Sent via email attachment

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Response to Request for Information: Temporary Assistance for Needy Families (TANF) Implementation of Sections 302 and 304 of the Fiscal Responsibility Act (FRA) of 2023

Dear Director Flagg and Deputy Director Ayala:

The National Domestic Violence Hotline (The Hotline), Futures Without Violence, Just Solutions, The National Network to End Domestic Violence (NNEDV), The Asian Pacific Institute on Gender-Based Violence (API-GBV), and The National Resource Center on Domestic Violence (NRCDV), are organizations committed to preventing and addressing gender-based violence, including domestic violence, dating violence, sexual assault, and stalking.

Victims of domestic violence face unique challenges and barriers at the intersections of violence and economic disadvantage. Significant numbers of low-income individuals are abused or assaulted, and abuse can also cause victims who were not previously considered to be low-income to fall into poverty. Violence can make it challenging to work, keep a job, continue education, have a place to live, take care of children or find care for them, establish safety nets, and more. According to The Hotline's most recent data, 18,732 people who contacted The Hotline through phone, chat, and text in 2022 cited financial barriers or lack of financial resources as a barrier to safety or seeking services from their abusive experience. Temporary Assistance for Needy Families (TANF) is a critical resource for a significant number of domestic violence and sexual assault victims. According to a recent report on the ways that victims of domestic violence and sexual assault use public benefits, 85% of respondents indicated that TANF is vital, and 2/3 of respondents said that domestic violence victims rely on TANF to establish safety and stability. The same study, however, reported that despite TANF being an essential resource, most respondents reported that the TANF system does not work well for

¹ . See, e.g., Eleanor Lyon, Welfare, Poverty and Abused Women: New Research and its Implications, National Resource Center on Domestic Violence (Oct. 2000), available at https://vawnet.org/material/welfare-povertyand-abused-women-new-research-and-its-implications; Mary Kay, Inc. (2012). 2012 Mary Kay Truth About Abuse Survey Report. Dallas, TX. At: http://content2.marykayintouch.com/public/PWS_US/PDFs/company/2012Survey. pdf; Lyon, E., Lane, S., & Menard, A. (2008). Meeting Survivors' needs: A multi-state study of domestic violence shelter experiences. Washington, DC: National Institute of Justice. At: http://www.vawnet.org/Assoc_Files_VAWnet/MeetingSurvivorsNeeds-FullReport.pdf; Lyon, E., Bradshaw, J., & Menard, A. (2011). Meeting Survivors' Needs through Non-Residential Domestic Violence Services & Supports: Results of a Multi-State Study. Harrisburg, PA: National Resource Center on Domestic Violence. At: http://www.vawnet.org/Assoc_Files_VAWnet/ DVServicesStudy-FINALReport2011.pdf; Kimerling, R., Alvarez, J., Pavao, J., Mack. K. P., Smith, M. W., & Baumrind. N. (2009). "Unemployment Among Women: Examining the Relationship of Physical and Psychological Intimate Partner Violence and Posttraumatic Stress Disorder," Journal of Interpersonal Violence, 24(3): 450-63.

² *Id*.

³ The Difference Between Surviving and Not Surviving: Public Benefits Programs and Domestic and Sexual Violence Victims' Economic Security, available at https://vawnet.org/material/difference-between-surviving-and-not-surviving-public-benefits-programs-and-domestic-and.

victims.⁴ Almost 60% (57.2%) reported that access to childcare does not work well, 51.1% reported the amount of benefits does not work well, 43.4% reported that the education and job training does not work well, and 27.1% reported that screening for disability or work barriers other than domestic violence (DV) or sexual assault (SA) does not work well.⁵

We appreciate the thoughtful questions offered by OFA as it contemplates the design and implementation of the FRA pilot program and the new work outcome measures.

3.1 What are the most important criteria a state should meet for selection into the pilot program, and why? Are there a minimum set of requirements a state should meet to be eligible for a pilot? If so, which ones? Are there aspects of state TANF programs that may increase their likelihood of success as a pilot? Are there aspects of state TANF programs that may impede their likelihood of success as a pilot? For example, if the benefit amounts or caseloads are low, full family sanction and family cap policies exist, etc. Is there particular past experience or past performance achievement that might be predictive of states' ability to successfully carry out a pilot?

States Should Engage in Community Outreach Prior to Applying

An important step for all states wishing to apply for the pilot program should be inviting input from communities impacted by their current TANF programs including: TANF recipients, non-profits that serve or advocate on behalf of TANF recipients (including faith-based organizations, domestic violence service providers, job placement entities that work with TANF recipients, researchers, etc.). States should summarize the number of listening sessions held, locations, and lessons learned in their applications, then describe how they will work to strengthen and improve their programming based on what they've been told. This approach is consistent with HHS' mandate under Executive Order 13985 to engage in capacity building and in this instance, will help states to embark on or deepen their own equity assessment work.

Serve Domestic Violence Survivors & Implement Low Barrier Strategies

Given that numerous studies show that between 15% and 50% of surveyed TANF participants have experienced family violence within the year preceding the survey,⁶ it would be important to consider states that have exhibited a capacity and interest in collaboration with other agencies, programs, and stakeholders for better integration or services – understanding that most victims of domestic violence who are TANF participants have multifaceted and complex needs. This would include partnerships with domestic violence experts, community-based organizations that work with culturally specific communities or individuals with disabilities, health and mental health providers, housing providers, and legal services organizations, among others, that can help address the barriers that TANF participants face in gaining and maintaining living-wage employment.

The proposed pilots also present an opportunity to encourage states to pursue low barrier strategies to increase success, including better aligning services in general, but also specifically for groups that have struggled to access TANF services whether as survivors of domestic violence, people with disabilities, those with limited English proficiency or others considered hard to employ. Pilot states should also be

⁴ *Id.* See Also We Would Have Had to Stay, available at https://vawnet.org/sites/default/files/assets/files/2018-11/NRCDV_PublicBenefits-WeWouldHaveHadToStay-Nov2018.pdf.

⁵ Id

⁶ Domestic Violence: Prevalence and Implications for Employment Among Welfare Recipients. US General Accounting Office, GAO/HEHS-99-12, (November 1998).

⁷ https://www.cbpp.org/research/improving-tanf-program-outcomes-for-families-with-barriers-to-employment

encouraged to use their TANF funds to provide cash assistance.⁸ Survivors consistently rank access to funds as a priority for being able to secure and maintain safety, and organizations have shared their findings about how and why such programming is vital with this administration.⁹

3.3. What technical assistance or supports would be helpful for states and service providers in designing and implementing pilots? What obstacles do you foresee and how can ACF provide assistance to overcome or manage them?

We support OFA providing baseline technical assistance to all pilot sites that includes trauma-informed practices supporting survivor independence, safety, and autonomy. We encourage HHS to promote models of co-located benefits specialists at local domestic violence programs or the inclusion of domestic violence advocates at benefits application offices. OFA should incorporate training by local domestic violence programs and state coalitions to the pilot sites on trauma-informed best practices. We would urge OFA to incorporate the commitment set forth in https://peerta.acf.hhs.gov/dv-ipv, the utilization of the resources listed, and encourage the use of webinars such as https://peerta.acf.hhs.gov/content/ofa-webinar-surviving-thriving-addressing-intimate-partner-violence-tanf-programs-project as mandatory learning for pilot sites.

3.4. What indicators of family stability and well-being, including alternative measures related to employment, for families participating in TANF should we consider measuring as part of the pilot? For example, should pilots include measures related to family poverty, interactions with the child welfare system, or other indicators related to child well-being? Please explain your reasoning. What data source(s) would be of most utility in tracking your recommended indicators? For example, if a state is interested in measuring job quality as an indicator of family well-being, would a state be able to measure that by tracking jobs with benefits such as a paid leave or employer contribution retirement plans? Should family income be included as a measure of family stability and well-being and, if so, what are the important components, who should be included, and what would be the most reliable and practical sources of data? Should any indicators be measured for all low-income families, irrespective of TANF participation, to evaluate whether a state's TANF program is successfully serving these families (e.g., the share of families living in deep poverty, taking into account all sources of income)?

We are most concerned about indicators of family stability and well-being that assess residential and romantic partnerships, including number of parents in the household, marital status, and family living arrangements. We are troubled by the possibility that such measures might incentivize states, whether directly, or indirectly, to encourage families where violence is present to stay together. Addressing the measure of a two-parent household in particular overlooks the trauma and instability caused by abuse, could overtly or covertly encourage a victim to stay in an abusive relationship to access potential financial stability, and disregards the well-being of both victims and children experiencing or witnessing violence. All of this also removes the focus on supporting victims leaving abusive relationships when feasible and rebuilding safe lives for themselves and their children. These traditional indicators have significant limitations and may prove to be harmful for victims of domestic violence and intimate partner violence. It is also critically important for the safety of children in homes with domestic violence that TANF recipients, most often mothers, not be encouraged or incentivized to stay in an abusive relationship. While children respond to domestic violence exposure in varying ways based on age and

⁸ https://www.clasp.org/wp-content/uploads/2019/04/2022.07.18_TANF-101-Cash-Assistance.pdf

⁹ https://www.freefrom.org/wp-content/uploads/2021/06/TrustSurvivorsReport.pdf

¹⁰ Office on Women's Health, Effects of Domestic Violence on Children, available at https://www.womenshealth.gov/relationships-and-safety/domestic-violence/effects-domestic-violence-children

severity of abuse, it can have long-lasting and harmful effects. In addition, men who abuse their partners also frequently abuse their children. 11

We instead encourage the OFA to use measures that were included in the Domestic Violence Housing First (DVHF) Demonstration Evaluation 12 which focus on relevant aspects of stability that have a direct and indirect impact on the outcomes for victims and their children including housing, economic stability, and well-being (including quality of life and social support). This includes a variety of validated measures to assess each of the constructs.

The Housing Instability Scale was created and validated within a larger, longitudinal study of domestic violence victims and can be used to assess housing instability. 13 There are a few measures of economic instability including the InCharge Financial Distress/Financial Well-Being Scale, The Consumer Financial Protection Bureau Financial Well-Being Scale, and the Family Resource Scale. 14 For quality of life there is the 9-item Quality of life scale. The Flanagan Quality of Life Scale, and the Measure Quality of Life tool. 15 A supportive measure could also include tracking jobs with comprehensive family friendly-benefit and robust wellness programs – including whether the employer offers a stable predictable wage, health insurance, retirement, education benefits, life insurance, workers compensation, leave, caregiving support and childcare. 16 There are also additional measures to assess hope, social support and well-being including the 12-item Herth Hope Index, the 6-item Medical Outcome Study of Social Support, and the General Well-being Scale. 17

¹¹ Resource Center on Domestic Violence: Child Custody and Protection, available at https://www.rcdvcpc.org/co-occurrenceof-child-abuse-and-domestic-violence-exposure.html

¹² Domestic Violence Housing First (DVHF) Demonstration Evaluation, Office of the Assistant Secretary for Planning and Evaluation, available at https://aspe.hhs.gov/dvhf-demonstration-evaluation.

¹³ Cris M. Sullivan, Gabriela López-Zerón, Adam Farero, Oyesola Oluwafunmilayo Ayeni, Cortney Simmons, Danielle Chiaramonte, Mayra Guerrero, Noora Hamdan & Mackenzie Sprecher. (2022) Impact of the Domestic Violence Housing First Model on Survivors' Safety and Housing Stability: Six Month Findings, Journal of Family Violence 38:3, pages 395-406. available at https://www.tandfonline.com/doi/citedby/10.1080/10530789.2022.2127852?scroll=top&needAccess=true. ¹⁴ See Prawitz, A. D., Garman, E. T., Sorhaindo, B., O'Neill, B., Kim, J., & Drentea, P. (2006). InCharge Financial Distress/Financial Well-Being Scale. APA PsycTests, available at,

https://doi.org/10.1037/t60365-000; Measuring financial well-being: A guide to using the CFPB Financial Well-Being Scale, Consumer Financial Protection Bureau, available at https://www.consumerfinance.gov/data-research/research reports/financial-well-being-scale/; Sexton, S., Rush, D. (2012), The Family Resource Support Guide, FIPP Case Tools, available at fipp.ncdhhs.gov/wp-content/uploads/casetools vol6 no5.pdf.

¹⁵ Sullivan and Bybee (1999), Quality of Life Questionnaire, available at https://www.dvevidenceproject.org/wpcontent/uploads/Quality-of-Life-Questionnaire.pdf; Flanagan, J. C. (1978). Flanagan Quality of Life Scale (QOLS). APA PsycTests, available at https://doi.org/10.1037/t80386-000; WHOQOL: Measuring Quality of Life, available at https://www.who.int/tools/whogol.

¹⁶ See generally American's Children: Key National Indicators of Well-Being (2021), available at childstats.gov/pdf/ac2021/ac 21.pdf; Measuring Job Quality (2022) Urban Institute, available at https://www.urban.org/sites/default/files/2022-04/Measuring Job Quality.pdf; Reimagining Job Quality Measurement (Family Workers Fund), available at https://familiesandworkers.org/job-quality-report/; Department of Commerce and Department of Labor Good Jobs Principles, available at https://www.dol.gov/general/good-jobs/principles; U.S. Surgeon General's Workplace Mental Health & Well-being, available at https://www.hhs.gov/surgeongeneral/priorities/workplace-well-being/index.html; Department of Labot Workplace Affordable Care Act and Wellness Program Regulations available at https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/wellnessprograms; Alleviating the Stress on Working Families: Promoting Family-Friendly Workplace Policies, National Council on Family Relations, available at https://www.ncfr.org/sites/default/files/2017-01/ncfr policy brief january 2017.pdf. ¹⁷ Herth, K. (1989), Herth Hope Index, available at http://www.npcrc.org/files/news/herth_hope_index.pdf; Holden L. Lee C. Hockey R. Ware RS. Dobson AJ. Validation of the MOS Social Support Survey 6-item (MOS-SSS-6) measure with two large population-based samples of Australian women. Qual Life Res. 2014 Dec;23(10):2849-53, available at https://pubmed.ncbi.nlm.nih.gov/24962651/; The General Well Being Schedule (GWB), available at https://www.phenxtoolkit.org/protocols/view/630701.

We also recommend that the OFA consider other child well-being measures including: ¹⁸ Child Poverty Rate:

 The percentage of children estimated to live in families with incomes at or below the Federal Poverty Level.

Annual Food Insecurity Among Children:

• The percentage of households with children that reported reduced quality, variety, or desirability of diet or uncertainty about having enough food for all household members.

Comprehensive Person-Centered Health Care:

- The percentage of children who have received developmental screening by 36 months.
- The percentage of children ages 3 to 6 that had one or more well child visits with a Primary Care Physician during the year.

Comprehensive Person-Centered System Integration:

 Percentage of children lifted out of poverty by safety net programs based on the supplemental poverty measure.

In addition, we believe that an improved TANF program that focuses on family stabilization and well-being will lead to reduced rates of child maltreatment and increased rates of children living safely with their families. We recommend that the area of child welfare involvement be evaluated between the pilot states and non-pilot states, recognizing that there will be some variation among the states. For instance, measures could include:

Child Welfare Involvement:

- Abuse and neglect per 1,000 children.
- Number of children exiting the child welfare system.

Foster Care:

 The percentage of children in out-of home placement by race and ethnicity compared to overall percentage of the under-18 population by race and ethnicity.

Moreover, we recommend that technical assistance be provided to the pilot states on intimate partner violence (IPV) and the most effective benchmarks for measuring family and child well-being based on available data sets.

Lastly, another indicator of the potential for success of a pilot program is demonstrated history of success. To the extent that pilot program applicants can show a history of positive outcomes in somewhat similar projects, e.g. child welfare, child or maternal health, and/or a commitment to evidence-based practices, HHS could consider them a plus factor when reviewing applications.

3.6. What information should be collected about the pilots to help evaluate and explain their level of success? Is there information HHS should collect to help determine how a successful pilot program may be replicated in a different state? Should the pilot program undergo a formal evaluation? If so, what form should it take? Please provide your reasoning.

We encourage the use of participant feedback (including self-reporting) on the relevance of personal responsibility plans, the effectiveness and the appropriateness of supportive services and resources provided. There can also be an assessment of the referrals to community-based services and utilization rates of services – with increased utilization rates through referrals from the TANF programs being measured as a metric of success. There could also be an assessment of participants' safety concerns

¹⁸ Information gleaned from: Oregon Health Authority, Child and Family Well-Being Measures Workgroup, *Final Report*, Sept. 11, 2015, available at: https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/Child-Family-Well-Being-Measures.aspx, pages 10-11.

and whether safety planning was integrated during their involvement in the TANF program (i.e. were safety concerns addressed, how were they addressed, etc.). There should also be an evaluation on barriers to access and whether those were successful reduced or removed.

Relatedly, personal responsibility plans could be systematically reviewed for inclusion of screening and referrals for family violence, referrals for resources such as housing, legal representation, and counseling, and integrated/ acknowledged work or training accommodations to address safety concerns.

Additional information collected could also focus on measures mentioned above such as financial security (including access to and completion of financial literacy programs), changes in housing stability, and assessments of physical and mental health (including trauma support and recovery), which could help assess the long-term impact of the program.

3.10. Are there similar past pilot efforts (federal, state, local) from which HHS should draw lessons learned in setting up this pilot project?

While not a pilot effort, a relevant resource is An Evaluation of a Workforce Development Program for Domestic Violence Survivors in New York City (June 2023). 19

3.11. Are there any other questions or issues related to the pilots for which you wish to provide comments?

State domestic violence coalitions who reviewed the RFI expressed concerns about the receipt of waivers under the family violence option (FVO) or for good cause and ways of ensuring that this doesn't negatively impact metrics of success. A local program suggested assessing the utilization of the FVO as a metric of success as the program participant would have been successfully screened for a history of domestic violence, referred to appropriate services, and provided the waivers necessary to support their escape or recovery from violence.

Conclusion. The needs of victims of domestic violence and the programs that serve them can require complex and unique considerations. We know that many components of TANF do not work well for victims of domestic violence but can still be a critical and life-saving program. Therefore, we encourage OFA to consider measures that best support victims and any potential negative impacts on them.

We are thankful for the opportunity to offer comments on this proposed rule. For additional information please contact Marium Durrani, Vice President of Policy at the National Domestic Violence Hotline at mdurrani@thehotline.org.

Sincerely,

The National Domestic Violence Hotline (The Hotline) has been a lifeline for victims, survivors, and families impacted by domestic violence and dating abuse, offering round-the-clock support to empower those affected by relationship abuse. Alongside its youth-oriented helpline, love is respect, which focuses on healthy relationships and dating abuse prevention, these services have handled over 6.5 million contacts since 1996. In 2022, the Hotline staff handled a record-breaking 446,316 contacts, providing over 200,000 referrals to shelter and domestic violence services. Despite progress, there remains substantial work to bridge the gap between survivors' needs for safety and the available

¹⁹ Duane, M., Dank M., Hughes, A., Ervin, S., Tiry, E., Doyle, L., An Evaluation of a Workforce Development Program for Domestic Violence Survivors in New York City, available at https://www.urban.org/research/publication/evaluation-workforce-development-program-domestic-violence-survivors-new-york

resources and support systems. Each contact helps deepen our understanding of survivors' experiences and the challenges they face in securing safety for themselves and their loved ones.

Futures Without Violence is a national nonprofit organization that has worked for more than 35 years to prevent and end violence against women and children in the United States (U.S.) and around the world. We educate about and work to eliminate domestic violence, sexual assault, child abuse, and human trafficking through education and prevention campaigns; training and technical assistance to state agencies, public and private entities, judges and court systems, colleges and universities, and global organizations; and we advance promising policies and practices at the state and federal level that prevent violence and help adult and child survivors heal and thrive.

Just Solutions provides strategic counsel to federal and non-profit clients on a variety of issues including racial, gender and economic equity, restorative justice, campus sexual violence, workplace and other economic protections for victims of domestic and sexual violence, sexual harassment, and stalking, criminal justice and policing reform, and the intersections of two or more of these issues.

The National Network to End Domestic Violence (NNEDV) represents the 56 state and U.S. territorial coalitions against domestic violence. NNEDV is a social change organization working to create a social, political, and economic environment in which domestic violence no longer exists. NNEDV works to make domestic violence a national priority, change the way society responds to domestic violence, and strengthen domestic violence advocacy at every level. Through our Economic Justice program, NNEDV strengthens advocates' financial expertise to help domestic violence survivors move from short-term safety to long-term security. Through the Independence Project, NNEDV provides credit-building mirco-loans to survivors of financial abuse.

The Asian Pacific Institute on Gender-Based Violence (API-GBV), is a national resource center on domestic violence, sexual assault, human trafficking, and other forms of gender-based violence, serving a national network of advocates and community-based programs that work with Asian, Asian American, Native Hawaiian and Pacific Islander ("AANHPI") survivors of gender-based violence. API-GBV promotes culturally relevant intervention and prevention, provides expert consultation, technical assistance and training, and conducts and disseminates critical research; and works to inform public policy. API-GBV works to support policies that increase the safety, autonomy, and well-being of AANHPI survivors of gender-based violence, including policies that impact survivors' access to economic security, housing and human services, civil rights, secure immigration status, employment, education and training.

The National Resource Center on Domestic Violence (NRCDV) is a national, non-profit organization that works to strengthen and transform system, program, and community efforts to end domestic violence. This mission is accomplished through the promotion of equitable and effective public policy, engagement in prevention, and provision of research, training, and technical assistance. NRCDV is committed to advancing solutions that increase the economic security of survivors, their families and communities.