BUSSW Policy Curriculum

Field Instructor Appreciation Breakfast

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Overview

- Policy I (WP700)
  - Conceptualization of social welfare
  - Key policies and programs
  - History of social welfare in U.S.
  - Role of social work

- Policy II (WP701)
  - Analysis of social problems and social policies
  - Policy practice

- Advanced Electives
Conceptualization of Social Welfare Policy

- What do people need? Or have a right to?

- Who is responsible for addressing?
  - Individual, family, community; local vs. national; government vs. private sector/market; religious communities; for-profit organizations

- Key ideological frameworks (liberal and conservative, etc.)
Key Policies and Programs

• Public Assistance (TANF, SSI, SNAP)
  • benefits
  • eligibility
  • financing
  • administration

• Social Insurance (OASDI, Medicare/Medicaid/ACA, Unemployment Insurance)
  • benefits
  • eligibility
  • financing
  • administration

• Tax Credits and “Corporate Welfare”
  • Earned Income Tax Credit
  • Child Tax Credit
  • Corporate subsidies and tax credits
Social Welfare History

- European legacy
- American colonies, Revolution, Constitution, slavery
- Post civil-war (Freedman’s Bureau, industrialization, and changing philosophies)
- Progressive Era (urbanization, start of social work, policies)
- Great Depression, New Deal, Social Security
- 1980s Reagan conservatism and retrenchment
- Bush, Clinton, Bush II
- Obama and current issues
History: What are the lessons?

- There are reasons why we are the way we are based on historical legacy.
- Some of our contemporary debates have long-standing historical precedents:
  - E.g., ideas of deservedness for assistance.
- Are any of the previous policy solutions relevant to contemporary situation?
- How does the context (ideological, political, economic, social, demographic, religious, geographic) influence recognition of social problems and policy design?
Social Work Profession

- Start of the profession in Progressive Era
- Development of the profession (early involvement in policy [Addams, and the New Deal advisors] professionalization, rise of psychoanalytic approaches)
- 60s – critique of social work (Ehrenreich, 1985)
- Policy practice (Figueira-McDonough, 1993)

BU School of Social Work
Two goals distinguish social work from other helping professions:
- (1) social justice and
- (2) self-determination.

Social work is more successful at #2; more attention is needed to #1 and this can only be done with policy practice → direct involvement in formation/modification of social policy.
Figueira-McDonough: Policy Practice

Methods of Policy Practice:

- Legislative advocacy*
- Reform through litigation
- Social action
- Social policy analysis*

* the focus of Policy II
Outline for Task Force Assignment

- Problem Definition: Conceptual
- Scope and Correlates of Problem: Data
- Causal Framework
- Current Social Policies: Analysis
  - Strengths/weaknesses? Equity, efficiency, effectiveness? Impact on populations?
- Policy Recommendations
Poor Health and Poor Access Among Low-Income Adults
Victoria Cox, Allyson Meyer, Ellen Andrews, & Elizabeth Lang

Health Status Among Low-Income Adults

In the United States, income is tied to health, in that those with high income experience the greatest health. This paper outlines the persistent disparities in health outcomes and healthcare access and quality among low-income adults. Low-income adults are more likely to be uninsured and delay medical or dental care due to costs, and are less likely to have access to employer-sponsored health insurance or a usual source of care. Research has shown access to primary care among low-income is associated with improved rates of receiving preventive care services, better management of chronic conditions, and reduced mortality. In recent years, the government and health care reform have worked diligently to ensure coverage for low-income families and children through passage of the Affordable Care Act. Since 2014, insurance rates have increased among all populations. But disparities continue to exist among low-income individuals, in particular low-income children affected by a Medicaid coverage gap.

Known Causes

Low-income adults face multiple health barriers, ranging from increased risk behaviors to residing in economically distressed areas with limited opportunities and access to services. Below is a list of the most frequent factors contributing to the disparities in healthcare coverage, these factors include: increased risk of disease, mortality, and poor health for an already vulnerable population.

- Increased rates of Health Risk Behaviors
  - Low-income adults are 40% more likely to smoke, which increases the chances of developing serious cancer, heart disease, and other chronic conditions.
- Increased rates of unmet needs for care
  - Individuals are more likely to experience unmet needs for care, leading to adverse health conditions (diabetes, cancer, obesity)
- Low-income adults are 3 times more likely to be obese & have lower rates of physical activity

Low Health Literacy

- Low-income adults are disproportionately affected by low health literacy, which is defined as a lack of ability or capacity to obtain, process, and communicate health information.
- Low HL among vulnerable, low-income, children, and adults, is associated with worse health outcomes and negative health outcomes.

Environmental conditions associated with poor health

- Low-income adults face more environmental hazards and poor living conditions.
- More likely to be exposed to indoor and outdoor environmental pollutants, such as lead-based paint and radon, which can lead to serious health problems.
- More likely to be exposed to unsafe and unhealthy environments, leading to increased risk of disease and death.
- Limited access to clean water and proper sanitation.
- Limited access to healthcare providers and high-quality clinical facilities.

Restricted Access to Care

- Employer-sponsored insurance is rarely afforded at low-wage jobs.
- More likely to be uninsured or underinsured.
- Less likely to receive recommended health care services due to reduced access and affordability.

Disparities in Access & Quality

- The differences in health status between low-income and middle-income adults is further impacted by disparities in healthcare access and quality.

- Access
  - According to the most recent data from 2014, low-income adults are more likely to experience worse health outcomes due to reduced access and affordability.
  - More likely to have access to preventive care services, such as screenings and vaccinations, which are critical to maintaining good health.
  - More likely to have access to primary care providers, leading to better management of chronic conditions and reduced mortality.

- Quality
  - More likely to be exposed to poor quality care, such as delays in treatment and lack of coordination of care.
  - More likely to experience worse health outcomes due to reduced access and affordability.

Policy Analysis: The Affordable Care Act

The Affordable Care Act (ACA), signed into law in March 2010, is a comprehensive health care reform legislation aimed at improving individual access to quality, affordable health insurance while controlling the growth of healthcare spending. The features of the ACA include:
- Compelling individuals to obtain health insurance
- Increased access to quality, affordable coverage
- Emphasis on prevention care, addressing the nation’s health disparity among low-income adults
- Emphasis on preventive care services, such as screenings and vaccinations

Policy Proposal: The Amendable Care Act

Purpose: To ensure that all Americans have access to affordable, high-quality health care. To eliminate disparities in access, quality, and outcomes for low-income adults.

- Access to care
  - Overcome economic barriers to healthcare coverage
  - Increase access to preventive care services
- Quality of care
  - Implement policies to reduce healthcare disparities
- Cost
  - Reduce costs of healthcare services and prescription drugs

References

Available upon request.
Mass Incarceration of Women of Color
Patille Bingham, Nicole Brooks, Rebecca Chernek, Danielle Helme, Libby Shrobe
Boston University School of Social Work

Visions of Women of Color Incarcerated for Drug Crimes

The Problem: Rates of federal incarceration for drug crimes amongst women of color are rising. Despite the disparate impact that mass incarceration has on women of color, no policies currently exist to specifically target their unique vulnerability to the system. The problem has been framed as a result of shifting gender roles, financial liability, and a lack of treatment for substance abuse; however, the reality is far more complex.

Women of color are disproportionately incarcerated due to biases of the criminal justice system that compound the specific societal race, gender, and class-based prejudices that push women of color into drug use and drug-related criminal behavior.

Current Policy Approaches to Address Race and Gender Biases

- The 1991 Bail Reform Act
- The Sentencing Reform Act of 1984 (creation of "Gender Neutral" sentencing)
- 2005 U.S. Supreme Court Decisions of Jelinek and Fanfan
- Gender-specific drug courts and pretrial diversion programs (sometimes paired with gender-responsive treatment modalities)

Many of these policies have actually magnified racial, gender, and class-based disparities, and women of color bear the brunt of these collective failures.

Current Legislative Efforts to Address Mass Incarceration

- Fair Sentencing Act of 2010
- Marijuana Legalization

Who Has Not Seen More of an Impact?

These current policy failures to consider:
- Implicit racial bias within the judicial system
- The institutional role of gender, race, and class in women’s pathways to crime
- Provision of adequate sentencing alternatives and widespread gender-responsive approaches to meet specific needs of growing numbers of women of color offenders

Policy Recommendations

In order to create a truly beneficial impact for women of color, we have developed three policy recommendations which target the problem from multiple angles:

1. Low Enforcement Arrest Diversion (LEAD) – Pro-trial diversion program
   - Police officers can divert women arrested for low-level drug offenses into an intensive case management program that provides linkage to treatment, harm reduction services, and housing.
   - Implicit bias trainings for police officers and judges

2. Gender Responsive Federal Bail Reform
   - Federal bail reform is needed to reduce implicit bias
   - Federal bail reform is needed to reduce implicit bias
   - Federal bail reform is needed to reduce implicit bias
   - Female offenders are more likely to be detained on non-violent offenses, and have no previous record of violent charges.
   - Bail reform is needed to address this disparity.

3. locality-based welfare benefits for those with drug offenses
   - Federal bail reform is needed to reduce implicit bias
   - Federal bail reform is needed to reduce implicit bias
   - Federal bail reform is needed to reduce implicit bias
   - Federal bail reform is needed to reduce implicit bias

Female Incarceration is most often due to drug related crimes, the only crimes with mandatory minimum sentencing provisions.

Given the disparate effects the War on Drugs has on people of color, women of color are incarcerated at disproportionately higher rates than white women.

The rate of incarceration for African American women for all offenses has increased by 800% since 1985, compared to an increase of 400% for women overall.
Advanced Policy Electives

- Mental health policy
- Child welfare policy
- Aging policy
- Substance abuse policy
- Family policy
- Children’s rights and the law
- State legislative processes
Increasing the Focus on Policy Practice

- New grant from CSWE: *Policy Practice in Field Education Initiative*
Policy Practice in Field Education Initiative

- Project Goal: creating opportunities for all students to develop fundamental policy practice skills and knowledge about intersection of race, ethnicity, and poverty

- Project plan has three foci: (1) training and support of field instructors; (2) foundation placement; (3) advanced placement.
Training and Support of Field Instructors

(1) Strengthening current content in the Seminar for New Field Instructors related to policy practice assignments in the field.

(2) Developing several online workshops focused on policy practice assignments in the field for foundation and advanced clinical and macro students.

(3) On-going support: development and dissemination of resources such as key issue websites and listservs, relevant data sources, “tips” for meetings with legislators, communication strategies for effective lobbying. Issues areas of race, poverty, and social justice will receive primary focus. There will also be opportunities for consultation on student field assignments from policy faculty and field education staff.
Foundation and Advanced Placement Assignments

- *Foundation placement and linkage to foundation policy courses.* Products for the student portfolio will include: poster of WP701 task force project, MP759 community analysis, and field assignment (e.g., policy brief).

- *Advanced placement and linkage to advanced policy courses.* Students’ policy practice field assignment in the advanced year will focus on either policy analysis or advocacy (primarily legislative advocacy). The portfolio product will include the resulting position paper for policy/program solutions based on this analysis.
Thank You

Comments?

Questions?