The Ethical Responsibilities of Street-Level Bureaucrats Under Welfare Reform

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The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty.

—National Association of Social Workers Code of Ethics, Preamble

Abstract

The enactment of welfare reform in 1996 brought drastic changes to welfare policy in this nation, leading to the complete dismantling of the safety net for poor and needy persons and families. Among a host of other challenges, it has raised questions as to whether social workers can meet their ethical obligations to “enhance human well-being and help meet the basic human needs of all people,” as called for by the National Association of Social Workers. This paper examines the ethical considerations surrounding the new requirements of welfare reform in the United States. In particular, it asks whether the new intake process serves as an implicit barrier or deterrent to welfare. The intake process, which has heaped on even more paperwork and record-keeping requirements, leads front-line workers to become so preoccupied with filling out the forms that they fail to hear and respond to the needs of the welfare applicant. Ultimately, the worker is not able to “enhance human well-being” or “help meet the basic human needs” of the poor and needy.

The practice of social work in the United States has had a long, often controversial and tumultuous history. Initially provided by private voluntary organizations and churches, welfare has grown into a complex network of government, nonprofit, and...
sometimes private organizations providing goods (e.g., cash) and services to the needy. Since 1996, with the passage of a major reform bill, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), drastic changes to welfare policy have led to the complete dismantling of the safety net for poor and needy persons and families in the United States. Among a host of other challenges, this has raised questions as to whether social workers can meet their ethical obligations to “enhance human well-being and help meet the basic human needs of all people,” as called for by the National Association of Social Workers.

This paper examines the ethical considerations surrounding the new requirements of welfare, or Temporary Assistance for Needy Families (TANF), in the United States. In particular, the new intake process serves as an implicit barrier or deterrent to welfare. The process has always required front-line workers to gather information from the welfare applicant and record the responses on the intake form. But the new intake procedures have heaped on even more requirements, thus becoming exceedingly cumbersome and time-consuming. In effect, front-line workers can be so preoccupied with filling out the forms that they fail to hear and respond to the needs of the welfare applicant. Ultimately, the worker is not able to “enhance human well-being” or “help meet the basic human needs of” the poor and needy.

Ethics and Social Work

A good deal of research has been conducted on the ethical and moral dilemmas surrounding the practice of social work (see Dobelstein 1999; Reamer 1983, 1998; Sykes 2004). Most of this literature addresses ethical behaviors of social workers in the health care professions. For example, there is a considerable body of literature on the ethical requirements of mental health, hospice, and home health care workers who must make decisions for frail, cognitively impaired elders (see Csikai 2004; Egan and Kadushin 1999; Furman 2003; Healy 1998; Proctor, Morrow-Howell, and Lott 1993). Similarly, studies abound on the ethical dimensions of the therapist-client relationship (see Cervantes and Hansen 1997). In addition, a good deal of research looks at the ethical obligation of social workers of any type to ensure client confidentiality (Millstein 2000; Raines 2004; Ward 2002). Indeed, the Code of Ethics of the National Association of Social Workers explicitly states that “Social workers should respect clients’ right to privacy . . . [and] . . . should protect the confidentiality of all information obtained in the course of professional service.”

By comparison, little research has focused on the ethical obligations of social workers who are responsible for providing income-maintenance services (e.g., TANF). The welfare reform act, PRWORA, provides fertile ground for such research, given that the morality of the law itself has come into question. That is to say, PRWORA ended the federal entitlements that until then had guaranteed some level of cash assistance to the nation’s poor and needy. As Dobelstein (1999, 24) suggests, “the end to federal welfare entitlements, a product of the 1996 welfare reform . . . reflects a loss of morality” in this nation.

Values, Morality, and Welfare

Like no other public concern, perhaps, social welfare foments a multitude of conflicting values. The many questions pertaining to what should or should not be done
about the needy reflect a set of mores and ethos around how Americans believe people should live their lives; that is, What is the right way, and what is the wrong way? Welfare policies are ultimately constructed and driven around these values. As Dobelstein (1999) asks, “Is it right to force people to work rather than receive welfare? Is it right to deny welfare benefits to a mother for a child born out of wedlock” (6)? Is lack of financial means to support the child the problem, or is sexual promiscuity the problem? Or is it laziness? These are but some of the cultural factors that shape the welfare state. They are confounded by ideology, morality, religion, politics, and ethics.

In the United States, the erosion of values around the poor and needy has shifted the beliefs and values of the American people around the responsibility for assisting the poor. In the 1960s, there continued to be some hope that new programs (e.g., training and education) would lead to meaningful, well-paying jobs (Dobelstein 1999; Leighninger 1999; Stoesz and Karger 1990). But the legacy of conservatism that swept through the country in the 1980s led to an attitude of benign neglect that was ultimately embraced and sealed in the 1996 welfare reform bill. That this draconian measure passed under a seemingly progressive Democratic president, Bill Clinton, is further indication of the erosion of values and of moral obligations to the needy and the poor. Parenthetically, some members of the Clinton administration raised moral objections to the welfare law, and ultimately resigned rather than remain to implement it. In the end, instead of questioning the morality of the “personal responsibility” legislation, most Americans would rather portray welfare recipients as promiscuous, immoral, and unworthy of any type of assistance, cash or otherwise.

In sum, the ethos around welfare in the United States has gradually evanesced to one that can now be characterized by apathy, hopelessness, and even anger. It is in this context that PRWORA gained enough support from both Democratic and Republican lawmakers. But professional social workers, whether they personally share this ethos or not, have an ethical and moral obligation to serve the needs and interests of welfare applicants and clients. Are they doing so since passage of welfare reform? Or does the law itself preclude social workers on the front lines of service delivery from meeting their professional and ethical responsibilities?

The Welfare Reform Law

One of the key provisions of the federal welfare law is welfare-to-work, which mandates each state to require able-bodied recipients to participate in work or work-related activities (e.g., job search) after receiving assistance for twenty-four months, or sooner as defined by state law. New applicants to TANF are generally required to attend an orientation on work requirements and responsibilities under TANF. Applicants and clients are also required to sign a Personal Responsibility Agreement (PRA) in which they specifically agree (1) that TANF is temporary, (2)
that TANF is a work program, and (3) that it is the client’s responsibility to get and keep work. To avoid penalties, states must meet minimum participation rates. As of 2002, the minimum participation rate for all families with dependent children was 50 percent. Those exempt from the work requirements generally include disabled recipients or caregivers and “payees” (e.g., grandparents who receive financial assistance on behalf of dependent grandchildren).

The welfare-to-work provision is one of the most controversial aspects of PRWORA because its goal is very ambiguous. Some argue that the goal of welfare-to-work is genuinely to promote employment and self-sufficiency. Others argue that the goal is to divert people away from welfare regardless of their employment prospects or outcomes. Still others argue that the goal encompasses both diversion and self-sufficiency (see Meyers, Riccucci, and Lurie 2001). Notwithstanding, a host of new rules and regulations to implement the welfare-to-work provision have been imposed on street-level workers.

The intake, or application, process drives the worker-client interaction, or encounter, and also places some constraints, albeit minor, on worker discretion. The front-line worker is required to record client responses on the intake form and ensure that the welfare applicant and clients provide certain information and present various documents for verification (e.g., electric bills, rent receipts). In addition, the worker must obtain the applicant’s signature on the Personal Responsibility Agreement (PRA), which, as mentioned above, states that the client agrees that TANF is temporary, that TANF is a mandatory work program, and that it is the client’s responsibility to get and keep work.

The intake process and the application form vary across the states, but the one feature common to all sites is that it is cumbersome and time-consuming. Moreover, workers’ efforts to ensure that certain requirements are met (e.g., the signing of the PRA) can detract from the client’s needs’ being addressed or even heard. That is to say, workers sometimes become so preoccupied with filling out the forms that they may not hear, and thus not respond to, the needs of the applicant or client. Wallace Sayre (1948) called this the “triumph of techniques over purpose.” For example, as will be discussed in greater detail below, a welfare worker in Bibb County, Georgia, insisted on going through an explanation of rules around the family cap, which places financial penalties on TANF clients for having additional children, even though the applicant’s tubes had been tied.

Data

Data for this study were generated from a larger research project conducted for the U.S. Department of Health and Human Services in conjunction with the Rockefeller Institute of Government in Albany, New York. Data were collected through direct observations of the interactions, or “encounters,” between street-level workers and applicants in eleven local, county-level welfare agencies in four states: Georgia,
Michigan, New York, and Texas. The four states were purposely selected to maximize variation in policy, administrative structures, and political culture.

These observations, or “encounters,” provide data on the actual content and process of intake practices in welfare offices. To collect sufficiently detailed information, the encounters were either tape-recorded (permission was granted for the sites in Texas and Michigan) or transcribed verbatim (New York and Georgia sites). A total of 730 encounters in welfare offices were observed for this study.

Data were also generated through paper-and-pencil surveys administered to all workers who had face-to-face contact or interaction with welfare applicants or clients. The survey asked questions about, for example, the workers’ understanding of the primary program goals of welfare as well as their personal opinions about welfare and about clients. Out of 286 surveys administered, 200 were returned, for a 70 percent response rate overall.

What Are Workers on the Front Lines Doing?

The passage of PRWORA was intended in part to change the behaviors or actions of street-level bureaucrats. Specifically, there was an expectation that workers would pursue the new welfare goals, either those expressed formally (employment or welfare-to-work) or informally (diversion or deterrence). Nevertheless, determining eligibility also remains an important goal of welfare. Indeed, the performance standards against which street-level workers continue to be measured are error rates (i.e., payment errors for TANF) and standard of promptness (Riccucci and Lurie 2001). The standard of promptness, or SOP, refers to the promptness with which applications and redeterminations for aid are processed.

The extent to which workers are focusing on eligibility determination in their interviews or encounters with welfare applicants would serve as an indicator of the degree to which they are consumed by intake procedures. Table 1 provides data on the frequency with which street-level bureaucrats focus on eligibility determination, employment, or diversion. The eligibility-determination index relates to the more traditional job task of welfare workers—timely and accurate processing of welfare claims. The employment index relates to new welfare reform goals requiring and supporting employment. The diversion index relates to efforts to deter welfare use, prevent fraudulent claims, and discourage out-of-wedlock births.

As the data show, eligibility determination was most frequently the focus (50.1%) of intake encounters, followed by employment (33.1%) and then diversion (15.9%).
Table 2 presents these data by state and also shows that eligibility-determination issues are addressed most frequently across states. It should be noted that the finding of 33.1 percent for employment may be misleading in that the mere mention of the term “work” or the requirement of job search was coded as “employment” even if there was no coaching or counseling, key behaviors for workers to help clients find jobs. Moreover, stating that “welfare clients must work or find jobs” continues to be part of the overall intake process for determining eligibility for benefits. The point here is that the amount of time focusing on eligibility determination (50.1%) may be greatly underestimated.

The Intake Process. The examples in this section represent a small sample of the intake encounters for eligibility determination that take place at welfare offices.
Exhibit 1

Worker: Tell me why you came to Atlanta.
Applicant: Mental illness that caused me to come home and be around family members [hands over a letter from her physician in Connecticut].
Worker: Have you applied for Social Security Disability?
Applicant: I don’t know where to go.
Worker: The Social Security office. You live over on Campbellton Road?
Applicant: Yes.
Worker: Since you’re in here today, I think the closest place is MLK. You can go there and apply for Social Security Disability.
Applicant: I thought it was in here, too.
Worker: Is this your home?
Applicant: Yeah. Do you know how much that is—Social Security?
Worker: If it’s just plain old Social Security, it’s $520 a month, plus you get Medicaid.
Applicant: Will that drop it out of here?
Worker: No, you’d still get TANF for your children, we’d just drop you off the case. You’d get $235 for them, which would help with income, until you’re mentally able to go back to work. Since right now you’re not mentally able to go to work, there’s a one-time exemption available. I’m going to go ahead and use that until you get a doctor’s statement that you can go to work.

[Further along in the encounter]
Applicant: How soon could I get [Medicaid], because Tiffany’s tooth is loose.
Worker: OK. We’ll see. This form states you’re not a victim of domestic violence. This is your one-time exemption saying you won’t have to work until you learn about disability from Social Security. This is the family cap rule. I’m going to explain it to you, but I want you to read it before signing. It says if you receive TANF for 24 straight months and then have another baby, it won’t be added to your TANF. You can have as many babies as you’d like, but the government won’t pay for it. This is a child support form—it releases information to child support enforcement. This is the interview form we finally got printed. It’s everything I asked you. I need you to sign and date for me. This is your Personal Responsibility—it has those things I told you about going to PTA. It requires you to sign and date [client signs and dates]. You have Medicaid this month?
Applicant: No.
Worker: In Connecticut?
Applicant: They stopped that, too.
Worker: It won’t stop until April 30th. So, technically, you’re not eligible in Georgia until May 1st. But if it were me and my child needed attention, I’d take her to the doctor and try. They may not take a Medicaid card from Connecticut, but they might.
Exhibit 2

Worker: Who do you live with?
Applicant: My mother.
Worker: What I can do is, because you’re 18, I can’t let you apply for food stamps; your mother’d have to apply. But I can apply you for TANF and Medicaid.
Applicant: OK.
Worker: Now, did you finish high school?
Applicant: No.
Worker: Are you working on your GED?
Applicant: No. I want to, but I can’t, because of child care.
Worker: Well, you’ll have to, because it’s mandatory if you’re applying for TANF.
Applicant: I don’t have money.
Worker: We’ll supply you with support services, including child care.
Applicant: OK.
Worker: You have some ID on you?
Applicant: Yes.
Worker: I’ll need a picture ID, Social Security card. Now, usually . . . Do you know about our TANF program? Usually the young ladies and young men who come in to apply here, usually first we put them into job search. But because you’re under 21, you’re mandatory to do education, and get your GED. And then after that, you’d do job search.
Applicant: OK. Do you have a food program?
Worker: Only thing I could do is give you a referral for food. What you need to do is call that number [indicates telephone number].
Applicant: OK.
[Further along in the encounter]
Worker: You pregnant?
Applicant: Yeah.
Worker: Girl, were you on some kind of birth control?
Applicant: [shakes head] I shoulda been.
Worker: You right, you should’ve been. You already got two children. And you haven’t finished high school. How pregnant are you?
Applicant: One month and two days.
Worker: You gonna be using birth control after that?
Applicant: Yeah. I wanna get my tubes tied.
Worker: It’s your choice. You live with your mother. She have any other children living there?
Applicant: Yeah, there’s three of us.
Worker: Three total?
Applicant: Four total. I didn’t know that—I didn’t know you had to be that age to apply for food stamps.
Worker: Yes, unless you live alone. Your mom receive any assistance?
Applicant: She works.
Worker: That’s probably why she can take care of her children. Like you need to.
Applicant: I was working—when my sister was here, she’d watch them. Then she left and I had to stop working.
Worker: Well, that’s gonna be a problem—child care. You didn’t think about that.
Applicant: I do now.
Worker: You will have to deal with it. Stop having babies.
Applicant: Most definitely.

[Further along in the encounter]
Worker: Why’d you get fired [from your last job]?
Applicant: Drugs.
Worker: What kind of drugs?
Applicant: Marijuana.
Worker: You were smoking marijuana?
Applicant: Yes, ma’am.
Worker: You still smoking?
Applicant: Yes, ma’am.
Worker: What I got to do?! Put you in a program?
Applicant: No.
Worker: What are you gonna do?
Applicant: I’m trying to straighten.
Worker: OK, you need to go to the life-skills class.
Applicant: Is this [food bank] close by?
Worker: What you need to do is call the number, and they’ll give you referrals of where you need to go. I’m going to talk with one of the employment-services workers. I’ll be right back. . . . OK, we got all kind of stuff to do for you. What’s gonna happen is I’m gonna have to make a referral to CPS [Child Protective Services]. And they’re gonna help you get yourself together. About the skills of life. Also, I’m gonna give your name to our substance-abuse folks. But remember, to get TANF, you’re gonna have to do school. All these things you’re gonna have to do to get your life together. . . .
Applicant: Y’all give emergency food stamps?
Worker: No emergency food stamps.
Applicant: How long it gonna take [to get food stamps]? Five days?
Worker: Yeah. Now, it’s gonna include her wages, her income. That’s it. Now, somebody will contact you about classes and a drug program, and you need to get in school.

They each illustrate how the applicant’s needs can get lost in the worker’s compulsory, obligatory processing of the intake form. This is not to say, of course, that all workers, even with the laborious new intake procedures, are completely ignoring
the needs of clients. Rather, the examples are illustrative of how strict adherence to the rules can interfere with the ethical treatment of clients or applicants.

The first example is an encounter at the Department of Family and Children’s Services (DFACS), South West Fulton Office in Atlanta, Georgia. The TANF applicant is in her late twenties or early thirties, has two children, and suffers from the disability of schizophrenia. She has just moved to Atlanta from Connecticut. In all likelihood, she will need some level of assistance for life, but the worker proceeds to have her sign the PRA and grants her a one-time waiver from the work requirement.

In another case, the applicant clearly needs food on an emergency basis and continually brings the interview back to this issue, but the worker spends more time counseling the applicant on family planning. The applicant is eighteen years old, has two children, and is pregnant. She is applying for TANF, Medicaid, and food stamps at the DFACS, Northwest Fulton Office in Atlanta. Because the applicant is under twenty-two and living at home, she is not eligible or cannot qualify for food stamps on her own.

In one encounter, in the DFACS office at Bibb County, Georgia, the worker insisted on going through an explanation of rules around the family cap (which places financial penalties on TANF clients for having additional children) even though the applicant had her tubes tied:

Worker: . . . in regards to family planning and birth control.
Applicant: I got my tubes tied.
Worker: Well, we still have to tell you about it. When TANF came into place they put something called family cap into place.

The worker proceeded to provide a lengthy explanation of the family cap, and then asked the applicant if she needed a referral to the health clinic.

In one last example here from a Dallas, Texas, office of the Department of Human Services, a client clearly shows her frustration with having to follow the rule-driven intake procedure, especially since her previous application for aid, with accompanying verification forms, cannot be found.

The encounter lasted for an hour and twenty minutes with a decision of “pending” for TANF, Medicaid, and food stamps until the client provided additional information and documentation to the caseworker.

These encounters represent just a few examples of how the management-driven application and intake process have affected worker-client interactions as well as potential outcomes. Under welfare reform, new rules were created, thereby resulting in an enormous amount of additional paperwork. Workers are required to get the applicants to sign various forms and enter into various agreements (e.g., the PRA) that often obscure and eclipse the substantive concerns of the clients (i.e., finding or receiving some form of assistance, including emergency food supplies). The process itself has become exceedingly arduous and convoluted. If the goal of welfare reform is to get people off assistance, then the intake process itself helps to fulfill that goal.

The Buck Stops Here

Street-level workers are certainly challenged by the demand to balance their responsibility to abide by the law (e.g., adhere to predetermined rules, procedures, and laws) and their professional and ethical responsibility to address the needs and
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interests of the clients (see Bowman 1991; Denhardt 1988; Menzel 1995; Rohr 1989, 1998). However, by going “strictly by the book,” street-level workers may be engaging in unethonal behaviors, and they may not even be aware that they are doing so (Adams and Balfour 2004, 4). Notwithstanding, the compelling question here is, Who or what is responsible for the ethical treatment of clients? That is to say, if the law reflects a certain degree of immorality, at least as some see it, can the burden of ethical responsibility be properly placed on the street-level bureaucrats? Or did lawmakers, policymakers, and the president ignore their ethical obligations when they enacted the law? Once a law embodying questionable moral and ethical considerations has been enacted, are those responsible for the law’s implementation relieved of their obligation to ensure the ethical and moral treatment of the persons targeted by the law? A profound example asks, Can the thousands of ordinary civil servants who implemented Nazi Germany’s Final Solution simply claim, “We were just carrying out orders” (Adams and Balfour 2004)?

Many argue that when one seeks to balance an obligation to the state with professional responsibility to the client, the interests of the client must prevail. Burke (1997), for example, argues that bureaucrats have a responsibility to act in ethical and moral ways, notwithstanding bureaucratic rules and regulations. He points to the importance of treating questions of bureaucratic conduct “largely as a matter of ethics and morality,” and goes on to say that “moral duties are different in many ways from political and institutional obligations, [but] they are also mutually de

Similarly, Lipsky writes:

An essential condition for transformation of the welfare state workplace is for workers to recognize the need for alliances with their clients. . . . Instead of hiding behind the defense of bureaucratic constraints, public workers must take responsibility for developing the discretionary aspects of their jobs. . . . We should look hard to identify those circumstances in which workers have been able to modify the people-processing approach in favor of more human relations with clients. (1981, 27)

Stivers (1994) looks at the tension between bureaucratic responsiveness (i.e., to the state, the masses, public policy, and law) and bureaucratic responsibility to engage in professional, ethical, and moral behavior (e.g., to clients). Stivers argues that one way to reduce the tension calls for greater listening skills on the part of bureaucrats. She writes that “The experience of listening involves openness, respect for difference, and reflexivity. Developing the capacity to listen well promotes accountability by helping administrators to hear neglected voices and engage in reciprocal communication” (364). Later she states that

skillful listening promotes the development of moral sensibilities because it models the reciprocity inherent in ideas of justice. . . . Instead of stripping away the qualities of unique individuals in favor of an ideal of universality, listening expands justice to include the details of the situation and the significant differences among human beings. (366)

But, as Maynard-Moody and Musheno (2003, 157) find, street-level workers possess the power to decide whether to adhere to the rules or to work on behalf of clients’ rights and needs. In their study of the “stories” they collected from some
Exhibit 3

Worker: How have you been supporting yourself?
Applicant: Oh, I used to clean. Just temporarily. I would clean different people’s house and do odd little jobs for them.
Worker: OK, we’re gonna have to verify everything, but I’ll make you a list of everything I’m gonna need from you. So, basically, your sister is providing for you—Pampers and everything?
Applicant: No. She is not.
Worker: Who is doing that?
Applicant: Yes, we did. We brought it up here. I got a call into Austin right now. As we speak. I’ve called and I talked to—I don’t know—I guess that’s your district office, and they’re gonna be getting back to me because we brought all that information up here. Last time we spoke with a Kathy somebody.
Worker: OK. So, if you didn’t provide the information . . .
Applicant: We did.
Worker: You still have to provide it [now]. Do you have a receipt?
Applicant: A receipt for what? What information are you asking for?

(continued)
Exhibit 3 (Continued)

Worker: For the same information they asked you for when you came in. . . .
All I see it’s gonna do is for us to do policy, and if I have to ask you for forms, you still have to provide them.
Applicant: Have I refused to do that?
Worker: Uh, uh.
Applicant: Have I refused to do that?
Worker: Not with me you haven’t.
Applicant: OK, I mean, it was the way you said it, like I . . .
Worker: I mean, I’m gonna go back and look in her case to see what else she needed.
Applicant: I don’t mind supplying you with whatever you ask me for.
Worker: OK. Great.
Applicant: But the way you just said . . . It’s like I’m not giving you what you need. We gave everything they’ve asked for, and nobody has gotten back with us.
Worker: OK.
Applicant: But then, we didn’t put it in Kathy’s hand, either. We left it at the front desk, so there’s no telling.
Worker: Did you get a receipt for it?
Applicant: Uh, no. No, we just made copies of it.
Worker: OK. I’ll ask Kathy, you know, if she has the information. So I’ll have to ask if she sent it down to us to see what’s going on. That’s all. They don’t. . . . You know, we have to go [through] policy and all that.
Applicant: I understand that.
Worker: So the fact that you called Austin doesn’t mean that, you know, we have to jump.
Applicant: No. I’m not asking nobody to jump. I just want Austin to know that there’s a lot of people in this office that’s not doing what they’re paid to do. So, I wanted to make that clear, because obviously they don’t know it.
Worker: OK.
Applicant: Come on, Kayja.
Worker: Right now, are you applying for their household?
Applicant: No. Just me.
Worker: And your baby?
Applicant: Right.
Worker: OK. I need her birth, her Social Security card.
Applicant: Oh, I don’t have it.

forty-eight street-level workers, including police officers, teachers, and vocational rehabilitation counselors, Maynard-Moody and Musheno find that the workers themselves make decisions about when to go by the book and when to serve as client advocates. These judgments are based on their judgments about the moral worth
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of the clients (Maynard-Moody and Musheno 2003, 93). Once having rendered a judgment about the client, the street-level bureaucrat will decide whether to “bend” or hide behind rules, procedures, and laws (also see Bowman 1991; Cooper 1998; Gortner 1991). As Maynard-Moody and Musheno observe,

Moral judgments about citizen-clients infuse all aspects of street-level decisions making. To street-level workers, fairness has little to do with the bureaucratic norm of treating everyone the same or even fairly implementing laws and regulations. To our storytellers, fairness and justice mean responding to citizen-clients based on their perceived worth. More than enforcers of law, street-level workers . . . are producers of values and character that embody mainstream notions of moral worth and productive membership in society. (93–94)

In short, if the client is deemed morally worthy by the worker, help is on the way; if not, the rules and regulations will be relied upon (read: hidden behind) to deny benefits or services.

How Do Welfare Workers View Their Clients?

It may be, as Maynard-Moody and Musheno found in their research, that some street-level bureaucrats will make decisions about how to treat clients based on their moral judgments about individual clients. Let us see how welfare workers view their clients and also the goals of welfare. This will shed light on whether street-level workers are making moral judgments about their clients and, ultimately, whether they are deliberately avoiding their ethical responsibilities toward their clients.

As seen in Table 3, while front-line workers believe that state and agency officials seek to reduce welfare caseloads, they do not see PRWORA as a means for reducing the number of people on welfare or for diverting applicants from coming onto welfare. Nor do they view welfare reform as a way to require and encourage clients to work, to prevent fraudulent behavior among clients, or to reduce out-of-wedlock births. Rather, as street-level bureaucrats see it, the primary goals of welfare reform are to accurately determine eligibility for welfare benefits and services, and to help clients achieve self-sufficiency. If street-level workers were not concerned about the needs of their clients, they would not acknowledge the importance of eligibility determination. Instead, they would view diversion or reducing caseloads as their priorities.

The survey results indicate, then, that the workers themselves believe that the intake process and filling out and collecting forms are a key aspect of welfare reform and of their jobs. However, as was noted earlier, under welfare reform the performance of workers continues to be evaluated against eligibility-determination concerns (e.g., SOP and error rates), and this further encourages workers to focus their energies on eligibility determination. This suggests that to the extent workers are focusing on eligibility determination, they may be acting pragmatically, out of self-interest. On the other hand, one could also argue that workers tacitly believe that they are acting ethically and responsibly by continuing to ensure that client eligibility for welfare benefits is performed accurately and in timely fashion.

Further indication that workers may be acting out of a sense of ethical responsibility toward their clients can be seen in Figures 1 and 2, which illustrate workers’
views and opinions about welfare clients. As part of the paper-and-pencil survey, workers were asked to indicate approximately what percentage of their welfare clients would rather be on welfare than work to support their families.

As seen in Figure 1, workers do not predominantly see their clients as preferring to be on welfare. The largest segment of the workers (30.3%) see a small proportion (0–24%) of their clients as preferring to be on welfare rather than work. About 38.9 percent see 25–50 percent of their clients as preferring to be on welfare. If workers viewed clients as undeserving and morally worthless, a higher percentage would see their clients as lazy and not wanting to work. Only 1.9 percent of the workers believe that welfare recipients would rather be on welfare than work and support their families.

Figure 2 provides additional evidence that workers may not see their clients as unworthy. The data in Figure 2 present results from the survey question asking workers if they believed that it is easy for welfare recipients in their county to find a job leading to self-sufficiency. As the data show, a relatively high percentage (39%) believe that it is not easy to find a job paying a living wage. Only 8 percent strongly believe that it is easy for welfare recipients to find jobs that could lead to self-sufficiency. Again, if workers believed it was easy for welfare clients to find work, they would be less supportive of people seeking eligibility for welfare benefits.

### Table 3

Front-Line Welfare Workers’ Views on the Importance of Welfare Goals (total from welfare workers in all states—Georgia, Michigan, New York, and Texas)

<table>
<thead>
<tr>
<th>Important to</th>
<th>Important to</th>
<th>Important to</th>
</tr>
</thead>
<tbody>
<tr>
<td>agency</td>
<td>state officials</td>
<td>worker</td>
</tr>
<tr>
<td>Reducing number of people on welfare</td>
<td>22.9</td>
<td>58.3</td>
</tr>
<tr>
<td>Determining eligibility for benefits and services accurately</td>
<td>22.3</td>
<td>10.7</td>
</tr>
<tr>
<td>Determining eligibility in a timely manner</td>
<td>12.2</td>
<td>4.8</td>
</tr>
<tr>
<td>Diverting applicants from coming on welfare</td>
<td>2.1</td>
<td>5.9</td>
</tr>
<tr>
<td>Requiring and encouraging work</td>
<td>4.3</td>
<td>4.3</td>
</tr>
<tr>
<td>Helping people get the best possible job they can get</td>
<td>3.2</td>
<td>0.5</td>
</tr>
<tr>
<td>Making sure everyone who is eligible receives medical benefits</td>
<td>2.1</td>
<td>1.1</td>
</tr>
<tr>
<td>Making sure everyone who is eligible receives child care</td>
<td>1.1</td>
<td>0.0</td>
</tr>
<tr>
<td>Helping people achieve self-sufficiency</td>
<td>20.2</td>
<td>6.4</td>
</tr>
<tr>
<td>Preventing fraudulent behavior among clients</td>
<td>0.5</td>
<td>3.7</td>
</tr>
<tr>
<td>Reducing out-of-wedlock births</td>
<td>1.1</td>
<td>2.7</td>
</tr>
<tr>
<td>Treating clients fairly and equitably</td>
<td>8.0</td>
<td>1.6</td>
</tr>
<tr>
<td>Total</td>
<td>100.0</td>
<td>100.0</td>
</tr>
</tbody>
</table>

n = 200
Summary and Conclusions

The welfare reform act of 1996 has led to questions regarding the ethical responsibility of street-level bureaucrats to effectively deliver welfare benefits to needy families. Because the law created a host of new and very arduous requirements for processing applications for aid, welfare workers are challenged to meet the needs of the state but also, at the same time, to serve the needs and interests of those seeking welfare benefits.

A good deal of normative discourse exhorts street-level bureaucrats to place the
needs of their clients above those of the state. This literature further argues that even if the morality of a law comes into question, street-level bureaucrats are not relieved of their obligation to ensure the ethical and moral treatment of their clients. The present study sought to empirically examine whether welfare workers are acting ethically and responsibly to meet the needs of their clients.

It found, first, that the preponderance of street-level bureaucrats’ time focuses on eligibility determination. This suggests that welfare workers are working to address the needs of their clients. They may be doing so in part because their jobs are measured against eligibility-determination criteria (e.g., standard of promptness and error rates). However, through other measures, the study suggests that welfare personnel may also be working to help their needy clients because they view them in morally positive ways. In effect, welfare workers are not hiding behind the law to avoid helping their clients receive welfare benefits.

NOTES
1. Formerly, Aid to Families with Dependent Children (AFDC).
2. For the purposes of this paper, the terms “ethical” and “moral” are used interchangeably. See Burke (1997).
3. There is also a good deal of work on the ethical responsibilities of public administrators more generally. See, for example, Bowman (1991), Cooper (1998), Denhardt (1988), Frederickson and Ghere (2005), Rohr (1989, 1998), Stivers (1994). This research addresses bureaucratic responsibility, but not the issue of bureaucratic responsiveness, which connotes, as Stivers (1994) points out, political bias. The concepts are seemingly similar, but in the context of bureaucratic behavior, they are not.
4. Code of Ethics of the National Association of Social Workers, secs. 1.07 (a) and (c); www.naswde.org/pubs/code/code.asp.
5. Some research looks at issues of confidentiality (e.g., Seelig 1990 and Reamer 1983), or the right to competent treatment (see Reamer 1998).
6. Mary Jo Bane, assistant secretary for HHS’s Administration for Children and Families, and Peter B. Edelman, acting assistant secretary for HHS Planning and Evaluation, resigned on September 11, 1996, just two weeks after President Clinton signed PRWORA into law (see Riccucci 2005).
7. The other three major provisions of PRWORA are block grants, time limits, and reducing out-of-wedlock pregnancies.
8. In fiscal year 1997, the participation rate for all families with dependent children was 25 percent. Since then it has increased by 5 percent each year. For 2002 and thereafter, the participation rate has been 50 percent of the cases. See www.nls.org/regs/1300.8.htm.
9. Certainly, however, the most dramatic change under welfare reform was the elimination of federal entitlements for cash assistance (AFDC) and the imposition of a time limit on assistance.
11. Hasenfeld (2000) illustrates how clients’ needs can sometimes be overshadowed during the intake or assessment process.
12. The local sites ultimately included were Bibb, Northwest Fulton, and Southwest Fulton counties in Georgia, Dallas (Masters and Grand Prairie) and Denton counties in Texas, Wayne (Detroit), Hillsdale, and Macomb counties in Michigan, and Albany and Suffolk counties in New York.
13. To collect a representative sample of these encounters, a quota sample was developed based on the amount of time workers spent in face-to-face contact with TANF clients or applicants. The sample was constructed on the basis of “time” because time spent by front-line workers in face-to-face encounters represented the most comparable
analytic unit across sites and organizations. Thus, the sampling unit was defined as “minutes of time workers spend in face-to-face encounters” with TANF applicants or clients per week. Based on surveys of front-line staff in the sampling frame, the average “encounter time” was computed. Hours were then computed to percentages of the entire weekly “encounter time” at each site. A stratified quota sample for observation (60 hours per site) was then allocated across sites in proportion to the share of the site’s total encounter time. After determining the quota of hours to be observed in each unit of the site, individual front-line workers in each unit were randomly selected for observation. These employees were observed for a minimum of three hours and a maximum of six, until the quota of observation hours was reached.

14. Also see Bovens (1996), who provides a taxonomy of administrative responsibility suggesting that public servants may exhibit responsibilities not only to their superiors, but, conversely, to their conscience, peers, profession, or clients.

REFERENCES


ABOUT THE AUTHOR
Norma M. Riccucci is professor of public administration at Rutgers University, Newark, New Jersey. In 2005, she was inducted into the National Academy of Public Administration; the following year she was the recipient of ASPA’s Charles H. Levine Award for her research, service, and teaching contributions to the field of public administration.