and who perceive work as simply a means for paying bills, their employment status is likely to be irrelevant to self-evaluation and self-esteem (Wells, 2001).

If we approach Rosenberg’s (1965) theory from a racial perspective, there is research that disconfirms the initial conclusion (see Lewin, 1948; Clark, 1965; Erikson, 1966; Kardiner & Ovesy, 1962; Grier & Cobbs, 1968) that racial inequality and prejudice (which contribute to discrimination and thus unemployment and dependency on welfare) result in Blacks having low self-esteem due to self-rejection and devaluation. Studies done by many researchers (e.g. Banks, 1972; Porter & Washington, 1979; Wylie, 1979; Rosenberg & Simmons, 1972) revealed lack of evidence of clear self-esteem deficit in racial minorities, despite their economic situation. Some researchers found that Blacks have a higher level of self-esteem than Whites.

In a survey of children in Baltimore schools in 1968 conducted by Rosenberg and Simmons (1972), they found that black children were just as satisfied with their looks as white children. Although they were, on average, of a lower socio-economic status than white children they were equally likely to believe their families “have done well and are socially respected.” Rosenberg and Simmons (1972) explained this finding (which contradicts earlier conclusions) by pointing to “contextual buffering” and “perceptual selectivity” as the psychological processes responsible for this (Wells, 2001). It can be inferred from this observation that black welfare recipients may not necessarily have low self-esteem because they are on public assistance. Their level of self-esteem may be dependent on the significance they attach to a job, how their significant others and their immediate community view them, and selective interpretation of environmental issues such as stereotyping.

Rosenberg’s (1965) social theory of self-esteem bears some relevance to the attribution theory initiated by Fritz Heider (1958). This theory examines how people “attribute” causes to events in their environment, and how this cognitive view impacts their level of motivation. Basically, “attribution theory is the study of how individuals explain events in their lives” (Bruning, Schraw, & Ronning, 1999, p. 137). According to this theory, people may attribute causes to events from a locus of control that may be either internal or external. External locus of control refers to the extent to which causality is due to factors outside the individual, e.g. bias,
racism, and luck. Internal locus of control assigns causation to factors within the individual, such as personal ability, intelligence, and motivation. Based on this theory, it can be assumed that women on welfare will present both internal and external locus of control when identifying barriers to employment. The type of attribution presented may or may not impact on the individual’s self-esteem.

The Behavioral View

Stanley Coopersmith (1967) has become well-known in the research arena as one of the pioneers in the study of self-esteem. His theoretical perspective on self-esteem appears to have developed over an eight-year span, during which time he conducted empirical research on the issue of self-esteem, basing his work on learning principles instead of broad social influences. Coopersmith views self-esteem as a construct with behavioral underpinnings that include nurturance, respectful treatment, and defined limits provided to children very early in childhood. This view suggests that reinforcement of experiences through early conditioning plays a role in the development of an individual’s self-esteem, hence the behavioral slant and his focus on learning principles. Like Rosenberg (1965), Coopersmith perceives self-esteem as an attitude and an expression of worthiness, defining it as “a personal judgment of worthiness that is expressed in the attitudes the individual holds toward himself. It is a subjective experience which the individual conveys to others by verbal reports and other overt expressive behavior” (1967, p. 4-5).

Coopersmith (1967, p. 248) suggests that individuals with a low self-esteem are likely to focus more on making excuses for obstacles to their success versus attempting to find a solution since such people are more susceptible to stress. Consequently, these individuals are prone to experience anxiety and feelings of helplessness and inadequacy. The empirical base of Coopersmith’s investigation of self-esteem, which included the use of multiple research methods, namely observation, surveys, case studies and interviews, has resulted in his work on this variable being viewed as very credible by professionals and researchers alike. Limitations aside, notably his primary focus having been children and adolescents, the absence of focus on the role of personal responsibility for one’s patterns of behavior, and the impact of choice and internal locus of control, his findings have withstood the test of time. The Coopersmith Self-Esteem Inventory (1975) continues to be among the most widely used instruments for measurement of self-esteem in individuals.
The behavioral view presented by Coopersmith (1967) has utility in this study because it facilitates us in understanding why some of the women on welfare project an internal locus of control and others, an external locus of control, in reference to unemployment. We are also assisted in our attempt to understand what psychological phenomenon and behavioral patterns may have contributed to some women completing an Employee Assistance Program (EAP), while others failed to complete the program.

The Humanistic View

The humanistic perspective on self-esteem began to take shape in the late sixties, due largely to the efforts of Nathaniel Branden (1969). In his book *The Psychology of Self-Esteem*, Branden describes self-esteem as a basic human need revolving around feelings of competence and worthiness that drives individuals to exhibit either appropriate or inappropriate behaviors, depending on their perception of their level of competence or worthiness. In some ways, this view of self-esteem appears to relate to Abraham Maslow’s (1954) Hierarchy of Needs. Maslow (1954) assumed that human beings have certain basic biological and social needs that drive or motivate their behaviors. Maslow theorized that these needs were hierarchical, and hence formed a pyramid. The hierarchy of human needs was presented as follows (from bottom to top):

* self-actualization
* self-esteem
* love and belonging
* safety and security
* the basic physiological needs (e.g. food and shelter)

Maslow posited that some people are likely to live their entire lives trying to satisfy only one set of needs, because we must first have our lower level needs satisfied before we are motivated to attempt to satisfy the next upper level ((Rubin & McNeil, 1981). Maslow’s theory of human needs will help this study in terms of an explanation for the large number of single, female parents on welfare, some of whom perceive themselves as having little or no chance of improving their situation.

Branden (1969, p. 110) states, “Man experiences his desire for self-esteem as an urgent imperative, as a basic need. Whether he identifies the issue explicitly or not, he cannot escape the feeling that the estimate of himself is of life-and death importance. No one can be indifferent to the question of how he judges himself; his nature does not allow man this option.” This
involves the use of personal choice, acceptance of responsibility or ownership for personal behaviors and reason based on human values. Branden (1969, p. 110) states:

“So intensely does a man feel the need of a positive view of himself, that he may evade, repress, distort his judgment, disintegrate his mind—in order to avoid coming face-to-face with facts that would affect his self-appraisal adversely.….If and to the extent that men lack self-esteem, they feel driven to fake it, to create the illusion of self-esteem—condemning themselves to psychological fraud—moved by the desperate sense that to face the universe without self-esteem is to stand naked; disarmed, delivered to destruction.”

In Branden’s view, self-esteem rests on four main pillars, namely awareness, personal integrity, ownership for decisions made or action taken, and self-acceptance (1969, p. 19). The humanistic perspective distinguishes between “Real” self-esteem and “Pseudo” self-esteem in attempting to demonstrate that there is a correlation between an individual’s lifestyle and the dynamic nature of self-esteem. From his perspective, self-esteem is a vital aspect of human existence that requires appropriate management throughout the lifespan. Branden points out that Real self-esteem is synonymous with authentic living, the end result being a healthy lifestyle encompassing happiness, joy, pleasure and self-acceptance. On the other hand, Pseudo self-esteem stems from the individual’s avoidance of reality and a tendency toward inauthentic living, the end result being the potential for the development of neurotic behaviors, self-destructive behaviors and existential issues such as alcohol or drug dependency, neglect of personal health, suicide, and staying in unhealthy or abusive relationships (Mruk, 1999, p. 129).

Branden’s humanistic view presents self-esteem as an existential matter, and consequently, a psychological issue central to man’s daily living (Mruk, 1999). If we apply this theory to the social issue of welfare dependency, we can begin to understand more fully what psychological force may be responsible for some welfare recipients presenting an internal locus of control as opposed to others having an external locus of control. Also, it becomes easier to understand why some long-term welfare recipients may continue to exhibit high self-esteem while some others may show signs of low self-esteem. Both Branden’s and Maslow’s approaches suggest that changes in the women’s lifestyle, attitudes, aspirations and self-esteem must be implemented in an attempt to prevent a recurrence of the ways of life that created obstacles to the women being gainfully employed.
The Cognitive Experiential View

Epstein (1985), a noted researcher and proponent of the cognitive view of self-esteem, theorized that people organize the information and experiences they gather about themselves, others, and their environment into “personal theories of reality.” One of the main assumptions of this theory is that people’s brains tend to take information and make connections between events, then organize the connections into integrated yet different systems consisting of higher and lower order constructs. This in turn leads to our “personal theories of reality” and generalizations which we use as cognitive maps to make sense of our world (Epstein, 1980, p. 102). Epstein notes that the personal theories of reality we form facilitate our personal growth and survival as individuals, help us to interact with others, to strike a balance between pleasure and pain in the future, and also assist us in maintaining a favorable degree of self-esteem (1985, p. 286).

Epstein (1985, p. 302) describes self-esteem as a basic human need that human beings have to be considered “love-worthy.” In citing self-esteem as a motivational yet paradoxical force that pushes us to change, Epstein notes:

…..[S]elf-esteem has profound effects on behavior and emotions. Accordingly, the regulation of self-esteem is of critical importance to the individual. However, a person’s reaction to events that have the potential to influence self-esteem is determined not only by the person’s need for enhancement but also by the person’s need to maintain the stability of his or her conceptual system. That is, the combined effects of both variables must be taken into account (Epstein, 1985, p. 303).

The cognitive theory of self-esteem suggests that this construct is much like a pyramid, with three interacting levels: There is basic self-esteem, the part that is most stable and influential upon becoming solid from a developmental perspective. Then there is a middle level, which may be viewed as the amount of self-esteem an individual possesses in certain experiential areas such as competence, skill at performing an activity, degree of self-control, personal power, likeability, appearance, and bodily functioning (see O’Brien & Epstein, 1983, 1988). According to Epstein’s view, self-esteem possesses much variety because, despite the fact that every human being is interested in all of the areas noted, there is variation in the amount of concern shown by each individual toward any of these areas. The third level of self-esteem as suggested by Epstein is the situational (situation-specific) and thus the most visible. The assumption is that this level has very little effect on the other two levels, except in rare circumstances. Levels one and two of
the self-esteem hierarchy are thought to influence the third level to facilitate a quick return to normalcy (Mr.uk, 1999).

Epstein’s theory of self-esteem gives us a way to understand global versus situational self-esteem, makes a comprehensive attempt to discuss the construct from the cognitive perspective, and has practical implications, notably in reference to identifying ways for measuring self-esteem (Mr.uk, 1999, p. 133). Is should facilitate us in understanding why women who receive public assistance vary in the levels of self-esteem exhibited. Based on the cognitive theory, it may be hypothesized that some women on welfare will have very high self-esteem because their basic (foundational) and middle levels of self-esteem have been well-developed and are very solid, thus allowing them to cope more successfully with their situation. Some researchers, however, (e.g. Aanstoos, 1984; Costall & Still, 1987; Dreyfus & Dreyfus, 1986) contend that Epstein’s theory has two major limitations: First, it seems to have more to do with personality development than with self-esteem; second, this approach is, overall, mechanical.

Despite the definitional variations stemming from theoretical leanings and the diversity of theories in terms of content and perspective, it is obvious that there are some basic components common to all definitions of self-esteem, namely competence, worthiness, cognition, affect, and stability (Mr.uk, 1994). In keeping with the varying views, many studies have been conducted to examine whether, and to what degree an individual’s self-esteem is affected by race, ethnicity, gender, socioeconomic status (that includes being on welfare), or the dominant culture which obtains at the educational institution the individual attends. Self-esteem, a construct that is popular both in common language and in psychology, has been studied extensively by some researchers for the purpose of determining its relationship to other psychological domains including personality, behavior, cognition, and also to clinical concepts.

One of the most well-documented studies involving self-esteem was that conducted by Rosenberg and Pearlin (1978), in which they investigated the relationship between self-esteem and social class among children and adults. These researchers used a sample of school children to document that the link between family social class and the child’s global self-esteem is stronger among older children than among children of a younger age. Their findings suggest that social class holds more saliency for adolescents than for young children because as children get older social comparisons and status orders become more relevant as bases of evaluation (Wells, 2001). A further study by the researchers using thousands of urban adults resulted in an even
stronger correlation being found between self-esteem and social class, notably for the income aspect of that variable.

In the research undertaken by Rosenberg and Pearlin (1978), they found that: 1) the personal meaning and evaluative saliency of social class is not the same for everyone; it varies for individuals depending on what stage of life they are in; 2) The relevance of one’s position regarding social class is greatly dependent on the similarity of group members of the settings in which the person has to evaluate himself against others; and 3) social class position does have some direct influence on the events by which individuals judge and evaluate themselves (Wells, 2001).

Many researchers have since replicated and extended the analysis done by Rosenberg and Pearlin (1978). For example, Demo and Savin-Williams (1983) replicated the finding of a stronger association between social class and self-esteem in adolescent than in pre-adolescent children, utilizing various self-esteem scales, all being global measures of general self-esteem. One common agreement they arrived at was that the different correlations showed a greater personal awareness of social class among children who are older, and more saliency of social comparisons of social status for the adolescents. Rosenberg and Pearlin’s study was replicated by Wiltfang and Scarbecz (1990), utilizing some non-traditional measures of social class (including unemployment and family welfare status, and social class of the neighborhood). These researchers found that traditional parental occupation and education had little effect on the adolescent’s self-esteem. Unemployment and welfare status were also found to have moderate effect. The study revealed that the neighborhood unemployment rate (i.e. social class of the neighborhood) had a stronger effect on adolescent self-esteem (Wells, 2001).

**Self-Esteem and Social Problems**

Literature indicates that many empirical studies have documented a correlation between self-esteem and negative behavior. For example, in a research review by Gurney (1987), a close link was found to exist between low self-esteem and social issues such as drug and alcohol abuse, juvenile delinquency, violent crime, teen pregnancy, and chronic welfare dependency. Keegan (1987) also reported that low self-esteem may cause or play a role in the onset and development of psychological issues such as anxiety, defensiveness, drug and alcohol abuse, depression, interpersonal problems, and low academic success. A longitudinal study of all children born in the United Kingdom in 1970, with follow-ups at five-year intervals, found that
low self-esteem was a strong indicator of unemployment among adults. The research found that boys with high self-esteem as young children were less likely to be unemployed as adults. In an article written by Senator John Vasconcellos et al (2000), it is pointed out that an FBI profiler found that most of the dangerous criminals he has studied tend to blame others for their shortcomings in an attempt to reduce their feelings of low self-esteem. The profiler concluded that any violent act engaged in by these individuals is an attempt to compensate for “a deep-seated feeling of inadequacy.” Some studies have also found a correlation between low self-esteem and depression, suicide, teenage pregnancy, school dropouts, eating disorders, and unemployment. At the same time, some studies have either been inconclusive or have found a low correlation between self-esteem and some social problems.

Regardless of the inconsistencies in research findings, it seems apparent from the findings, in general, that self-esteem is a fundamental aspect of our being, with implications for our daily existence. It is also obvious from the various theories presented that self-esteem can be approached from different perspectives. It is important to keep in mind that the variable known as self-esteem has multiply dimensions, namely cognitive, affective, and behavioral aspects, a fact that elucidates the reason for difficulty in arriving at a unilateral definition. Self-esteem is cognitive because the individual consciously thinks about himself as he thinks about the dissonance between his ideal self, the person he desires to be, and how he perceives himself. The feelings and emotions the individual experiences when thinking about the discrepancy constitute the affective aspect of self-esteem. The behavioral element is revealed in characteristics such as decisiveness, resilience, assertiveness and respect for others. Also, despite its overall stability, self-esteem can fluctuate, thus the phenomenon known as global versus situational self-esteem. This quality contributes to some of the difficulty related to measuring and researching self-esteem (Vasconcellos et al, 2000).

**Social and Political Implications of Self-Esteem**

There is justification for continued interest in self-esteem and further exploration of this construct when we consider that this human phenomenon not only confers benefits to individuals and groups (hence personal implications), but also has both social and political implications. As noted earlier, several scholars have indicated that self-esteem is at the root of society’s problems. According to Branden ((1994), “….How people experience themselves impacts upon every moment of their existence. Their self-evaluation is the basic context in which they act and
react, choose their values, set their goals, meet the challenges of life…. The more solid a client’s self-esteem, the better equipped he or she is to cope with adversity in their personal lives or their careers. The higher a client’s self-esteem, the more ambitious he or she will tend to be, not necessarily in a career or financial sense, but in terms of what he or she hopes to experience in life—emotionally, intellectually, creatively, spiritually. The lower the client’s self-esteem, the less he or she aspires to; moreover, he or she is less likely to achieve set goals.” So much for personal implications.

Much of the psychological literature describes self-esteem in terms of mental processes and social interactions. Thus, self-esteem has social implications. The social benefits of self-esteem include neighborhood stability, stronger communities, and good citizenry. Literature (e.g. Branden, 1994; Crocker, in press; Hochstein, 1992; Smelser, 1989; Sniechowski, 1994;), indicates that the higher an individual’s self-esteem the more likely he or she is to feel secure within himself or herself, accept self-responsibility, and participate in political activities. Branden (1994) points out that “self-esteem empowers, energizes, and motivates.” As observed by Sniechowski (1994), “…Healthy self-esteem can be a powerful and compelling antidote to the inclination toward herd-think.”

From a political perspective, every woman’s level of self-esteem influences her ability to take positive action in the world to improve life for herself and others (see Hochstein, 1992). For example, the individual with a high self-esteem is more likely to believe in her right to a better way of life, to protest against injustice, and “to demand and work for change” (Hochstein, 1992). The lower the individual’s self-esteem the less likely she is to agitate for positive change; she may not believe that she deserves better. Let us not forget that we live in a society (U.S.) that is dominated by white males. They make the policies and establish guidelines that determine how society’s institutions function, and impact on women’s quality of life in one way or another. If women are not strong enough to recognize and challenge injustices, then there will be little hope for a reduction of social ills.

Currently, the trend is to implement programs aimed at getting people off welfare, the goal being to eventually get rid of the welfare system. These decisions are being made by politicians, many of whom either do not buy into the view that welfare dependency impacts on AFDC recipients psychologically, or do not attach much importance to the notion of self-esteem. Instead, their decisions are based on the negative stereotypes they hold of those on welfare. In
addition, there is the ongoing controversy between politicians and even between some educators and researchers about the meaning and significance of self-esteem in an individual’s life. While some clamor for greater efforts at boosting people’s self-esteem, others view such protests as “much ado about nothing.” Despite the continuing disagreements about the role of self-esteem in people’s lives, research overwhelmingly suggests that self-esteem is a valid construct worthy of attention. As such, policy makers and educators will need to bear this in mind when enacting policies, devising interventions, and spending public funds, especially in reference to persons receiving welfare aid. Hopefully, as more research is conducted and self-esteem and its social implications become more clearly understood, policies and interventions will become more aggressive and more appropriate to the needs of the masses, especially the economically disadvantaged in our society.

At this point, the rest of this segment of the study will focus on literature pertaining to Welfare aid and the demographic characteristics of women on welfare.

**An Historical Overview of Welfare Aid in the U.S.**

In order to fully appreciate the importance of researching the link between self-esteem and the demographic characteristics of women on welfare, it is first necessary to gain an understanding of the origin of the welfare system as we know it today. Such an understanding should lead further to an insight into the forces and issues that help shape decisions, goals and priorities of the welfare-dependent persons and the possible impact on their psychological well-being. This takes us first to poverty, the underlying reason for the need for social welfare aid.

**What is Poverty?**

Throughout the history of man, poverty has continued to be a social problem affecting those who fall in the “poor” category both physically and socially. As Tomaskovic-Devey (1988, p. 5) stated, “Physical survival requires a quantifiable number of calories and protection from environmental threats such as the weather. Social survival…..requires the ability to participate as a member in the society.” Research undertaken by the British sociologist Peter Townsend (1979) suggests that poverty experience is defined, not by the absolute levels of material deprivation, but rather by the social isolation that stems from low income. This notion is supported by Fuchs (1967) and Tomaskovic-Devey (1988). What, then, are the root causes and consequences of poverty?
Academic literature advances three major theoretical orientations regarding the underlying causes of poverty. One theory (an individual level explanation) posits that people are poor because of a personal or cultural defect. Consequently, minority groups, particularly Blacks, Puerto Ricans and the poor (in general) have been described as engaging in a culture of poverty (Glazer and Moynihan, 1970; Lewis, 1968; Banfield, 1970). Those who subscribe to this view believe that people are poor due to their maladaptive values and behaviors. Poverty is all they have ever known, so it becomes self-perpetuating.

Another approach proffers that poverty stems from people having some personal characteristics such as low education, inadequate intelligence, low motivation, or allegiance to the family rather than the workplace, which ultimately results in their being less competitive in the job market. This view is implied (Tomaskovic-Devey, 1988), despite not having been investigated. This perspective may also be considered an individual level approach to poverty.

A third view of poverty (best described as a structural view), postulates that people are poor because they have limited economic opportunity, due either to segmentation of the present job market based on gender and race or due to the proportion of overall opportunity in the area where they live (see Wachtel, 1972; Gordon, 1972; Edwards, Reich, & Gordon, 1975; Gordon, Edwards and Reich, 1980).

Race and gender have been identified as the two best predictors of official poverty status in America. As noted by Tomaskovic-Devey (1988), the probability of being poor is greatly increased if an individual is female and Black. Research suggests that discrimination in hiring, and structural barriers to involvement in the labor force tend to account for part of the higher rates of Black and female poverty. Also, “there is a greater likelihood of Blacks living in low opportunity, high poverty localities (the South and urban ghettos) and the degree of racial discrimination in a locality bears relationship to the size of the Black population” (Blalock, 1967; Szymanski, 1976; Lieberson, 1980; Reich, 1981). Van Haitsma (1989) states the following in reference to the poor, whom she refers to as the underclass:

“Poverty accompanied by weak labor force attachment, as opposed to the poverty of the working poor, is likely to be accompanied by high rates of crime, teen pregnancy and out-of-wedlock childbirth, welfare dependency, and single parent households—social dislocations writers tend to associate with the underclass. Spatial concentration of poverty, welfare receipt and intergenerational transmission of culture or structural position all contribute to the social context in which poverty may occur. When this context reinforces
weak labor force attachment, an underclass can be said to exist” (pp.27-28).

In reference to gender, research indicates that the amount of job market discrimination against females is quite high. Sex-segregation of jobs has been shown to be the main mechanism of labor market sex discrimination (Treiman and Hartmann, 1981). In a study conducted by Bielby and Baron (1986), sex discrimination was found to be as high as 96 percent. Nearly all women work in “female” jobs that are generally low wage, a factor that makes it difficult for single women to earn a wage that is above the poverty level. According to INCITE (March, 2001), “for every $1.00 the average man earned in 1997, white women earned 75 cents; black women earned 67 cents; Latina women 53.9 cents; and Asian Pacific American women earned 80 cents.” Research shows that single women with children face even greater hurdles. Married women are less likely to be poor because they are supported (usually) by the higher wages of their spouses (Tomaskovic-Devey, 1988).

Female-headed households continue to experience a high though steady rate of poverty. In 1960, less than 10 percent of all families in the U.S. with children were headed by a single woman. Within thirty years the percentage had increased to about one in four women with dependent children. Although all racial groups were affected by this trend, it was more dramatic among Blacks (see Rodgers, 1996). Statistics reveal that three out of every 100 adolescents are already unmarried mothers, or will fall into this category before leaving their teen years. For one of three of these teenage mothers, the only feasible option is to depend on public assistance to meet basic needs, which means becoming a welfare mother. This teen parent is the most likely of the three to be poor and to have limited education, and thus the most ill-equipped of the three to get off welfare and become self-sufficient (Danziger, 1986).

The teenage mothers are at greater risk of long-term welfare dependency because of their limited earning abilities stemming from lack of education, limited job skills and work experience, and the high cost of child care (Hofferth, 1987; Moore et al, 1979). The children born to such families are in turn at risk of being poor because “….Growing up in a household that receives public assistance does increase the likelihood of welfare receipt….. This is the result of the impact of economic background” (Albelda & Tilly, 1997). Add to this the high rate of divorce and it becomes increasingly clear why there continues to be an increase in the number of poor children in the U.S. As a larger percentage of American Families continue to be headed by single women, we can expect poverty among children to worsen (Rodgers, 1996).
According to Nicolas and JeanBaptiste (2001), approximately 20 percent of the American population was poor in 1964. The poverty level dropped from 13.3 percent to 12.7 percent (U.S. poverty data, 1999), but that still means that as at 2000, roughly thirty-two million people continue to live in poverty in the United States; 16 percent of that number were persons under age eighteen, and the statistics indicate that about 28 percent of female-headed household families fell below the poverty line (U.S. Census Bureau, 2000). The Children’s Defense Fund (2000) reports that about 12.1 million children (17 percent) under age 18 years are poor from the federal standpoint. Statistics also show that, next to children, non-White minorities, the elderly, and single-mothers are the most vulnerable to poverty (AARP, 1996). The U.S. Census Bureau (2000b) indicates that in 1999, the poverty rate for Black Americans was 23.6 percent, and for Hispanic Americans, 22.8 percent. Among American Indians and Alaskan natives, the poverty rate was 25.9 percent. The National Council of American Indians (1999) reports that American Indians have an unemployment rate of 46 percent, compared with 4 percent for the U.S. population. Also, research indicates that there are about 700,000 homeless persons in temporary public shelters around the U.S. each night, of which approximately 40 percent are families (mostly mothers) with children (Kilborn, 1999). These figures suggest that poverty has always been (and continues to be) a major social problem.

**The Origins and Myths of Welfare**

It was precisely for purposes of fighting poverty that President Lyndon B. Johnson enacted the Economic Opportunity Act (EOA) in 1964. Lyndon’s action led to the implementation of several antipoverty programs that included cash assistance and in-kind assistance, with each type comprising many components. Perhaps it is worth noting that the welfare system that exists in the U.S. today came into existence partially to meet the needs of the poor, and partly in response to the great depression and the political agitation of the poor for income security (Patterson, 1981; Piven and Cloward, 1971). Prior to 1935 (when the first federally sponsored effort in the U.S. to reduce poverty was implemented), there was no federal level provision for meeting the needs of the poor. The programs available were mostly local and charitable. Aid to unwed and abandoned mothers was discouraged because the operating theory at that time was that the poor, not the system, needed to be reformed (Tomaskovic-Devey, 1988).

Following enactment of the Economic Opportunity Act (EOA), three basic welfare programs were put in place by the federal government: (1) Social Security for the elderly and
the disabled; (2) Unemployment Insurance; (3) Aid to Families with Dependent Children (AFDC). In general, these three programs operated on the assumption about the importance of work ethic and family form. Thus, initially, poor families who were childless or with fathers present in the home were not allowed to participate.

There were many stereotypes regarding welfare recipients that surfaced with the creation of social welfare programs, and these persist today and continue to be propagated by critics of the welfare state. For instance, persons on welfare are perceived as “lazy” able-bodied individuals content to freeloard on government programs while others work hard to earn a living. There is also the myth that cash welfare benefits provide an adequate income for the welfare-dependent population and consequently give them little incentive to work. Some critics believe that the welfare system has contributed to an overwhelming increase in out-of-wedlock parenthood and promotes teen childbearing. There are those who espouse that welfare is a culture – a way of life passed on “within families from generation to generation, creating intergenerational welfare dependency.” There is also the popular conception that welfare mainly supports minority families, notably Blacks (Albelda & Tilly, 1997). In keeping with this myth, the term “welfare queen” wormed its way into the American lexicon and eventually became a form of public identity for female welfare recipients, notably African American women on welfare (see Hancock, 2003). This term has had the effect of marginalizing poor, single Black mothers within the American political culture (Hancock, 2003) and also within the African American social and political communities (Cohen, 1996). In addition, this “identity” has contributed to a misrepresentation of welfare recipients, thereby resulting in some policy solutions based on misdiagnosis of the welfare dependency problem (Hancock, 2003).

The myths and stereotypes about women on welfare have resulted, over the years, in the federal government and American taxpayers becoming increasingly intolerant of persons on welfare and more critical of welfare aid programs. As noted by Goodwin (1989), the Kennedy election of 1960 ushered in the first serious review of welfare aid programs which revealed that welfare-dependents were no longer predominantly widowed mothers, but single mothers who had never been married. The view was that “welfare was being given to mothers who had not had a stable life in a traditional two-parent family, but seemed in some way to have created their own difficulties by having children out of wedlock” (Goodwin, 1989).
Public Welfare Amendments implemented in 1962 sought to sanction efforts to offer counseling for mothers assisted by welfare aid to help them improve their social and psychological stability and become more inclined to get off welfare. A total of $2 million in funds was also sanctioned for Community Work and Training (CWT) to facilitate welfare recipients in achieving training and work leading to economic independence. Two years later (i.e. 1964), President Johnson enacted legislation leading to the incorporation of $150 million into Title V of the Economic Opportunity Act (EOA) for work-training programs (Sankofa-Amammere, 1999). The welfare reform programs were aimed at moving welfare aid recipients off welfare, thereby reducing welfare costs in the federal budget, while at the same time improving the general living standard of those receiving public assistance. Between 1963 and 1973, the “War on Poverty” initiative was at its peak. Jobs were plentiful and federal funding had jumped from $1.7 billion to $35.7 billion in the ten-year span (Ornstein & Berlin, 1975). Several other efforts also stemmed from the War on Poverty, one of which was the Work Incentive (WIN) Program. Its primary objective was to assist welfare recipients in achievement of economic independence through gainful employment.

With the passage of time, however, it became apparent that the objective underlying the creation of WIN was not being achieved. First, many participants were remaining at the remedial level of education longer than the program had intended. Many applicants had very low educational levels that necessitated more education toward a normative foundation on which they might be trained more successfully for higher job levels. Goodwin (1989) points out that this longer-than-anticipated term of education and training severely decreased the rate of timely job placement and failed to reduce the welfare roll. Consequently, some politicians were of the view that the people on welfare might be lazy and not willing to work. It was also believed that those people had to be prodded into training and employment (Goodwin, 1989). This conception resulted in an amendment to the WIN Program in 1971, the purpose being to ensure greater workforce participation by persons assisted by welfare aid (Goodwin, 1989, p. 47). The WIN Program had one major objective: find jobs for welfare-dependent individuals and help them acquire economic freedom. Thus, by this time the public welfare provisions of the Social Security act of 1935 that included psychological counseling to welfare-dependent families were basically useless or non-operational. “The psychological distress, environmental struggles, and
demographic concerns …..were devalued in favor of reducing the welfare rolls” (Sankofa-Amammere, 1999).

Sankofa-Amammere (1999) indicates that Sharron and Shapiro (1967) assumed a more social approach to the problems of the poor segment of the society, particularly the urban Black population of the 1960s. These researchers pointed out that this group’s “ghetto” environment, family attitudes, and peer negativism resulted in their alienation, depressed views of themselves, and feelings of hopelessness. Sharron and Shapiro (1967) proposed that these people’s psychosocial and environment problems could be alleviated by establishment of a center for emotional education which would become a major part of the lives of all persons for whom the poverty program is designed. They envisioned such a center being multi-functional, serving as a meeting place, a training center, and a school for life (see p. 6). Hopefully, this vision will eventually become a reality, as welfare reform continues.

According to Wright, Reagles, and Butler (1970), the State of Wisconsin’s Wood County Project of the 1960s attempted to provide for the psychological and social needs of the “culturally disadvantaged population which included ethnic and racial minorities and members of special groups, such as migrant workers. The focus was on extension of vocational rehabilitation services to those persons having social, financial or educational handicaps to employment. The psychological counseling aspect was highly emphasized based on the view that one’s efforts at self-development through education and training may be undermined by self-defeating behaviors resulting from stress, financial difficulties, and psychological distress (symptoms of depression and low self-esteem) (Sankofa-Amammere, 1999).

**Welfare Reform**

Since 1967, there have been about six welfare reform plans implemented in the U.S., the most recent having been enacted in 1996 by President Clinton in his bid to “end welfare as we know it.” The 1996 welfare legislation reformed the following programs: AFDC, the Supplemental Security Income (SSI) program for children, child support enforcement, child care, food stamps, and child nutrition. This law also placed emphasis on reduction of non-marital births and welfare benefits for non-citizens. The Personal Responsibility and Work Opportunity Reconciliation Act (PRWOR), signed into law in August 1996, created a system of block grants to states, referred to as Temporary Assistance for Needy Families (TANF). Thus, TANF came to replace the AFDC that was in place for about six decades.
With enactment of the PRWOR, welfare policy shifted from an emphasis on provision of financial assistance to a new priority – work, or movement of welfare aid recipients to participation in the workforce (employment) and economic self-sufficiency. In 1997, the Balanced Budget Act permitted the U.S. Department of Labor (DOL) to give welfare-to-work grants to states, and through these states, to training and employment systems of their communities, the goal being to help persons in the welfare population who are the hardest to employ to be become employable (U.S. Department of Labor Employment & Training Administration, 2004). Through this authorization, both state and local employment and training agencies have been able to serve welfare aid recipients under the Job Training Partnership Act (JTPA) and to implement the Job Opportunities and Basic Skills (JOBS) program.

A Look at the Welfare-Dependent Population

Social scientists have consistently documented the uneven distribution of poverty, noting that in the U.S., the most common face of poverty among adults is the woman’s. This finding prompted the coining of the phrase “feminization of poverty” (Pearce, 1978). As stated earlier in this chapter, the majority of persons on welfare in the U.S. are female. In addition, the participants of this study were all female. Therefore, the researcher considers it appropriate to focus on welfare-status with women as the focal point.

Throughout their life cycle, three major factors affect the economic status of women: Economic responsibility for parenting of children, marital status, and women’s experience in the workforce (Pearce & Moritz, 1988). The specific path taken by each individual woman is directed by life experiences and the beliefs, attitudes, and barriers related to each factor (King, 1992). The receipt of public assistance (welfare aid) is viewed as a negative economic experience by many, and is affected to a large extent by parenting and family structure considerations. Statistics presented by the U.S. House of Representatives (1991) reinforces this view. About 75 percent of all periods on public assistance started with a change in relationship that resulted in a female-headed family with children. Approximately 50 percent of the periods on public assistance started after a woman assumed the role of family head due to loss of the male and his earnings through absence, divorce, separation or death. About 30 percent started when a woman who had never been married, divorced or separated had a child. A drop in family earnings was not considered a major cause of resorting to welfare since only 15 percent of AFDC periods on public assistance could be traced to a decrease in family income.

40
A change in family structure has been cited as the most common route out of welfare, 35 percent of endings occurring when a female household head gets married and 11 percent occurring when there was no longer a child under 18 years old in the household. An increase in income was more significant in ending AFDC than reduced income was in initiating it. Approximately 21 percent of endings occurred when the female household head earned more money herself, and 5 percent of endings took place when another family member increased earnings. These alternatives are not available to everyone (King, 1992). There are many women for whom marriage is not an option; there are also those for whom even year-round work is not sufficient to keep them and their families out of the poverty circle (Funiciello, 1984; Pearce & Moritz, 1988).

Many critics of the welfare system argue that the policies have been guided more by racism, stinginess, and judgments of the extent of the worthiness of some women than based on need. Some critics perceive the AFDC and the TANF as policies reflective of a society that is very racially divisive, gender divisive in reference to labor, and firmly committed to ensuring preservation of heterosexual unions (Albelda, 1999).

For many women who receive public assistance, being on welfare is both a negative personal experience and a negative economic experience, because they feel humiliated and degraded. The large quantity of paperwork that must be completed in the process of applying for public assistance, as well as how they feel they are perceived by others by merely being at the welfare office contribute to the feeling of humiliation. The woman’s former identity is publicly destroyed as she then becomes known as a “welfare mother” or “welfare queen,” with the connotations of illegitimacy it carries (Grella, 1988; Hancock, 2003; Nicolas & JeanBaptise, 2001). She is further humiliated by the experiences and interactions engaged in throughout the community, for example when she attempts to cash a welfare check, pays for items at the supermarket with her welfare card (at which time she has to contend with the public’s stares and stereotyping), or seeks to have a landlord/landlady accept her under subsidized housing. While many in society focus on the material/economic aspect of welfare for these women, few seem to address the psychological impact of such experiences.

In a study conducted by Nicolas and JeanBaptiste (2001) in which they explored the participants’ (all female) perceptions and experiences with poverty, most of the participants expressed feelings of shame and disrespect. They described the process of starting on welfare as
“degrading, devaluing, dehumanizing and belittling” (Nicolas & JeanBaptiste, 2001). They reported being talked to in a condescending manner by case workers (some younger than them), and also reported experiencing anxiety on going to the offices, and shame at having their children observe others yell at or talk down to them (the parents). In expressing their shame at being in the system, participants mentioned the reluctance of society to be accepting of women on welfare because they are viewed as “lazy….don’t want to work….want to stay home and watch Soap operas daily.” Participants also talked about hiding their welfare status from friends and neighbors to avoid having to deal with the guilt and shame related to being on welfare. They also mentioned their reluctance to talk with non-welfare recipients about their experiences, thus having few outlets for their anger and frustration (Nicolas & JeanBaptiste, 2001).

Several researchers (Furnham, 1983; Klein, Amundson, & Borgen, 1992; Ensminger, 1978; Golding & Middleton, 1982) have conducted objective studies and posited the view that people who receive welfare assistance experience lower self-esteem than their non-recipient cohorts. These studies also noted that female welfare recipients are, as a group, more prone to general negative life experiences and they usually experience greater financial deprivation, loss of self-esteem and isolation. Other research studies (Krause, 1996; Rank, 1994) have made similar findings. For instance, in a study investigating self-esteem and enrollment in public assistance, Krause (1996) found a significant decline in the self-esteem of the participants. Maslow (1954) alluded to psychological needs relating to self-esteem in his model of human needs. Rubin and McNeil (1981) note that the individual’s efforts at achieving his/her unique potential and gaining recognition are thwarted by the inability to satisfy these needs. The findings illustrate, therefore, the need for further studies of the relationship between self-esteem and welfare-dependent women, the focus of this study.

**Welfare Status: Perception Versus Reality**

For decades, it has been a widely held belief that Blacks constitute the largest segment of the poor and welfare population. Consequently, when the term welfare came up in discussions on in the media, for many the first image that came to mind was that of a Black person. To illustrate, a 1994 CBS/New York Times survey revealed that, on the average (across states), 55 percent of respondents reported that most people on welfare are Black, and over 50 percent of the poor population are Black. This is obviously a misperception. According to the U.S. Census Bureau (2000), in the year 2000 the U.S. had an 11 percent poverty rate, on average. Twenty-
two percent of Blacks were noted to be living in poverty. Although this figure was higher for Blacks, considering that Blacks constitute only 13 percent of the U.S. total population, what it means is that Blacks are disproportionately poor. Data collected between July and September of 1997 (U.S. Department of Health and Human Services, Administration for Children and Families (1997) reveals that 36 percent of TANF adult recipients are White, 35 percent are Black, and 21 percent are Hispanic. Based on this data, we can conclude that Blacks and Whites are nearly equally represented in the welfare population – thus negating the overall perception held by many.

Another popularly held perception about people on welfare is that women who collect benefits from the various welfare programs could live a decent life without having to seek employment. Some studies seem to support this view, but several other studies indicate that most mothers on welfare can hardly survive economically and would rather not be on welfare if they were sure they could succeed without public assistance (see Mink, 1998). The misperceptions, regardless of their origin, tend to impact on the nature and scope of welfare policies and on attitudes of persons in the workforce toward the poor and those receiving welfare aid. In turn, welfare recipients are either discriminated against or hindered in some other way from becoming self-sufficient, and their mental health is affected.

Some researchers (Messer & Lehrer, 1976; Curtis & Murphey, 1991) argue that self-esteem must be present in order for the welfare-dependent individuals to take steps at becoming self-sufficient. In other words, in order to succeed, these persons must first have the confidence and believe that they can succeed in the workplace. These views lack an empirical support base, however. Demo & Savin-Williams (1983) conducted a study that replicated Rosenberg and Pearlin’s (1978) finding of a stronger relationship between social class and self-esteem in adolescent than in younger children using various alternative self-esteem scales (all global measures of general self-esteem). They confirmed that the different correlations showed a greater personal awareness of social class among older children and the greater salience of social comparisons of social status for adolescents. One may deduce from this finding that social class status, of which welfare status is an off-shoot, is important to persons on welfare and impacts on their level of self-esteem.

There is also a school of thought (Katz, 1986) that contends that welfare is universally disliked, leading this researcher to assume, therefore, that even those on welfare do not feel good
about it. Katz (1986) states, “Nobody likes welfare….Poor people, who rely on it, find it degrading, demoralizing, and mean” (ix). Wilson (1996) asserts that living in a jobless environment may lead to the development of a culture where the participants may find reliance on welfare more accepting and the obstacles preventing work prove overwhelming. Wilson’s culture of poverty model promulgates the view that low self-efficacy is a psychological adaptation to the jobless “ghetto” environment and can be viewed as a social psychological variable that exists within the “ghetto subculture.” The findings presented so far seem to lead to the conclusion that self-esteem issues can surface as a result of the conditions associated with welfare dependency (such as stigmatization, negative self-perception, lack of control over one’s life situation, etc.) and from chronic unemployment. Feelings of diminished importance, sense of failure and lack of self-worth can, if not addressed, lead to a state of psychological distress. It is with these issues in mind that this study is being undertaken.

**Socio-demographic Factors**

A review of the socio-demographic factors of persons on welfare suggests that they are important for the development of interventions, training programs, theory, and further research. Demographic factors such as race, age, number of children, educational level, welfare history and employment history have proven to be extremely useful and critical in making decisions about choice of resources and types and quality of service deliveries offered to the welfare population. An attempt is made below to highlight in greater detail the relevant factors included in this study:

**Length of Time on Welfare**

There are a variety of reasons for which welfare-dependents continue to depend on the system. However, research indicates that most welfare recipients continue to accept public assistance for economic reasons, as a means of survival. Studies (e.g. Chrissinger, 1980) show that the longer persons on welfare accept public assistance, the more discouraged they are likely to become about their move toward economic independence. Some studies (e.g. Goodwin, 1972), have found that persons who are considered long-term welfare recipients lack confidence in their abilities to find work and to remain employed. According to Peterson (1986), the length of time over which a person has received AFDC payments or Food Stamps since age 16 is inversely related to their employability. Peterson noted that a correlation exists between the
length of time one spends on welfare and an acquired lifestyle that leads to a stabilized adjustment to continued dependence on welfare.

Chressinger (1980) presented four factors that determine employment behavior, as follows:

Knowledge of welfare policies concerning the amount of income that may be ignored in calculating welfare benefits, the amount of income considered necessary before going off welfare would be worthwhile, and the age of the oldest child covered by the welfare grant. The fourth monetary determinant, the value of in-kind welfare services, revealed that services with high monetary value, namely medical care and food stamps, were used to a great extent by all the welfare mothers (p. 54).

As suggested by Chressinger (1980), despite a large proportion of persons on welfare not knowing how much money they could earn and still qualify for welfare grant, 50.5 percent of 97 subjects stated that they would need to earn anywhere from $800 to $1,500 a month before they would consider it worthwhile to give up their grant. These monetary determinants of employment behavior offer insight into the main reason that many people continue their dependency on welfare aid. Goodwin (1989) found that the longer an individual stayed on public assistance and the greater the number of children that person had, the greater was the likelihood of this being a hindrance to self-sufficiency. Studies done by Hooks (1984) found that “mothers complained that working did not enable them to support their families in a manner any better than being on welfare, and sometimes made them worse off” (Kerlin, 1993, p. 83). Some schools of thought claim that policies meant to reduce poverty tend, instead, to increase economic problems for the poor by making them less self-reliant. Notably, some critics contend that when individuals are on welfare this reduces their earnings and the prospect of marriage (Herrnstein & Murray, 1994; Horn, 2002; Mead, 1986, 1998; Murray, 1984, 2001).

One must bear in mind that a large percentage of women on welfare have limited education (many not having completed high school), have few or no skills relevant to the job market and face a multitude of other barriers to employment. For those who attempt to get off welfare, they tend to obtain minimum-wage jobs. Their monthly income from such jobs puts them at or below the poverty line, and sometimes they are financially worse off than if they remained on welfare. For this reason, therefore, some people choose to remain on welfare although they experience low self-worth, guilt and shame, and would rather be part of the workforce like their non-welfare-dependent cohorts.
In summary, there is evidence indicating that the length of time one spends on welfare has an inverse relationship to that person’s employability, because with the passage of time the individual begins to feel an increasing entitlement to assistance or becomes increasingly dependent on it. Studies have indicated that income from paid work must be adequate for the individual’s economic survival needs and put him/her in a better financial position than does welfare aid before that person will choose to get off welfare. Also noteworthy is the observation by some studies that the individual’s pride, confidence, self-worth, and motivation regarding paid work can be negated by the length of time spent on welfare.

**Age of First Motherhood (Woman’s Age at Birth of Her First Child)**

Research studies have found that, among women who are between ages fifteen and nineteen years, about 7.2 percent of White women, 15.8 percent of Hispanic women, and 14.4 percent of African American women have had at least one child (see Bach & O’Connell, 2001). As pointed out by Stewart (2003), most scholarly investigations tend to emphasize the effects of poverty and educational achievement on teenage pregnancy, while a few (Nock, 1998; Oates, 1997) have addressed and examined the effects of adolescent self-esteem on teen fertility patterns. Proponents of the welfare culture theory reason that young women (on welfare) become pregnant because of their desire to increase the amount of benefits they receive. They also argue that widespread dependency on welfare has negated the stigma once associated with receipt of public assistance (Corcoran, 1995; Mead, 1986; Murray, 1984). Kaplan (1996) cites two main reasons teenagers have children. First, they view motherhood as a way of gaining control over their lives when individual outcomes seem out of their control. They assume that their babies will give them love and affection (which may be lacking in their lives). Second, these teenagers may simply be modeling what they have come to perceive (from socialization) as an accepted route to womanhood (Kaplan, 1996).

Hoffman and Hoffman (1973) theorize that teenagers have children because children are considered valuable to those who may not have opportunities for occupational prestige. This theory may help explain why “teenage pregnancy is more frequent among members of the lower socioeconomic strata” (Stewart, 2003). From Furstenberg’s (2000) perspective, motherhood is viewed as a route leading to adulthood. Geronimus (1997) contends that early childbearing is, for some young women, especially minority women, a “rational choice,” the underlying reason being minority women do not see the same returns on education in comparison to white women.
and that early motherhood is not as “costly” for such women as it may be for white, middle class women. Family value such as the age at which the teen’s mother or grandmother became a parent or their verbal messages about receiving welfare aid could also play a role in determining at what age the daughter becomes a mother herself.

Proponents of the General Resources Model (Becker, 1981; Haveman & Wolfe, 1994) claim that poor parents do not have the resources needed to invest in their children. Both the parents and their children are “concentrated” in neighborhoods with high crime rates, low housing standards, and insufficient schools (Jencks & Mayer, 1990; Massey & Denton, 1993). The assumption is that because the poor parents who live in those conditions cannot convert resources into human capital such as education for their children, the children view childbearing as a way to gain adult status and social esteem. In reference to self-esteem, there are mixed views. Some researchers have indicated that teenage pregnancy is a way of enhancing the teenage mother’s self-esteem (Dash, 1986; Freeman & Rickels, 1993; Musick, 1993). Oates (1997) finds no beneficial effect of teenage pregnancy on self-esteem. However, he concurs that teenagers may expect an enhancement of their self-esteem through motherhood. In one study (Holmbeck et al, 1994), high self-esteem was found to boost the likelihood of adolescents’ use of contraceptives. According to Stewart (2003), “A strong personal sense of control has been linked to individual outcomes such as high educational attainment and good mental health” (Mizell, 1999a; Mizell, 1999b; Ross & Van Willigen, 1997).

Some researchers have hypothesized that young recipients of welfare aid may feel its negative impact more severely than their older counterparts (Mead, 1986; Murray, 1984; Tanner, 1996). Meanwhile, a study conducted by Vartanian and McNamara (2004) showed that it is income and not welfare receipt that influences the economic well-being of young women. Stewart (2003) suggests that adolescent self-esteem and personal sense of control are predictive of age at first motherhood, and that teenage women with a high self-esteem and personal sense of control have a later initial motherhood age. This researcher also reasons that if young women have high self-esteem and personal control, they may feel more confident in abstaining from sex or in insisting on safe sex practice by their partners. She notes, however, that the relationship between adolescent self-esteem and early motherhood is “far from conclusive.”
Number of Children While on Welfare

Several studies (Azocar, Miranda, & Dwyer, 1996; Ensminger, 1978; Ross & Huber, 1985; Tableman et al, 1982) have indicated that single mothers with three or more children are more likely to be dependent on welfare. In addition to the issue of economic deprivation, there is the problem of psychological stress. The researchers note that such women are more susceptible than their cohorts to poor self-esteem, feelings of powerlessness, and stressful life conditions. Azocar et al (1996) noted, “Another difficulty in recruiting and retaining disadvantaged minority women in treatment is that these women tend to have many children and few resources available to them. Having many children at home [without adequate means of providing for the family] has been associated with higher depressive symptomatology” (p. 94). Families with three or more children were more likely (than others) to report they “worry all the time” about meeting their bills (Ross & Huber, 1985). Ensminger (1978) suggests that a dependency on public assistance appears to stem from the woman being the only adult in a family, with more and younger children, limited education, and poor health.

As noted by Sankofa-Amammere, (1999), “The severe inconvenience of agencies having limited funding for, imposing frequent temporary cuts on, or permanently defunding daycare and transportation allocations, increases the economic and emotional stress for the individuals who rely on these types of support.” The woman’s educational level and the perceived benefits of not working should also be considered as mediating factors that may contribute to the woman’s frequency of motherhood while on welfare. For example, if the woman thinks she can only earn minimum wage due to limited skills or education, she may find it more economically rewarding to remain unemployed and continue to receive public assistance. Assuming she has to factor into her minimum wage pay check child care costs and transportation expenses, and assuming she does not have a high personal investment in employment as a way of personal identity but rather, sees work as just a way of paying bills, the woman may consider it “too expensive” to work.

To summarize, literature addressing the issue of number of children a woman has while on welfare suggests that single women on welfare who have three or more children are likely to have few resources and experience more barriers in securing paid employment. Also, these women are more likely than their counterparts to worry constantly about their ability to pay their bills, and about their children’s well-being. The constant stress usually affects their psychological health, of which self-esteem is an aspect.
Parents and/or Grandparents on Welfare (Intergenerational Welfare Dependency)

A fair amount of research exists about the intergenerational transfer of welfare dependence. Studies have generally found that adults whose parents were on welfare are more likely to themselves to become a part of the welfare-dependent population (An et al., 1993; Dolinsky, Caputo & O’Kane, 1989; Gottschalk, McLanahan, & Sandefure, 1994; Hill & Ponza, 1989; McLanahan, 1988; Rank & Cheng, 1995). In studies conducted by Gottschalk (1992) and Vartanian (1999), it was found that for Blacks, parental welfare receipt was a strong prediction of welfare receipt by the daughter, although other mediating variables such as income level and education of the household head played a role.

While few studies have examined the relationship between self-esteem and intergenerational transfer of welfare dependency, what has been said earlier about the experiences of women on welfare seems to suggest that the women’s self-esteem is impacted somehow if they are following in their parents’ or grandparents’ footsteps in reference to welfare receipt.

Welfare Recipients’ Perceived Barriers to Employment

With enactment of the PRWORA of 1996 has come the welfare-to-work programs aimed at moving welfare recipients into the workforce quickly. Indications are that in many instances, assessments are not conducted to address the personal factors that are impediments to employment (see Kalil et al, 1998). Several studies show that a large proportion of welfare recipients, especially minorities, have difficulty keeping jobs and cycle between work and welfare (Harris, 1993, 1996; Pavetti, 1993; Spalter-Roth et al, 1995). Some persons on welfare cannot find jobs, while others find jobs but lose them because of inadequate occupational skills (Bane and Ellwood, 1994; Harris, 1996; Wagner et al, 1998).

In a survey of 3,200 employers about entry-level jobs available to persons without a college degree, Holzer (1996) found that most jobs required some sort of credential (e.g. high school diploma, work experience, or references). Many persons on welfare do not possess these. To illustrate, roughly 50 percent of all welfare dependents are high school dropouts, and almost 40 percent had no work experience before their first encounter with welfare (Harris, 1996). Holzer (1996) also found that the majority of entry-level jobs required employees to do one or more of the following daily: read and write paragraphs, deal with customers, do arithmetic, and
use computers. As noted by Barton and Jenkins (1995), the average person on welfare aid reads at the sixth to eighth grade level and may be unable to carry out many of these tasks.

We must also consider that persons on welfare may not understand the workplace norms or behaviors expected of them on the job, hence not being “work ready.” For example, they may not understand the importance or seriousness attached to punctuality, absenteeism, and the chain of command that represents authority and responsibility on the job (Berg, Olson, & Conrad, 1991; Hershey & Pavetti, 1997). Other barriers to employment presented by researchers include: real and perceived discrimination, lack of access to a car and/or no driver’s license, major depression, post-traumatic stress disorder, generalized anxiety disorder, alcohol dependence, drug dependence, physical health problem, child has a health problem, child care issues, and abuse from domestic partner (see Danziger et al, 2000).

In discussing what characteristics make some welfare recipients “hard to serve,” Danziger (2002) classified the barriers to employment as “work-related,” “family breakdown or instability,” “health limitations,” “limited English proficiency,” and “housing instability.” Among these classifications were challenges such as learning disability, physical disability, mental health problems, involvement with the child welfare system, child care and transportation problems, and prior felony convictions. Welfare-dependents who have left the system due to sanctioning have been found to have a greater number of barriers to employment than persons who leave the welfare system for other reasons (Danziger 2002). Though not stated directly, it is implied in research (Danziger, 2002) that women who remain long-term welfare recipients will have a greater number of barriers to employment and increasing difficulty obtaining employment. It is obvious from these findings that AFDC recipients attempting transition from welfare to work are faced with a myriad of complex problems. Considering that women comprise a larger percentage of the poor, and the vast majority of welfare recipients are women (and children), it would seem that greater attention will need to be given to the obstacles preventing women on welfare from securing employment.

Research indicates that the locus of control for barriers to employment of women on welfare are both external (system-based) and internal (client-based). The external barriers include the welfare system itself which provides little incentive for one to become independent; the negative attitudes, misperceptions and stereotypes the general public tend to harbor toward welfare recipients; a lack of appropriate job training programs; insufficient career and personal
adjustment counseling for those on welfare; a shift from manufacturing to a service- and technology-oriented economy. Internal factors, notably low self-esteem, depression, learned helplessness, and a tendency by some to blame others for their predicament (external locus of control) have also been cited as barriers to self-sufficiency.

One can conjecture that the longer such barriers persist, the longer the woman will stay on the welfare roll. Research shows that persistent welfare users are more likely to experience crimes such as domestic violence in one or two years. It can also be assumed that those who attribute the barriers to external causality are likely to have more of their self-esteem intact. Such experiences are likely to impact the woman’s self esteem negatively.

Let us bear in mind that, in the presence of self-efficacy, an individual may have higher self-esteem due to self-confidence. In addition, the presence of racial attitudes could also be a mediating variable. For instance, according to Hunt (2001), “....African Americans are especially likely to system-blame when they have low self-esteem” because of the “unique self-esteem/structuralism link among Blacks.” His study showed that Blacks with the highest self-esteem (lowest mastery) are least likely to blame the system for poverty. On the other hand, the study found that Blacks with the lowest self-esteem (highest mastery) are more likely to blame poverty on the system.

Completers Versus Non-Completers of an Employment Assistance Program (EAP)

Training programs (sometimes referred to as Welfare-to-Work programs) were introduced in 1967 (e.g. the Work Incentive Program established in 1968) for the purpose of helping able-bodied welfare recipients to find jobs and economic independence. With the sweeping changes taking place in the welfare system, states are now shifting emphasis away from cash assistance (through AFDC), to provision of assistance to enter the workforce. Some women on AFDC may make the transition from welfare to work with limited challenges. However, there are many who are likely to encounter a multitude of obstacles and challenges in the process. These individuals will either find employment temporarily and then become unemployed again, or they may have to depend on family and friends to assist them in surviving economic hardship.

With the new welfare reform comes job training programs /employee assistance programs (EAPs) such as the Job Opportunities and Basic Skills (JOBS) aimed at helping to prepare welfare recipients to become self-sufficient. The JOBS program was meant to assure
that the welfare recipients with children received the education, training and employment necessary to help them get off the welfare roll (Barton & Pillai, 1993). The question is: How client friendly are the programs? When one considers the multitude of barriers that many of these women face, it comes as little surprise that some are successful at completing the programs while others fail to do so.

As noted by Goodwin (1989), “A program that has any hope of lowering welfare rolls must have a long-range perspective. It must be aimed not merely at immediate job placement but at helping compensate for social patterns that have led to inequities in personal backgrounds and experiences” (p. 63). Results of studies have been mixed in reference to the success of the training programs. Weidman et al (1988) did an analysis of the WIN program and found that, despite the services that were being provided, expected outcomes such as adequate initial job placements, long-term job retention, and achievement of economic independence continued to pose problems for single female parents.

Weidman et al (1988) identified several factors that have prevented single parents from completing the training programs. They included: (1) Attendance—issues such as child care responsibilities, poor health, financial problems, and lack of transportation were cited as reasons for poor attendance. The women missed, on average, more hours of class and laboratory work than did the regular electronic technician students. (2) Public Agency—late checks, checks with errors and wrong amounts of food stamps were some of the problems that hindered the women’s ability to pay for family care and transportation. (3) Social Support—The support offered participants by their families and friends was critical to the likelihood of them succeeding. As indicated by Weidman et al (1998), about 62 percent of those who dropped out during the first three months felt their participation had impacted their children negatively, in comparison to 30 percent who continued the training (see p. 110). (4) School-Related Problems—Conflicts arose due to the nature of the training institution; it was an established training institution with a white, male, middle-class student body. There were reports of racial, sexual, and anti-welfare remarks from some students and faculty. (5) Obstacles to successful job placement—The hindrances included limited work experience, poor social skills, unwillingness to relocate, no car or driver’s license, no telephone, and failure on job tests.

The literature is replete with information suggesting that most women who are on AFDC face several issues which they must overcome before they can achieve self-sufficiency. As noted
by Pavetti et al (1996), the issues are broad and varied. They include learning problems, mental health issues, substance abuse, and domestic violence. In some cases, about 80 percent of persons in groups being served are high school dropouts. Many suffer from depression or other mental problems. Some participants have alcohol problems. There are those who face domestic violence on a regular basis or have been victims of sexual abuse or some other trauma. For these women, just surviving on a day-to-day basis is a challenge in itself, an experience that drains them of energy and robs them of motivation to succeed. Consequently, we could cite motivational issues as a factor that may distinguish between completers and non-completers. There is also the issue of indifference. Some women may have become so used to being on and off welfare, they may have simply “given up” and developed an indifferent attitude to the system and lost faith in their ability to do better. There are also program participants who may not take the program seriously, viewing it as something to do to fill time. The participant’s perception of the program could dictate completion or non-completion. For example, those who perceive the program as valuable may be more inclined to prod on that those who do not attach any value to it.

Cognition cannot be overlooked. Some participants may operate at a higher cognitive level than others (e.g. those who completed high school or some college). They may master the exercise and feel more confident in the process than those with low cognitive functioning. Another factor that should not be overlooked is the participant’s comfort level in a group setting and group dynamics. If the individual has difficulty sharing, trusting, and experiences anxiety in group environments, the person may not feel comfortable in the program. They may use any opportunity to discontinue participation. Another issue deserving of consideration is distraction from a significant other. For example, one study (see Womens’ eNews, 2001) found that women, notably those with a spouse or partner, were less likely than men to complete job training programs while receiving assistance. Also, the length of time the program participant has been on welfare could also influence her decision to complete the training program.

A study done by Klein, Amundson and Borgen 1992 found that the majority of welfare recipients “experienced unemployment as a flat experience with relatively few highs and a continual, pervasive string of lows” (see pp. 90-91). Hence, most of them seldom appeared to grieve a job loss. Many had difficulty remembering what was their most recent “real” job.
Many of the participants were found to have had long histories of either part-time, temporary, casual, or unskilled low-paying jobs.

In a study conducted by Peterson (1986), the variables “length of time a mother remained in a previous job” and “amount of time a mother had been employed since her previous employment ended” were used as an index of stability of work behavior and commitment to work. His study indicated that it is possible to create a measure to distinguish between persons on welfare who can be helped and those who most likely cannot be helped. This study seems to possess utility in that it could assist us in making decisions about the employability of welfare recipients. The findings are an insight into what other factors may be attributed to some people’s failure to complete a training program.

This researcher has not found any study that has specifically examined or found a relationship between self-esteem and completion or non-completion of a training program. However, one can assume, from the issues highlighted above, that the participant’s self-esteem is impacted somehow depending on the problem being encountered. Unfortunately, the challenges facing some of these individuals are of such magnitude that job training programs alone may not be sufficient to “bring them back on track.” It may require the service providers to consider designing program models to better address the needs of these individuals (Pavetti, 1996). Program implementation without evaluation, assessment of participants’ issues and additional needs not addressed by the program will continue to result in dissatisfaction for some participants and their decision to drop out prior to program completion.

In summary, the welfare-to-work programs were implemented for the purpose of reducing the welfare rolls and helping women toward self-sufficiency. However, overall, the result of this plan has been moderate increase in employment of the target group, and even smaller welfare savings. The jury is still out regarding the success of training programs. Meanwhile, unless some changes are initiated to meet the varying needs of employment program participants, it is likely that many will continue to drop out before completion.

**Summary of the Literature Review**

Research shows that self-esteem is a multi-dimensional variable which impacts every aspect of our lives. The cognitive, affective and behavioral components make it a challenge for investigators attempting to define this construct. The theories of self-esteem are many are
varied, yet they converge on one element: The understanding that self-esteem comprises competency, worthiness, cognition, affect and stability.

Studies have been conducted regarding self-esteem and persons with low SES. Some studies have examined the relationship between self-esteem and a number of important variables related to daily experiences. However, a gap exists in terms of self-esteem in relation to the socio-demographics of women on welfare. The researcher considers it necessary to pursue this study in view of the fact that there are more women than men on welfare, and also because female welfare recipients face so many barriers to employment in contrast to the rest of us in society. The information presented in this chapter supports the researcher’s view of the need for further investigation to determine the relationship between self-esteem and the demographics of length of time on welfare, age of first motherhood, parents and/or parents on welfare, perceived barriers to employment, number of children while on welfare, and completion or non-completion of a training program. Overall, studies done in relation to self-esteem and some behavioral attributes of low SES persons seem inconclusive. The results of this study will add to the existing literature.
CHAPTER 3

METHODOLOGY

This study examined the relationship between the psychological construct of self-esteem and certain pre-existing demographic characteristics or behaviors exhibited by women receiving welfare assistance. An examination of the literature review indicates that, despite the preponderance of evidence emphasizing the significance and critical nature of self-esteem and its link to psychological wellbeing as well as a multitude of social problems, researchers are yet to arrive at a common agreement on a clear universal definition and conceptualization of self-esteem. Notably, there appears to be a paucity of research and a void in extant literature in relation to examination of the relationship between self-esteem and the characteristics of women on welfare, and this gap needs to be addressed. This chapter delineates the procedures that were employed to conduct the study, and describes how data were collected and analyzed, instruments used, participants, hypotheses, variables and data analysis, highlights limitations of the design and presents a chapter summary.

This study investigated the extent to which the self-esteem of women on welfare is impacted by the duration of time on welfare aid, the age at which participants had their first child, the number of children participants had while on welfare, parents and/or grandparents receiving welfare, perceived barriers to employment, and persistence in completion or non-completion of an employment assistance program for women on welfare.

Participants

Because this was an archival study, data were extracted from pre-existing records generated by subjects who participated in a program referred to as Career Quest, sponsored by Florida’s State Department of Labor and Employment Security in collaboration with The Florida State University. The majority of those who participated in this project were single mothers who were receiving Aid to Families with Dependent Children (hereafter AFDC) grants. The stipulations for participation in the Career Quest project were based on the program’s definition of limitations or deficiencies in relation to job readiness. In order to participate in the program, subjects were required to meet the following criteria:

1. Had not been employed for 12 of the previous 24 months.
2. Had not attained a high school or GED diploma.
3. The participant’s child/children was/were three years of age or older.
   Subjects whose children were younger had the option of choosing
   “volunteer participant” status in the Career Quest workshop.

   Most of the participants met these criteria. However, single parents who were unable to
   obtain employment over a specified job search period assumed “volunteer participant” status, in
   that they volunteered to participate in the workshop. A large number of these volunteer
   participants were either high school or college graduates and some had long work histories.
   Consequently, the educational levels of the subjects who participated in the Career Quest
   workshop included completion of high school, college, and non-completion of requirements for a
   high school or GED diploma. Based on this, the average level of education for all participants
   was found to be 11.5 years (Sankofa-Amammere, 1999).

   Project participants received various support services such as food stamps, bus passes,
gas vouchers for travel, Medicaid and childcare expenses. In terms of racial makeup, 75 percent
of the participants identified themselves as African Americans and 25 percent identified as
Caucasians. Females comprised 95.2 percent of the group and 4.8 percent were male. (For
purposes of this research, only the completed files of female participants will be used since the
investigator wants to focus on females only, in keeping with area of interest). The average age
of persons who participated in the Career Quest project was 32.6 years (SD=8.2). The average
number of years of receiving welfare assistance was 5.1 years (SD=5.6), and the average age at
which participants had their first child was 18.4 years (SD=5.6). The average number of children
was 2.5 and the average age of the participants’ oldest child was 10.6 years (see Sankofa-
Amammere, 1999).

   Subjects in this group of workshop participants were selected from and studied in a city
in North Florida (Tallahassee, population 200,000) and 95 percent of these subjects were
recipients of full welfare benefits. Another significant characteristic that distinguished the
Career Quest program participants from the general welfare population was the racial makeup:
75 percent were African Americans. Welfare-related statistics obtained from the U.S.
Department of Health and Human Services (1997) indicate that 36 percent of adult recipients of
Temporary Assistance for Needy Families (hereafter TANF) were white, 35 percent were black,
and 21 percent were Hispanic. Participants in the Career Quest program were found to be similar
to the overall welfare population in that in both cases there is a significant number of single female parents receiving welfare aid (Sankofa-Amammere, 1999).

**Description of the Career Quest Program**

During the period 1992-1996, The Florida State University was contracted by the State of Florida’s Department of Labor and Employment Security to provide a job club or Career Quest Program. This project was implemented in workshop format and offered training in career and general life management skills for program participants who were receiving welfare assistance. Over a three-week period the duration of each workshop session was approximately sixty hours.

The principal objective of the Career Quest Workshop was to facilitate subjects in their development of short-term and long-term career goals. Hence, participants attended presentations, group sessions, individual counseling and directed independent research on career and educational opportunities. To assist participants in recognizing their abilities to improve their economic situation, a number of educational and counseling modules were developed. The main purpose of these modules was to increase the participants’ self-esteem and coping and vocational skills. A cognitive-behavioral theoretical paradigm was employed to address the psychosocial and vocational needs of the workshop participants (Ebener, Grider, Sankofa-Amammere & Humphreys, 1996).

**Research Question and Hypotheses**

In this study, the researcher sought to answer the following question:
What is the relationship between self-esteem and demographic characteristics of women on welfare?

a. What is the relationship between self-esteem and the number of years women spend on welfare?

b. What is the relationship between self-esteem and the age at which women on welfare had their first child?

c. What is the relationship between self-esteem and the number of children born to women on welfare?

d. What is the relationship between self-esteem and parent and/or grandparents’ dependency on welfare?

e. What is the relationship between self-esteem and barriers to employment as perceived by women on welfare?
f. What is the relationship between self-esteem and completion of an Employment Assistance Program (EAP) for women on welfare?

Hypothesis

The researcher used the alternate form to test hypotheses that had supportive theories and research findings. In the absence of said theories and research findings necessary for making a consistent prediction (as in (e) and (f), ), the null form was proposed:

a) There is an expected inverse relationship between self-esteem of women on welfare and the number of years they spend on welfare. Wilson’s (1996) culture of poverty model and the culture of self-worth model noted in the literature review suggest a directional prediction.

b) There is an expected inverse relationship between self-esteem of women on welfare and the age at which they had their first child. This prediction is supported by the literature review which indicates that several studies related to self-esteem and teenage pregnancy tend to show that “adolescent self-esteem and personal sense of control are predictive of age of first motherhood (see Stewart, 2003), and that women with a high self-esteem and personal sense of control have a later initial motherhood age.”

c) There is an expected inverse relationship between self-esteem of women on welfare and the number of children these women had while on welfare. The literature review indicates that single women with three or more children are more likely to depend on welfare aid, and that such women are more prone than their counterparts to poor self-esteem, feelings of powerlessness, and psychological stress. They have more barriers to employment, and fewer resources.

d) There is an expected inverse relationship between self-esteem and having parents and/or grandparents who were welfare. Generally, the literature indicates that adults whose parents and grandparents were on welfare are more prone themselves to become dependent on welfare (e.g. An et al., 1993; Rank & Cheng, 1995). Some findings (e.g. Gottschald, 1992, Vartanian, 1999) suggest that for Blacks, parents being on welfare is a strong prediction of welfare receipt by the daughter, although there are other mediating variables such as income level and education of the household head.

e) There is no relationship between self-esteem and barriers to employment as perceived by women on welfare. The null hypothesis is applied in this case because research suggests
that persons who tend to attribute barriers to external causality are likely to have more of their self-esteem intact. Research also indicates that there is a unique self-esteem/structuralism link among Blacks; hence Blacks are more likely to blame the system when they have low self-esteem. Overall, research findings are inconsistent.

f) There is no relationship between self-esteem of completers or non-completers of a Career Quest workshop for women on welfare. The researcher was unable to find any studies that could be used to indicate a directional relationship – positive or negative.

**Research Design**

This investigation was an archival study because the data utilized were extracted from an organized body of records containing information previously collected from a sample of women on welfare aid.

**Data Analysis**

The researcher utilized the Statistical Package for the Social Sciences (SPSS 6.0, 1995) for conducting all statistical analyses required for this study. A correlational statistical technique was employed in this study because the researcher considered it useful and appropriate, given the gap that exists in research in this area. Some researchers (e.g. Borg & Gall, 1983, p. 576) point out that the correlational method is “especially useful for exploratory studies in areas where little or no research has been done.” This approach is also useful and appropriate for use when variables being investigated are complex and not well understood (Isaac & Michael, 1990). The construct of self-esteem fits in this category in view of its illusiveness and complexity in terms of conceptualization, definition and research. These authors also note that the correlational technique makes it possible to measure many variables and their interrelationships all at the same time in a realistic setting (Sankofa-Amammere, 1999). A regression analysis was also applied for the purpose of examining the contribution of each of the predictor variables for statistical significance.

The variables of interest in this study were: (1) Self-Esteem - the criterion variable, (2) Years on Welfare, (3) Age of First Motherhood, (4) Number of Children, (5) Parents and/or Grandparents on Welfare, (6) Perceived Barriers to Employment, and (7) Completion or Non-Completion of a Career Quest program. In addition to these predictor variables, this researcher included three control variables (Education Level, Participant’s Age, and Marital Status) as covariates based on their mediating potential. For purposes of manipulation, this researcher used
the raw scores from participants’ test profiles instead of using a categorical coding representing three levels (high, medium, and low).

**Limitations**

One of the advantages of utilizing a correlational design is that it allows the researcher to better understand the relationship between variables. Despite this key benefit, however, there are limitations associated with the use of a regression method of analysis that are worth noting. First, there is a risk of violation of the assumption that the predictor variable has been reliably measured. There is also the risk of inflation of the coefficient standard errors resulting from high intercorrelation among the predictor variables (see Tate, 1996). Another risk is that the multiple correlation of the criterion and predictor variables (i.e. the R) could result in bias or inflation of estimates of the R-values. Inflated R-values are likely to reduce the generalizability and replication of the study (Smith & Glass, 1987). In view of the limitations noted, data in this study were evaluated statistically and examined closely in an effort to minimize or avoid risks that can be overcome. Descriptive statistics including preliminary analysis and examination of data were conducted to determine the presence of any significant outliers that could have influenced the results of the study and to determine if any of the assumptions were violated.

**Data Analysis for Hypotheses**

For hypotheses (a) and (b), the researcher derived a Pearson product-moment correlation between Self-Esteem and the Number of Years on welfare, and between Self-Esteem and the age at which the woman had her first child. The researcher checked for assumption of normality by examining distribution of scores to determine if they were normally distributed or skewed positively or negatively. The intervals for (a) were: Less than 1 year, 1-3 years, 4-6 years, 7-9 years, and 10 years and above. No intervals were used for (b); the actual age was used.

For hypothesis (c) the actual number of children for each participant was written and a Regression was applied to support the results. For hypothesis (d), an Analysis of Variance (ANOVA) was employed in this case, with four levels or nominal categories of the Independent Variable, namely: No parents on welfare, Parents on welfare, Grandparents on welfare, and Parents and Grandparents on welfare. Steps were take to ensure that the assumptions of independence, normality and homogeneity of variance were met. Regression was also be done to support the results.
To analyze data for hypothesis (e), ANOVA was used. “Yes” and “No” were used in categorizing perceived barriers to employment as either Internal or External. Five levels were utilized, namely: Internal Barriers only, Mostly Internal Barriers, Half and Half, External Barriers only, and Mostly External Barriers. The researcher examined scores for normal distribution, equal spread of scores and mutual exclusion to ensure that assumptions of normality, homogeneity of variance, and independence were met. A regression was done as a follow-up to show the effect that these levels of barriers would have on the woman’s self-esteem.

Data for hypothesis (f) were analyzed using ANOVA, ensuring that assumptions of normality, equality of variance, and independence were met. The two nominal categories were: (1) Completers, and (2) Non-completers. The researcher attempted to control for family-wise error by setting the alpha at the appropriate level (.001), i.e., .008/6.

**Potential Control Variables**

The number of years of education attained by a subject may be a potential control variable. For example, high school completion means a higher level of education than (say) 9th Grade, which in turn creates better opportunities for the subject, and hence higher self-esteem (possibly). Thus, the relationship between A&B could be mediated by education. This researcher identified three control variables, namely, Education Level, Participant’s Age, and Marital Status. These background variables were included as covariates in the analyses.

**Criterion and Predictor Variables**

For this study, the dependent or criterion variable was self-esteem (SESTM) and the independent or predictor variables were the following demographic characteristics selected for exploration in this study: Years on Welfare (YRSWF); Mother’s Age at Birth of First Child (MAFCH); Parents and/or Grandparents on Welfare (PAOGW); Number of Children While on Welfare (NOCWW); Perceived Barriers to Employment (PBEMP); Completers (COMPL); Non-Completers (NCOMPL).

Within this study, the criterion variable of self-esteem was conceptualized as a composite psychological construct comprising global self-esteem (attitude toward oneself in general) and situational self-esteem (attitude toward oneself in specific contexts: peers, parents, school, and personal interests) (see Coopersmith, 1967). Self-esteem was operationally defined as the perception that individuals hold of themselves based on their experiences in society which affects their level of self-confidence and self-worth and impacts on their behaviors and responses.
to situations (this researcher’s definition). This construct was measured with the Coopersmith Self-Esteem Inventory - Adult Form (Coopersmith, 1975). Only pre-workshop scores were used.

The responses provided on the Demographic and Work History Questionnaires administered to participants at the beginning of the workshop served as a measure for each of the independent variables. Years on Welfare was defined as the amount of time (12 months = one year) that each participant spent on welfare. Mother’s Age at Birth of First Child was defined as the chronological age of each participant when her first child was born. Number of Children While on Welfare was defined as the number of biological children that each participant had while on welfare. Parents and/or Grandparents on Welfare was defined as the extent to which the participant has had a parent and/or a grandparent receiving welfare assistance. Perceived Barriers to Employment was defined as internal or external locus of control: That is, whether the participant viewed herself or others as being responsible for her inability to be gainfully employed. Completers were defined as participants who attended the workshops from inception to end, while Non-completers were defined as those participants who attended some of the workshops but discontinued participation before the project ended.

**Instruments**

On the first day of each workshop, each participant completed a self-report questionnaire and objective assessment measures. The measures used were the Demographic and Work History Questionnaires, the Coopersmith Self-Esteem Inventory, Adult Form (SEI – 1975), and the Beck Depression Inventory (BDI). Participants were administered the SEI at the beginning of the workshop and also at the termination. The purpose was to help the workshop organizers determine whether and to what extent participation in the Career Quest had impacted on the participant’s self-esteem. In this study, however, the researcher focused on the pre-workshop self-esteem scores only.

Other instruments administered to the Career Quest workshop participants included the Self-Directed Search (SDS), My Vocational Situation (MVS), the Career Occupational Preference System (COPSystem), the Science Research Associates Reading Index, the Science Research Associates Arithmetic Index, and the Career Orientation Placement and Evaluation Survey (COPES). These measures were not focused on or addressed in this study when addressing questions (a), (b), (c), (d), (e), and (f). The researcher planned on using these
measures in a post-hoc analysis only if relationships were found to be significant. However, given that the alternate hypothesis was rejected for (a) through (d), and the null hypothesis was not rejected for (e) through (f), there was no need to implement the plan.

**Demographic and Work History Questionnaires**

The Career Quest Demographic Questionnaires were used to gather information such as the number of years during which the participants were assisted by AFDC, number of children, age of oldest child, and participants’ educational levels. The Career Quest Work History Questionnaires were used for documentation and assessment of previous employment undertaken by the participants, and gathered the following data: name of employer, hourly pay rate, number of hours worked per week, period of employment and reason for leaving the job. Participants also presented their resumes, which provided information pertaining to the length of time since their last job. The questionnaires were designed by the workshop director and the design and content of the forms were approved by the project’s primary investigator and contract vendor. (Sample of questionnaires will be presented in Appendix).

**Coopersmith Self-Esteem Inventory – Adult Form (SEI – 1975)**

This instrument was used to assess the participants’ levels of self-esteem at the beginning and at the end of the program. (Only scores from the pre-workshop assessment will be analyzed in this proposed study). On the first day of the workshop, participants were asked to fill out the self-esteem and depression inventories after in-house matters such as registration, introduction, workshop orientation and informed consent had been addressed.

**Description of Coopersmith Self-Esteem Inventory – Adult Form (SEI – 1975)**

The Coopersmith Self-Esteem Inventory (SEI – 1975) was developed by Stanley Coopersmith for the purpose of assessing attitude toward oneself in general (global), and in specific (situational) contexts, namely peers, parents, school and personal interests. This attitude toward self has been referred to as self-esteem. For the School Form, respondents are required to state whether a set of 50 aspects of a person which are generally viewed as favorable or unfavorable are “like me” or “not like me” (McArthur and McArthur, 1997). This instrument was initially designed to measure self-esteem in children (ages 9-15 years), utilizing items from scales formerly employed by Carl Rogers. The Adult Form is an adaptation of the School Short Form and is used for individuals who are 16 years of age and older (Anastasi, 1988; Blascovich & Tomaka, 1991; Pervin, 1993; MacArthur & MacArthur, 1997). It is a 25-item inventory.
considered to be reliable and stable. Peterson and Austin (1985) point out that the SEI has an impressive amount of information bearing on the construct validity.

**Psychometric Properties of Coopersmith SEI - 1975**

In reference to the reliability and stability of the SEI, Bedian (1977) concurs with other researchers by noting that the test-retest reliability was .80 for males and .82 for females. The Kudo-Richardson (KR-20) reliability coefficients for males and females were identified as .74 and .67 respectively. According to Ahmed, Valliant and Swindle (1985), this instrument has construct and discriminant validity, and homogeneity had an acceptance level of .75 when measured by the Cronbach-alpha coefficient. These researchers described the SEI as being heterogeneous. On average, correlation of single items within the four factors of the instrument (View if Life, Family Relations, Tolerance and Confusion Level, and Sociability) was found to be moderate.

Mruk (1999, p. 101) cites as strengths of the Coopersmith Self-Esteem Inventory (SEI – 1975, 1981) its consistency with Coopersmith’s (1967) model and research on self-esteem (construct validity); the presence of content validity in reference to how the questions are related to what we know about self-esteem in terms of competence and worthiness, and the ease with which it can be administered, scored and interpreted in individual and group settings.

Ryden (1978) reported the instrument as having a test-retest reliability of .80 after intervals of about six to fifty-eight weeks which, according to Ryden, seems to lend support to the presence of equivalent stability of the Adult Version with the initial inventory for which Coopersmith (1967) indicated test-retest reliability ranging from .88 over five weeks to .70 over three years. In terms of scoring, a score of 100 suggests a totally positive self-esteem, while a score of zero suggests a totally negative self-esteem. The table below illustrates the normative data for means and standard deviations of the Coopersmith SEI in reference to gender and ethnicity:

**Table 1**  
**Means and Standard Deviations for Gender and Ethnicity of the Coopersmith Self-Esteem Inventory**

<table>
<thead>
<tr>
<th></th>
<th>Means</th>
<th>Standard Deviations</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>63.5</td>
<td>15.0</td>
<td>323</td>
</tr>
<tr>
<td>Male</td>
<td>64.8</td>
<td>14.7</td>
<td>325</td>
</tr>
<tr>
<td>Black</td>
<td>64.6</td>
<td>14.2</td>
<td>60</td>
</tr>
<tr>
<td>White</td>
<td>63.8</td>
<td>16.3</td>
<td>243</td>
</tr>
</tbody>
</table>

Coopersmith, 1981. Maximum possible total score is 100.
Kokenes (1978) conducted a factor analysis study of the Coopersmith SEI using a sample of 7,000 children (grades four through eight) for the purpose of observing the comparative importance of the home, peers, and school to the global self-esteem of pre-adolescents. The study confirmed the construct validity of the subscales that Coopersmith proposes to be self-esteem measures. Some studies indicate that the Coopersmith SEI is a fair predictor of achievement in reading, an inference that the instrument has predictive validity. In a study conducted by Simon and Simon (1975), they correlated the Coopersmith SEI and the Science Research Associates Achievement Series scores of eighty-seven fourth graders and obtained a concurrent validity coefficient of .33 (p<.01). They also correlated the children’s scores with the Lorge-Thorndike Intelligence Test, obtaining a coefficient of .30. These findings led the researchers to suggest the presence of concurrent validity in the Coopersmith SEI. The Coopersmith Self-Esteem Inventories “...are among the best known and most widely used of the various self-esteem measures” (Johnson, Redfield, Miller & Simpson, 1983). Some research findings indicate that the Coopersmith inventories do converge with other self-report instruments that measure self-esteem (see Johnson et al., 1983).

In relation to weaknesses associated with the SEI, the most obvious problem seems to be that there is no way for the examiner to determine if the participant is distorting his or her responses to take them in a desired direction (Mrük, 1999). This seems to suggest that manipulation of scores is possible. Also, there is no built-in provision to allow for identification of defensive self-esteem, or how much of what is being assessed is reflective of global or situational self-esteem. The following limitations were presented by Peterson and Austin (1985):

1. Beyond statements regarding high, medium or low self-esteem, interpretation may prove difficult since no exact criteria were provided.
2. Despite the SEI having seemingly been well-researched, well-documented and widely used, self-esteem as a concept is not well-developed.
3. The SEI is not recommended for clinical use in reference to individual assessment.
4. Behavioral ratings should be administered along with the SEI.

Susceptibility to responses that are viewed as being socially desirable is cited as possibly the biggest limitation to self-esteem measures (MacArthur & MacArthur, 1997). These researchers note that it is a challenge trying to obtain non-self-report instruments of self-esteem.
because of the construct’s personal and subjective nature. They also point to the tendency for skewness of scores toward high self-esteem, noting that even the lowest scorers on most self-esteem tests tend to score above the mean. Blascovich and Tomaka (1991, p. 123) seem to support this view, as indicated by their argument that “an individual who fails to endorse Self-Esteem Scale items at least moderately is probably clinically depressed.” At the same time, these authors also criticize the Coopersmith SEI for its lack of a stable factor structure.

Despite its limitations, the Coopersmith Self-Esteem Inventory (1967/1981) has been cited as one of the most popular measures of self-esteem (MacArthur & MacArthur, 1997). Mecca, Smelser and Vasconcellos (1989) concur, noting that “This instrument ..... has demonstrated a degree of reliability and validity that has made it very popular with researchers.” (A sample of the Coopersmith SEI is included in the Appendix).

**Procedure**

For this study, the completed records of 125 participants were used. Each participant was identified by a number for protection of identity and for privacy. Prior to starting the workshop, all workshop participants had read and signed research consent forms and they had been briefed by the workshop coordinator regarding how the information in their files would be utilized. This researcher obtained information from the demographic and work history questionnaires, participant survey forms, and vocational, educational and psychosocial assessments (including the SEI) that participants were required to complete during their involvement in the workshop.

The workshop participants also completed a Life Plan Supplemental Form on which they stated their life goal and what they perceived as barriers to their becoming employed. The barriers noted were divided into “Internal locus of control” and “External locus of control” to facilitate data analysis. As mentioned earlier, participants were administered a Pre- and Post-Workshop SEI. In an effort to reduce the threat to internal validity, this researcher chose to use only the scores obtained on the Pre-Workshop SEI administration.

An application was submitted to the Institutional Review Board (IRB) at Florida State University seeking approval to conduct this study. This action is required prior to engaging in any research activity, because the IRB assumes responsibility for ensuring that ethical codes of conduct and the welfare of all human subjects participating in any type of research involving the university are given priority in the course of research. The application was subsequently
approved by the Florida State University’s Human Subjects Committee. Copies of the consent form and approval from the Human Subjects Committee are attached in the Appendix section.

**Changes**

In the course of collecting data, it was discovered that all participants indicated number of children they had, but the information available was insufficient for purposes of addressing the question “What is the relationship between self-esteem and the number of children born to women while on welfare?” To overcome this obstacle, this researcher chose to modify the question which now reads: What is the relationship between self-esteem and number of children (meaning the number of children each of the participants has)?

**Summary**

The purpose of this study was primarily to explore the possibility of a link between self-esteem and the demographic characteristics of Black female welfare recipients. The study, being archival, allowed for extraction of pre-existing data from completed files for 125 Black female participants. Self-esteem served as the dependent or criterion variable and the independent or predictor variables comprised the following: (a) Number of years on welfare, (b) age at which participant had her first child, (c) the number of children the participant had, (d) parents and/or grandparents on welfare, (e) barriers to employment – internal or external locus of control, and (f) completion or non-completion of a Career Quest program for women on welfare. The measurements of interest administered to participants have been identified and described, and where applicable, their psychometric properties presented in this segment of the study.

This study attempted to accomplish three specific yet interrelated goals: (1) Provision of empirical findings through conduct of this study to encourage future research on self-esteem in relation to women on welfare, with the hope that prospective investigators of this issue will make adjustments to their research method to reflect whatever lessons surface in this study; (2) expansion of the research pool and extant literature currently available on self-esteem as it relates to women on welfare; and (3) clarification of the meaning of self-esteem and review of the major theoretical underpinnings in an attempt to raise the level of awareness of mental health professionals and others in the healthcare, education and social work systems who are in a position to influence the intervention programs and policies, and help convey the need for greater attention to the psychological impact of welfare dependency. A correlational technique and inferential statistics such as regression analysis and Analysis of Variance (ANOVA) were
employed in the analysis of data obtained from pre-existing information in participants’ files. Results of the descriptive statistics, computed correlation between variables and the regression analysis are provided in Chapter IV of this study.
CHAPTER 4

RESULTS

This study was undertaken for the purpose of examining the relationship between self-esteem and demographic characteristics of women on welfare. The participants completed the Coopersmith Self-Esteem Inventory, Adult Form (SEI-1975), both at the beginning and end of the Career Quest Workshop. For purposes of this study, however, only the pre-workshop self-esteem scores were used. Also, the researcher chose to focus on Black female participants only based on her interest in women’s issues, and in part because the majority of the workshop participants were women of African descent. In addition to the SEI, participants also completed Demographic and Work History questionnaires. Because this is an archival study, the researcher did not have any contact with the subjects. Instead, data were obtained from pre-existing records generated by the individuals who participated in the Career Quest project sponsored by Florida’s State Department of Labor and Employment Security in collaboration with The Florida State University.

The Coopersmith Self-Esteem instrument, scored as a single global self-esteem score, measured the individual subject’s attitudes toward herself in the areas of: 1) Social Self-Peers; 2) Home-Parents; 3) School-Academic; and 4) General-Self. Participants responded “Like Me” or “Unlike Me” to each of the 25 items on the SEI. For each item responded to that was a positive view of the self, four (4) points were awarded. The higher the score, the higher the suggested self-esteem of the responder. A score of 100 suggested a totally favorable (positive) self-esteem, while a score of zero (0) suggested a totally unfavorable (negative) self-esteem.

The relationships between Self-Esteem (criterion variable) and demographic variables (Years on Welfare, Mother’s Age at First Child, Number of children), and two control variables (Participant’s Age and Education Level) were analyzed through a multiple regression (direct method) to determine the extent to which each variable correlates with Self-Esteem. Subsequent to an assessment of the overall relationship model, the contribution of each of the predictor variables to Self-Esteem was examined for statistical significance (p<.01 based on Bonferonni correction).
A post-hoc method using a one-factor Analysis of Variance (ANOVA) was applied to determine whether the differences among the means of variables examined were greater than one would expect from a sampling error only. The ANOVA was also used as a way of predicting Self-Esteem from each of these demographic variables: Parents and/or Grandparents on Welfare, Perceived Barriers to Employment, Completers versus Non-Completers, and Marital Status (control variable). The results are summarized at the end of this chapter to address the hypotheses of this study.

**Preliminary Analysis**

An initial screening of the data was conducted through examination of the scatterplots for each combination of the criterion (Self-Esteem) and predictor variables. This measure was taken in an effort to detect any outliers that may exert excessive influence on the results of this study. Initial examination of the data indicated there were no problems evident in the scatterplots and hence no problematic outliers exerting excessive influence on the regression results. The researcher determined it best to drop one outlier (participant identifying as widowed) as only 1 of 125 subjects reported being widowed, making this an insufficient number in this category to make group comparisons. Table 2 shows the frequencies for the predictor and criterion variables.
Table 2
Frequency Table for Predictor and Criterion Variables

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Valid Percentage</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Years on Welfare</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 1 yr</td>
<td>13</td>
<td>10.4</td>
<td>10.4</td>
</tr>
<tr>
<td>1-3 yrs</td>
<td>30</td>
<td>24.0</td>
<td>34.4</td>
</tr>
<tr>
<td>4-6 yrs</td>
<td>32</td>
<td>25.6</td>
<td>60.0</td>
</tr>
<tr>
<td>7-9 yrs</td>
<td>29</td>
<td>23.2</td>
<td>83.2</td>
</tr>
<tr>
<td>10 + yrs</td>
<td>21</td>
<td>16.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Mother’s Age at First Child</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 15 yrs</td>
<td>6</td>
<td>4.8</td>
<td>4.8</td>
</tr>
<tr>
<td>15-20 yrs</td>
<td>95</td>
<td>76.0</td>
<td>80.8</td>
</tr>
<tr>
<td>21-25 yrs</td>
<td>19</td>
<td>15.2</td>
<td>96.0</td>
</tr>
<tr>
<td>26-30 yrs</td>
<td>4</td>
<td>3.2</td>
<td>99.2</td>
</tr>
<tr>
<td>30+ yrs</td>
<td>1</td>
<td>0.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Parents and/or Grandparents on Welfare</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>72</td>
<td>57.6</td>
<td>57.6</td>
</tr>
<tr>
<td>Parents</td>
<td>44</td>
<td>35.2</td>
<td>92.8</td>
</tr>
<tr>
<td>Grandparents</td>
<td>5</td>
<td>4.0</td>
<td>96.8</td>
</tr>
<tr>
<td>Both</td>
<td>4</td>
<td>3.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Number of Children</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>27</td>
<td>21.6</td>
<td>21.6</td>
</tr>
<tr>
<td>2</td>
<td>33</td>
<td>26.4</td>
<td>48.0</td>
</tr>
<tr>
<td>3</td>
<td>37</td>
<td>29.6</td>
<td>77.6</td>
</tr>
<tr>
<td>4+</td>
<td>28</td>
<td>22.4</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Perceived Barriers to Employment</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal</td>
<td>42</td>
<td>33.6</td>
<td>33.6</td>
</tr>
<tr>
<td>Mostly Internal</td>
<td>7</td>
<td>5.6</td>
<td>39.2</td>
</tr>
<tr>
<td>Half and Half</td>
<td>22</td>
<td>17.6</td>
<td>56.8</td>
</tr>
<tr>
<td>Mostly External</td>
<td>14</td>
<td>32.0</td>
<td>88.8</td>
</tr>
<tr>
<td>External</td>
<td>40</td>
<td>11.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Completers vs. Non-Completers</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed</td>
<td>72</td>
<td>57.6</td>
<td>57.6</td>
</tr>
<tr>
<td>Did not Complete</td>
<td>53</td>
<td>42.4</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Self-Esteem</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt; 20</td>
<td>5</td>
<td>4.0</td>
<td>4.0</td>
</tr>
<tr>
<td>20-40</td>
<td>20</td>
<td>16.0</td>
<td>20.0</td>
</tr>
<tr>
<td>41-60</td>
<td>33</td>
<td>26.4</td>
<td>46.4</td>
</tr>
<tr>
<td>61-80</td>
<td>46</td>
<td>36.8</td>
<td>83.2</td>
</tr>
<tr>
<td>81-100</td>
<td>21</td>
<td>16.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

From an examination of Table 2, the majority of the 125 participants (25.6%) spent 4-6 years on welfare. Almost one-fourth (24%) spent 1-3 years on welfare, while 23.2% were shown to have spent 7-9 years on welfare. Nearly one out of every six participants (16.8%) was found to have spent 10 or more years as a welfare recipient. Regarding Motherhood, Table 2 indicated
that the majority (76%) of the participants tended to have their first child around ages 15-20 years. Regarding Parents and/or Grandparents on Welfare, the majority of participants (57.6%) did not have any parents or grandparents who had been on welfare. However, 35.2% indicated that their parents had been on welfare. Most of the participants had in the range of 1-3 children, with 29.6% of participants having had three children. Those with two children comprised 26.4% of the participants. This was followed by those with one child (21.6%).

For Perceived Barriers to Employment, the results suggest that the majority of participants (33.6%) presented an internal locus of control, while 32.0% showed an external locus of control. Some participants were evenly split on internal and external barriers to employment (17.6%), while some presented with more external than internal (11.2%). For Completers versus Non-Completers, the results reveal that 57.6% of participants in the study completed the Employee Assistance Program (EAP), while 42.4% did not finish. For Self-Esteem, the largest percentage of participants (36.8%) had scores in the range of 61-80, followed by 26.4% participants having scores in the range of 41-60.

In reference to the three control variables (Education Level, Participant’s Age, and Marital Status), the results show that 44.8% of those included in the study had less than a high school education, while 46.4% had completed high school.

In terms of age, 7.2% of participants were shown to be age 30 years (this age group representing the highest percentage). Regarding marital status, the results reveal that 76% of participants were single mothers, while 10.4% were married. Only one individual was shown to be widowed. For purposes of facilitating group comparison, this individual was omitted. The divorced group represented 8.8% and the separated, 4%.

**Descriptive Statistics**

The descriptive statistics for the criterion, predictor, and potential control (demographic) variables are illustrated in Table 3. The correlations among the criterion, control, and predictor variables are shown in Table 4. Correlations with an asterisk indicate a p-value less than 0.05, while correlations with a double asterisk indicate a p-value less than 0.01. The correlation table reveals an inverse relationship (-.243) between the predictor variables of number of children a participant had and the age at which she first became a mother. This suggests that the younger the mother’s age at first motherhood, the greater the number of children she is likely to have. The .006 level of significance (p-value) suggests that there is a 99.4% confidence that this correlation
holds true for the population. The results also indicate a positive correlation \( r = .276 \) between a participant’s age and the age at which she had her first child (both predictor variables). It suggests that the higher the mother’s age, the older she was likely to be at first motherhood \( (p=.002) \). A positive correlation is also indicated between participant’s age and number of children \( r = .292 \), suggesting that the older the mother, the more children she is likely to have \( (p=.001) \). There was also a positive correlation \( r = .253 \) found between education level and mother’s age at first child \( (p=.004) \), suggesting that the more education a participant had, the later the age at which she started motherhood. Consistent with prior research and expectations based on theory, most correlations occurred in the expected direction. None of the results was statistically significant.

**Table 3**

Descriptive Statistics for the Criterion, Predictor and Control variables (n=125)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Min</th>
<th>Max</th>
<th>Possible Range</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Predictor Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Years on Welfare</td>
<td>2.12</td>
<td>1.248</td>
<td>0</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mother's age at first child</td>
<td>18.65</td>
<td>3.392</td>
<td>11</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>Parents and/or Grandparents on Welfare</td>
<td>.53</td>
<td>.725</td>
<td>0</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Number of Children</td>
<td>2.70</td>
<td>1.381</td>
<td>1</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Perceived Barriers to Employment</td>
<td>1.82</td>
<td>1.467</td>
<td>0</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Completers vs. Non-Completers</td>
<td>.42</td>
<td>.496</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Control Variables</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education Level</td>
<td>.66</td>
<td>.685</td>
<td>0</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Participant's Age</td>
<td>31.59</td>
<td>7.441</td>
<td>19</td>
<td>58</td>
<td></td>
</tr>
<tr>
<td><strong>Criterion Variable</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>60.80</td>
<td>21.378</td>
<td>12</td>
<td>100</td>
<td>0 - 100</td>
</tr>
</tbody>
</table>

The descriptive statistics for the control variables of participant’s age, and education are reflective of how the variables were coded. Education was coded as 0, 1, 2, 3, or 4. A code of 0 indicated less than a high school education; a code of 1 indicated completion of high school or attainment of GED; a code of 2 indicated some college or attainment of an AA degree; a code of 3 indicated completion of a Bachelor’s degree, and a code of 4 indicated completion of graduate school. The mean score for Education was 66, \((SD=0.69)\). The mean age for participants was 31.59 years, \((SD=7.44)\). The minimum age of participants was 19 years, and the highest (maximum) age was 58 years.
Table 4
Pearson Correlation Matrix

<table>
<thead>
<tr>
<th></th>
<th>Years on Welfare</th>
<th>Mother's age at first child</th>
<th>Number of Children</th>
<th>Participant's Age</th>
<th>Education Level</th>
<th>Self-Esteem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Years on Welfare</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother's age at first child</td>
<td>-0.095</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Children</td>
<td>0.148</td>
<td>-0.243**</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participant's Age</td>
<td>-0.067</td>
<td>0.276**</td>
<td>0.292**</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education Level</td>
<td>-0.140</td>
<td>0.253**</td>
<td>-0.077</td>
<td>0.088</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>-0.115</td>
<td>0.030</td>
<td>-0.170</td>
<td>-0.044</td>
<td>0.103</td>
<td>1.00</td>
</tr>
</tbody>
</table>

* p < 0.05, two-tailed
** p < 0.01

Self-Esteem and Demographic Characteristics of Participants

For this study, the research question addressed was: What is the relationship between self-esteem and demographic characteristics of women on welfare? The selected demographic characteristics were years on welfare, age of first motherhood, number of children, parents and/or grandparents on welfare, perceived barriers to employment, and completion versus non-completion of a Career Quest program for women on welfare. Education level, marital status and participant’s age were selected as potential control variables that could possibly mediate the relationship between the criterion (Self-Esteem) and predictor variables. Therefore, these variables were included as covariates in the respective analyses.

A one-way analysis of variance (ANOVA) was employed for the purpose of finding out if the differences among the means of variables used were greater than predicted from sampling error, and to predict self-esteem. The variables for which ANOVA was used were nominal scale variables, namely parents and/or grandparents on welfare, barriers to employment, marital status, and completers versus non-completers. A multiple regression (direct method) was also utilized to test the relationship between self-esteem and demographic variables (years on welfare, number of children, mother’s age at first child, education level, and participants’ age). The results from the Multiple Regression analyses and the results from the ANOVA analyses are illustrated in Tables 5 through 9 illustrated below.

What is the Relationship between Self-Esteem and Years on Welfare, Mother’s Age at First Child, Number of Children, Education Level, and Participant’s Age?
Years on welfare has been defined within the study as the length of time (number of years) each participant was in receipt of AFDC. This interval variable (YRSWF) was entered in a multiple regression to determine how much of the participant’s self-esteem can be attributed to it. Other interval variables factored into the multiple regression were mother’s age at first child or motherhood (MAFCH), number of children (NOCWW), education level (EDU), and participant’s age (PARAG). The results of the multiple regression are shown in Table 5.

**Table 5**
**Summary of Multiple Regression Analysis Predicting Self-Esteem from Predictor and Control Variables (n = 125)**

<table>
<thead>
<tr>
<th>Independent Variables</th>
<th>r</th>
<th>B</th>
<th>SE B</th>
<th>B</th>
<th>t</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>YRSWF</td>
<td>-.115</td>
<td>-1.411</td>
<td>1.573</td>
<td>-.082</td>
<td>-8397</td>
<td>.372</td>
</tr>
<tr>
<td>MAFCH</td>
<td>.030</td>
<td>-0.252</td>
<td>0.643</td>
<td>-.040</td>
<td>-3920</td>
<td>.696</td>
</tr>
<tr>
<td>NOCWW</td>
<td>-.170</td>
<td>-2.490</td>
<td>1.569</td>
<td>-.161</td>
<td>-1.587</td>
<td>.115</td>
</tr>
<tr>
<td>EDU</td>
<td>.103</td>
<td>2.767</td>
<td>2.911</td>
<td>.089</td>
<td>.950</td>
<td>.344</td>
</tr>
<tr>
<td>PARAG</td>
<td>-.044</td>
<td>.003</td>
<td>0.292</td>
<td>.001</td>
<td>.011</td>
<td>.991</td>
</tr>
</tbody>
</table>

R = .211  R² = .045  R² adj = .004  F = 1.112  p = .358

Note: YRSWF = Years on Welfare, MAFCH = Mother’s Age at First Child, NOCWW = Number of Children, EDU = Education Level, PARAG = Participant’s Age

In Table 5, the Pearson correlation coefficient (i.e. the r) shows the bivariate correlation between Self-Esteem and each of the other variables listed. No significant relationships were noted. The R² model of .045 which reflects the strength of the relationship between self-esteem and predictor (independent) and control variables was not found to be statistically significant. Therefore, the conclusion is there is no significant relationship between years on welfare and self-esteem. In each case, the r and the partial r are both insignificant. Hence, the researcher also concludes from this finding that there is no significant relationship between self-esteem and mother’s age at first child, no significant relationship between self-esteem and number of children, and no significant relationship between self-esteem and the control variables Education and Participant’s Age.

What is the Relationship Between Self-Esteem and Parents and/or Grandparents on Welfare?
Previous research (e.g. An et al., 1993; Gottschalk, McLanahan, & Sandefur, 1994; Vartanian, 1999) indicates intergenerational transfer of welfare dependency. Intergenerational welfare dependency refers to the participant having had a parent(s) and/or a grandparent(s) on welfare. An ANOVA was utilized to predict self-esteem from parents and/or grandparents’ dependency on welfare. The results of this analysis are shown in Table 5 below. Grouping was done to allow for refinement of the variable.

**Table 6**

**Summary of ANOVA Predicting Self-Esteem from Parents and/or Grandparents’ Dependency on Welfare (n=125).**

<table>
<thead>
<tr>
<th>Self-Esteem</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>72</td>
<td>59.22</td>
<td>21.437</td>
<td>2.526</td>
</tr>
<tr>
<td>Parents</td>
<td>44</td>
<td>61.45</td>
<td>20.973</td>
<td>3.162</td>
</tr>
<tr>
<td>Grandparents</td>
<td>5</td>
<td>74.40</td>
<td>22.199</td>
<td>9.928</td>
</tr>
<tr>
<td>Both</td>
<td>4</td>
<td>65.00</td>
<td>25.586</td>
<td>12.793</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td>60.80</td>
<td>21.378</td>
<td>1.912</td>
</tr>
</tbody>
</table>

**Source**

<table>
<thead>
<tr>
<th></th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>1193.446</td>
<td>3</td>
<td>397.815</td>
<td>.868</td>
<td>.460</td>
</tr>
<tr>
<td>Within Groups</td>
<td>55478.554</td>
<td>121</td>
<td>458.500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>56672.000</td>
<td>124</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Responses were coded as 0 (None), 1 (Parents only), 2 (Grandparents only), 3 (Both parents and grandparents). More than half (72 out of 125) of participants indicated they had neither parents nor grandparents on welfare. A little more than one third (44 out of 125) indicated their parents had been welfare recipients. Only 5 out of the 125 participants indicated having grandparents on welfare, while 4 of the 125 responded to having both parents and grandparents on welfare. Despite a lack of statistical significance between self-esteem and parents and/or grandparents being on welfare, the mean (74.40) for participants with only grandparents on welfare was higher than the mean for those with parents only (61.45), none (59.22), or both parents and grandparents on welfare (65.00).

What is the Relationship Between Self-Esteem and Perceived Barriers to Employment?
Perceived barriers to employment refer to the welfare recipients’ locus of control regarding what they view as barriers or obstacles to their becoming gainfully employed. These are both system-based (external) and client-based (internal). The predictor variable (perceived barriers to employment) was coded 0, 1, 2, 3, 4, with 0 meaning internal barriers only, 1 meaning mostly internal barriers, 2 indicating an equal number of internal and external barriers, 3 indicating external barriers only, and 4 representing mostly external barriers.

Barriers were classified as either internal or external depending on whether the participant reflected an internal or external locus of control. Analysis of the participants’ responses indicated that many of them stated the same thoughts, but in different ways. Thus, for example, if the participant stated something such as, “I did not get my GED” or “I screwed up my life” as an obstacle to employment, this was coded as an internal barrier. If she said “I had to take care of my sick parents,” or “Having problems with daycare” this was coded as external. Approximately 33.6% of participants indicated having an internal locus of control, their mean being 64.48, while 32% cited external barriers only, their mean being 64.20. Grouping was done to allow for variable refinement.

Table 7 lists types of internal/external barriers to employment indicated by participants.

Table 7
Listing of Types of Internal/External Barriers to Employment Indicated by Participants

<table>
<thead>
<tr>
<th>Internal</th>
<th>External</th>
</tr>
</thead>
<tbody>
<tr>
<td>Need to finish school</td>
<td>Problems with sick child</td>
</tr>
<tr>
<td>Need to get GED</td>
<td>Cannot afford daycare</td>
</tr>
<tr>
<td>Lack of concentration</td>
<td>Abusive relationship(s)</td>
</tr>
<tr>
<td>Feeling like a failure</td>
<td>Lack of funds for attending school</td>
</tr>
<tr>
<td>Procrastination</td>
<td>Childrearing</td>
</tr>
<tr>
<td>Lack of confidence</td>
<td>Don’t know where job is</td>
</tr>
<tr>
<td>Indecisiveness</td>
<td>Single parent</td>
</tr>
<tr>
<td>Lack of will/motivation</td>
<td>Having child at an early age</td>
</tr>
<tr>
<td>Lack of commitment</td>
<td>Transportation problems</td>
</tr>
</tbody>
</table>

An ANOVA was employed to predict Self-Esteem from the barriers to employment presented by participants. The results of this analysis are shown in Table 8. No statistical significance was found between self-esteem and barriers to employment.
Table 8
Summary of ANOVA Predicting Self-Esteem from Perceived Barriers to Employment (n=125)

<table>
<thead>
<tr>
<th>Self-Esteem</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal</td>
<td>42</td>
<td>64.48</td>
<td>22.837</td>
<td>3.524</td>
</tr>
<tr>
<td>Mostly Internal</td>
<td>7</td>
<td>54.29</td>
<td>18.455</td>
<td>6.975</td>
</tr>
<tr>
<td>Half and Half</td>
<td>22</td>
<td>54.55</td>
<td>21.613</td>
<td>4.608</td>
</tr>
<tr>
<td>Mostly External</td>
<td>14</td>
<td>53.14</td>
<td>22.156</td>
<td>5.922</td>
</tr>
<tr>
<td>External</td>
<td>40</td>
<td>64.20</td>
<td>18.978</td>
<td>3.001</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td>60.80</td>
<td>21.378</td>
<td>1.912</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>3008.526</td>
<td>4</td>
<td>752.132</td>
<td>1.682</td>
<td>.159</td>
</tr>
<tr>
<td>Within Groups</td>
<td>53663.474</td>
<td>120</td>
<td>447.196</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>56672.000</td>
<td>124</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What is the Relationship Between Self-Esteem and Completers versus Non-Completers?

As noted in the research, completers refer to participants who attended all workshop sessions conducted over a 3-week period and who took all the pre- and post-workshop tests administered during that time frame. Non-completers refer to participants who did not attend all the workshop sessions presented in the 3-week period and who did not take the post-tests. Since this study focused on Self-Esteem, participants who completed the Coopersmith Self-Esteem Inventory (SEI Adult Form) prior to and at the end of the workshop were classified as completers. Those who did not take the Self-Esteem Inventory at the end of the workshop were classified as non-completers. For this research analysis, only pre-workshop SEI scores were used. Table 9 shows results of the analysis for the ANOVA used to predict self-esteem for completers and non-completers.
Table 9
Summary of ANOVA Predicting Self-Esteem from Completers and Non-Completers (n=125)

<table>
<thead>
<tr>
<th>Self-Esteem</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed</td>
<td>72</td>
<td>63.33</td>
<td>20.594</td>
<td>2.427</td>
</tr>
<tr>
<td>Did not complete</td>
<td>53</td>
<td>57.36</td>
<td>22.132</td>
<td>3.040</td>
</tr>
<tr>
<td>Total</td>
<td>125</td>
<td>60.80</td>
<td>21.378</td>
<td>1.912</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>1089.811</td>
<td>1</td>
<td>1089.811</td>
<td>2.412</td>
<td>.123</td>
</tr>
<tr>
<td>Within Groups</td>
<td>55582.189</td>
<td>123</td>
<td>451.888</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>56672.000</td>
<td>124</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

There was no statistical significance found between self-esteem and this predictor variable. However, the completers had a higher mean (63.33) than non-completers (mean=57.36). The non-completers, standard deviation 22.132, deviated more from the mean than did the completers (standard deviation = 20.594).

Other Findings

Marital status was introduced as a potential variable associated to self esteem to determine its level of prediction of self-esteem. This variable was coded as 0, 1, 2, 3, and 4. A code of 0 indicated single, 1 indicated married, 2 represented divorced, 3 indicated separated, and 4 meant widowed. Only one participant was found to be widowed. This participant was not included in the group comparison (thus n=124). The mean score for marital status was .43, (SD=0.87). Table 10 shows the results of the analysis of ANOVA used to predict self-esteem from this variable. The wide grouping was done in order to allow for refinement of the variable.
Table 10
Summary of ANOVA Predicting Self-Esteem from Marital Status (n=124)

<table>
<thead>
<tr>
<th>Self-Esteem</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>SE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>95</td>
<td>62.78</td>
<td>19.448</td>
<td>1.995</td>
</tr>
<tr>
<td>Married</td>
<td>13</td>
<td>42.77</td>
<td>23.403</td>
<td>6.491</td>
</tr>
<tr>
<td>Divorced</td>
<td>11</td>
<td>63.64</td>
<td>21.796</td>
<td>6.572</td>
</tr>
<tr>
<td>Separated</td>
<td>5</td>
<td>59.20</td>
<td>33.752</td>
<td>15.094</td>
</tr>
<tr>
<td>Total</td>
<td>124</td>
<td>60.61</td>
<td>21.362</td>
<td>1.918</td>
</tr>
</tbody>
</table>

Source

<table>
<thead>
<tr>
<th>Source</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>4695.408</td>
<td>3</td>
<td>1565.136</td>
<td>3.652</td>
<td>.015</td>
</tr>
<tr>
<td>Within Groups</td>
<td>51434.011</td>
<td>120</td>
<td>428.617</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>56129.419</td>
<td>123</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The mean for the singles group was 62.78 (SD=19.45). The married group had a mean of 42.77 (the lowest mean) (SD=23.403). The divorced group showed a mean of 63.64, (SD=21.796). The group of “separated” participants showed a mean of 59.20 (SD=33.752). The multiple comparison indicated that the mean difference of the single and the married group was significant (p-value = .008) at the .050 level. The difference in the self-esteem score of singles and the married is 20% or a 98.4% confidence in the difference between single and married participants in the population. The average self-esteem score for the singles group was 20% higher than that of the married group. The between-group p-value was .015, which could be viewed as significant. In terms of group difference, the married participants showed the lowest level of self-esteem (almost 1 standard deviation difference).

Conclusion

In this study, some hypotheses were stated in the alternate, and some in the null. The alternate hypothesis was rejected for hypotheses (a) through (d); the null hypothesis was not rejected for hypotheses (e) and (f). This researcher concludes that, overall, the results indicate that there is a stronger correlation between predictor variables than exists between self-esteem and the demographic variables. The strongest correlation among predictor variables is between participant’s age and the number of children. The results of these ANOVA and multiple
regression analyses are discussed in the chapter that follows. Conclusions derived from findings are presented and limitations of the study, implications and recommendations for practice as well as implications and recommendations for further research are noted.
CHAPTER 5

DISCUSSION

This study explored the relationship between self-esteem and certain demographic variables of Black women on welfare. The purpose for undertaking the study was three-pronged. The first goal was to expand on existing literature and to stimulate research interest in this field. Another goal was to draw the public’s awareness to the need for greater attention to the potential psychological impact of welfare dependency as it relates to Black women. The researcher is hoping that persons in the institutional systems that have some type of relationship with women receiving government assistance (welfare) will, through increased awareness, be motivated to lobby for change on their behalf and goad policymakers into developing policies that are mutually beneficial to women and society as a whole. The third objective of this study was to generate more interest among students, professionals and the reading audience at large in the topic under discussion, based on the wealth of literature currently available in reference to self-esteem and its undisputed importance in the hierarchy of human needs.

As noted earlier, this was an archival study; therefore, the researcher did not have direct contact with the participants. All necessary data were obtained from pre-existing records generated by women who participated in a special program, Career Quest, sponsored by Florida’s State Department of Labor and Employment in partnership with The Florida State University during 1992 - 1996. The participants completed one demographic and one work history questionnaire and a Self-Esteem measurement (pre- and post-workshop). Only the pre-workshop Self-Esteem score was utilized in the study. The relationship between Self-Esteem and the demographic variables of Years on Welfare, Age of First Motherhood, Number of Children, Parents and/or Grandparents’ Dependency on Welfare, Perceived Barriers to Employment, and Completion versus Non-Completion of the Career Quest Program for Women on Welfare was analyzed through the use of multiple regression and analysis of variance (ANOVA). Three control variables (Participant’s Age, Education Level, and Marital Status) were also included as covariates in the analysis based on their mediating potential. This chapter discusses the findings of the study, the researcher’s conclusions, limitations of the study, implications for practice and the implications for further research.
In this study, the researcher examined the possibility that self-esteem is significantly related to certain behavior characteristics of Black women on welfare. Despite the plethora of literature that has begun to surface regarding self-esteem, and the existence of some empirical studies that suggest a strong relationship between self-esteem and some of the demographic variables, this study did not reveal any results supportive of those findings.

Overall, it was concluded from the findings of this study that Self-Esteem is not significantly related to the demographic variables used in the statistical analysis. Only one of the control variables, Marital Status, was found to have a correlational statistical significance in relation to Self-Esteem. The findings seemed consistent with the literature on self-esteem and Blacks in some cases, in that a stronger correlation was found between predictor variables than between Self-Esteem and the predictor variables. For example, this study showed a positive correlation between level of education and the age at which the participant had her first child: The more educated a participant, the later the age at which she started having children. The literature points to a lack of evidence of clear self-esteem deficit in racial minorities notwithstanding their economic plight, although some schools of thought opine otherwise (Schneiderman, Furman & Weber, 1989).

**Description of Sample Population**

The sample for this study consisted of 125 participants who were selected from the pool of women who participated in the Career Quest program conducted at Florida State University during the period 1992 to 1996. This was a convenience sample consisting of Black women age 18 years and above. Women of other racial groups and male subjects were not included in the study because the researcher chose to focus on Black women (they comprised the largest percentage of workshop participants and current research is, at best, controversial regarding self-esteem of Black women).

Data were collected from the files of the participants for statistical analysis. The instruments used were the completed Demographic and Work History Questionnaires and the Coopersmith Self-Esteem Inventory (SEI – Adult Form, 1975). All participants were residents of the city of Tallahassee, Florida. Some were women born in this part of Florida and a few were individuals who had relocated from other areas of Florida and other states, for a variety of reasons.
In this study, the researcher used the term “Black” as a descriptor of the participant’s ethnicity or race to mirror existing census descriptions. This descriptor was also employed to allow for inclusion of some participants of African descent who may have been from other countries considered a part of the African diaspora, such as Africa or the Caribbean, and persons who may have been of mixed ethnicity but who classified themselves as “Black.”

**Discussion of Findings**

A review of the descriptive statistics for the sample revealed that 25.6% of the participants had spent 4-6 years on welfare. Nearly one fourth (24%) had been receiving welfare aid for 1-3 years, and 23.2% of the sample was found to have spent 7-9 years on welfare. One out of every six participants (16.8%) had spent 10 or more years as a welfare recipient. These findings reflect, to an extent, Ellwood’s (1986a) findings. Ellwood noted that more than 40 percent of welfare participants were found to have had multiple spells of welfare dependency when the multiple-spells approach was applied in data analysis, and that “fifty percent of those who ever receive AFDC will receive it for more than four years,” while “nearly 25 percent will eventually use AFDC in ten or more years.” Goodban (1985) conducted an analysis of some psychological effects related to welfare dependency with a group of one hundred single Blacks on welfare. Of that group, more than 50% had been on public assistance for more than five years. According to Schneiderman, Furman, and Weber (1987), more than fifty percent of those dependent on welfare (in the mid eighties) received AFDC beyond four years. The average length of time on AFDC was almost seven years.

However, despite the length of time spent on welfare, participants’ Self-Esteem did not appear to correlate significantly with this demographic variable. This finding appears to support some research (e.g. Rosenberg & Simmons, 1972) that suggest that length of time on welfare does not affect the Black woman’s self-esteem. After analysis of a large national sample of black adults, Hughes and Demo (1989) confirmed previous findings by Rosenberg and Simmons (1972), and Gecas (1982) indicating that, among African Americans, the sense of self-acceptance (hence self-esteem) tends to be shaped mostly by reflected appraisals from significant others in their immediate community. Crocker and Major (1989) also noted the role played by the contextual setting in reference to self-esteem as it relates to stigmatized and oppressed groups. They posit that through psychological selectivity, these persons are able to value attributes for which they are valued by those similar and proximal to them, and discredit negative evaluations.
from those viewed as distant and hence lacking credibility (for example, persons representing the welfare system, whom they may view as discriminatory). At the same time, there are some other studies\cite{(e.g. Sankofa-Amammere, 1999)} that have found the existence of an inverse relationship between self-esteem and length of time on welfare. To illustrate, in a study conducted by Sankofa-Amammere (1999) which investigated the relationship between employment–related histories and psychological distress of single women on welfare, the findings revealed a scatterplot with an inverse U relationship depicted between “self-esteem” and “years on welfare.” Thus, indications are that research findings to date are inconclusive regarding the correlation between self-esteem and time spent on welfare. The jury is still out for this one.

Overall, the findings of this study being discussed showed that there was a stronger relationship between the predictor variables than between the predictor variables and Self-Esteem. Therefore, the relationships observed between predictor variables will be discussed first. With regards to the first variable, Motherhood, the study showed that most of the participants had their first child between ages 15 to 20 years. This finding is consistent with research (see Bacchu & O’Connell, 2001). The most prevalent ages for first motherhood were age 15 years (10.4%), age 17 years (16.8%), age 18 years (14.4%), age 19 years (16.8%), and age 20 years (10.4%). A positive correlation was found to exist between a participant’s age and the age at which she had her first child. This suggested that the greater the participant’s age, the older she was likely to be at her first conception.

This study revealed a positive correlation between participant’s age and the number of children, meaning that the older the participant, the more children she is likely to have. One trend of thought posited in current literature that seems aligned to this finding and yet raises some questions is the welfare culture model of poverty or culture of poverty theory\cite{a term coined by Oscar Lewis (1965), (see also Murray, 1984; Mead, 1986; Corcoran, 1995)}, which argues that young women on welfare become pregnant in order to increase the benefits they receive from government. While superficially this theory may appear appropriate, a more in-depth review would suggest that theory to be a near-fallacy, given that the fertility rate of persons on welfare have been found to be lower than that of women not on welfare (see Rank, 1989; Stewart, 2003).

Data from the U.S. Department of Health and Human Services (1998) reveal that the average number of children born to women on welfare is two. This presents a picture vastly
different to the stereotyped view of these women as having lots of children to collect more benefits. Some studies (see Bach & O’Connell, 2001) have suggested that a large percentage of welfare recipients tend to have their first child while in their early teens, ages 15 to 19 years, either while still in school or after dropping out of school, and their frequency of motherhood may be either to enhance their self-esteem (Dash, 1986; Freeman & Rickels, 1993; Musick, 1993; Oates, 1997), or due to limited education or perceived benefits of not working (Lewis, 1965; Murray, 1984; Cocoran, 1995). Literature (see Kaplan, 1996; also notes that early childbearing is viewed by some young women, especially those from disadvantaged homes and neighborhoods, as a way of gaining control over their lives. Some researchers (see Geronimus, 1997) argue that, for some young (especially minority) women, childbearing is a “rational choice.” The assumption is that they do not see the same returns on education in comparison to their white or middle class counterparts. This researcher believes that the relationship between the welfare recipient’s age and number of children is inconclusive, in view of the varying premises and inconclusive findings that abound in the research field.

How Important is Education?

The present study revealed that education level was a predictor of age of first motherhood. It can be inferred from this observation that those with more education are likely to start having children at a later age than their less educated peers. Examination of the descriptive statistics showed that the percentage of participants who completed high school (46.4%) was almost equivalent to the percentage that did not complete high school (44.8%). Only 8.8% of participants had above a high school education. These figures are fairly consistent with literature (Bane & Ellwood, 1994; Harris, 1996; Wagner et al, 1998; Danziger et al., 2000) which notes that a large percentage of women who receive welfare have limited education, many of them not having completed high school, a factor which increases their barriers to employment and contributes to their becoming increasingly dependent on welfare.

Approximately 50% of persons on welfare are high school drop-outs (Harris, 1996). Research also indicates that the average person on welfare reads at the sixth to eighth grade level (Barton & Jenkins, 1995). Some researchers (Holmbeck et al, 1994; Ross & Van Willigen, 1997; Mizell, 1999a; Stewart, 2003) have found that teenagers with high self-esteem have higher educational attainment and are more likely to use contraceptives, thereby reducing the risk of early pregnancy.
The majority of the 125 participants (57.6%) indicated that neither their parents nor grandparents had been welfare recipients. A little more than a third of the sample (35.2%) reported having parents who had been on welfare. A review of the mean scores revealed that the mean for the 5 participants who reported having only grandparents on welfare was significantly higher (74.40) than the mean for those with parents only, none, or both parents and grandparents on welfare. This finding suggests that the participants who had only grandparents on welfare had a higher self-esteem than all the other groups. This finding is inconsistent with research that contends there is a positive relationship between self-esteem and intergenerational welfare dependency (McLanahan, 1988; Dolinsky, Caputo, & O’Kane, 1989; Gottschalk, McLanahan, & Sandefur, 1994; Rank & Cheng, 1995), because the scores indicate that participants with no parent or grandparent on welfare showed the lowest mean (59.22) on self-esteem.

One would expect those with no parent or grandparent on welfare to have higher self-esteem when compared to the other groups to be consistent with the literature that suggests that the woman’s self-esteem is impacted negatively if she is following in her parents’ footsteps in terms of welfare receipt. Studies done by Gottschalk (1992) and Vartanian (1999) showed that for Blacks, parental dependency on welfare aid was a strong predictor of welfare receipt by the daughter. They noted, however, that other mediating variables such as education and income level played a role. Thus, it is possible that other mediating variables may have contributed to the result obtained in this study under discussion.

Impediments to Employment

Many studies indicate that a significant number of persons on welfare, notably minorities, experience difficulty holding on to jobs and tend to cycle between work and public assistance due to personal factors that create impediments to employment (Harris, 1993, 1996; Pavetti, 1993; Spalter-Roth et al., 1995). Most jobs call for some sort of credential, such as a high school diploma or work experience (see Holzer, 1996). Most persons on welfare do not have these requirements. For example, literature (Harris, 1996) suggests that approximately 50 percent of welfare recipients are high school dropouts, and about 40 percent did not have any work experience before starting on welfare. We can already surmise, therefore, that lack of education and work experience are barriers to employment – factors that impede some people in their effort to get off welfare. While some barriers may be due to systemic structures or situations beyond
the individual’s control (e.g. gender bias), there are barriers that may stem from the person’s characteristics or behaviors (e.g. dropping out of school). In this study, participants cited both internal and external barriers to employment. Barriers such as “no GED,” “lack of job skills” and “no childcare” featured prominently in participants’ listing.

The majority of the participants (33.6%) cited barriers to their employment as internal. Almost an equal number (32.0%) pointed to external factors as reasons for their employment issues. The inference here is that Black female welfare recipients are evenly split in terms of perceived barriers to employment. One key observation is that they are not all “blaming the system” as the public is prone to believe. Rather, they seem to be taking responsibility for their actions and attainment of goals. Coincidentally, the practice of self-responsibility is one of the six pillars of self-esteem (Branden, 1994).

Participation in training programs may be viewed as the practicing of self-responsibility. Job training programs were initiated beginning in 1967 to assist persons on welfare in finding jobs and self-sufficiency (Sankofa-Amammere, 1999). It is in keeping with this objective that the Career Quest workshops were implemented. The results show that more than half of the participants (57.6%) completed the Career Quest program, while 42.4% did not complete it. Researchers (see Weidman et al., 1988) have highlighted a host of issues that tend to prevent participants from completing the program. Factors such as child care, money, transportation, health, and social support were presented as the main obstacles. In the study conducted by Weidman et al., (1988), about 30 percent completed the program, while the others dropped out. In reference to this study under review, the researcher believes that some participants did not finish the program due to a lack of motivation, personal problems encountered while in the program such as a sick child, lack of transportation, and family illness or substance abuse relapse. Completers may have been more motivated, may have had a higher level of education and may have felt more invested in the program given their higher cognitive functioning.

Lack of education has been presented as one of the many barriers to getting off welfare. Dean and Liobrera (Center on Budget and Policy Priorities, 2003) indicate that prior to enactment of welfare reform, about 88 percent of recipients age 18-49 had no more than a high school diploma, and 42 percent had no high school diploma or GED. They point out that persons in this age group face great difficulties in finding jobs, even when the economy is good. Their findings are similar to this study’s in which almost half (44.8%) of participants were found to
have less that a high school education. Possibly, this study showed less than the national average of 50% due to the fact that Tallahassee is a college town and likely to influence natives toward getting a good education. Incidentally, 46.4% of study participants had completed high school.

**Discussion of Additional Findings**

A correlation was found between self-esteem and marital status, more specifically in reference to married participants. Married participants were found to have shown the lowest self-esteem mean in comparison to those who were either separated, divorced or single. While the study did not reveal the cause for this finding, the researcher is considering that perhaps this phenomenon could be explained by the fact that being on welfare has its challenges, some of which are trying to make ends meet, not living in the type of environment one would like to, and being in abusive households. It is possible that the married woman is more “trapped” than her cohorts, has to contend with more stress at home due to the presence of a spouse who may either be controlling, abusive, or a substance abuser. Research (see Olson & Pavetti, 1996) suggests that about “20 to 80 percent” of women on welfare may be victims of domestic violence. Possibly, the non-married peers have greater autonomy and freedom to do as they please.

In reference to participants’ age, the highest percentage was 7.2%, reflective of those 30 years old. The wide age range calls into question its possible effect on the outcome of the study. Each of the four generations (20s, 30s, 40s, and 50s) may have responded to questions asked based on their individual characteristics, possible dissimilar life experiences, and their educational, cultural and health habits that distinguish living conditions differently for each generation.

**Self-Esteem in Relationship to Demographic Variables**

The participants were found to have an average self-esteem (60.80) which is about 3.8 below the norm for the Coopersmith Self-Esteem Inventory (SEI-Adult Form). Based on what literature suggests, (see Rainwater, 1982; Rosenberg & Simmons, 1972), one would expect these participants, because of race and economic status, to have very low self-esteem, but this proved to be otherwise. The question that surfaces is: Is there a myth about Blacks and women on welfare having a low self-esteem, and that, by going to work they will have a higher self-esteem? This researcher believes - and research (see Peterson, 1986) supports this view, that people can be intelligent when their economic status is at stake. They will figure out ways to maximize their
resources when the need arises. Some welfare recipients may elect not to work if they figure that welfare aid yields more money than working for minimum wage. In this case, their choice is simply a matter of economics, and may have little if any to do with their self-esteem. In other words, a person may be on welfare and still have their self-esteem intact if they are comfortable with the choice they have made. In reference to Blacks and self-esteem research indicates that, contrary to study findings done in the sixties, on the whole, Blacks have a higher level of self-esteem than their White peers (Rosenberg & Pearlin, 1978).

In this study, no statistical significance was found between self-esteem (criterion variable) and the demographic (predictor) variables of years on welfare, age of first motherhood, number of children, parents and/or grandparents on welfare, perceived barriers to employment, and completion versus non-completion of a Career Quest program for women on welfare. Of the three control variables included, namely education level, marital status and participant’s age, only marital status was found to be significantly correlated to self-esteem. Married participants got the lowest mean score when compared to the single, divorced and separated groups. In the absence of a finding of statistical significance, the alternate hypothesis was rejected for (a) through (d), and the null hypothesis was not rejected for (e) through (f). This investigator concluded that no statistical significance was found because self-esteem is a very complex construct difficult to operationalize. In some cases, the true criteria being examined may not be conscious to the participant. Participants in turn are likely to respond to the surface, overt aspects presented in the test instrument and the researcher ends up missing the true self-esteem of the participant.

Another reason for the results of the study being what they are may have to do with the possibility that several other variables constitute self-esteem but were not factored into the model, such as family structure, support from family, financial stability, parents’ educational background, emotional state, community involvement, religious faith/spirituality, and cultural commitment/closeness to one’s culture and neighborhood. It is possible that another type of self-esteem measure may have been more appropriate for this study.

**Limitations of the Study**

One of the limitations of this study is the reliance on self-report methods through use of the demographic and work questionnaires and the Coopersmith Self-Esteem Inventory (SEI – Adult Form), 1975. The literature (Groth-Marnat, 1997) indicates that self-reporting is subject to
social desirability, defensiveness, and some other issues related to self-presentation. For example, it is very possible that some of the most salient elements of self-esteem, such as one’s feeling of adequacy or inadequacy, are not in a person’s conscious thought. Dealing primarily with conscious content and overt variables as is the case with the use of self-report instruments could result in the principal motives of one’s behavior being missed. This researcher is aware of such a limitation. However, the self-report method was utilized during the conduct of the Career Quest workshop due to limited time and resources. Also, since this was an archival study, the researcher was only able to extract data from files generated by participants and was not involved in the selection of choice of instruments or reporting method.

Yet another limitation also tied to self-reporting is the fact that many welfare recipients have extensive work histories involving participation in temporary, part-time, casual, unskilled and/or low-wage jobs. For some of these participants, the reality of the type of job they were engaged in may not have been in sync with their perceived ideal job. Thus, possibly, some participants may not have been completely honest in their reporting of “time spent on welfare.” Possibly, the lack of forthrightness may have been in an attempt to “look good” or preserve their self-respect. Some may perceive the questionnaires as an invasion of their privacy. Uncorroborated data can, therefore, introduce the issue of criterion validity and result in faulty or inconclusive findings. Selection bias should not be overlooked. These participants were mandated to attend the Career Quest program and it is possible that some may have been “defensive” in answering the questions.

A further limitation of this study is the issue of subject selection. It is well-known that subjects involved in any investigation bring with them both inherent and learned characteristics, unique to each person. The participants in this study represented a wide variation in age: The youngest was 19 years and the oldest, 58 years. Women in their 20s, 30s, 40s and 50s were represented in the sample of 125. This may have introduced the “cohort effect,” thereby possibly compromising the study results to a small extent, because there is the risk that the women in their 20s may have self-reported from a different perspective in comparison to the women in their 30s, 40s, or 50s.

It is possible that some of the behavioral differences may have had little to do with age but instead could have been due to differences in educational, cultural and health habits which distinguished living conditions differently for each generation represented. Also, in contrast to
teenagers and persons in their early twenties who may be focused on self-worth, the older adults may view their self-esteem in terms of factors such as cognitive abilities, parenting, or physical health. Consequently, discrepancies in scores between groups on the self-esteem measure could have been due to the predictor variable or to the subject-related variable (e.g. age). In addition, there may have been some inherent characteristics in the group that showed up (e.g. possibly more motivation, and higher self-esteem).

A fourth limitation of this study pertains to the possible deficiency inherent in the Demographic and Work History Questionnaires employed in the Career Quest program. The quality of design of these instruments raises the issue of content validity. The nature of these questionnaires made it impractical to follow test development procedures such as those used for standardized test instruments. This researcher believes that some other demographic items such as “siblings on welfare,” “age of youngest child,” “age of oldest child” and “parent’s education” should have been included in the questionnaires. Although their omission does not necessarily compromise the study findings, the researcher is of the opinion that the availability of this information could have presented opportunities for embarking on further research.

There is the also the issue of generalizability. All the participants in the study (125) were Black women and they all resided in Tallahassee, Florida. They were all parents, with varying marital status (mostly single) and levels of education. It is obvious that this group is not representative of the national distribution of persons on welfare (or even women on welfare), because, according to House Ways and Means Committee Green Book (1995) and Sankofa-Amammere (1999), single mothers who are welfare-dependent are distributed evenly among the major ethnic groups in the U.S. Nationally, approximately 37 percent represents Blacks, 20 percent, Hispanics, 37 percent, Caucasians, and 6 percent, “other.” Based on these observations, the researcher is of the view that the results of this study cannot be generalized to women on welfare who reside outside of Tallahassee, Florida or to all women on welfare in the U.S. The findings cannot be generalized to include men since no males participated in the study.

Research shows that 50 percent of welfare recipients have less than a high school education (Harris, 1996). For this study, 44.8 percent had less than a high school education, while 46.4 percent had completed high school, 7.2 percent had an associate degree, and 1.6 percent had a bachelor’s degree. One can infer from this finding that these participants were, on the whole, more educated than the typical woman on welfare. Possibly, the level of education
may be due to Tallahassee being a college town. Additionally, participants were not selected through true randomization. The sample can be described as one of convenience. Consequently, generalizability of results of this study is limited to Black women on welfare in Tallahassee, Florida who are similar to participants in terms of variables examined.

This study did not factor in characteristics such as single versus multiple spells on welfare (i.e. being on and off welfare more than once), chronic welfare dependency, work experience and health or disability status. Also, no attempt was made to determine the marginal versus aggregate effects of the criterion variables on the subjects’ recidivism or continued dependence on welfare. Possibly, some of these characteristics could have confounded the outcome of the study.

**Implications for Practice**

Throughout this study, it has been stated that women contend with a multitude of social issues that have the sum effect of impacting negatively on their mental health and psychological wellness. For example, research (Tomaskovic-Devey, 1988; Rose, 1995; Rodgers, 1996; Parvez, 2002; Department of Health and Human Services, 1997; INCITE Newsletter, 2001) indicates that women make up the larger percentage of persons on welfare, with a disproportionate number being women of color. INCITE (2001) indicates that “two out of three adult recipients of public assistance are women.” Although statistics presented by the U.S. Department of Health and Human Services (1997) show a near-even number of Whites and Blacks in receipt of welfare aid, there still exists the misperception that the welfare system mainly supports minorities, especially Blacks. Granted, there is a greater percentage of Blacks (23.6 percent in 1999, according to the U.S. Census Bureau, 2000b) living in poverty in the U.S. However, since Blacks constitute only 13 percent of the U.S. population, this merely suggests that this group is disproportionately poor. Research (see Pearce, 1978; Rose, 1995; AARP, 1996; U.S. Census Bureau, 2000; Nicolas and JeanBaptiste, 2001; Institute for Women’s Policy Research, 2002;) also indicates that women make up the larger percentage of those classified as “poor”.

In commenting on government work programs and their impact on gender and race, Rose (1995) uses the term “impoverishment of women” while Abramovitz (1988) uses Pearce’s (1978) coined phrase “feminization of poverty” to drive home the point that women make up the majority of the “poor.” Several factors, including job market discrimination, single-parent households, work ethic related to capitalism, the family ethic concerning “maintenance of
patriarchy,” race, gender, and limited education have been cited as reasons for this phenomenon. Rose (1995) and Abramovitz (1988), in presenting a feminist analysis of the welfare system and government work programs, suggest that capitalism, race, gender, class and production-for-profit are all intertwined, a dynamic that leads to creation of policies aimed at ensuring that “private-sector jobs remain preferable to relief” which is so stigmatized that people try to avoid it. Rose (1995) describes the welfare policies of the early 1990s as “punitive and paternalistic” policies that blamed the poor for their economic plight. Taking these views into consideration, it might be easy to assume that this study would yield the same or similar results if the sample comprised poor white women instead of Black women. However, it must be remembered that from the beginning of the era of slavery to present times, Blacks in the U.S. have been at the bottom of the social and economic ladder.

**Black and White Self-Esteem**

Yes, there are other “oppressed” groups in the society, and yes, the category referred to as “poor” includes some Caucasians (Whites) and people of other races or ethnicity. But Blacks tend to bear the bigger burden, those on welfare even being referred to as “welfare queens” by segments of society. Hence, we would expect those on welfare to show low self-esteem, especially if we believe research findings of the pre-Rosenberg era. Studies (Rosenberg and Simmons, 1972; Rosenberg and Pearlin, 1978), however, have found that, contrary to popular belief, Blacks do not have lower self-esteem than Whites, despite their economic situation. They found that minority youth and adults in low socio-economic conditions can show a high level of self-esteem, sometimes even higher than that exhibited by better off counterparts. Some researchers (e.g. Banks, 1972; Porter & Washington, 1979; Wylie, 1979) have also indicated a lack of evidence of clear self-esteem deficit in poor Blacks.

Based on the attribution theory and social theory described in Chapter 2, and given what research says about Black self-esteem, it may be safe to say that there is no conclusive way of determining whether this study’s findings would be the same if the participants were poor white women. We must not forget that Blacks face certain issues that Whites do not have to contend with, and there are some variables that impact Blacks differently to Whites; for instance, education, and single motherhood. Also, Black women tend to have an assemblage of reasons for welfare dependency and obstacles to personal advancement that are different to that experienced by Whites.
When one factors in the myriad of issues encountered by women and the issue of racial discrimination typically experienced by Blacks, coupled with marginalization of women and the perception that minorities and women have low self-esteem, it makes for easier understanding of the large number of women dependent on welfare aid and the socio-demographic, socio-cultural and mental health consequences that ensue. In view of the limitations and issues noted above, it appears that establishment of appropriate policies and allocation of adequate funding for provision of necessary resources to promote early intervention through counseling is worth consideration. Although no statistically significant relationship was found between self-esteem and the demographic variables selected for study, a few observations surfaced which warrant brief mention and which lead this researcher to conclude that early intervention and appropriate funding for provision of services and resources would be beneficial to the welfare population. For example, about sixty percent of participants were found to have spent 4-10 years on welfare. Also, the majority of participants seemed to become mothers between ages 15-20 years. A little more than a third of the participants were found to present an internal locus of control in reference to barriers to employment, most mentioning lack of education or job skills, while nearly one third identified external barriers. Forty-two percent did not complete the Career Quest program.

A Call for Intervention

These observations suggest a need for intervention through psycho-educational programs such as self-assertion, self-efficacy, work adjustment, career planning and job search. Special training courses aimed at enhancing self-esteem and employability should be provided for women on welfare with a view to helping them acquire interviewing and job skills relevant to the current-day job market. Other research seems to support this view. As noted by Moen (1985) and Harris (1991), “women with more education have more human capital to invest in employment and ……are more likely to maintain a continuous attachment to the labor force.” For teenage mothers, attempts should be made to have them continue their education because graduating from high school is likely to be their best way out of the cycle of dependency on public assistance. Without educational interventions or counseling, most of these women can find only low-income, unstable jobs with limited (if any) opportunity for advancement, thereby being forced to remain on welfare or to have multiple spells of welfare dependency.
In a longitudinal study (17 years) conducted in Baltimore, Maryland, involving 288 Black teenage welfare mothers residing in Baltimore who had their first child at age 18 years or younger in the late 1960s (see Furstenberg, 1976; Furstenberg, Brooks-Gunn, & Morgan, 1987; Harris, 1991), these researchers found that the welfare mothers who completed their education got stable jobs and left welfare quickly. Those with fewer educational and family resources often had to find jobs to supplement their welfare benefits. However, when this group eventually completed their education or became attached to the work force, they exited welfare and became solely dependent on income from their job. Harris (1991) points out that, in order for policymakers to achieve their goal of having labor market income replace welfare benefits, they will need to implement programs that offer educational and training services to provide welfare dependents with skills needed to hold a permanent job for a decent earning. Harris concluded that when programs invest in education and training instead of relying on “premature job placement,” in the end it is the recipients and the states that benefit.

As noted earlier in this study, the participants were almost evenly divided in terms of their perceptions of internal or external barriers to employment. Heider’s (1958) attribution theory may bear some relevance in this case. One possible explanation may be that some participants exhibit an attribution of personal responsibility (internal locus of control) for their economic outcome based on their psychological traits and definition of self and the world. Possibly, some participants may be harboring negative beliefs and cognitive distortions which contribute to their locus of control, based in part on the negative stereotyping of women on welfare (e.g. lazy, unmarried, taking advantage of taxpayers). Even the welfare reform act of 1996 suggests irresponsibility that needs fixing, as in the name “Personal Responsibility and Work Opportunity Reconciliation Act” (PRWORA, P.L. 104-193). Also, some participants may have attributed their economic plight and unemployment to external forces.

Gurin, Gurin, and Morrison (1978) found that low-income persons of color tended to have a lower sense of personal efficacy and success expectancy because, unlike their wealthier counterparts and Whites, they view life as unfair, difficult to control, and plagued with discrimination. The blend of poverty with gender and race or ethnicity has an effect on the woman’s experiences and plays a role in how she defines herself and the world around her (Belle, 1994; Gergen & Davis, 1997; Scarbrough, 2001). Their self-esteem may not appear to be deficit since the external locus of control may serve as a buffer. Those exhibiting internal locus
of control may also appear to have above-average self-esteem due perhaps to “perceptual selectivity” and the significance they attach to work (Wells, 2001). However, it does not mean that these individuals are exempt from anxiety, stress, or feelings of helplessness, likely to be experienced as they are forced to exit welfare due to welfare reform.

Mental health problems are known to limit the employability of persons on welfare (Danziger et al., 2000). Also, women on welfare and their children have been found to have a higher rate of physical health problems in comparison to women and children in the general population (Loprest & Acs, 1995; Olson & Pavetti, 1996; Danziger et al., 2000). Thus, it may be worthwhile for mental health practitioners serving this population to consider intervention that involves the use of cognitive-behavioral and rational-emotive therapeutic approaches. Since many of the women in this population tend to have started motherhood in their early teens and are inclined to have limited education, practitioners serving this group should consider introducing topics such as child rearing, social skills building, and cultural education as intervention programs geared toward facilitating these women in learning the skills required for self-sufficiency and enhanced mental well-being. There should be interventions involving periodic monitoring of progress (depending on service needs). Also, when appropriate, mental health professionals should become advocates for these women and assist them in navigating the system and institutional policies.

Psychological research of earlier times, (see Kardiner & Ovesey, 1951) seems to suggest that Black women generally tend to have lower self-esteem than their White counterparts. It is also postulated in some studies that women on welfare have low self-esteem because of their economic situation (see Rainwater, 1982). These premises are based on the minority self-esteem hypothesis that suggests that ethnic minorities should internalize a negative self-image and manifest it in low feelings of self-worth because they are at the bottom of the social and economic ladder (Rosenberg and Simmons, 1972; Jackson & Lassiter, 2001). However, many studies (Banks, 1972; Rosenberg & Simmons, 1972; Porter & Washington, 1979; Wylie, 1979) indicate there is no conclusive evidence of clear self-esteem deficit in racial minorities, regardless of their poor financial status. For this study, the researcher found the women to have an average amount of self-esteem (mean score 60.80) (SD = 21.378) which is close to the norm. With this in mind, practitioners and other professionals who serve women dependent on welfare may want to keep in perspective the possibility that it is only a myth that Black women and
women on welfare have low self-esteem, and that by going to work they will automatically improve their self-esteem. They should consider the other factors such as family support, family structure, education and financial background when attempting to provide counseling or other types of intervention for this group.

Both the welfare system and the operationalization and conceptualization of “self-esteem” can be viewed as political, for the simple fact that women and minorities are marginalized, then erroneously perceived as having low self-esteem based on their gender, color, and social status. Seldom do researchers consider that the measurement tools may be based on the test developer’s group values, history and culture. Practitioners serving women on welfare should bear these points in mind. They should also consider that quite possibly, as some studies (e.g. Rosenberg & Simmons, 1972) have shown, in the Black (or other cultural) setting, self-esteem may be composed of and influenced by certain components that are quite different to those posited by what has come to be viewed as standard, conventional measures that are western in origin. Clinicians need to be aware that working on a person’s self-esteem is a challenge because this construct results from characterizations that are internally generated and can only be caused by the client. Branden (1994) lists those characterizations (practices) as living consciously, self-acceptance, self-responsibility, self-assertiveness, living purposefully, and integrity. Through increased awareness, the clinicians can design appropriate interventions and work with the clients in a manner deemed suitable for facilitating their actualization (Branden, 1994).

Recommendations for Professionals and Policymakers

It is recommended that practitioners address specific issues pivotal to helping the women enhance their self-esteem and self-sufficiency by asking themselves questions revolving around issues related to the practices that stem from within the individual (Branden, 1994). Questions such as, “How can I assist this woman in developing a higher level of autonomy and self-responsibility?” and “How can I facilitate this woman in releasing blocked potentials?” may help the practitioner do a better job of helping the welfare-dependent client (Branden, 1994). In addition, the procedures used for delivery of service to the welfare population should be designed in such a manner that service becomes more available, affordable, accessible, community-based, client-centered, and culturally acceptable. Outreach to minority groups and
welfare-dependent women is of crucial importance in light of the obstacles they face and in keeping with the ultimate goal of helping them achieve self-sufficiency.

This section would not be complete without the mention of the role of state and governmental policies. Welfare-dependent women achieve self-sufficiency primarily through work. However, it is important to review the monetary gains accomplished by working. “Work” means more than simply getting a job. It should be a job that pays sufficiently well for survival of the woman’s family. As already pointed out, low wage earning is one of the main causes of poverty for women. As the welfare reform takes root, politicians, legislators, and other entities and individuals involved in serving the welfare population will need to consider developing and implementing policies genuinely aimed at helping women get off welfare – policies not based on political or cultural views, but rather on the actual needs of that group. The JOBS programs would do well to place emphasis on education and work experience for women on welfare (notably the young mothers), since research (Mullan-Harris, 1991) suggests that in the long run, recipients and states are likely to benefit the most if they have programs invested in education and training versus premature job placement.

**Implications for Research**

Every scholarly study explored and completed, all types of research design employed, and every research finding revealed serves to broaden and add breadth and scope to the pool of available literature and presents novel opportunities for other scholars and professionals to increase their knowledge base, examine their practice and to refine their research methods, data collection and interpretation with a view to perfecting their skills and improving scientific research. It is this researcher’s opinion that this study will serve as an impetus for future researchers interested in self-esteem and how it is impacted by women’s difficulties in becoming self-sufficient.

One of the main implications for research in addressing the issue of self-esteem and its relationship to certain behavioral (demographic) characteristics of women on welfare is in reference to further investigation illuminated by this study. This includes but is not limited to use of a random sample versus a sample of convenience so as not to undermine generalizability of the results. By using a sample at hand (convenience sample) instead of a sample selected through probability, there is no guarantee that the behaviors of the convenience sample represent the behaviors of other groups.
Further investigation of participants through use of assessment tools other than those utilized in this study, and expansion of focus to include other variables may give a more accurate picture of the relationship between the criterion and predictor variables. This researcher suggests that future research considers developing assessment tools that are more in-depth with questions asked in the Self-Esteem instrument. Perhaps an instrument that captures the global self-esteem separately from the situational self-esteem of Black women on welfare would yield some answers not found in this study. As noted in the literature, the Coopersmith Self-Esteem Inventory (SEI) provides a “global” picture of one’s self-esteem. It lacks a built-in provision to allow for the researcher to determine defensive self-esteem by the participant, or what amount of the variable being assessed is reflective of either the global or the situational self-esteem. In addition, one must call into question the appropriateness of the psychometric scales and other structured measures used to assess certain groups of people.

Test instruments are generally ethnocentric (at least inherently), content-wise. Thus, it is not far-fetched to consider the possibility that the instruments employed to measure self-esteem have been socially, historically and culturally constructed (Gergen, 1985; Ellis, 1998) and that “they (perhaps unintentionally) may be giving special advantage to the values of certain groups over that of some other groups, thereby resulting in some individuals from marginalized groups being unnecessarily pathologised.” Given that self-esteem has been found to be so fundamental to the individual’s psychological well-being, future research may wish to consider alternative ways of investigating this construct instead of depending solely on the measures currently in use, which some researchers have described as “dubious” and “discriminatory.”

Another implication for research has to do with the relationship noted between self-esteem and marital status. Although self-esteem was not significantly related to the predictor variables in this study, it was significantly related to “marital status,” indicating that marital status can be a predictor of self-esteem as defined in this study. As mentioned in the previous chapter, the results of this study revealed that the participants who were married had the lowest level of self-esteem in comparison to those who were single, separated or divorced. The mean difference of 20% in favor of the single women suggests a level of significance that should not be overlooked. This researcher believes that this observation merits investigation and recommends that the phenomenon be examined further.
Recommendations for Future Research

It is recommended that future research consider the possibility of exploring the extent to which other factors such as one’s spirituality/religious faith, community involvement, family support, friendship circle, church and neighborhood affiliation help predict the level of self-esteem of Black women who are welfare recipients. This suggestion is in light of psychological literature noted earlier which indicates that, contrary to some empirical findings that state otherwise, Black women tend to have higher self-esteem than their White peers regardless of their social condition. This recommendation is also based on the fact that this study found participants to have a self-esteem mean of 60.80 which is only 3.8 less than the norm for means of Blacks as shown in the data for the Coopersmith SEI. In that same data, the self-esteem normative mean for Whites is cited as 63.8. In the Contingencies of Self-Worth Scale (see Crocker et al., in press), seven domains are highlighted as being important internal and external sources of self-esteem, namely: other people’s approval and acceptance, physical appearance, outdoing other people in a competition, family love and support, personal competencies and abilities, God’s love, and virtue. One question that could possibly be investigated is: What role does religiosity play in the self-esteem level of Black women who are dependent on welfare?

One of the limitations of this study was the risk of defensive responses or responses thought to be socially desirable or distorted in terms of truth. Some of the remarks written by a few participants next to certain questions on the demographic questionnaire helped highlight this limitation which tends to be associated with self-reports. In future, having participants write a number instead of their name on a response sheet may help reduce the risk of such issues such as attributional errors, defensive responding, and participant’s relative self-awareness.

Another recommendation for future research is that consideration be given to utilizing levels of analysis that are more advanced than the Analysis of Variance (ANOVA) and multiple regression. As the literature suggests, on occasion, the use of more advanced analyses has modified or clarified initial conclusions, bringing to light new observations. Also, employing more advanced analyses can lead to improved interpretation, especially in reference to the acceptance and validity of one’s conclusions.

It must be reiterated that males were not included in this study, although there are Black male welfare recipients. Possibly, by including males in the sample, future research examining the relationship between self-esteem and welfare dependency by Blacks may uncover variations
in responses based on gender. Another area recommended for future research is the inclusion of White women in the sample, which would allow for comparison of outcomes and help support or refute current findings or myths. Also, replication of this study in another country (e.g. England) using the same racial group and population or including both females and males may provide additional information regarding this topic. Another issue worthy of consideration is the possibility that older women who are dependent on welfare may, as they age, base their self-esteem on concerns quite different from self-worth. They may, for example, begin to base it on factors such as aging, cognitive abilities, parenting, or physical health in contrast to their younger counterparts on welfare whose primary focus may be self-worth. Researchers with an interest in older adults on welfare may wish to consider investigating this area.

Finally, this researcher wishes to reiterate that both welfare dependency and self-esteem are resource-consuming, socio-cultural and often emotionally charged social issues with political, cultural and racial undertones, interpretations and ramifications. Hence, more empirical studies should be conducted on these topics. Efforts should be made to conduct in-depth research pertaining to the psychological or mental well-being of women on welfare and to determine the effects of the women’s health on their level of motivation and persistence in gaining economic independence. A great deal of policy changes have occurred since the participants of this study last provided the data used in the study. For this reason, this researcher thinks it is necessary to touch very briefly on welfare reform.

**Welfare Reform: Is it Working?**

A new era dawned on August 22, 1996, with the enactment by the U.S. Congress of the Personal Responsibility and Work Opportunity Act (PRWORA), PL 104-193 (Haskins, Sawhill, & Weaver, 2001). This piece of social legislation resulted in a new block grant, referred to as Temporary Assistance for Needy Families (TANF) replacing AFDC. This welfare reform policy was legislated with the goal of getting everyone off welfare, into the workforce, within a short period of time. It was assumed that all participants could get off welfare and be gainfully employed within two years. Thus, welfare offices began to place more emphasis on job placement. Existing research, however, suggests that while there have been some improvements to the plight of some welfare recipients, some unemployed families seem to be faring worse, economically; some are also losing welfare benefits as they attempt to get off welfare. This researcher recommends further research regarding the effectiveness of welfare reform.
Summary and Conclusion

Researchers, and in particular psychologists, have long maintained that self-esteem plays a vital role in people’s lives. However, the elusive and multidimensional nature of this psychological construct has continued to make it difficult to establish a relationship between self-esteem and certain human characteristics or demographic variables. This study addressed the research questioning pertaining to the relationship between self-esteem (the criterion variable) and length of time on welfare, age of first motherhood, number of children, parents and/or grandparents on welfare, perceived barriers to employment, and completion versus non-completion of a Career Quest program for women on welfare. Although research shows the number of Whites and Blacks on welfare to be almost equal, there is a general tendency for the public and policy makers to believe that most people on welfare are Black, hence the term “welfare queen” being used in reference to Black women on welfare. This observation, along with the researcher’s interest in minority women’s issues, served as part of the motivation to investigate this topic.

In the results that followed, no statistical significance was found between self-esteem and the predictor variables. However, there was statistical significance found between self-esteem and a control variable, marital status. The statistical analyses showed that there was a strong relationship between self-esteem and married women on welfare: That group had the lowest self-esteem when compared with the other groups in that domain, leading to the inference that Black women on welfare who are married have lower self-esteem than their peers who are not married or who are divorced or separated.

Another aspect of the result was the observation that there was greater relationship between the predictor variables than between self-esteem and the predictors.

Some of the key concerns of the current study had to do with generalizability and the question of instrumentation which could affect internal validity of the study. The type of self-report used, the absence of instrument-related norm data and instrument design were other issues that warranted concern. The null hypothesis was not rejected since no statistical significance was found between self-esteem and any of the six predictor variables considered. The limitations of the study, implications for practice, and suggestions for future research were discussed.

To conclude, no statistical significance was found between self-esteem and the predictor variables. The researcher surmises that possibly, that was because other factors such as family
support, financial level, emotional status, and family structure were not factored into the model. Also, it is possible that self-esteem is already built into the participants’ psyche and, with the passage of time, has stabilized. In addition, it is possible that some participants gave responses considered to be socially desirable.

Despite no statistical significance having been found between self-esteem and the predictor (demographic) variables, this investigator is of the opinion that future research of this kind, with inclusion of adjustments reflective of the knowledge and lessons learned in the research reported here could lead to better and more profound understanding of the nature and scope of self-esteem and its relationship with behavioral characteristics of women on welfare.
APPENDIX A

FSU Career Quest Demographic Questionnaire Form

Human Services Center
Information Sheet

Date ________________

Counselors in the Human Services Center are committed to maintaining complete confidentiality of information you reveal. If you are concerned about this issue, please discuss it with your counselor.

NAME: ___________________________ BIRTHDATE: ___________________________

AGE: __________ SEX: __________ RACE: ____________________________

ADDRESS: __________________________________________________________________

CITY: ___________________ STATE: _______ ZIP: _________________________

HOME PHONE NUMBER: (____) __________ WORK PHONE: (____) __________

MARITAL STATUS: _______________ OCCUPATION: _______________________

Please circle the number of letters showing the highest year of normal schooling you have achieved:

1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6 7+

DEGREES EARNED:

High School Diploma __________________________ GED ___________________________
Associate Degree __________________________ Bachelors Degree __________________
Masters Degree __________________________ Doctoral Degree __________________
Other ________________________________________________________________

Have you had a counseling or therapy before? YES _________ NO _________
If so, with whom? _______________________________________________________

Who referred you to or told you about the Human Services Center?

_____ Project Independence _____ Administration
 _____ Academic Advisor _____ Friend
 _____ Student Health Center _____ Newspaper Ad
 _____ Residence _____ Brochure
 _____ Radio/TV Ad _____ Counselor
 _____ Other (please specify) ______________________

FORM L-1
Page 1

Participant # ______________
I now have, or have in the past, experienced problems with:

- depression
- anxiety
- relationships
- fainting spells
- skin problems
- headaches
- trouble concentrating
- nervousness
- stomach problems
- obesity
- sleep difficulty
- aching muscles
- frequent nausea
- other

(please specify)

---

1. Are you presently receiving medical treatment? _____ Yes _____ No
   If so, name of physician ___________________________ Phone # __________

2. Are you presently consulting with another counselor or therapist? _____ Yes _____ No
   If so, name of counselor or therapist__________________________
   Phone # __________________________

3. Religious Affiliation _____________________________________________

4. Do you have children? _____ Yes _____ No
   If yes, names and ages __________________________________________
   Do any of your children live with you? _____ Yes _____ No
   If yes, please indicate which ones: ________________________________

5. What do you expect from this counseling experience?

What would you like to talk to the counselor about?

- _____ Vocational concern (career choice of college major choice: planning for the future)
- _____ A personal concern (concerns relating to my behavior, attitudes, or feelings about myself)
- _____ An educational concern (lack of academic skills, achievement, or information)
- _____ A relationship concern (marriage and/or family problems: same sex/opposite relationship problems)
- _____ Other (please specify) __________________________

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FORM L-1
Page 2
APPENDIX B

Career Quest Demographic Questionnaire Form

Human Services Center
Independence Project
Participant Survey

1. How many children do you have? ____________

2. How many of these children are living with you? ____________

3. If you have children under the age of 18 who do not live with you, who do they live with? ____________

4. How old were you when your first child was born? ____________

5. How many years total have you received AFDC? ____________

6. Did your mother ever receive AFDC? ____________

7. Did your grandmother ever receive AFDC? ____________

8. Did you graduate from high school? ____________

9. Do you have a GED? ____________

10. What are your current goals?
APPENDIX C

FLORIDA STATE UNIVERSITY HUMAN SERVICES CENTER

CONSENT FORM

My signature indicates my consent to the Human Services Center of the Florida State University to work with me in making a more effective educational, vocational, or personal adjustment. I also consent to participate in research conducted using surveys, questionnaires, and tests administered to me while at the Human Services Center and as follow-up. I authorize those affiliated with Project Independence at the Human Services Center to obtain my address and phone number from the Department of Labor and Employment Security and/or the Department of Health and Rehabilitative Services so that I may be contacted in the future for the purpose of follow-up. A photocopy of my original signature may be accepted in lieu of the original form.

I understand that portions of the interviews may be observed or recorded for training purposes only, that the confidentiality of counseling information will be maintained, and that all relationships with the counselors and staff will be maintained on a strictly professional basis.

Signed: ____________________________
Date: ____________________________
Witness: __________________________
Date: ____________________________
APPENDIX D

Office of the Vice President For Research
Human Subjects Committee
Tallahassee, Florida 32306-2763
(850) 644-8873 · FAX (850) 644-4392

APPROVAL MEMORANDUM

Date: 3/2/2005

To: Carol Challenger
U-Box 64555
Tallahassee, FL 32313

Dept.: EDUCATIONAL PSYCHOLOGY AND LEARNING SYSTEMS

From: Thomas L. Jacobson, Chair

Re: Use of Human Subjects in Research
The Relationship Between Self-Esteem and Demographic Characteristics of Women on Welfare.

The forms that you submitted to this office in regard to the use of human subjects in the proposal referenced above have been reviewed by the Secretary, the Chair, and two members of the Human Subjects Committee. Your project is determined to be Exempt per 45 CFR § 46.101(b) 4 and has been approved by an accelerated review process.

The Human Subjects Committee has not evaluated your proposal for scientific merit, except to weigh the risk to the human participants and the aspects of the proposal related to potential risk and benefit. This approval does not replace any departmental or other approvals, which may be required.

If the project has not been completed by 2/28/2006 you must request renewed approval for continuation of the project.

You are advised that any change in protocol in this project must be approved by resubmission of the project to the Committee for approval. Also, the principal investigator must promptly report, in writing, any unexpected problems causing risks to research subjects or others.

By copy of this memorandum, the chairman of your department and/or your major professor is reminded that he/she is responsible for being informed concerning research projects involving human subjects in the department, and should review protocols of such investigations as often as needed to insure that the project is being conducted in compliance with our institution and with DHHS regulations.

This institution has an Assurance on file with the Office for Protection from Research Risks. The Assurance Number is IRB00000446.

Co: Deborah Ebener
HSC No. 2005.123

110
APPENDIX E

Coopersmith Inventory

Stanley Coopersmith, Ph.D.
University of California at Davis

Please Print

Name ___________________________ Age ___________

Institution ______________________ Sex: M __ F __

Occupation ______________________ Date ___________

Directions

On the other side of this form, you will find a list of statements about feelings. If a statement describes how you usually feel, put an X in the column "Like Me." If a statement does not describe how you usually feel, put an X in the column "Unlike Me." There are no right or wrong answers. Begin at the top of the page and mark all 25 statements.

[Calculation]

x4 = [Blank]

Consulting Psychologists Press, Inc.
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Like

Me

Unlike

Me

1. Things usually don't bother me.
2. I find it very hard to talk in front of a group.
3. There are lots of things about myself I'd change if I could.
4. I can make up my mind without too much trouble.
5. I'm a lot of fun to be with.
6. I get upset easily at home.
7. It takes me a long time to get used to anything new.
8. I'm popular with persons my own age.
9. My family usually considers my feelings.
10. I give in very easily.
11. My family expects too much of me.
12. It's pretty tough to be me.
13. Things are all mixed up in my life.
14. People usually follow my ideas.
15. I have a low opinion of myself.
16. There are many times when I would like to leave home.
17. I often feel upset with my work.
18. I'm not as nice looking as most people.
19. If I have something to say, I usually say it.
20. My family understands me.
21. Most people are better liked than I am.
22. I usually feel as if my family is pushing me.
23. I often get discouraged with what I am doing.
24. I often wish I were someone else.
25. I can't be depended on.
APPENDIX F

Scoring the Coopersmith Self-Esteem Inventory (SEI-1975) – Adult Form

The SEI (Adult Form) is a 25-item instrument designed to measure the evaluations that a person makes and generally maintains about himself or herself (see Coopersmith, 1967). These items are in the form of generally favorable (positive) or unfavorable (negative) statements about the “self.” The respondent responds “Like Me” or “Unlike Me” to each item on the form.

For each item the responder gives that is a positive view of himself or herself, four (4) points are awarded. The higher the score, the higher is the suggested self-esteem of the responder. The basis for scores is a totally favorable (positive) self-esteem score of 100 and a totally unfavorable (negative) score of zero (0).

The SEI examines attitudes toward an individual’s “self” in four (4) areas: 1) Social Self-Peers; 2) Home-Parents; 3) School-Academic; and 4) General-Self. However, it is scored as a single global self-esteem score. Thus, the global self-esteem score obtained by the respondent encompasses the situational factor.
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122


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BIOGRAPHICAL SKETCH

Perhaps it was destiny, or the will of a supreme being. Who knows? All I can say is that a variety of events and experiences in my personal and professional history were instrumental in my decision to pursue a doctoral degree in Counseling Psychology. The eldest of three children and a native of a tiny Caribbean island (Dominica – a vestige of British and French rule sandwiched between the French departments of Guadeloupe and Martinique, and home to the indigenous Carib Indians and persons of African descent), I learned early in life that education is the key to knowledge, the ride from poverty, and the tool for improving society. My mother was a blue-collar worker, my father a fireman. Between the two, financial resources were scarce but I was happy. Given that most people in our society were in the same economic predicament, we did not recognize this as poverty. We just learned to be resourceful, to grow some of our own food, make our toys from materials found in the environment, and bring home good grades and reports from teachers or risk the wrath of our parents or guardians (and neighbors) – either a verbal onslaught or a “serious” beating. Neither was appealing to me, so I took steps to avoid them. My mother refrained from “beating,” but her verbalizations could crush an ant. She was as gentle as a lamb, but when provoked to anger, she struck like a lioness.

During my childhood, discipline, respect, hard work, self-reliance and service to others in the community were the dominating themes at home and at school. At age two I had the unfortunate experience of witnessing someone strike my maternal grandmother, knocking her to the ground, and of seeing my mother rush out the front door clad only in undergarments to assist her mother. By age two-and-a-half I was enrolled in preschool, nearly a year ahead of most of my peers due to my reading ability. By age eight, I was my maternal grandmother’s favorite assistant, helping her to make brooms and baskets, and trekking with her for miles to her farming plot in the mountains. At that time also I was beginning to hear the stories about how my grandmother and her sister (once the proud owners of land and several heads of cattle) lost everything due to a lack of education. From then on, I decided that I would make it my life’s mission to get a sound education and to venture into a field that would allow me to help others.
Spending time with my godmother allowed me the opportunity to crystallize that thought. She was fairly well educated, and she knew everyone in the community, including many of the socialites, some of whose children were doctors or lawyers. My frequent visits to some of these homes led to my exposure to information and educational resources not available at my home. Thus was laid the foundation for my decision to pursue a college education someday.

Upon graduation from high school, I took on a teaching job. Within a short period, I was selected for training. By the time I had graduated from the Teachers Training College, I was intent on changing lives. I requested and was reassigned to the high school section of the St. Martin’s School. There, I found it easier to discuss social issues and to assist the teenage students in making positive changes in their lives. During my period of service, I realized that I was able to impact both students and parents. Much later I discovered the reason both students and parents tended to gravitate toward me: They viewed me as confidential, honest and candid, and someone who showed genuine interest in the students’ personal well-being. All the while, I was providing counseling services to students without knowing it. After having been awarded a three-week scholarship to the United States for teacher training, the educational spark was lit again.

I knew all along my passion lay in helping others to navigate life’s bumpy course, but I guess it was necessary to start off in education before finding my true calling. Upon obtaining my Bachelor’s in Business Education at Florida A&M University, I decided to pursue the Master’s degree in Counseling. The practicum and testing involved was the best thing that could have happened along the way. Self-assessment and evaluation led me to the conclusion that I needed to make that final leap – pursuit of a degree that allows me to do counseling, testing, outreach, and teaching, the ultimate goal being to help people cope with problems. The Combined program in Counseling and School Psychology offered at Florida State University provided all these opportunities, and thus began the arduous journey of becoming a psychologist. During my enrolment in the program, I worked as a Hall Director with the Housing Department. This experience served to cement my interest in serving the college population.

All the main characters who played a role in my upbringing exhibited patience, resilience, fortitude, tenacity, self-reliance, and concern for the well-being of others. In retrospect, I think they were great role models for me. By emulating these qualities I have been able to effectively and successfully cope with the challenges associated with pursuing a doctoral
program. The practicum and internship experiences gained in the Counseling Psychology program proved to be sources of enlightenment. I can confidently proclaim that I have found my calling and my niche. My future goal is to work at a university counseling center due to my interest in working with college students. However, somewhere in the distant future I intend to specialize in psychological testing and crisis management and I look forward to publishing journal articles and books related to various aspects of psychological well-being. My present areas of research interest include anxiety disorders, diversity issues, eating disorders, self-esteem, and women’s issues.