

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

*We ask that the Agency Director complete the questionnaire or provide final review and return the questionnaire by Friday, April 20, 2001. Please mail the questionnaire in the enclosed envelope to Richard Speigman, Public Health Institute, 2168 Shattuck Avenue, Suite 300, Berkeley, CA 94704-1307. Please keep a copy of the completed questionnaire in the event that there are problems with the mail.*

**Date:** \_\_\_\_\_

**Primary person completing questionnaire:**

Name: \_\_\_\_\_ Job title: \_\_\_\_\_

Department or  
Agency name: \_\_\_\_\_ County: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Additional persons completing questionnaire:**

Name: \_\_\_\_\_ Job title: \_\_\_\_\_

Department or  
Agency name: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Job title: \_\_\_\_\_

Department or  
Agency name: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Please identify who should be contacted if there are any questions regarding this questionnaire:**

\_\_\_ “Primary person” listed above

\_\_\_ Other: Please list below

Name: \_\_\_\_\_ Job title: \_\_\_\_\_

Department or  
Agency name: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

# CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE

## ORGANIZATIONAL STRUCTURE

**Q1.** In your county, which of the following best describes the organizational relationship of your Child Welfare and CalWORKs programs? (See definitions at right.)

\_\_\_ (1) They are both divisions of the *same* higher level agency (such as a Social Services or Human Services Agency).

\_\_\_ (2) They are in *different* agencies (such as a Children’s Services Agency and a CalWORKs Services Agency).

Please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_ (3) Other: \_\_\_\_\_

Please describe: \_\_\_\_\_

\_\_\_\_\_

**Please note: For purposes of this questionnaire, we define:**

→ “CalWORKs” to include eligibility determination/cash assistance *and* welfare-to-work activities and services.

→ “Child Welfare” to include any of the four components of Child Welfare Services – Emergency Response, Family Reunification, Family Maintenance, and Permanency Placement.

*Please attach a copy of your organizational chart that includes your CalWORKs and Child Welfare departments.*

## MANAGEMENT-LEVEL COMMUNICATION AND PLANNING

**Q2.** Describe the frequency of communication in your county between the top manager of the CalWORKs program and the top manager responsible for the Child Welfare program *specifically in regards to planning for coordination of common issues, programs, and/or services.* **Check one.**

- \_\_\_ (1) Almost no communication
- \_\_\_ (2) 1 – 6 times per year
- \_\_\_ (3) 7 – 11 times per year
- \_\_\_ (4) Monthly
- \_\_\_ (5) Weekly
- \_\_\_ (6) One person manages both programs

**Please note:**

This question does not inquire about *routine* administrative activities.

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q3.** Is your county currently working to develop or implement a plan linking CalWORKs and Child Welfare activities?

\_\_\_ (0) No

**3a.** IF NO, given the reality that your county has many priorities, how do you rank the linking of Child Welfare and CalWORKs activities?

- \_\_\_ (0) Not a priority
- \_\_\_ (1) Low priority
- \_\_\_ (2) Medium priority
- \_\_\_ (3) High priority

**GO TO Q5 ON NEXT PAGE**

\_\_\_ (1) Yes

**3b.** IF YES, at what stage is the plan?

- \_\_\_ (1) Just beginning work on it **GO TO Q4**
- \_\_\_ (2) In draft form **GO TO Q4**
- \_\_\_ (3) Being implemented

**3c.** IF BEING IMPLEMENTED, has your agency conducted or commissioned an evaluation of your activities that integrate CalWORKs and Child Welfare planning or programs?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**Q4.** Is there a formal committee or other structure that oversees linking the planning and service activities between CalWORKs and Child Welfare?

\_\_\_ (0) No

**4a.** IF NO, is such a committee being considered?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**GO TO Q5 ON NEXT PAGE**

\_\_\_ (1) Yes

**4b.** IF YES, how long has this committee been in place?

- \_\_\_ (1) Less than 1 year
- \_\_\_ (2) 1 – 2 years
- \_\_\_ (3) More than 2 years

**4c.** IF YES, how often does this committee meet?

- \_\_\_ (1) Weekly
- \_\_\_ (2) Monthly
- \_\_\_ (3) 2 – 4 times per year
- \_\_\_ (4) Other, specify: \_\_\_\_\_

**4d.** IF YES, briefly describe the membership of the committee or attach a list of the members, including job titles and departmental affiliations.

---

---

---

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**COORDINATED CASE PLANNING**

**Q5.** Have there been any discussions at the *management* level to increase coordinated case planning for CalWORKs and Child Welfare clients?

- (0) No **GO TO Q6**
- (1) Yes, a limited amount of management-level discussion and/or planning has taken place.
- (2) Yes, considerable management-level discussion and/or planning has taken place.

**5a.** IF YES, has coordinated case planning been implemented?

- (0) No **GO TO Q6**
- (1) Yes

**5b.** IF YES, how long has coordinated case planning been in place?

- (1) Less than a year
- (2) One year or longer

**5c.** IF YES, how fully implemented is coordinated case planning?

- (1) Partially
- (2) Fully

**5d.** IF YES, once a coordinated case plan is developed, does the client continue to see both a CalWORKs and a Child Welfare worker, or is the plan monitored by one case manager?

- (1) Client sees both
- (2) Client sees only one case manager
- (3) Other, please specify: \_\_\_\_\_

**5e.** IF YES, have any of your client-related forms been altered due to efforts to increase coordination between CalWORKs and Child Welfare?

- (0) No
- (1) Yes

Comments on coordinated case planning: \_\_\_\_\_  
\_\_\_\_\_

**CALWORKS INTAKE AND ASSESSMENT**

**Q6.** Does your county have any protocols that require CalWORKs eligibility and/or employment services workers to determine if clients are *concurrently* in the Child Welfare system?

- (0) No **GO TO Q7**
- (1) Yes

IF YES, where are protocols in place to determine concurrent involvement? **Check all that apply.**

- 6a.** Initial eligibility determination \_\_\_\_\_
- 6b.** Re-determination of eligibility \_\_\_\_\_
- 6c.** Appraisal for work readiness \_\_\_\_\_
- 6d.** Failure at a welfare-to-work activity \_\_\_\_\_
- 6e.** Other, please specify: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q7.** Does your county have an information system in place that allows CalWORKs workers to determine what the status of their client is in the Child Welfare System?

- \_\_\_\_ (0) No **GO TO Q8**  
 \_\_\_\_ (1) Yes

**7a.** IF YES, is this information available to eligibility workers?

- \_\_\_\_ (0) No  
 \_\_\_\_ (1) Yes

**7b.** IF YES, is this information available to employment services workers?

- \_\_\_\_ (0) No  
 \_\_\_\_ (1) Yes

**7c.** IF YES, how do your CalWORKs eligibility and employment services workers access the Child Welfare status of their clients?

\_\_\_\_\_

\_\_\_\_\_

Comments on your information system: \_\_\_\_\_

\_\_\_\_\_

**Q8.** Other than as required under the mandated reporter process, does your county have a process in place that allows your CalWORKs workers to refer CalWORKs clients to Child Welfare voluntary services to reduce the risk of child abuse and neglect? (Voluntary services include, but are not limited to, Family Preservation Services.)

- \_\_\_\_ (0) No  
 \_\_\_\_ (1) Yes

Comments: \_\_\_\_\_

\_\_\_\_\_

**Q9.** At what point(s), if any, in the CalWORKs process do county protocols require workers to screen or assess the family for *substance abuse* problems? **Check one box for each row.**

	Screen Required (1)	Assessment Required (2)	Both Required (3)	Neither Required (0)
<b>9a.</b> Initial eligibility determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9b.</b> Re-determination of eligibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9c.</b> Appraisal for work readiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9d.</b> Failure at a welfare-to-work activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9e.</b> Other, specify: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_

\_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q10.** At what point(s), if any, in the CalWORKs process do county protocols require workers to screen or assess the family for *mental health* problems? **Check one box for each row.**

	Screen Required (1)	Assessment Required (2)	Both Required (3)	Neither Required (0)
<b>10a.</b> Initial eligibility determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10b.</b> Re-determination of eligibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10c.</b> Appraisal for work readiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10d.</b> Failure at a welfare-to-work activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10e.</b> Other, specify: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Q11.** At what point(s), if any, in the CalWORKs process do county protocols require workers to screen or assess the family for *intimate partner (domestic) violence*? **Check one box for each row.**

	Screen Required (1)	Assessment Required (2)	Both Required (3)	Neither Required (0)
<b>11a.</b> Initial eligibility determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11b.</b> Re-determination of eligibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11c.</b> Appraisal for work readiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11d.</b> Failure at a welfare-to-work activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11e.</b> Other, specify: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_  
\_\_\_\_\_

**CHILD WELFARE INTAKE AND ASSESSMENT**

**Q12.** Does your county have any protocols that require Child Welfare workers to determine if their clients are *concurrently* in the CalWORKs system?

- \_\_\_\_ (0) No **GO TO Q13**
- \_\_\_\_ (1) Yes

IF YES, at what point? **Check all that apply.**

- 12a.** Initial phone referral \_\_\_\_\_
- 12b.** Emergency Response \_\_\_\_\_
- 12c.** Family Maintenance \_\_\_\_\_
- 12d.** Family Reunification \_\_\_\_\_
- 12e.** Permanency Placement \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q13.** Does your county have any protocols in place that direct Child Welfare workers to determine if a client has a *possible* need for CalWORKs cash assistance and/or employment services?

- \_\_\_ (0) No **GO TO Q14**
- \_\_\_ (1) Yes

IF YES, at what point? **Check all that apply.**

- 13a.** Initial phone referral \_\_\_
- 13b.** Emergency Response \_\_\_
- 13c.** Family Maintenance \_\_\_
- 13d.** Family Reunification \_\_\_
- 13e.** Permanency Placement \_\_\_

Comments: \_\_\_\_\_

**Q14.** Does your county have an information system in place that allows Child Welfare workers to determine what the status of their client is in CalWORKs?

- \_\_\_ (0) No **GO TO Q15**
- \_\_\_ (1) Yes

**14a.** IF YES, is information on CalWORKs *eligibility* status available to Child Welfare workers?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**14b.** IF YES, is information on *welfare-to-work or employment* services status available to Child Welfare workers?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**14c.** IF YES, how do your Child Welfare workers access the CalWORKs eligibility and welfare-to-work or employment services status of their clients?

\_\_\_\_\_  
\_\_\_\_\_

**Q15.** In initial phone referrals for reports of abuse and neglect, do you routinely inquire about:

**15a.** Substance abuse problems?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**15b.** Mental health problems?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**15c.** Intimate partner (domestic) violence?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**15d.** Child care needs?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q16.** When engaged in a face-to-face Emergency Response investigation, do staff members routinely assess the family for:

**16a.** Substance abuse problems?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**16b.** Mental health problems?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**16c.** Intimate partner (domestic) violence?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**16d.** Child care needs?

- \_\_\_ (0) No
- \_\_\_ (1) Yes

**Q17.** Does your county have a protocol providing that whenever a client visits any CalWORKs or Child Welfare office, s/he gets assessed for Child Welfare *and* CalWORKs (eligibility and/or employment) services?

- \_\_\_ (0) No **GO TO Q18**
- \_\_\_ (1) Yes

**17a.** IF YES, please describe your system: \_\_\_\_\_  
\_\_\_\_\_

**STAFFING AND TRAINING**

**Q18.** Has your county co-located non-clerical Child Welfare workers in your CalWORKs eligibility unit?

- \_\_\_ (0) No **GO TO Q19**
- \_\_\_ (1) Yes

**18a.** IF YES, is this is a \_\_\_ (1) pilot program *OR* \_\_\_ (2) permanent assignment?

**18b.** IF YES, how many full-time-equivalent, non-clerical Child Welfare positions are currently placed in the CalWORKs eligibility unit? \_\_\_\_\_

**Q19.** Has your county co-located non-clerical Child Welfare workers in your CalWORKs welfare-to-work or employment services unit?

- \_\_\_ (0) No **GO TO Q20**
- \_\_\_ (1) Yes

**19a.** IF YES, is this is a \_\_\_ (1) pilot program *OR* \_\_\_ (2) permanent assignment?

**19b.** IF YES, how many full-time-equivalent, non-clerical Child Welfare positions are currently placed in the CalWORKs welfare-to-work or employment services unit? \_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q20.** Has your county co-located non-clerical CalWORKs eligibility staff in your Child Welfare program(s)?

- \_\_\_ (0) No **GO TO Q21**  
\_\_\_ (1) Yes

**20a.** IF YES, is this is a \_\_\_ (1) pilot program *OR* \_\_\_ (2) permanent assignment?

**20b.** IF YES, how many full-time-equivalent, non-clerical CalWORKs eligibility worker positions are currently placed in Child Welfare services? \_\_\_\_\_

**Q21.** Has your county co-located non-clerical CalWORKs welfare-to-work or employment services staff in your Child Welfare program(s)?

- \_\_\_ (0) No **GO TO Q22**  
\_\_\_ (1) Yes

**21a.** IF YES, is this is a \_\_\_ (1) pilot program *OR* \_\_\_ (2) permanent assignment?

**21b.** IF YES, how many full-time-equivalent, non-clerical CalWORKs welfare-to-work or employment services worker positions are currently placed in Child Welfare services?  
\_\_\_\_\_

**Q22.** Within the last two years, has there been a joint meeting of most or all *line* staff from both the CalWORKs and Child Welfare programs to discuss common issues, programs and/or services?

- \_\_\_ (0) No  
\_\_\_ (1) Yes

Comments: \_\_\_\_\_

**Q23.** Within the last two years, did a majority of Child Welfare workers receive training to screen clients for CalWORKs programs and benefits?

- \_\_\_ (0) No  
\_\_\_ (1) Yes

Comments: \_\_\_\_\_

**Q24.** Within the last two years, did a majority of CalWORKs eligibility workers receive training on when and how families need to be referred to Child Welfare voluntary services to reduce the risk of child abuse and neglect? (Voluntary services include, but are not limited to, Family Preservation Services.)

- \_\_\_ (0) No  
\_\_\_ (1) Yes

Comments: \_\_\_\_\_

**Q25.** Within the last two years, did a majority of CalWORKs welfare-to-work or employment services workers receive training on when and how families need to be referred to Child Welfare voluntary services to reduce the risk of child abuse and neglect? (Voluntary services include, but are not limited to, Family Preservation Services.)

- \_\_\_ (0) No  
\_\_\_ (1) Yes

Comments: \_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q26.** Would you say that sharing confidential client information between CalWORKs and Child Welfare programs in your county is:

- (0) Not at all difficult
- (1) Somewhat difficult
- (2) Difficult
- (3) Very difficult

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Q27.** Please describe any other planning, staffing, or training activities in your county that link CalWORKs and Child Welfare services.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FUNDING**

**CalWORKs Single Allocation Funds**

**Q28.** Does your county use CalWORKs single allocation funds to support substance abuse services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q29.** Does your county use CalWORKs single allocation funds to support mental health services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q30.** Does your county use CalWORKs single allocation funds to support intimate partner (domestic) violence prevention services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q31.** Besides substance abuse, mental health, and/or intimate partner violence prevention services referred to above, have other new Child Welfare services been made available or existing services expanded using CalWORKs single allocation funds?

- (0) No
- (1) Yes

Comments: \_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**TANF Incentive Funds**

**Q32.** Does your county use TANF incentive funds to support substance abuse services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q33.** Does your county use TANF incentive funds to support mental health services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q34.** Does your county use TANF incentive funds to support intimate partner (domestic) violence prevention services for Child Welfare families?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q35.** Besides substance abuse, mental health, and/or intimate partner (domestic) violence prevention services referred to above, have other new Child Welfare services been made available or existing services expanded using TANF incentive funds?

- (0) No
- (1) Yes

Comments: \_\_\_\_\_

**Q36.** Does your county use TANF incentive funds to support services for the prevention/early intervention of child abuse?

- (0) No, and not currently under consideration
- (1) No, but under consideration
- (2) Yes

**Q37.** Comments on any funding questions (Q28 – 36) above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DEGREE OF INTEGRATION**

**Q38.** Currently, do you consider your county’s CalWORKs and Child Welfare Services to be:

- (0) Not integrated at all
- (1) Somewhat integrated
- (2) Moderately integrated
- (3) Highly integrated

Comments: \_\_\_\_\_

**CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE**

**Q39.** On a scale from **zero** to **four** (0 is no barrier, 4 is a substantial barrier), how much do you perceive each of the following items acting as a barrier to integration of CalWORKs and Child Welfare services in your county? **Circle one number for each potential barrier.**

	<b>Not a Barrier</b>	<b>Moderate Barrier</b>	<b>Substantial Barrier</b>		
<b>39a.</b> Lack of agency consensus on an appropriate integration model	0	1	2	3	4
<b>39b.</b> Lack of a common assessment tool	0	1	2	3	4
<b>39c.</b> Lack of a common client information system	0	1	2	3	4
<b>39d.</b> Restrictions on sharing client information between programs	0	1	2	3	4
<b>39e.</b> High staff workloads (difficult to add additional tasks)	0	1	2	3	4
<b>39f.</b> Difficulty in hiring new staff (lack of availability)	0	1	2	3	4
<b>39g.</b> Human resources classification limitations and/or union constraints	0	1	2	3	4
<b>39h.</b> Lack of middle manager or supervisor commitment to integration	0	1	2	3	4
<b>39i.</b> Lack of line staff understanding of need for services integration	0	1	2	3	4
<b>39j.</b> Lack of line staff commitment to integration	0	1	2	3	4
<b>39k.</b> Difficulties in blending CalWORKs and Child Welfare funding	0	1	2	3	4
<b>39l.</b> Lack of funding	0	1	2	3	4
<b>39m.</b> CalWORKs client fear of potential Child Welfare Emergency Response intervention	0	1	2	3	4
<b>39n.</b> Integration not a high priority for executive staff	0	1	2	3	4
<b>39o.</b> Competing/conflicting client timelines for the two programs	0	1	2	3	4
<b>39p.</b> CalWORKs restrictions on serving families while the child is out of the home	0	1	2	3	4
<b>39q.</b> Lack of flexibility in California TANF Plan	0	1	2	3	4
<b>39r.</b> Lack of flexibility in California Child Welfare laws/regulations	0	1	2	3	4
<b>39s.</b> Other: _____	0	1	2	3	4
<b>39t.</b> Other: _____	0	1	2	3	4
<b>39u.</b> Other: _____	0	1	2	3	4

Comments on barriers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CALWORKS – CHILD WELFARE SERVICES QUESTIONNAIRE

- Q40.** If you have additional information on how your county has linked Child Welfare and CalWORKs services, please feel free to attach additional comments and/or copies of relevant materials.

***Reminder:***

Please attach the following:

- A copy of your organizational chart.
- If available, a list of the members of any committee or other structure that oversees linking CalWORKs and Child Welfare (please include job titles and departmental affiliations).

***Thank you for your assistance!***

**A report summarizing the statewide findings from this questionnaire will be released within six months – and we will mail you a complimentary copy.**

**CalWORKs/Child Welfare Partnership Project  
California Center for Research on Women and Families  
Kate Karpilow, Ph.D., Project Director  
Linda Orrante, M.S.W., Project Coordinator  
(510) 559-2696**

**March 23, 2001**