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Soper, Nancy F

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NAME OF SUPERVISOR/NOM DU DIRECTEUR DE THÈSE

J. P. Forcèse

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THE STIGMA OF
PUBLIC ASSISTANCE PROGRAMS

by

C

Nancy E. Soper, B.A., M.Pl.

A thesis submitted to the
Faculty of Graduate Studies
in partial fulfilment of the
requirements for the degree of
Doctor of Philosophy

Department of Sociology and Anthropology

Carleton University
Ottawa, Ontario

November 1979

The undersigned recommended to the
Faculty of Graduate Studies acceptance of the thesis:

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submitted by Nancy E. Soper, B.A., M.Pl.,
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.....
Thesis Supervisor

.....
Chairman,
Department of Sociology

Carleton University

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ABSTRACT

It has been frequently argued that a guaranteed income program would be less stigmatizing than the present system of welfare. In this study, the author attempts to examine this proposition by comparing the experiences of the recipients of a guaranteed income program experimentally introduced in Manitoba* with those of welfare recipients in the same province. The stigma of social assistance is understood to be the process which results in the disqualification of recipients from full social acceptance. The research seeks to determine the extent to which different administrative procedures and regulations, as differentially experienced by the recipients, are associated with an increased tendency for the recipients to withdraw from normal activities and to experience difficulties with others in the community. A model of the stigma associated with public assistance is developed drawing from two perspectives in sociology: social-exchange and symbolic interactionism. Hypotheses are derived from this model to the effect that a guaranteed income program, such as the one experimentally introduced in Manitoba, which removes many of the administrative procedures that contribute to the stigmatizing process, will have a reduced stigma effect on the behaviour and experiences of the recipients in the community.

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* This publication used the data from the Manitoba Basic Annual Income Experiment, a project funded by the Governments of Canada and Manitoba.

The data required to test this model consist of responses to a questionnaire administered once to the panel sample interviewed over the three-year life of the Manitoba Experiment. Broad comparisons are made between three groups: those on welfare, those on the guaranteed income program, and those in the same income range who were not receiving either type of benefit. The analyses focus on their behaviour patterns, perceptions, and the relation between these indicators of stigma and the specific procedures that were hypothesized to contribute to stigma.

The findings of the study are discussed in relation to the primary research question of the relative stigmatizing effects of the two types of social assistance. The role of each of the two theoretical perspectives and the emphasis on behaviour patterns are reassessed. And, finally, the policy implications are reviewed.

- v -

To

THOMAS

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Chapter I

INTRODUCTION

During the 1960's and early 1970's the systems of welfare that existed in Canada and the United States were the subject of considerable concern. This concern coincided with more rigorous attempts to measure the magnitude of the poverty problem and to evaluate the effectiveness of social programs designed to assist the poor. At the same time, the concept of a guaranteed income captured the imagination of those who urged for reform of the social security systems in these countries. From among the criticisms of welfare policy emerged the issue of the stigma of social assistance. Proponents of a guaranteed income, in turn, argued that this alternative form of income assistance would remove the stigma of welfare. It was in this context that the Governments of Canada and Manitoba embarked upon the Manitoba Basic Annual Income Experiment, presenting the opportunity to empirically examine the stigma associated with the two systems of income assistance.

A. Social Policy Background

To a large extent the increasing concern over the state of the welfare system centered on the persistence of poverty in the face of increased effort, not only in terms of income maintenance, but educational and manpower and employment policy. In Canada, the severity of the situation was documented in the Fifth and Sixth Annual Reports of the Economic Council of Canada (1968 and 1969). From the 1920's until the present the

federal government has increasingly become involved in the provision of income assistance, an area of policy where it has little jurisdiction according to the British North America Act. The enactment of the Canada Assistance Plan in 1966 represented a substantial movement into the social welfare area. It is the Canada Assistance Plan which sets the legislative framework for the present welfare system in Canada along with the social assistance acts of each province.

In brief, the Canada Assistance Plan provides for the sharing of the costs of a wide range of income assistance, welfare services, and employment-related projects between the federal and provincial governments. The provinces retain control over the administration of welfare assistance and services; the criteria for eligibility, the benefit rates, and operational procedures being set out in the respective provincial acts.

By 1970, the system of welfare provided through the Canada Assistance Plan and by the provincial administrations was already under critical review. The federal government's White Paper on Income Security for Canadians identified, as the central issue, the intractability of the poverty problem.

"There are 4 million low income people in this country despite an annual outlay of \$4.5 billion in income security programs." (Monroe, 1970:12)

The proliferation of bureaucratic structures and the inefficiency that was assumed to accompany such an institutional arrangement were also subject of

criticism. According to the Report of the Special Senate Committee on Poverty,

"the welfare system as it exists today is a chaotic accumulation of good intentions gone out of joint".
(Croll, 1971:xiv)

Finally, there was significant concern over the manner in which assistance was being delivered. In 1973, Rubin Baetz, then Chairman of the Canadian Council on Social Development, pointed to the inhumanity associated with the provision of assistance.

"There is much evidence to suggest that the present social assistance program is too much imbued with at best an unhealthy paternalistic attitude and at worst a punitive one. Present social assistance programs tend to set apart from the mainstream of society those who require public help." (Baetz, 1973:32)

It was at this time, in the early 1970's, that Canadian policy makers began to give serious consideration to the notion of a guaranteed income. The guaranteed income was an approach wherein a minimum level of income support is guaranteed as a matter of right. Although such a program could take a number of forms, the concept at that time was closely linked with that of a negative income tax. The distinguishing characteristic of a negative income tax is that, in addition to the minimum level of support provided those with no income, it allows for the supplementation of the earnings of the working poor by means of a tax-back rate. In contrast to the welfare system, which reduces the benefits by the total amount of the

recipient's income, a tax-back rate of less than 100 per cent provides low-income families some support until their earnings reach a certain level. Such a guaranteed income program was seen to have a much lower disincentive to work. Because the negative income tax can be based entirely on an income test, it has the potential of being integrated into the positive tax system. This was a notion that was attractive both in terms of its simplicity and its potential for closing the poverty gap by meeting the needs of the working poor.

The Special Senate Committee on Poverty recommended the establishment of a national guaranteed income program using the negative income tax approach. The Committee considered it to be an anti-poverty measure in the sense that

"freed from preoccupation with meeting the basic needs of survival, many will be able to take advantage of opportunity programs which enable them to achieve independence." (Croll, 1971:175)

It was also seen as a way in which a variety of social programs could be pulled under one administrative structure; including the welfare system, family allowances, and Old Age Security.

In the same year, the Province of Quebec published the Castonguay-Nepveu Report, consisting of a comprehensive review of the

social security system. This report recommended the introduction of a two-tiered guaranteed income program incorporating the negative income tax concept.

In Canada, this concern over the effectiveness of welfare and the rising interest in a guaranteed income culminated in 1973, with the establishment of a Federal-Provincial Social Security Review and the establishment of a guaranteed income experiment in Manitoba.

Pressure for reform of the system of welfare occurred at a time when policy makers were searching out more sophisticated techniques of program evaluation and policy decision-making. For example, methodologies such as the Program Planning Budget System were introduced to refine the assessment of programs in terms of their cost-effectiveness. There was increasing interest in the use of social experimentation in the estimation of program impact, and by 1970 the United States had embarked on four income maintenance experiments.¹ Research interest in income maintenance experiments quickly began to develop in Canada. The federal government's White Paper on Income Security for Canadians called for further study of the effects of a guaranteed income on the motivation of recipients to work or to save and its potential impact of such a program on the Canadian economy (Monroe, 1970). In 1971, the Premier of Manitoba announced that

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1 The New Jersey Income Maintenance Experiment, 1968; the Rural Income Maintenance Experiment in areas of North Carolina and Iowa; the Gary (Indiana) Experiment; and the Seattle-Denver Income Maintenance Experiment underway by 1970.

his government was interested in launching a pilot project to determine whether the concept of a guaranteed annual income was administratively feasible. By that time, research interest had grown in Ottawa to the point where the federal government established a \$25 million fund to allow for cost-sharing of such experiments with interested provinces.

Although discussions were held with the other provinces in the hope that a number of them would want to embark on such experimental studies, only Manitoba followed through to present a proposal. In 1974, the Governments of Canada and Manitoba signed an agreement to conduct the Manitoba Basic Annual Income Experiment. This research project was jointly funded, with Canada assuming 75 per cent of the cost, and was primarily designed to investigate the impact such a program might have on the work effort of recipients. While this was the major research objective, other issues related to the delivery of social assistance were identified for study. It was in this context that the federal government embarked on the study of the stigma of social assistance, recognizing that, despite the frequent references to the humiliating and debilitating effects of the welfare stigma, few people have systematically examined the factors contributing to the stigma of welfare or questioned the assumption that guaranteed income plans would reduce these undesirable effects. The Basic Annual Income Experiment conducted in Manitoba provided an opportunity to empirically investigate the relative amounts of stigma associated with the welfare program and one particular type of guaranteed income program.

B. The Stigma Issue

The stigma of welfare became a popular issue in the debates regarding welfare reform. Many of the criticisms of the existing system of welfare related to the effects of stigma, and proponents of a guaranteed income argued that this alternative form of social assistance would remove the stigma. While the stigma of welfare is not a new notion, it has only been in recent years that stigma has come to be considered a problem.

In the 19th Century, official (welfare) policy was deliberately designed to create a sense of shame and moral inferiority on the part of those who sought relief rather than work. This policy was defended both by those sympathetic to the poor and by those who wanted to save public money. All believed that the failure to earn a living was a sign of moral decay, and that indiscriminate giving of aid would hasten the downward slide to pauperism. Shame was used to discourage people from applying for public assistance and to encourage recipients to get off. (Handler and Hollingsworth, 1969:1)

However, there has been increasing awareness that, in addition to the social costs to human dignity, there are costs associated with the welfare stigma in terms of the effectiveness of social assistance and the overall goal of alleviating poverty.

Critics of the present system of welfare have documented the extent to which recipients have been denied, not only a wide range of social courtesies, but certain civil rights (Briar, 1966; Canadian Civil Liberties Education Trust, 1975). The present system involves certain administrative

procedures which critics claim tend to stigmatize the recipient.

Eligibility for welfare, for example, is determined not only on the basis of income, but also need. The determination of need has involved investigations into the family circumstances which would not be required if the more impersonal income test were used. It is believed that this practice transmits to the recipient the feeling of being a second-class citizen, not having the normal right to privacy. This form of discrimination is compounded by the expectation that the recipient adhere to more stringent norms than apply to other members of society, rules or norms with respect to how their money is spent, who may stay in the house, etc. The fear that recipients will abuse welfare necessitates constant investigations of the family's activities.

Increasingly, it has been argued that recipients should not be denied social acceptance because of their participation in assistance programs. In 1973, the Honourable Marc Lalonde tabled the Working Paper on Social Security in the House of Commons as a starting point for the federal-provincial review of Canada's social security system. In this document the government identified the stigmatizing dimension of welfare as one of the inadequacies of the system. Further, the government associated the tendency to stigmatize with the discretionary powers which remained in the hands of local welfare authorities, the needs test, and the "sheer quality of humanity in the administration of social assistance" (Lalonde, 1973:16). At the outset of the review, the federal government established the principle that:

A model social security system must be human and fair, both in its benefits and in its administration, in order to help beneficiaries to live in decency and dignity. (M. Lalonde, 1973:18)

Critics have argued that the present welfare system does not reach those who are most in need of assistance. However, we know very little about the effectiveness of our welfare program in terms of the number who enrol relative to the total eligible population. A study of New York welfare caseloads showed that, out of the 150,000 families eligible for wage subsidies, "only about 15,000 families were claiming them" (Cloward and Piven, 1968). In general, the overriding concern has not been that some people do not seek assistance, but that such a large number do. We know very little about the reasons why some people refuse to take advantage of available assistance programs, or "about the attitudes which lead them to feel deterred or discouraged in the search for assistance" (Pinker, 1971:202). The loss of social status may be an important consideration when deciding whether to seek aid and, thus, the variation in the amount of stigma may be one factor affecting differential participation rates among a variety of programs.

Piven and Cloward have argued that it is through the application of a stigma to the receipt of assistance that society has maintained control over the numbers on the welfare rolls. In their study, Regulating the Poor, the expansion and contraction of welfare provisions are examined in relation to the broader economic conditions in society, and, in particular, to the demand for labour. Welfare programs are seen as having a central

role in the regulation of marginal labour and the maintenance of civil order, not simply by providing assistance to ameliorate the effects of poverty, "but by granting it on the condition that they behave in certain ways" (1968:22). The authors argue that the occasion of providing assistance has been used to reinforce the work ethic, thereby maintaining a reserve of workers among the poor.

The intractability of the poverty problem has also been examined from the perspective of the welfare stigma. It has been assumed that by providing a certain level of income security, changes will be induced in those other aspects of the life of the poor recipient which tend to keep him in poverty. However, many constraints affect the potential social mobility of the poor and these may reduce the probability of alleviating poverty. The limited availability of appropriate services, educational programs or jobs is one type of constraint. Others are the subtle control processes which operate in a community to limit the access of the poor to available resources. The stigmatization or labelling process is one of these social control mechanisms which, if it operates against the recipients of a guaranteed income program, may prevent them from taking steps to change other aspects of their life. Spilerman and Elish refer to this process as "psychological maiming"; a condition of withdrawal or retreat. This state of demoralization, they suggest, may help to explain why both our programs of income assistance or subsidies and services have failed to break the cycle of poverty (Spilerman and Elish, 1971).

Waxman developed a critique of the two theoretical perspectives predominant in sociological literature on poverty and their ability to explain the persistence of poverty in the face of government efforts of the last fifteen years. The essence of his analysis is that both the poverty of culture approach and the situational explanation of poverty fail to recognize the importance of the relations between the poor and the non-poor. Drawing from Erving Goffman's work, Waxman argues that the stigma of poverty serves to isolate the poor from the non-poor. The effect of the stigma of poverty is to generate a pattern of discriminating responses to low-income individuals, thereby reducing their opportunities for improvement and hampering the internalization of the predominant cultural values.

This critique has obvious implications for policy analyses of social assistance programs which Waxman discusses. Many of the programs associated with the War on Poverty in the United States and in particular those programs which targeted their efforts to the low-income population worked to increase the isolation of the poor. He suggests that each program or policy should be evaluated in terms of whether it will, in the long run, lead to the integration of the poor into the society, or will it inevitably lead to further isolation?

In discussions of the stigmatizing effects of welfare and guaranteed income programs, there abound certain assumptions regarding not only how a guaranteed income program would operate and how recipients would react to such a program but what factors contribute to the stigma. Frequent

references have been made to how a guaranteed income would be more objective, more efficient, simpler to comprehend, and require less personal contact with clients. More specifically, it is assumed that a guaranteed income program, incorporating a self-reporting system, would reduce the amount of contact between program officials and recipients and would reduce the scrutiny of recipient households. Further, it is often argued that, by replacing the means test for eligibility with an income test based on the concept of a negative income tax, a degrading aspect of receiving assistance will be removed.

As Peter Rossi has pointed out in his discussion of the income maintenance experiments in the United States, no one has stopped to question these assumptions (Pechman and Timpane, 1975). The empirical studies reviewed in a later section suggest that certain experiences on welfare are stigmatizing. However, there is no evidence to indicate that the various welfare procedures criticized by recipients are a necessary condition for stigma. Furthermore, it is not clear that simply by instituting a guaranteed income program with a self-reporting system the contact and scrutiny can be eliminated.

It is an empirical question whether, by removing the necessity to interact, one can eliminate the stigma associated with a program. For example, although there might be no means test, recipients would have to submit some statements of earnings and other income. A program such as the one experimentally introduced in Manitoba requires, in addition, that recipients also report changes in their net worth (i.e., all purchases and

sales of goods over \$100). Furthermore, the possibility of fraud and misreporting will inevitably require the establishment of auditing procedures, and requests for proof of income, marital status or change in net worth, as was the case in the Manitoba project.

With regard to the amount of personal contact expected with a guaranteed income, it is reasonable to assume that a self-reporting system might reduce the amount of contact that would be required between clients and program officials from the program's point of view. Other procedures which determine the comprehensibility, reliability and responsiveness of the program, including enrollment procedures, method of delivering the benefits, payments calculations or formulae, and rules of eligibility might well influence the amount of contact recipients need and would themselves initiate with the program. With respect to a guaranteed income program having a self-reporting system, it is unclear what proportion of the target population has the language ability or level of education necessary to participate in a self-reporting system without a great deal of assistance from program personnel or to comprehend the eligibility rules or potential benefits well enough to apply.

In sum, the fundamental policy question raised is whether, by simply altering the method of delivering income assistance, the government can expect to reduce the amount of stigma experienced by recipients. The introduction of a guaranteed income can not be expected to change the general attitudes or values in the society regarding work and receiving assistance. What the guaranteed income program may be able to do is reduce

the interpersonal contact between recipients and officers of the program and reduce the visibility of the recipient in the community. The importance of this question lies in the fact that there is a trade-off involved in moving toward a more universal depersonalized system. The value of a personalized welfare exchange system which builds in a certain amount of discretion is that the individual's particular needs can be more accurately assessed and met. By moving to a more objective delivery system, the special needs and circumstances of the clients will be ignored.

In 1975 the author, at that time a federal research officer associated with the Manitoba Basic Annual Income Experiment, put forward a proposal to study the relative amount of stigma associated with welfare and a guaranteed income within the context of the experiment. The study went forward as an independent piece of federal research, the issue of stigma not being of sufficiently high priority from the perspective of the province.

C. Concept of Stigma

Welfare stigma is a term loosely used to refer to the degrading consequences of being on welfare, the humiliating experiences of recipients and the negative attitudes of other members of the community. The term "stigma" originally came from the Greeks who used body signs to identify persons with blemished characters or low moral status and who were to be avoided in public. The stigma was a cut or burn in the body of a slave, criminal or traitor, among others. Although the term is currently used in a similar way, it tends to refer to the moral condition or disgrace attributed to an individual rather than to the sign projected by the individual of this state. Erving Goffman (1963) has made the most extensive use of the concept, "stigma", in his studies of the contingencies of social interaction. A review of his analysis will help to explicate the process of stigmatization.

Goffman observes that social interaction among individuals is facilitated by the acceptance in society of a set of categories of people. A number of personal attributes become associated with each category reflecting the way in which members of society normally expect people in these categories to behave, look or think. In his conceptual scheme, behaviour or the social setting is not inherently meaningful but its meaning is in the social identity it bestows on an individual. If in a social situation an individual reveals an attribute considered abnormal and less desirable for a member of his category, he is reduced in the minds of others to be "disreputable", "tainted", "weak", etc., and is reclassified

in a less reputable category. There must be some generally accepted notions of what is "normal", referred to by Goffman as "identity values", for various categories of people and, in order for stigmatization to occur, the discrediting attribute must be visible and must be seen by members of society collectively as not being normal for a certain category.

As Goffman points out, there is a special type of relationship between the attribute and the stereotype. The possession of some attributes is universally stigmatizing where the "identity norm" is applied universally. Other attributes are stigmatizing only when possessed by people of a certain category. For example, consider two men, a wealthy man and a poor man, neither of whom work. The poor man bears the stigma of being unemployed and the wealthy man conforms to the stereotype of the man of leisure.

The process of stigmatization involves both expressive reactions, such as moral indignation on the part of others in society, and action directed toward controlling the behaviour of the individual. In the minds of others in society, the undesirable attribute overrides all other attributes, good or normal, which the person may have objectively and breaks the claim that these attributes have on him. The individual, then, having been placed in a less desirable category, acquires a whole range of imperfections which are imputed to him on the basis of the undesirable attribute.

By definition, of course, we believe the person with a stigma is not quite human. On this assumption we exercise varieties of discrimination, through which we effectively, if often unthinkingly, reduce his life chances. (Coffman, 1963:5)

Stigmatization is a subtle mechanism for social control used by members of society "to restrict or open access to rewards and satisfactions, set limits to social integration, and induce deviants into segregated environments" (Lemert, 1967:41). Through this labelling process the social structure is maintained with the disreputable individuals having the lowest social standing. The many organizations existing in our society, whose purposes are to provide goods, security, protection and rehabilitation for our deviants, can be seen to play a substantial role in this process. The justification for their existence may derive from some lofty moral commitment to help the poor, to protect the blind and handicapped, or to resocialize the criminal. Their actions and administrative procedures, however, often reflect a fear that these groups of people will threaten certain values or beliefs, such as the belief in the work ethic and the existence of equality of opportunity, and the value placed on private property. Consequently, they impose extraordinary requirements and standards of behaviour on the deviant and force him to accept an anomalous conception of himself.

The responses to the stigmatized tend to be supported by a kind of stigma theory, an ideology created by members of society to explain the inferior position of the stigmatized and describe the danger he represents

to society so as to justify the fact that he is labelled and excluded. In light of his new social identity, a defensive response to this stigma is interpreted by others as further evidence of his defect.

Goffman observes that the stigmatized have similar learning experiences, "the moral career of the stigmatized", through which they adjust their self-concept and behaviour to their new situation. The stigmatized, having learned and incorporated the standpoint of the normal, thereby acquiring the identity beliefs of the wider society, soon recognizes that he does not conform to these standards. Through this socialization process he has learned what the implications are, in general, of possessing such a stigma, but it is through interaction with others that he learns in detail the consequences for him. Societal reaction to him is a constant reminder of his stigma which affects his self-concept, his sense of self-worth.

The behaviour of others toward a person and the behaviour of that person express or assume a definition of him, as does the immediate social situation in which behaviour occurs. The major issue in the life situation of the stigmatized is social acceptance. The individual interprets the behaviour of others in terms of the meaning it has for his own self-concept and thus for his own behaviour. Goffman's conceptual framework sensitizes us to the need to examine two types of behaviour patterns: the behaviour patterns of non-recipients which tend to be interpreted by recipients as a denial of his normal social status, and the behaviour of recipients themselves which reflect an adoption of this lowered sense of self-worth.

Although stigma is a factor that inevitably surfaces in discussions of welfare reform, there have been few attempts to study, in any systematic fashion, its causes and consequences. In addition to the in-depth study of unemployed welfare recipients in Newfoundland conducted by Cato Wadel (1973), there have been a number of studies of AFDC recipients² in the United States (Handler and Hollingsworth, 1969; Kerbo, 1976; Stuart, 1975; Horan and Austin, 1974), all of which focus to some extent on aspects of the stigmatizing process. In addition, there have been a number of studies in both Canada and the United States that examine the experiences of welfare recipients in general and whose findings shed some light on the stigma effect.

D. Previous Studies

This section will contain a brief review of earlier studies. Of particular interest are behaviours on the part of recipients or non-recipients which are taken as evidence of stigma, the characteristics of social assistance which contribute to stigma, and the types of recipients who are most susceptible to the social assistance stigma.

Between 1967 and 1969 Cato Wadel (1973) conducted a study of welfare recipients in a number of small rural communities in Northeastern

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2 AFDC, Aid to Families with Dependent Children, is an income assistance program introduced in the United States to provide aid to "intact" families with dependent children in which the father is unemployed.

Newfoundland. Wadel gathered his data through 12 months of participant observation field-work involving personal contact with about 100 unemployed welfare recipients. The report of his findings consists essentially of a case study focussing on the experience of one unemployed logger and his attempts to maintain his community status and self-esteem. The conceptual framework underlying Wadel's description of the welfare recipient's experiences is closely in line with Goffman's analysis of stigma and impression management (Goffman, 1959).

Wadel found that the contact that recipients had with welfare officers was a dominant factor in their life. For the recipient, contact with welfare officers tended to be an embarrassing experience because of the number of questions asked and the close scrutiny given his activities. Recipients were disturbed, not by the time and trouble involved in answering all the questions the officers asked, but by the implication that they could not be trusted. There were a number of characteristics of the welfare bureaucracy that reinforced this uneasiness and antagonism. Welfare rules and regulations tended to be changed frequently either by the federal or provincial governments. This made the recipients constantly dependent on the officers for information about the new regulations and for reassessment of their situations with respect to the new rules.

Other characteristics of the agency's operation made it difficult for the recipient to establish any rapport with the workers in order to alleviate some of the negative response they experienced. An important part of maintaining one's self-concept is in being able to demonstrate that

other aspects of one's self that are normal, or in being able to provide a convincing rationale for accepting welfare. The high turnover in the welfare staff removed the opportunity for the recipient to present a good case for his need and thereby preserve his self-respect vis-à-vis the officials of the program. Recipients also resented the young age of welfare officers, feeling that they never had known hard times and would not be able to understand.

Wadel's findings also illustrate how various procedures relating to the provision of welfare make it difficult for recipients to maintain their status in the community. For example, able-bodied recipients complained of the distinction made between them and recipients of disabled-bodied relief in the manner in which they received their cheques. The recipients of disabled-bodied relief received their assistance cheques by mail, while the recipients of able-bodied relief were required to pick up their cheques and, as they saw it, to line up so that everyone could see who they were. Some recipients saw the rigid allocation of benefits and restraints on earnings as preventing them from saving enough money to do the little extras, such as painting the house, which would help them to maintain or improve their self-image in the community.

Wadel found that the receipt of welfare altered the individual's interpersonal network, the relations he had with relatives, friends, neighbours and workmates. In this respect the effect of the welfare experience tended to be greater for the man than for his wife, since his role of provider was in question. Recipients tended to be selective in

their association with other welfare recipients, for frequent interaction with them made it difficult to maintain their status. There was a noticeable tendency for welfare recipients to modify their behaviour in order to elicit more favourable responses from others in the community. In conversation with non-recipients, recipients tended to over-emphasize such experiences as medical ailments or work accidents which were generally regarded as more respectable reasons for being on welfare. Recipients tended to be careful not to complain or talk about their rights, except to people in the same position, lest they be criticized for lack of modesty. Further, recipients tended to adopt very conservative consumption patterns or spending habits as a result of the critical reactions they expected from non-recipients. Recipients believed that the acquisition of modern appliances or other non-essentials was looked upon with suspicion and often led to the possibility of being accused of abusing the system.

The reaction on the part of other members of the community to the recipient varied to some extent. The low-wage earners were a particularly critical group.

For the employed the increase in the number of welfare recipients was felt to constitute a threat to the value of work and thus to their self image. (Wadel, 1973:112)

Further, some difference was observed across communities according to the employment opportunities in the community.

Wadel concludes that it is inevitable that any services or programs aimed at reducing economic injustice or lack of income security will spark off new forms of social injustices. He isolates the imperfections in the economic system as the major factors in determining the situation of the welfare recipient.

Although it contains no explicit reference to stigma, Scott Briar's study (1966) of recipients of AFDC examines in a more systematic fashion many of the aspects of welfare that Wadel would suggest would play a part in the stigmatization process. Intensive interviews ranging in length from three to six hours and extending over two to three sessions were conducted with 100 recipients of AFDC. The semi-structured format of these interviews aimed to systematically probe each recipient's experiences with the agency, his conceptions of the agency and its operations, and perceptions of his rights and obligations vis-à-vis the agency. Both husbands and wives were interviewed separately since, as the data subsequently bore out, their experiences were expected to differ.

In general, the study found that individuals were reluctant to apply for assistance and that they would exhaust all other alternatives before applying. The typical applicant had been on unemployment insurance until it ran out, was in debt to financial institutions, and had already borrowed from friends. Recipients reported that the application interviews tended to be disturbing in many ways. They complained of having to sit in a waiting room with other applicants with whom they did not like to be associated, to discuss their financial situations where many could listen,

and to suffer through many and repeated questions. As was found in Wadel's study, the recipients tended to interpret the officials' propensity to ask many questions as an indication that they could not be trusted to tell the truth. The recipients felt they had no control over the decision regarding the application and 60 per cent were not aware that they had a right to appeal a decision.

The recipients showed a tendency to dissociate themselves from other recipients, referring to them as "they", not "we". Their opinions and attitudes toward other welfare recipients could easily be mistaken for those of an anti-welfare or conservative group. For example, Briar reported that more than half of the recipients interviewed believed that at least 25 per cent of all welfare recipients remain on welfare longer than necessary, and about one half believed that over 25 per cent of the recipients cheat.

Briar suggested that his findings indicate that recipients do not have a clear conception of their rights (for example, the right to appeal) but they do have definite ideas about their obligations to the agency. Virtually every recipient interviewed believed that if their social worker asked them to report for budget counselling once a week they should be expected to do so. Although AFDC is defined as a right by statute, few recipients believed it to be so. The assistance was perceived as a privilege which could be revoked at any time. This was evident in the high proportion (66 per cent) who believed that the officers had a right to know how the money was spent, and a higher proportion (76 per cent) who said

that it should be terminated if the benefits were being misspent. The extent to which they had relinquished their rights as normal citizens was indicated by responses to a series of questions regarding the use of night visits to check on recipients. Sixty-six per cent favoured night searches, the reason given being that the agency had a right to know how money was being spent and that many recipients cheat. Ninety per cent said there were laws which gave a person the right to refuse entry to anyone who does not have a search warrant, but only 66 per cent of these believed that these laws applied to welfare recipients; and only 50 per cent of these felt that the recipient should refuse entry to a social worker.

Briar concluded that certain characteristics of assistance programs reinforce and perpetuate the recipient's concept of self as suppliant rather than as a rights-bearing citizen. The common characteristics of assistance programs which have this effect are the complex eligibility rules, including the determination of need and amount of assistance, low visibility of the decision-making process and appeal procedures, the linkage of financial assistance to services which means the recipient automatically becomes an object of other agencies, and the over-concern for checking, reviewing and investigating the individual's behaviour and expenditures.

Handler and Hollingsworth (1969) attempted a more systematic analysis of the relationship between stigma and recipients' experiences on welfare, their attitudes towards welfare, use of the program, and the rate at which they tended to leave the program. The data for this study were based on

survey responses of AFDC clients in Wisconsin in 1967. The "feeling of stigma" was assumed to be a function of the extent to which recipients felt embarrassed or uncomfortable in the presence of non-recipients, the extent to which they perceived the attitude of the community toward them to be hostile, and the extent to which they experienced difficulties or problems with people in the community.

Handler and Hollingsworth found that recipients who did have "feelings of stigma" were less satisfied with their welfare experience, were more critical of the program and had more suggestions for its improvement, held less positive attitudes toward their caseworker, were more inclined to say that they wanted to work, were more opposed to unannounced visits, used the services associated with the program more, and tended to leave the program sooner and by their own efforts.

The authors concluded that their findings cast doubt on the idea that particular welfare experiences, the practices of the agency, produce feelings of stigma. Although they demonstrated some relationship between "feelings of stigma", as they defined it, and welfare experience, it is difficult to determine whether stigma is a cause of the recipients' more-frequent use of the program, or whether the recipients who need to use the various services of the program more become more stigmatized through the greater contact with the program. A second interview was conducted with those who left the program. The findings here led Handler and

Hollingsworth to conclude that stigma encourages "socially desirable" behaviour, such as getting off the program, rather than itself being a consequence of the welfare experience.

It is interesting to compare the findings of the Handler and Hollingsworth study (1969) with the results of a survey study of recipients in Montreal (Heppner, 1974). This study, based on an unbiased systematic sample of welfare recipients in that city, examined a wide range of variables relating to the recipients' background characteristics, their attitudes toward the program and its officials, and their contact with the program. In particular, one part of the questionnaire included the questions used by Handler and Hollingsworth to measure "feelings of stigma". The findings of the Montreal study are consistent with those of Handler and Hollingsworth. About two-thirds of the sample felt -- in some way -- stigmatized. Those who felt stigma tended to have more contact with the agency and to complain more about welfare. It is interesting that the measures of self-esteem (Rosenberg scale) were not related to "feelings of stigma" and the belief that the agency had a right to enquire as to how one spent the welfare money was not related to "feelings of stigma".

The most frequent complaints about welfare were related to the long waits in the welfare office, the need to ask for money to cover every specific need, being repeatedly asked the same questions, having to sit with all types of people in the welfare office, and the practice of inspectors inquiring of neighbours about the recipient. Heppner concludes that those who felt stigma were more compliant and less active in the

community. Recipients who were members of welfare rights groups felt less stigma despite the fact that they typically had more difficulties in the community, were more dissatisfied with welfare, and more critical of it. She identified the following factors as sources of difficulty between the recipient and the system: the public stigmatization of the welfare recipient status, the recipients' perception of selves as acted upon and dependent upon welfare, and the the social welfare officers' treatment of recipients.

A national survey of welfare recipients, conducted by Health and Welfare Canada (1970), provides an extensive profile of recipients, their perceptions of and attitudes toward the welfare system, the extent to which they participate in the community life, and their life situations. The findings are based on a sample of 2,104 heads of households and individuals who are recipients of welfare. Only a subset of the findings will be considered here.

With respect to their experience with the welfare agency, one-third of the respondents said that on their last visit to the welfare office they were obliged to wait for too long a time. It is interesting that 15 per cent of those recipients volunteered the reason for the delay as "they just like to make you wait". Only 9 per cent felt that the worker asked questions that he had no right to ask. The findings demonstrated a certain amount of compliance: about one-third reported that they had at one time or another had their payments stopped or cut down, but 37 per cent did not attempt to do anything about it. Of those who felt they were getting less

than they should, 58 per cent had not gone to see anyone about it. Only 42 per cent of the recipients were aware of an appeal procedure and the greatest percentage of these learned about it from friends or acquaintances. The welfare recipients tended to have a low opinion of other recipients: 94 per cent said that welfare officers should check up on everybody to make sure that people really need the money and that they are not cheating or wasting the benefits.

The authors of that study concluded that welfare recipients are not heavily involved in community activities; recognizing that this may be partly a function of their reasons for being on welfare, such as being disabled. However, they reported that 65 per cent of the recipients stated that they voted in the last election. The greatest involvement in community groups was with the church; however, only 25 per cent claimed membership in a church. Both adults and children tended to engage in solitary activities rather than group activities. The study also revealed that there was not a great deal of mutual involvement with neighbours.

The studies reviewed above are basically of an exploratory nature. Some attempted an explicit examination of stigma, while the objective of others was simply to describe the experiences of welfare recipients. Those studies whose objective it was to measure stigma examined the subjective dimension, the "feeling of stigma". This variable relates to the mental state intervening between the behaviour of others toward an individual and the behavioural response of the individual in Goffman's analysis of stigma. It is an unobserved variable in this conceptual scheme which he calls the

"ego identity" and which is inferred from the behavioural analysis. All these studies, however, illustrate the way in which recipients interpret the procedures of the welfare agency and the behaviour of its officials as a denial of full social acceptance. In those studies which examined the behaviour patterns of recipients in the community, evidence was found of a certain degree of isolation from normal social activities and interaction.

The findings suggest that there is a set of behaviours of welfare officials which are significant in terms of the image they project of the recipient. Recipients tended to interpret the officials' tendency to ask a lot of questions, to repeat questions, to make them wait for long periods of time, as evidence of disrespect. They attributed to officials certain motives, such as ensuring that they were unable to maintain their image in the community. Recipients tended to expect others in the community to behave the same way toward them, with suspicion and lack of respect.

The behaviour patterns of recipients, as they are described in some of the studies, suggest that they accommodate their activities and actions to this view of themselves. Recipients are apparently willing to give up normal rights of citizens in relation to the welfare agency. They tended not to question the amount, or changes in the amount, of their benefits.

In the wider community, the frequency with which they saw friends or former workmates decreased and they were willing to restrain their consumption patterns to avoid possible suspicions. Certain behaviour patterns reflect an attempt to maintain a former status, such as an exaggeration of illness or work injury and avoiding contact with other recipients.

In a more recent study, Harold Kerbo (1976) examined the behavioural effects of stigma in terms of the extent to which it contributes to a degree of apathy or dependence upon welfare. Using the measures of "the feeling of stigma" adopted by Handler and Hollingsworth (1971), he sought to determine whether there was any association between stigma and the extent to which recipients possess an accepting and passive attitude toward their situation. An active-passive index was developed based on two items. An endorsement of the statement

the only way a welfare recipient is able to get all the benefits he is entitled to is to always ask his caseworker about them and keep bothering the welfare department until all of the benefits are obtained

is taken to be a passive orientation toward the welfare system. In contrast, an endorsement of

the only way welfare recipients are going to get more opportunities and money is by collectively protesting against the welfare department and the government for more

is taken to reflect the antithesis. On the basis of these indicators, Kerbo found that those who felt greater stigma appeared more inclined to be passive.

While the treatment of recipients by welfare officers has been identified as an important element in the stigmatization process, there are other program parameters which are thought to contribute to the stigma of

social assistance. In a comparative study of social services in Britain, the United States, Norway and Sweden, Elizabeth Huttman attempted to isolate the institutional arrangements and administrative policies which contribute to the stigmatization of clients (Huttman, 1973): As a result of her study, which focusses mainly on housing programs, she argues that while the source of stigma lies in the societal beliefs regarding the role of social services and the nature of the poor, the stigma is reinforced and strengthened by certain administrative procedures.

Using as a measure of stigma the willingness of individuals to apply for various types of assistance or services, Huttman identified the means test and the stratification of users as the two policies which contribute to stigma. In the latter case stigma is reinforced when the needs of socio-economic groups are met by different agencies. For example, in the United States the housing requirements of the poor are met through public housing, while other strata use non-profit housing or FHA insured loans. In contrast, the British council system provides housing for a wide range of income groups. In this system, tenants are allowed to apply for a means-tested rebate, but this occurs after entry and involves much less stigma. In general, program services which physically isolate or make highly visible the use, such as public housing, will be more stigmatizing.

The provision of assistance in the form of in-kind benefits, such as food vouchers, has often been criticized for being stigmatizing. In a recent study, Archibald Stuart put this assumption to test by comparing recipients of cash assistance and in-kind benefit with regard to their

feelings of stigma, their views of their rights, and their feelings of powerlessness. Included in his sample were families on one or more of Aid to Families of Dependent Children, general assistance, medical assistance, food stamps, or low-income public housing.

As a measure of the feelings of stigma, recipients were asked how much it bothered them to apply for the service and how ashamed they felt to tell others about it. Stuart found a significant difference in the attitudes of the two types of recipients -- those who were receiving in-kind benefits were much less likely to indicate feelings of stigma. This study also found that recipients of income assistance were less likely to assess the assistance as adequate in meeting their needs.

Recipients were also asked for their opinions of the persons taking applications for aid or services as to whether they always treated everybody equally or whether they tended to favour certain groups. The findings suggest that the less adequate the payments were perceived to be, the more the recipient perceived the workers to favour certain applicants and the more stigmatized they felt. Comparisons among the programs showed that AFDC recipients felt more bothered when applying for income assistance, considered it less adequate, and believed that they were treated less fairly than did the recipients of the three in-kind benefits.

Stuart's findings demonstrated an association between feelings of stigma and perceptions of how one is treated. He concludes that the difference in stigma between these two types of programs was in part due to

the different way in which they were perceived. The receipt of social assistance appeared to imply greater dependence and hence a more depreciated status than the receipt of in-kind benefits which were viewed in terms of their adequacy in meeting supplemental needs.

It is apparent from the studies reviewed here that not all recipients exhibit "feelings of stigma" or a sense of shame. The Handler and Hollingsworth data indicated that 49 per cent of the AFDC recipients reported feelings of stigma. The question of whether certain individuals are more susceptible to the welfare stigma was addressed by Patrick Horan and Patricia Austin (1974). In their study, the welfare stigma was conceptualized and measured in terms of expression of shame or distress at receiving assistance from the AFDC program. Recipients were asked whether they ever felt ashamed about being on welfare and how often they ever felt bothered about it. Using a path analytic model, these measures were related to several social background variables: time on welfare, education, and work history. Their analysis showed that the more educated the recipient was or the longer he had been on AFDC, the greater his tendency to feel stigmatized. In addition, the analysis revealed that knowledge of welfare rights organizations was associated with a decreased tendency to feel stigmatized.

Horan and Austin found that work history had no effect on the recipients' tendency to feel stigma. This finding is consistent with the Handler and Hollingsworth study (1971) which found no significant relationship between "feelings of stigma" and the recipients' employment

record, present employment status, whether they had ever worked, or the number of years in the labour force. Heppner (1974) also found no significant relationship between "feelings of stigma" and certain individual characteristics, including past work experience and reasons for not working. Finally, Kerbo (1976) found no significant relationships between stigma and certain social background characteristics such as race, education, length of residence, and age. He did, however, find that those who accept the notion that poverty is the fault of the individual rather than the system — that is, those who accept the traditional ideology regarding the cause of poverty — are more likely to feel stigma. It is not clear, however, whether this belief about the cause of poverty has developed as a result of the stigmatization process or whether it makes the individual more susceptible to it.

In summary, there are certain assumptions in previous studies that the source of the stigma lies in the values of the society (Huttman, 1973), or the structure of certain sectors of society, such as the economy (Wadel, 1973). In those studies where there was an explicit examination of stigma, the analyses were based on the perceptual indicators of feelings of stigma such as embarrassment and perceived discrimination. Behavioural effects were examined in relation to these perceptual factors; however, the findings were not conclusive. Some of the studies concluded that stigma induces socially acceptable behaviour, such as using the services of the program more often and getting off the program sooner (Handler and Hollingsworth, 1969). Others interpreted the association between the use of the program and stigma as resulting from the restrictions of the

stigmatized position (Wadel, 1969). Although the studies did demonstrate that recipients feel stigmatized to different degrees, the findings regarding the effect of certain social and economic background characteristics were inconsistent and in some cases contradictory.

Finally, with regard to what aspects of the welfare experience contribute to the stigmatization process, the findings of these studies have demonstrated the effect that the treatment given recipients by program officers and certain welfare procedures has on the way recipients come to view themselves. However, previous research does not provide evidence to argue that, in the absence of this contact, the recipients would not be made to feel stigmatized by other factors, such as the response of other members of the community, or the internalization of certain norms or values regarding the receipt of welfare or poverty in general.

Chapter II

CONCEPTUAL FRAMEWORK

The basic approach taken in this study is that stigmatization is a learning process and that public welfare is a system of social exchange. The extent to which the stigma of public welfare modifies the behaviour of its recipients depends on the schedules of reinforcement associated with this system of exchange. In order to develop specific hypotheses relating to the impact of the stigma of social assistance, this section will make explicit the principles of learning theory used by G.C. Homans (1974), P. Blau (1964), and J.F. Kunkel (1973); the important contingencies of social interaction identified by E. Goffman (1959); and certain assumptions regarding the organizing principles of social reinforcers found in the works of Kunkel and R. Pinker (1971). Kunkel's model of behavioural change will be used to express the relationship between these major concepts. Finally, using the findings of the studies reviewed above, the empirical content of these concepts will be specified as they relate to the stigma of welfare.

A. Learning Principles

Stigmatization is a special case of learning distinguished by the important roles of social reinforcement and symbolic conditioners and the extensiveness of its impact on an individual's behavioural patterns. This process will be conceptualized in terms of J.F. Kunkel's model of social

change. Although Kunkel's model is largely based on the principles of learning theory developed by G.C. Homans, it is used here because it provides an example of the application of these principles to the explanation of social phenomena.

The basic assumption of Kunkel's model is that human behaviour is learned through differential reinforcement. The important reinforcers are the behaviours of others in the individual's social context. Kunkel uses the term contingent stimuli to refer to the behavioural response of others to an individual's action which affects the frequency with which the individual repeats the action. A reinforcing stimuli or rewarding response is that which reduces an individual's state of deprivation with respect to some basic need. This element of Kunkel's model is similar to the proposition in Homans' work that:

For all actions taken by persons, the more often a particular action of a person is rewarded the more likely the person is to perform that action.
(1974:16)

Aversive stimuli are consequences of a behaviour which maintain or increase an individual's state of deprivation and thus tend to reduce the probability of that behaviour reoccurring. An aversive stimulus may be either the withdrawal of a rewarding behaviour or the presentation of punishment.

Kunkel distinguishes a second set of stimuli, called discriminant stimuli, which are behaviours or elements in the environment which come to indicate to the individual that a particular action will or will not be reinforced. Homans expresses this relationship in the following learning principle:

If in the past the occurrence of a particular stimulus, or set of stimuli, has been the occasion on which a person's action has been rewarded, then the more similar the present stimuli are to the past ones, the more likely the person is to perform the action or a similar action now. (1974:23)

The efficacy of any stimulus in maintaining or modifying behaviour is a function of the value of the stimulus to the individual as a reward or punishment. According to Homans:

The more valuable to a person is the result of his action, the more likely he is to perform the action. (1974:25)

It is always assumed in this model that in order for the behaviour of other individuals to act as reinforcing stimuli, the individual must associate their responses with his own behaviour. Further, the schedule of reinforcement, as indicated by the frequency of the behaviour, influences the effectiveness of a behavioural response as a reinforcer. In the case of most reinforcers, the value of the reward decreases with frequency over time as the individual becomes satiated.

The value of a stimulus is a function of the individual's state variables which measure the various states of deprivation or satiation. The individual's state variables are, in turn, a function of the values and norms, in the sense that needs or levels of satisfaction are learned, and secondly, that means of satisfying physiological needs are often governed by norms. Kunkel distinguishes a class of reinforcers, which he calls generalized reinforcers, which do not reduce deprivations themselves but can be used to obtain rewards that do. They are particularly effective because their nature as reinforcers is, under normal circumstances, independent of any momentary state. He identifies money and status, both generalized reinforcers, as the most effective stimuli for maintaining or changing behaviour patterns in North American society. It is possible, however, that a person may have no money or status to lose, in which case the effect of withdrawing these, as negative reinforcement, is attenuated.

Kunkel observes that

the behaviour patterns which constitute daily life are usually followed by several stimuli, some reinforcing and others aversive, some immediate and others which do not occur for some probability that an activity will be repeated. (1975:32)

An individual will continue to emit a behaviour as long as the consequent benefits he receives outweigh the costs. Thus, the causal scheme in Kunkel's model requires more than the association of a behaviour and a reward, but also necessitates the identification and evaluation of all of the behavioural responses following an action. Further, while it may

appear that the subsequent result is being identified as the cause of the prior behaviour, the causal scheme implied here involves a sequence of (1) the individual's action, (2) contingent stimuli, and (3) the repetition or extinction of the action. It is the occurrence of an action and the contingent stimuli together which cause the occurrence or extinction of a behaviour at a later time.

B. Stigmatization as Social Reinforcement

Frequently the notion of stigma is taken to denote some attitude or feeling about one's self, and stigmatization, the process of conveying and internalizing negative attitudes about self. The symbolic interactionist tradition, with which Goffman's work is associated, has tended to emphasize these internal or subjective states. It is from this perspective that one might argue that a behavioural model is inappropriate to the study of stigma. Further, those within this tradition, which stresses the "social construction of reality" and the ever-changing nature of this reality, would argue that the nature of the phenomenon which is the subject of this analysis, defies objective measurement. This latter position is not adopted by all symbolic interactionists. For example, Manford H. Kuhn has advocated the objective measurement of internal states with such techniques as self-esteem scales or self-concept scales (Kuhn and McPortland, 1954).

Although Goffman's analysis of stigma tends to be exploratory and descriptive, his concepts are defined in behavioural terms and are thus amenable to direct observation. The characteristic which identifies an

individual to those around him as being other than normal is called the stigmatizing attribute. The stigma is the individual's "social identity" inferred from the behavioural responses of others to him. The major part of Goffman's work deals with the behaviour patterns the "stigmatized" adopt in response to the reactions of "normals" to him. The subjective state such as "feelings of stigma" is an unobservable variable in Goffman's scheme called the "ego identity" which intervenes between the behaviour of others toward the stigmatized and the behaviour of the stigmatized.

Learning theory notions are implicit in Goffman's conception of stigma, and in particular, in his concept of "the moral career of the stigmatized persons". Stigmatization is the process through which an individual learns to modify his behaviour patterns in accordance with his change in status as reflected in the behaviour of others toward him. The important reinforcing contingencies are social, such as the behaviour of "normals" toward the stigmatized encountered in social interaction involving both.

In the social exchange paradigm, social interaction is social reinforcement: that is, previous social interaction shapes subsequent interaction. Symbolic interactionism emphasizes a characteristic feature of human interaction which is particularly important for understanding the stigmatization process. A basic assumption of symbolic interaction theory is that interaction among humans is symbolic, in the sense that actors respond to the behaviour of others, not for some inherent quality in the acts, but for the significance imputed to them by the actors, and, in particular, the significance it has for the individual's self-concept.

(Singleman, 1972:415). Man has the capacity to assume the perspective of the generalized other, which in turn allows him to construct his behaviour in terms of the expectations of others (Mead, 1934). It is the extent to which the response an individual elicits in the community reflects a lowering of his social status, or, alternatively, a withdrawal of the respect and obligations he learned to expect in his former status, which make them negative reinforcers for his behaviour.

It is important to recognize the symbolic nature of the reinforcers, in order to understand the extent of behaviour change -- behaviours remote from the actual stigmatizing attitude. Individual behavioural items are not being reinforced, but rather the whole behavioural repertoire which was associated with the previous status. Goffman, as well as Lemert, in his analysis of secondary deviance (1967), deal extensively with the ways in which the daily routine of a stigmatized person consists of adaptations, not as much to the primary event which is the source of the stigma, as to the social response to the stigma.

In order for stigmatization to occur there must be social interaction between normals and the stigmatized. The stigmatizing attribute must be visible in order to elicit stigmatizing responses. Goffman discusses at considerable length the contingencies of social interaction which affect the ability of the potentially discreditable to hide their stigmatizing attribute, and thus avoid the undesirable responses of others. Further,

the possession of a stigma must elicit a predictable response from others and the symbolic meaning of this response must be shared between stigmatized and normals.

Using this framework, which combines both assumptions from the social exchange paradigm and assumptions from symbolic interactionism, it is possible to conceptualize the stigma of welfare in the following way. Being dependent on welfare is a stigmatizing attribute. The stigma is the recipient's social identity inferred from the tendency of non-recipients to deny him the normal privileges and respect in social interaction with them. The extent to which an individual is stigmatized is the degree to which he modifies his behaviour in response to the reactions of non-recipients. The key to how the consequences of a program stigma can be assessed lies in Goffman's work itself, which is essentially a behavioural analysis of social identity. Goffman states that a study of stigma must look for the routine cycles of restrictions the stigmatized individual faces regarding social acceptance, or, in the case of the potentially discredited, look for the contingencies he faces in managing information about his own identity. The subject of analysis is the behaviour of non-recipients and recipients in mixed contacts for "the treatment that an individual gives others and receives from them expresses or assumes a definition of him" (Goffman, 1971:340).

C. The Social Implications of Stigmatization

Kunkel's model does not depart significantly from the behavioural propositions in the works of other social exchange theorists. He does, however, place greater emphasis upon the distinctive human capability reflected in the processes of modelling, generalizing, and discriminating. Vicarious learning is the process of learning through observing the behaviour of others and its consequences. Where stable patterns of reinforcement are observable, individuals come to expect that the same sanctions are likely to apply to them as to others who share their status. Because of the relativity of rewards and punishments, and the fact that behaviours are usually followed by a number of consequences, a particular stimulus may not condition one person, but may condition another. For example, persons with a stigma may have no way of removing the stigma attribute which elicits negative responses from others, but the stigma consequences may still serve, by example, to condition others. This process is what Scott refers to as "the social implications of moral learning" (Scott, 1971).

D. Schedules of Reinforcement: Welfare as a System of Social Exchange

Finally, Kunkel identifies the important role of the social structure in the shaping, maintenance and alteration of behaviour. The person's position in various groups and the community at large determines the important discriminant and contingent stimuli he faces. It is the generalized response — the organized behaviour patterns of others, rather

than random or particularistic responses -- which give others' behaviour the characteristics of contingent stimuli. The contingencies of an individual's actions -- the schedules of reinforcement -- are largely determined by values and norms in society. The values indicate which behaviour should be reinforced, and the operating norms indicate what behaviors are actually reinforced. The operating norms are then inferred from actual behaviour patterns in response to various types of actions.

It is useful to consider the provision of welfare as a system of social exchange which exists alongside the economic market. A persistent characteristic of our society has been its efforts, in one form or another, to assist the poor. Kunkel identifies values and beliefs as the organizing principles underlying behavioural regularities such as this. The basis for systems of public assistance can be said to be the value of interdependence. There is a competing value dominant in the economic exchange system. This is the value of independence, the belief that man should be responsible for providing for himself and his family and should be rewarded according to his success in doing so. The stigma of welfare results from the operating norms or the pattern of sanctions associated with this value of independence.

In the economic market the medium of exchange is money and the mechanisms for regulating exchange are easily identified and measurable: including wage rates, interest rates, usury rates, prices, etc. In the social welfare system the medium of exchange is social status. Social assistance is provided at a cost in terms of the recipient's social status.

The recipient is expected to demonstrate deference to others and give up certain rights of normal citizens. By extracting deference, the upper class, as "givers" in this exchange, establish a claim to moral righteousness and superiority which fortifies and justifies their higher status. The middle and lower classes enforce this deference among recipients in an effort to maintain their status apart from the "pauper".

The model of welfare assumes that there is a set of operating norms which regulate the exchange and, thus, that a pattern of behaviour in response to recipients exists, and is experienced by recipients directly, or is observed indirectly. The welfare program is an institutionalized response to those who seek financial assistance. The program provisions, procedures and regulations are, in themselves, stimuli which have significance in terms of the image society projects of assistance recipients. In addition, the program parameters set the bounds of the response on the part of officers of the program. For example, the design of the program determines the amount of interaction that will occur between clients and officers, and the amount of control the officers individually can exert over the lives of recipients. The nature and amount of interaction between recipients and officers is important because these are "mixed contracts" where the stigmatizing attributes are visible to the non-stigmatized. In addition, the behavioural response of officials is particularly efficacious since it is associated with the financial benefits of the program.

Unobserved internal process

Further, the design of assistance programs affects the contingencies of social interaction between recipients and non-recipients in the community. The extent to which operating norms or sanctioning behavioural patterns become established in the community is, in part, a function of the visibility of the stigmatizing attribute; that is, the participant's status. The design of the program, in particular the allocation of benefits, determines to what extent recipients can maintain the physical trappings and behavioural patterns symbolic of their previous status.

E. Testing the Model

The relationship between the major concepts in the model of the stigma of social assistance having been described, it remains to specify the class of behaviours denoted by these concepts. Studies of the experiences of recipients of the present welfare programs in Canada and the United States, reviewed earlier, point out the various program features which signify to recipients their loss of status. These include subsistence level benefits, vouchers, scrutiny of lifestyle and needs, invasion of privacy, unannounced visits by social workers, inter alia. The aim of personal contact and discretion in the welfare system is to identify more accurately the needs of the client; however, another consequence is that the recipients' and officers' sensitivity to the "giver-receiver" relationship is heightened. The failure of government programs to provide adequate information regarding eligibility criteria, calculation of benefits, and client rights places individuals in the exchange on an unequal footing. The exchange is

monetary benefits for social deference and the benefits become more or less significant as reinforcing stimuli depending on the schedule of reinforcement and the value of the payments to the recipient.

The characteristics of social assistance programs which affect the contingencies of social interaction for recipients in the community at large are those features which publicly label individuals as recipients, such as the requirement that cheques be picked up at the office, the use of food or clothing vouchers and direct payment of rent, utilities, medical bills or other necessities. In addition, contacts made with other professional services on the recipients' behalf, reveal their participant status to other service personnel in the community with whom they may wish to consult, for example, with respect to medical care or family counselling.

The behaviour patterns which reflect the recipients' new sense of identity include the relinquishing of normal rights of citizenry with respect to privacy or access to services, and the withdrawal from normal social and economic activities. Recipients tend to generalize from their experience with the welfare program and its officials to their life in the broader community. The tendency to withdraw from previous activities, organizations, and friendship groups is an attempt to avoid the anticipated negative responses of others in the community.

This model of stigma assumes that an individual's self-concept can be changed or maintained without focussing on subjective attitudes or beliefs.

Thus, regardless of the stability of the values of independence embedded in the economic institutions of society, and the beliefs or attitudes toward those who receive public assistance, the stigmatizing consequences of being on social assistance can be reduced by removing program features which contribute to that learning process.

The experimental introduction of a guaranteed income program in Manitoba provides an opportunity to test this model of the stigma of public assistance. Many of the program characteristics identified by the model as aversive are absent from the guaranteed income program. Thus, by comparing the behaviour of recipients of welfare and the behaviour of recipients of the guaranteed income program, it is possible to assess the relative importance of some of these program parameters to the stigmatization of public assistance recipients. The administrative procedures are not the only source of stigma however. It must be assumed, in order to assess their importance as discriminant and aversive stimuli, that the propensity of the general public to stigmatize guaranteed income recipients will be the same as for welfare recipients. The continued concern to ensure an incentive to work, evidenced by the fact that work effort response was the primary research objective of the experiment, attests to the stability of the value of independence (Anderson, 1978).

The Manitoba Basic Annual Income program is a transfer program based on the negative income tax model. In contrast to the welfare program which determines the amount a family gets by means of a needs schedule, a negative income tax type plan establishes a support level which is the

amount of money a family will receive if it has no other income. Whereas welfare payments are reduced by the total amount the family earns over \$20.00 a month (reduced by 100 per cent of the additional earned income) the guaranteed income program specifies a tax-back rate, less than 100 per cent, which determines by how much the family's payments are reduced as its own income increases. While a welfare family is no better off by working until it can earn more than the welfare allotments, a family on the guaranteed income program is always better off by working more.

The guaranteed income program has used both a self-enrolment process, which involves the completion of an application form and a detailed statement of income similar to the income tax form, and an assisted enrolment process. In either case, there is no necessity for the applicant to go to the guaranteed income office; the whole process can be completed by mail. Income is reported monthly, and payments are mailed to the recipients, or deposited directly into their bank accounts. The recipient is supplied with a manual summarizing the operational rules of the program, the method of calculating benefits, and the appeal procedure.

The guaranteed income program reduces the contact between the program officials and recipients to a minimum necessary for clarification of income reports, or to contacts initiated by the client. The information required from the recipient for application or determination of benefits is limited to income and assets. The agency exerts no control over the use of the money, and officers no longer have a monopoly on the information about the program. By removing all of the characteristics of the welfare program,

which the model suggests are important stimuli, guaranteed income recipients should be less stigmatized. The one potential problem characteristic of the guaranteed annual income program is the procedure of direct deposit. The identity of those who opt for direct deposit will be revealed to bank managers. This procedure may have negative consequences for those recipients who have debts.

F. Hypotheses

In general, the model of the stigma of social assistance suggests that an important schedule of reinforcement in the stigmatization process is determined by the design of a particular social assistance program. The more aversive characteristics associated with a program, the lower will be the recipient's participation in organized and informal activities in the community. The most general hypotheses suggested by the model of social assistance imply a broad comparison of the responses of recipients of welfare and the recipients of the guaranteed income program.

- H:1 Recipients of welfare will participate to a lesser extent in formal and informal activities in the community than recipients of a guaranteed income program.

The behaviour of others in the community is also an important source of negative reinforcers to the extent that it expresses a withdrawal of acceptance or a denial of the recipient's former status. For this type of behaviour to occur, the individual's recipient status must be visible to members of the community. Certain characteristics of welfare, such as the

procedure of having the recipient pick up his cheque at the welfare office, the practice of referring recipients to other professional services in the community, and the use of vouchers -- features absent in the guaranteed income program -- tend to advertise the recipient's status.

H:2 Recipients of welfare will tend to experience more difficulties with members of the community than recipients of a guaranteed income.

The nature of the community, as indicated by its size, will also affect the flow of information about the recipient, his visibility and, consequently, the frequency with which he will experience aversive reactions in the community.

An important assumption of the model is that the behavioural responses, and other discriminant stimuli, form a pattern. They are not random or unique occurrences. It is the pattern, the combination of program characteristics which has significance with respect to the individuals' status. Similarly, it is the different pattern of response which develops in a community, involving a wide range of individuals and groups, which has the symbolic quality and takes on the effect of reinforcement.

There may be, however, individual stimuli which affect the stigmatization process more than others. In addition, individual recipients of both welfare and guaranteed income, experience some aspects of the program more than others. Therefore, the following hypotheses, which relate specific program characteristics to the behaviour of recipients, will be tested.

The standard of living ensured by the program is a significant sign to the recipient of his self-worth.

H:1.1 The lower the payments provided by the program, the greater the tendency of the recipient to withdraw from normal activities.

The procedures for administering assistance programs determine the nature of the reinforcement schedules by necessitating contact between non-recipients (the officers of the program) and the recipients. The lengthy and numerous visits to the welfare office increase the opportunity for non-recipients to express in their behaviour their rejection of recipients.

H:1.2 The more frequent the contact between recipients and officers of the program initiated by the latter, the greater will be the tendency to withdraw from normal community activities.

The manner in which the recipient receives the support is important. The practice of the welfare agency of paying landlords and creditors directly suggests to the individual that he is incapable of managing his own affairs. The use of vouchers or food stamps has a similar meaning. The more control the program assumes over the individual's family budgeting, the more stigmatizing it will be.

H:1.3 Recipients who receive benefits by means of food vouchers, direct payment of their expenses, or rent will have a greater tendency to withdraw from normal community activities than those receiving cash benefits.

The failure to provide recipients with information regarding the rules, appeal procedures and criteria for eligibility, leaves the recipient dependent upon the official to make the best decision, or a fair decision, on his behalf. Further, it puts the recipient and official on an unequal basis with respect to knowledge about the program.

- H:1.4 The more certain or knowledgeable the recipient is of the factors determining his eligibility and the calculation of his benefits, the less will be the tendency to withdraw from community activities.

The amount of discretion the officials are seen to have, in determining eligibility and the amount of support, is an additional factor in the stigmatization process, as it tends to reinforce the association made by recipients between their response to the program and the benefits they receive.

Late payments have been identified in previous studies as aspects of assistance which reflect the recipient's low social worth.

- H:1.5 The more often payments are received late, the greater the tendency to withdraw from community activities.

The program officers' behaviour is an important source of aversive stimuli. The tendency of officials to repeat questions, seek verification from neighbours, and make unannounced visits to the recipient's home, etc., reflects a lack of trust as well as a lack of respect for the individual's privacy.

H:1.6 The greater the number of aversive experiences recipients have with officials, the greater the tendency to withdraw from community activities.

Stigmatization is a process contingent upon interaction between recipients and non-recipients where the latter's status is known. This is obviously the case in contacts between officers of the program and recipients. However, visibility in the community is contingent upon the recipient's ability to hide his receipt of assistance. Certain program procedures make this difficult; for example, where the recipient must pick up his cheque from the welfare office, or must use food vouchers, or where some of his expenses are paid directly by the welfare office. The following hypotheses regarding the response recipients evoke from others in the community will also be examined:

- H:2.1 Recipients who must pick up their cheque from the office will tend to experience more difficulties with members of the community and will have a greater tendency to withdraw from normal activities.
- H:2.2 Recipients who receive vouchers instead of, or in addition to, cash benefits will tend to experience more difficulties with members of the community and consequently be more withdrawn.
- H:2.3 Recipients who have certain of their expenses paid directly by the welfare agency will tend to experience more difficulties with members of the community and consequently be more withdrawn.

Variation in the amount of stigma experienced by recipients is likely to occur within programs due to three groups of factors: variation in the operating norms; differences in the value of the rewards; and differences

in the schedule of reinforcement actually faced by recipients. The hypotheses presented above will allow the study to examine the effect of the program procedures actually experienced by the recipient. However, the analyses will have to control for differences related to the other two factors.

The response of non-recipients in the community is a function of the values in society at large. However, some variation in the operating norms can be expected to occur, depending on economic conditions in the community and the composition of the population. The relationship between employment opportunities, the percentage of the population on the program, and average income are likely to be complex. On the one hand, a community which is experiencing economic difficulties may be more accepting of those who receive assistance. On the other hand, lower-income people in that same community may tend to be much less tolerant of those who receive as much as they do without working. At the minimum, rural versus urban differences must be considered.

It is the individual's state variables which determine the value of welfare benefits, and thus the efficacy of these benefits as reinforcers. The individual's level of education, income, disabilities and marital status affect the alternatives he may have to welfare, and therefore the extent to which he is reliant on welfare. The analyses of the effect of the various program parameters on the behaviour of the recipients must control for these factors.

The efficacy of the aversive responses recipients elicit from program officers and others in the community will depend on the amount of social status the recipient has to lose. It could be argued that there is a stigma attached to other assistance programs which the individual may have experienced previously, or to being unemployed, or poor. Consequently the tendency of welfare recipients to be stigmatized; that is, the extent to which they alter their behaviour in the community and towards the program itself, may be a consequence of previous learning experiences. Therefore, previous experience on welfare, previous or present participation in other programs, such as subsidized day care and subsidized housing, and other individual characteristics, such as marital status and age, which contribute to one's status in the community, must be taken into account along with previous income and employment history.

The model of stigma of social assistance suggests a further set of hypotheses related to the social effects of the stigmatization process which cannot be adequately tested here. On the basis of the central principle of learning theory and the definition of stigma as a pattern of sanctions and the identification of a set of discrediting administrative procedures, an hypothesis can be derived to the effect that:

The more aversive and discrediting characteristics a program has, the greater the rate at which people will withdraw from the program.

Behaviour is vicariously learned through observing the behaviour of others and its consequences. Individuals do not have to experience being

on welfare to learn what the consequences of participating will be.

Non-recipients are not only generally aware of how others feel about welfare recipients, they are frequently part of the stigmatization process itself.

The greater the number of discrediting characteristics a program has, the lower the response or take-up rate will be.

An individual will continue to emit a behaviour as long as the consequent benefits he receives outweigh the costs. There are two sets of contingent stimuli or reinforcers relevant to this model: the actual welfare benefits and the loss of social status or acceptance. The efficacy of stigma, the withdrawal of social acceptance as a sanction, and welfare aid as a reward depend on the individual's state of deprivation and the availability of alternative sources of these rewards.

The most extreme response to the stigma of social assistance is perhaps to drop out of the program. This study is confined however to the observation of the responses of those individuals who remain on the program. To the extent that there is a stigma associated with the program, these behaviour patterns will reflect adaptations to the routine restrictions faced by the stigmatized or the impression management strategies adopted by the discreditable. The measure of stigma is the degree of behaviour modification that occurs. The area of the recipient's life situation hypothesized to be affected by his experience with a particular form of social assistance is social interaction in the community

on a formal basis through organizations or on an informal basis through involvement with neighbours and friends. Social participation is only one dimension of social acceptance which Goffman indicates is the issue in stigmatization. There are a wide range of behaviours between this and withdrawing from the program. In observing any of these areas, however, it is the pattern of behaviour change and the extent to which this change reflects recipients' attempts to meet the expectations of others which become significant for measuring the effects of stigma.

U

Chapter III

METHOD

The research strategy employed in this study attempted to take advantage of the existence of the Manitoba Basic Annual Income Experiment to assess the possible stigmatizing effects of a guaranteed income program, as compared to the existing welfare program. The Manitoba Experiment was not designed with the study of stigma in mind, but rather had as its primary objective the analysis of the labour supply response of individuals and households to a range of negative income tax programs. Consequently, certain aspects of the design of this study were determined by other research goals and not by the experimental analysis of stigma. Further, the Manitoba Basic Annual Income Experiment was a joint federal and provincial venture. This institutional context placed certain additional constraints on the methodology. This section will, therefore, include a brief description of the Manitoba Experiment, its design, and operation, as part of the outline of the methodology for the stigma study.

In order to estimate the labour supply response to negative income tax programs the design of the Manitoba Experiment concentrated on the effect of different support levels and tax rates on the labour force behaviour of recipients. Three support levels and three tax rates were used in almost all possible combinations to produce seven financial treatment plans. The addition of a control plan, where units would not receive payments, resulted in a total of eight experimental plans to which selected families

from Winnipeg and several rural communities were assigned. The selected sample units were enrolled in their respective guaranteed income programs in January 1975 for three years.

The data required for the primary research effort, labour supply analysis, were collected through a series of periodic interviews administered to all family units every four months throughout the life of the experiment. In addition, three pre-experimental interviews were conducted during 1974. These interviews were highly structured and collected detailed information on hours worked, wages, job search activities, reasons for and activities engaged in during periods of unemployment, income and assets. Individual data were collected from both heads and all other adults in the family unit (including those 16 and over). In addition, data relevant to the study of other behavioural and attitudinal responses such as marital stability, achievement motivation, ethnicity and geographic mobility, inter alia, were collected at two or three points throughout the experiment. The research strategy for the study of stigma accommodated itself to the overall research strategy for the experiment, and to the constraints of available resources for non-labour supply analyses.

Although this study exists as a part of the Manitoba Basic Annual Income Experiment it does not, strictly speaking, follow the experimental approach. The major value of the experimental design is the ability of the researcher to manipulate or control the treatment variables. The program parameters of explanatory value in the model of the stigma of social

assistance include, not only the level of benefits, but the manner in which they are delivered. The establishment of the experimental guaranteed income program introduces an alternative set of program parameters to those of the existing welfare program. However, the specific characteristics, the way in which they have been combined, and in some cases varied, throughout the experiment for purely operational reasons, have been beyond the control of the researcher.

As a joint project, the Province of Manitoba had responsibility for the operational aspects of the experiment, the operation of the payments system, the field survey operations, and quality control and data processing procedures. The agency established to perform these functions was called Mincome Manitoba. The experimental guaranteed annual income (G.A.I.) benefits were often referred to as Mincome payments. The research activities were shared by both levels of governments, as were the costs. While this division of responsibilities roughly corresponded to that of the existing welfare system, where the provinces are responsible for the delivery of welfare, with the federal government sharing the costs subject to certain guidelines established in the Canada Assistance Plan, it is a rather arbitrary division of activities in a research endeavour. It is evident then that the manner in which the stigma study was operationalized was constrained by the fact of not being a primary research objective, and by being the work of a federal researcher whose ability to influence the operational aspects was limited by this institutional arrangement.

It should not be surprising, given the jurisdictional division of responsibilities for welfare, that the two levels of government did not agree as to the priority of different research areas. Such disagreement existed over the stigma study resulting in it being identified as an independently conducted piece of federal research. The necessary tie between the research design and operationalization was consequently further attenuated.

In the true experimental design, control over extraneous variables is obtained through the random assignment of sample units to treatment plans prior to the introduction of the treatment. The sample assignment process for the Manitoba Experiment was made with reference to the seven treatment plans defined by the support level and tax rate and the one control plan. For the stigma study to comply with the true experimental design, the sample points must be randomly distributed over the three treatments -- welfare, guaranteed income, and no welfare or guaranteed income benefits.

In many respects the research approach adopted here resembles the cross-sectional survey strategy where the samples are typically drawn from various subpopulations; in this case, those who are already exposed to welfare, those participating in an experimental guaranteed income program, and those not involved in either. However, while individuals in the welfare sample have self-selected that treatment, the individuals on guaranteed income have been assigned to this program. It is important, however, to appreciate the nature of the experimental environment in which

this cross-sectional analysis is being conducted because it is the source of a number of uncontrolled extraneous variables not usually found in cross-sectional survey studies.

A. The Sample

The sample on which the study of stigma is based consists of the adult heads of all family units in the interview panel of the Manitoba Experiment at the beginning of the third year of the experiment. This sample, totalling 2,357 individuals, includes approximately 1,356 receiving guaranteed income payments, 208 receiving welfare, and 537 receiving neither type of payment. The welfare component consists of members of the control plan of the Manitoba experiment who "happen" to be on welfare. The nature of the stigma study sample was defined by the sample design of the Manitoba experiment as described below.

The sample selection and assignment process of the Manitoba Basic Annual Income Experiment was conducted on the basis of information obtained in pre-experimental interviews of the potentially eligible population and the use of a formal assignment model. The sample frame consisted of a merge of two data files considered to be an exhaustive listing of the residents of Manitoba. The population of interest for the analysis of labour supply response is much narrower than the population that one might visualize eventually being covered by a guaranteed income program. For these reasons, and for cost and efficiency considerations, the aged, the institutionalized, the disabled, and others were excluded on the grounds

that the experimental treatments were unlikely to produce a work behaviour response of interest. The population of interest was confined to residents of the City of Winnipeg and selected rural Manitoba communities who earned less than \$13,000.

The sample frame was broken up into eight strata based on family structure (double-headed or single-headed) and income level (\$0-4,999; \$5,000-8,999; \$9,000-12,999; no data available). Household addresses were randomly selected within strata for a screener interview. Based on screener data, households were again assigned to strata from which they were randomly selected for a lengthy and detailed baseline interview. Households who completed the baseline interview were assigned to a "normal income" cell based on a vector of socio-economic variables projecting their expected earned income over three years, and then were randomly selected from within cells for enrolment. This process selected the sample points for the urban and rural dispersed sample, which were then assigned, through the use of a sample assignment model, to the nine treatment plans.

Additional sample points were added to the urban dispersed sample -- enrolled one year later but also to receive payments for three years. These sample points were confined to the household types and income groups thought not to be adequately represented in the original sample.

In addition, Dauphin, Manitoba was selected to be a saturation site where all residents would be able to apply to be enrolled in the experimental guaranteed income program. A screener interview was done on

all Dauphin households. All households with a total "normal income" of less than \$9,000, and where both heads were less than 64 years of age (as of July 1974), were attempted for a baseline interview. All those meeting the residence, age and income guidelines, according to the baseline data, were asked to complete an enrolment interview and subsequently sent an enrolment package containing information about the program and enrolment instructions. However, residents of Dauphin were able to initiate the enrollment process at any time during the three years.

The aim of the sample development process was a random stratified sample. There were two non-random processes which had affected the nature of the sample at the time that the stigma study was conducted. Social experiments, such as this one, must rely on voluntary participation and thus usually are faced with a certain number of units who refuse to enroll. Further, throughout the first two years of the experiment a certain amount of attrition occurred which can be assumed to be a non-random process. Attrition is not an insurmountable problem in social experiments as long as data is available to analyze the pattern of attrition itself. However, it does become problematic in cross-sectional analysis. While pre-experimental data on the families in the sample was collected, it did not become available to the researcher in time for the analysis.

A more important source of non-randomization for the stigma study existed as a result of the fact that the welfare sample, and therefore the remaining controls, were self-selecting. There are two types of characteristics by which these groups may differ: (1) those related to the

eligibility criteria of welfare (i.e., marital status or family type, employment status, home ownership, disabilities) and (2) those which differentiate individuals in terms of whether they choose to seek assistance or not (ethnicity, education, language and age).

In the model of stigma, an individual's characteristics (state variables in Kunkel's terminology) with respect to social status or economic situation were identified as having an influence on the efficacy of the stigma, or welfare benefits, as reinforcers of behaviour. To the extent that welfare and guaranteed income recipients differ along these dimensions, any stigma may be expected to have a variable effect. An analysis of the characteristics of these three sub-samples revealed that the sample of guaranteed income recipients did, indeed, resemble the control group of non-recipients with respect to most of the basic demographic characteristics. However, the welfare recipients differed significantly from the other two groups on a variety of dimensions. And finally, the sample in Dauphin differed in a number of ways from those in Winnipeg and other rural sites.

It is important that these differences be examined in order that they may be controlled for in the subsequent analyses. The following section will review the characteristics of the sub-samples.

Sample of Guaranteed Income Recipients: The sample of guaranteed income recipients is similar in its composition to the control group of non-recipients with respect to age, sex, marital status, disabilities,

ethnicity, educational achievement, language, debts and financial assets.

However, guaranteed income recipients are less likely in all sites to have employment earnings. In light of this difference, it is interesting to note that a very high percentage (88 per cent) of those who dropped out of the guaranteed income program were individuals with earnings. This difference between guaranteed income recipients and control respondents was much smaller than the difference that existed between welfare recipients and controls. Only 25 per cent of the provincial welfare recipients in Winnipeg had any earnings during the year.

A smaller percentage of the guaranteed income recipients were employed full time compared to the group of non-recipients. Again, a rather high percentage (67 per cent) of those who dropped out of the guaranteed income sample were employed full time. The provincial welfare sample was dramatically different with respect to this characteristic; 94 per cent having no employment. This should not be surprising given the eligibility criteria for long-term provincial social assistance. The fact that municipal welfare recipients have a higher incidence of employment reflects the temporary and emergency nature of that type of assistance.

Finally, a smaller percentage of the guaranteed income recipients owned their own homes than the group of non-recipients. This finding cannot be linked to the attrition process since both those who dropped out of, and those who refused to participate in the experiment from the start were less likely to own their homes. A very small percentage of the provincial and municipal welfare recipients owned their homes.

Fifty-one per cent of the guaranteed income sample had 11 years of schooling or more, compared to 22 per cent of the provincial welfare sample. The major difference among sub-samples in terms of language was that municipal welfare recipients were more likely to report a language other than English as their first language compared to members of the other groups.

Finally, the difference between the sub-samples in terms of indebtedness and the possession of financial assets is interesting. A much smaller percentage of welfare recipients had any debts compared to the guaranteed income recipients and non-recipients. On the other hand, they were less likely to have any financial assets.

Dauphin: The sample in Dauphin was unique, to some extent, because it was the saturation component of the Manitoba Basic Annual Income Experiment. It was in this site that all residents who felt they were eligible could apply for guaranteed income payments. Thus the treatment sample in Dauphin was self-selecting, like the welfare sample. In addition, the Dauphin interview panel was affected by much higher attrition and refusal rates made worse by a very high refusal rate on the stigma questionnaire itself.

The first point to make is that the welfare sample in Dauphin was made up entirely of provincial recipients. Second, it should be noted that there were no real controls in Dauphin. (Those being interviewed, but not receiving guaranteed income payments, were not, because they initially refused to enrol or subsequently dropped out.

The Dauphin sample was, on the average, older than the Winnipeg or rural dispersed sample components. However, the age distribution of the provincial welfare group was dramatically truncated toward the older ages. In Dauphin, 49 per cent of the welfare respondents were over 55 years of age, compared to 6 per cent of the provincial welfare sample in Winnipeg. In addition, this group of welfare recipients, as was the case in Winnipeg, was predominantly female. The fact that the single individuals in the Dauphin welfare sample were single by reason of widowhood, rather than divorce and separation, was consistent with this age distribution.

Both the guaranteed income recipients and the welfare recipients in Dauphin were more likely than their respective groups in either Winnipeg or the other rural dispersed sites to have no earnings, and they were less likely to have any employment. In Dauphin, 46 per cent of the guaranteed income recipients had no earnings compared to 29 per cent in Winnipeg.

With respect to ethnic composition, a large percentage of the Dauphin sample as a whole was Ukrainian (23 per cent). The percentage of the entire population of Dauphin who were Ukrainian was higher than this (40 per cent) according to the 1971 Census of Canada. In general, the level of education in Dauphin was lower than in Winnipeg. Only 25 per cent of the guaranteed income recipients and 10 per cent of the welfare recipients had 14 years of schooling or more. Relative to Winnipeg and to the other rural sites, Dauphin had a very high proportion whose first language is other than English.

The incidence of debts was much lower in Dauphin. However, while a significantly smaller percentage of guaranteed income recipients had debts, a higher percentage of the welfare sample had debts. A much higher percentage of the Dauphin sample had no financial assets, although a higher percentage of them own their own homes.

Summary: Although the sample of guaranteed income recipients resembles very closely the low-income population as represented by the control group, the welfare sample differs significantly in ways that could be anticipated with knowledge of the eligibility criteria for municipal and provincial welfare. These differences will be controlled for in subsequent analyses.

B. Data Collection

The data required for the study of stigma derived from four sources: the pre-experimental interviews, the seventh periodic interview conducted during the first months of the third year, a self-administered questionnaire completed at the same time as the seventh periodic, and the monthly income report form and payments data.

Data relating to the main explanatory variables, the behavioural response of officials of the program and other non-recipients in the community, and the behaviour patterns of recipients were collected through the self-administered questionnaire. This instrument was a type of multiphase survey, in which respondents, who were neither on the guaranteed

income program nor on welfare, received a questionnaire which did not contain any questions relating to contact with assistance programs since the values for these variables can be deemed to be zero throughout the period of concern in the analysis (Appendix A).

In general, the information sought in the questionnaire was the frequency with which the respondent did various things, whether he had ever done a particular thing, or whether he had been subject to certain types of behaviours on the part of others with whom he might have come in contact. The questions, then, were relatively straightforward, largely questions which elicited self-reports of behaviours or acts.

The development of the questionnaires was subject to two constraints. First, there was no opportunity to pretest the instruments on a sample of low-income families. Consequently the greatest possible use was made of the findings of previous studies and the knowledge of the interviewing team. Questionnaires used in previous studies were studied carefully with respect to the formatting, wording and response rate to the individual questions. The draft of the stigma questionnaire was examined by the interviewing team. Although the interviewers were not representative of the sample to be surveyed, they had had up to two years of experience administering structured interviews to this particular sample. Each interviewer provided written comments and suggestions, many of which were incorporated into the final version of the instruments.

The second constraint related to the manner in which the questionnaires were administered. The questionnaires were given to the respondents after the main interview, which was a rather lengthy and detailed questionnaire relating to a variety of individual economic variables. There was no extra incentive to complete the stigma questionnaire, and it was necessary to make clear to the interviewee that his participation in that part of the interview would not affect his status with respect to receipt of guaranteed income payments. Consequently, respondents fatigued by the main interview could refuse to answer the stigma questions without having to drop out of the experiment.

These self-administered questionnaires were given to each adult head of the family, to be filled out without consultation with anyone else in the family and during the time that the interviewer was at their home to conduct the seventh periodic interview (see Appendix B). In order to reduce the anxiety that recipients of welfare or guaranteed income might have had with regard to their comments on the assistance programs they were participating in getting back to program officials, the following procedures were adopted. First, respondents were reminded that all information they provided to the Manitoba Experiment would be kept confidential. Second, it was emphasized that their comments would never be shown to officials in the guaranteed income payments office and therefore could in no way affect their payments. Third, the only form of identification the respondents were asked for was their birth date; that is, their name or address or identification number were not printed on the

questionnaire. Finally, in an attempt to reinforce the impression of care and confidentiality, they were given a plain brown envelope in which to seal the questionnaire when it was completed.

The variables specified in the model of stigma can be grouped into the following sets: (1) program procedures (i.e., method of enrollment, method of payment, amount of payment), (2) program contact, (3) contact with individuals or agencies in the community, (4) response to the program, (5) involvement in the community, and (6) state variables or demographic characteristics. The following will very briefly describe the source of the data for each of these variables.

Program Procedures: The experiences of a recipient of social assistance are, to a great degree, determined by the legislation and procedures associated with a particular program in which he is enrolled. However, it must be recognized that recipients of any one program may experience different routines or procedures from one office or region to the next. Furthermore, the individual's own life situation (his needs and activities) will determine, to some extent, the particular subset of procedures as well as the frequency of contact with the program that he experiences. Because a range of variation in procedures exists, the respondents were asked detailed questions regarding the procedures and contingencies they personally faced in receiving benefits.

Respondents were asked directly how they received their payments, whether they received vouchers, whether any of their expenses were paid

directly and how regular their payments were (Appendix A, Questions 18 and 19). Differences in enrollment procedures among the guaranteed income participants were identified through payments records.

Contact with the Program: The recipients' contact with the assistance program can be characterized according to three aspects: length of time exposed to the program, frequency of contact with officials of the program, and the nature of the contact. The length of time that guaranteed income recipients had been on the program varied from one month to two years. This information was obtained from the payments records. However, it was necessary to ask welfare recipients directly when they first started receiving welfare payments (Appendix A, Question 12). With respect to the frequency of contact, both groups of recipients were asked directly how often they had phone or face-to-face contact with officials of their program. In the case of guaranteed income recipients (Appendix A, Questions 12-15), the questions were greatly disaggregated by reason for contact. This was done to ensure that the contact reported related to the guaranteed income payments program and not to the interviewing process. These questions which elicited the frequency with which recipients experienced personal contact with officials also distinguished between two types of contact — that which was initiated by the officials and that initiated by the client. Further data on the nature of the program contact were collected by a set of questions, asking recipients whether they had experienced various types of behaviours on the part of officials (Appendix A, Question 16). The types of behaviours referred to in formulating these questions were identified in previous studies as humiliating or status

lowering for the recipients (Briar, 1966; Health and Welfare Canada, 1971; Heppner, 1974; Wadel, 1973; The Canadian Civil Liberties Education Trust, 1975).

Contact in the Community: A set of questions was formulated regarding the frequency with which respondents encountered difficulties with individuals or agencies in the community (Appendix A, Questions 5-9). A variety of different types of agencies were covered: services where contact would be self-initiated and partly a function of variable individual need; universal services, in which user contact could be self-initiated or agency-initiated; financial institutions; and finally, landlords and merchants, who were expected to be the most significant individuals in the life situation of the recipient.

Response to the Program: Aside from dropping out of the program, which might be the strongest indication of the presence of stigma, there are a number of behavioural responses which typify stigmatizing programs: a passive and accepting stance to problems incurred on the program (Appendix A, Question 17); dependence on the program officers, as indicated by a high rate of client-initiated contact (Questions 14 and 15); and attempts to conceal from others their receipt of assistance (Question 20).

Community Participation: Questions were developed which were intended to elicit the number of formal organizations recipients attended (Appendix A, Question 20), the extent of their involvement in these organizations (Question 26), and the amount of time spent in various types of informal

activities. The questions relating to formal activities contain a list of organizations which was a summary of a comprehensive list of associations or groups in the Town of Dauphin. The purpose of the question, as it was formatted, was not to measure attendance or involvement in individual types of activities, but to ensure that all respondents had the same frame of reference when they were asked about their activities. The purpose of the question was to measure the incidence of participation in the "universe" of organizations. The primary interest underlying the questions relating to the recipients' patterns of social interaction (Appendix A, Questions 5 and 6) was in determining the relative amount of time spent by himself or with immediate family, and time spent at home or out in the community.

Supplementary Information: Previous studies tend to focus on the perceptual aspects of the stigmatization process rather than its behavioural manifestations. In order to be able to make some comparisons with these studies, the questions introduced by Handler and Hollingsworth (1969) were included (Appendix A, Question 21).

In addition, recipients were asked several questions designed to elicit their own ideas in an open-ended manner. Respondents were asked their reasons for enrolling in the particular program they were on, partly to check whether guaranteed income recipients viewed their participation differently from the welfare recipients because it was an experimental program. Respondents were also asked whether they would be willing to go on welfare or a guaranteed income program such as Mincome (whichever was applicable), if it would improve their income, and if not, why not. At the

end of the questionnaire, the respondents were encouraged to add any additional comments they might have about welfare or guaranteed income. The material from the open-ended questions was elicited in order to increase the interest of the recipient but also to check the validity of the questionnaire.

Control Variables: The major source of data for the demographic variables -- such as employment status, occupation, hours worked, financial assets, use of other government programs, family characteristics, reason for and activities during periods of unemployment -- was the seventh periodic interview instrument. This instrument provided extremely detailed information relating to the four months previous to the interview, from which aggregate variables could be constructed. In addition, the educational level achieved and ethnicity were derived from the pre-experimental interview. Finally, data generated by the payments system on family composition, family income, and payments amounts was linked with individual records.

The data required for this study were manually extracted from the seventh periodic instruments, the self-administered questionnaires and the baseline interview, and coded directly onto keypunch sheets. The payments data was manually coded and merged with the larger set. Throughout this process, various data cleaning procedures and quality checks were employed which are described in more detail in the methodological appendix (Appendix C).

Virtually all the errors detected resulted from keypunch errors which were correctible. The main data problem was the amount of missing data due to the failure to complete a module, a particularly troublesome problem in the Dauphin welfare sample, and the failure to complete all questions within the module.

Chapter IV

BEHAVIOUR PATTERNS OF SOCIAL ASSISTANCE RECIPIENTS

In the model of the stigma of social assistance developed earlier, the provision of assistance is conceptualized as a form of social exchange in which benefits are exchanged for social deference. The agency delivering the benefits is seen as the main source of aversive stimuli in the stigmatization process. The special nature of the contingencies faced by recipients is that they have meaning for their self-concept. Through their experiences with the agency, its procedures and the actions of the officials, recipients become aware of a loss of social status, of a new social identity. Some part of the recipient's behavioural repertoire then becomes an attempt to cope with these aversive responses.

The model led to the formulation of two very general hypotheses, the first regarding the relative impact of the stigma of welfare and guaranteed income on the social involvement of its recipients.³ The second relates the relative susceptibility of the two types of recipients to difficulties in the community.⁴ These general hypotheses were then broken down into two sets of sub-hypotheses, linking the specific program characteristics considered to be humiliating, to failure to participate in community organizations. Finally, a number of state variables were identified that could be expected to affect the association between program experiences and

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3 Hypothesis 1, as set out in Chapter II, page 53.

4 Hypothesis 2, as set out in Chapter II, page 54.

behaviour. The efficacy of the aversive characteristics of the delivery of social assistance and the value of the benefits are expected to vary according to these individual characteristics.

The purpose of this chapter will be to bring the data to bear on these hypotheses. The first section will consist of a broad comparison of welfare and guaranteed income recipients with respect to their social involvement in the community. The second section will summarize the findings regarding the series of sub-hypotheses. This will include an examination of the effect of the control variables upon the relationship found between type of assistance and participation. The last half of this chapter will deal with the hypothesis regarding the difficulties faced by recipients in the wider community.

A. Social Isolation

In general the study hypothesizes that guaranteed income recipients, who are not subject to many of the negative stimuli faced by welfare recipients through enrolment procedures and periodic contacts with the program, will not demonstrate the lower level of participation in community activities that is assumed to be indicative of the social isolation of the stigmatized.

Social isolation was measured in a number of ways. In order to obtain a measure of their involvement in organized activities in the community, all respondents were asked whether they attended, regularly or

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occasionally, each of seventeen types of group activities. This list of activities was used to create an index of community participation by summing the number of activities identified regardless of how frequent the participation was.

The data presented in Table 1 provide support for the general hypothesis that guaranteed income recipients will be more actively involved in organized activities than welfare recipients (Hypothesis 1, p.45). Guaranteed income recipients were more likely by 16 percentage points to be involved in two or more activities than welfare recipients, and they differed very little from the control group in terms of their level of activity. There was a greater tendency to be involved in community organizations in the rural sites except Dauphin, where participation was considerably lower for both the welfare recipients and the guaranteed income recipients. There was no difference between municipal and provincial welfare recipients in terms of their level of involvement.

Table 1: PARTICIPATION IN ORGANIZED ACTIVITIES

	Welfare	G.A.I. (5)	Controls
No Activities	30%	21%	23%
One Activity	27%	19%	15%
Two or More	44%	60%	62%
Total Number	165	1,243	506

5 The sample of recipients receiving the experimental guaranteed annual income benefits.

The lower level of activity did not occur across all activities. Welfare recipients were less active in sports clubs, cultural groups, business or professional associations and labour unions, while participating to the same degree as non-recipients in Home and School and neighbourhood associations. That welfare recipients were less involved in associations or unions is not surprising since only 25 per cent had any employment during the year.⁶ The fact that they were no less involved in Home and School or neighbourhood associations suggests that they continued to uphold their responsibilities as citizens, and it was their recreational or social activities that were relinquished.

Taking the sample as a whole, the individuals most often identified as being those that respondents spent time with were first, immediate family, and then relatives and other friends. The types of people least often included were workmates and neighbours. There were some differences from site to site. Winnipeg respondents were 15 per cent more likely to report spending no time with neighbours than respondents in rural areas, including Dauphin. They were 12 per cent more likely to identify other friends, as people they spent time with.

Breaking down the sample by recipient group reveals that the pattern of social interaction for welfare recipients differed somewhat from non-recipients and guaranteed income recipients, and from the controls.

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6. See the discussion of the sample in Chapter III, page 61.

Although immediate family members were still identified most frequently, the next most frequent response was spending time by themselves. Beyond this, the most significant differences between welfare and guaranteed income recipients were that welfare recipients were 20 per cent less likely to spend time with neighbours than guaranteed income recipients, 25 per cent less likely to spend time with other friends, and 7 per cent more likely to spend time by themselves. Although the differences between the welfare group and guaranteed income recipients were not always large, they were consistently in the same direction.

Cato Wadel (1973:76) has made the distinction between primary and secondary interpersonal relationships in his analysis of the stigma of unemployment. Primary relationships such as those with immediate family are ascriptive. The individual is accepted by his family members regardless of his role in the work world or the community. However, it is the recipient's ability to maintain other social relationships which reveals whether he has been able to maintain his status in the community. The data presented above reveal that both types of recipients were able to maintain their primary interrelationships. However, guaranteed income recipients were much more likely to maintain the secondary relationships with neighbours, workmates and friends and therefore we should expect them to be more likely to maintain their social status in the community. The differences between welfare and guaranteed income in this regard were greater in Dauphin than in Winnipeg.

The stigma effect of welfare, as indicated by the differences between the behaviour of welfare recipients and that of guaranteed income recipients, appeared to be greater in Winnipeg than in Dauphin, when participation in formal activities was used as the indicator, but greater in Dauphin, where informal interaction was the measure. This difference reflects the fact that informal activities formed a greater part of life in the rural town than they did in Winnipeg where the general level of involvement in formal activities tended to be higher.

Respondents were also asked to indicate how much of their spare time they usually spent at home, at community places, stores, movie theatres and at other people's homes. In terms of where respondents spent their time, other than at home, the most frequently mentioned places were stores and other people's homes. Community places and movie theatres were mentioned least frequently. There was no difference in this pattern from site to site or program to program. The most significant difference between welfare recipients and the other groups was in the percentage spending no time at community places. In Winnipeg, 55 per cent of the welfare recipients reported spending no time at community centres, compared to 36 per cent of the controls and 36 per cent of the guaranteed income recipients. Similar responses were observed among the municipal and provincial recipients.

There appeared to be small but consistent differences between welfare recipients and guaranteed income recipients across the various indicators of social participation. Welfare recipients were less likely to be

involved in organized activities in the community and were less likely to spend time with neighbours, other friends, workmates, and others outside their immediate family. They were more likely to spend a great deal of time by themselves, to spend time at home, and were less likely to spend time at other people's homes, at community places or at movie theaters. In general, the behaviour of the guaranteed income recipients differed very little from the non-recipients. Recipients of the guaranteed income program did not, as hypothesized, exhibit the same degree of social isolation as did welfare recipients.

B. Program Parameters

Because considerable variation was expected in the contingencies faced by recipients of the same program, as well as of different programs, the general hypothesis relating program type and social isolation was broken down into a number of hypotheses identifying specific program characteristics as factors in social isolation. Since participation in formal activities displayed the greatest variation among the subgroups of the sample, this measure was used as the behavioural indicator of social isolation.

Although the data supported the general hypothesis regarding the relative amount of social isolation associated with the welfare and guaranteed income programs, the analyses provided no evidence to support the hypothesized relationship between involvement in community activities.

and individual program characteristics.⁷ The data failed to demonstrate an association between participation in organized activities and the amount of the benefit (Hypothesis 1.1), the number of contacts made by program officials (Hypothesis 1.2), the frequency of late payments (Hypothesis 1.5), or the number of unpleasant experiences with program officers (Hypothesis 1.6).

It was hypothesized that the more control the program or agency assumes over the individual or family budgeting, the greater would be the tendency to withdraw from normal community activities (Hypothesis 1.3). An analysis of the welfare sample revealed that all but 14 welfare recipients had some expenses paid for directly. Therefore, there was not a sufficiently large number of recipients who did not receive direct payments to form a comparison group. Similarly, there were only 13 welfare recipients who received food vouchers, making it impossible to assess the importance of this program parameter in the stigmatization process.

Data measuring the degree of program comprehension were not available at the time of this report (Hypothesis 1.4). Thus a number of indirect measures were employed. If a lack of comprehensibility of the program contributes to the stigmatization process, one would expect greater social

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7. The set of hypotheses presented in Chapter II, pages 55 to 57.

withdrawal among those with lower levels of education, those whose first language is other than English, and those who feel uncertain about their eligibility. The data, however, showed no evidence of such relationships.

One possible interpretation of these findings is that it is not the individual program parameters, but the combination of them that produces the stigma. Individual recipients are not responding to discrete program procedures, but to the pattern, the combination of experiences they or others have encountered. However, further analyses yet to be discussed suggest that the indicator used to measure social isolation was not appropriate in the context of a study of welfare stigma.

C. Control Variables

The model suggests that the response to the program will vary depending on certain state variables which affect the efficacy of the rewards and sanctions involved in the receipt of assistance. The analysis of the demographic characteristics of the welfare and guaranteed income samples indicates that these groups differed substantially with respect to some of the state variables, such as age, marital status or family type and unemployment, which determine the significance of the reward or benefit for the individual. This section will discuss the possibility that the difference between welfare and guaranteed income recipients with respect to their tendency to be less involved in community activities can be accounted for by the differences in the value of the rewards and sanctions to the individuals who are on these programs.

Family types differ in the amount of social status they claim in the community. The group of welfare recipients contained a much higher ratio of single-headed family units, relative to double-headed families, than did the guaranteed income recipients. When family type was controlled in the analysis, the difference between the two programs, in terms of social activities increased in the case of single individuals and couples without children, but decreased for families with children (Table 2). If marital status was operating as a state variable, the weakest effect should occur within the marital type with the lowest status attached to it, the group with the least to lose. However, the data show that single-parent families exhibited the least effect, maintaining a surprisingly high level of activity regardless of the type of assistance they received.

Table 2: PERCENTAGE INVOLVED IN TWO OR MORE ACTIVITIES BY FAMILY TYPE

	Welfare	G.A.I.
Single Individual	21% (29)	56% (172)
Single Headed	53% (76)	55% (119)
Double Headed	45% (56)	64% (814)
Couple	25% (4)	46% (138)

The fact that single individuals and couples were the groups most greatly affected suggests that the presence of children may be a tie to community associations. Controlling for the presence of children under

sixteen years of age shows clearly that those individuals who had children were slightly more involved in community activities in general, and they tended to maintain a high level of involvement. The proportion of childless recipients on welfare who were involved in two or more activities was considerably lower than the proportion among guaranteed income recipients (Table 3).

Table 3: PERCENTAGE INVOLVED IN TWO OR MORE ACTIVITIES BY PRESENCE OF CHILDREN

	Welfare	G.A.I.
Children	51% (120)	63% (891)
No Children	24% (45)	52% (352)

This finding is consistent with the earlier observation that welfare recipients tend to maintain their involvement in Home and School activities while withdrawing from other areas.⁸

Controlling for age produced similar results. The difference between guaranteed income recipients and welfare recipients virtually disappeared for some age groups, the under 35's, but increased among those over 35 years of age. Age is commonly associated with greater social status in a

community. While differences in the age distribution do not explain differences in participation, there is some evidence of an interaction effect (Table 4). As might be expected, older welfare recipients were more susceptible to the stigma effect. The percentage difference between welfare and guaranteed income, in terms of the proportion of recipients involved in two or more activities, increases from 16 per cent to 25 per cent among this group.

Table 4: PERCENTAGE INVOLVED IN TWO OR MORE ACTIVITIES BY AGE

	Welfare	G.A.I.	% Difference
Under 35 Years	52% (69)	58% (719)	6%
35 Years and Over	38% (96)	63% (524)	25%
All Ages	44% (165)	60% (1,243)	16%

The difference in social participation between welfare recipients and recipients of guaranteed income may be, in part, a result of the fact that a greater percentage of welfare recipients were disabled and consequently restricted in their ability to participate. Disabled⁹ respondents were less likely, by 10 percentage points, to be active in community organizations than those not disabled. However, when being disabled was

9 A disabled respondent was defined as one whose disability caused him to be unemployed.

controlled for in the examination of participation rates, it appeared that disability reduced the original relationship slightly, but certainly could not account for the largest portion of the difference between welfare and guaranteed income recipients.

Respondents who had some period of unemployment were less active than those who were fully employed. Thus, the unemployed were already isolated from activities to some extent. When the analysis controlled for percentage of time unemployed the program effect was only evident among the employed. Those who were unemployed were less likely to be active, whether on the guaranteed income program or welfare. The percentage of time unemployed seemed to make little difference to the rate of participation, just the fact of being unemployed.

The evidence to this point indicates that there is a difference between welfare and guaranteed income recipients in the extent to which they maintain their involvement in community organizations. The analyses, however, found no association between social participation and any of the program parameters specified in the sub-hypotheses. Further analyses were conducted controlling for certain demographic characteristics by which the sample were known to differ. The data show that certain groups are more susceptible to stigma but because these are not the types of individuals that predominate in the welfare sample, this fact does not help to explain the greater social isolation among welfare recipients. Types of individuals more susceptible to the effect of the welfare stigma included families, or individuals without children, those over 35 years of age and

the employed. Older age groups and those with jobs are likely, under normal circumstances, to have more status in the community; therefore, they have potentially more to lose by the effects of stigma. The unemployed, typically, are not involved in social activities, and therefore there is little room for behaviour change. The behaviour of one-parent families might be explained by the fact that the option of withdrawing from activities is not always available. For example, the presence of children tends to tie parents to certain organizations such as Home and School.

These various factors suggest that participation in organized activities may not be a good indicator of the presence of stigma in that it is significantly affected by other factors. Among the comments made by respondents in some of the open-ended questions, there was the suggestion that the important deterrent to social participation was money:

"We hardly have enough money to live on, therefore can't participate in any social activities."

In light of this, it is worth examining the possible relationship between income and social participation. Table 5 demonstrates that there is indeed a direct relationship between average monthly family wage income and participation in formal activities.

Table 5: PERCENTAGE PARTICIPATING IN TWO OR MORE
ACTIVITIES BY AVERAGE MONTHLY WAGE INCOME OF FAMILY

	0-\$299	\$300-599	\$600-899	\$900-1199	\$1200-1499	\$1500+
Welfare	35% (85)	67% (9)	75% (4)	—	—	100% (2)
Mincome	49% (299)	58% (222)	59% (303)	67% (234)	70% (106)	73% (73)

The association between social participation and type of social assistance is likely a result of a number of factors, not the least of which is income.

D. Difficulties in the Community

The model of the stigma of social assistance that underlies this study identifies the welfare agency itself as the main source of stimuli in the stigmatization process. The procedures established, the behaviour of the officers and the level of the benefits are meaningful to the recipient in terms of his sense of self-worth. The delivery system also affects the visibility of the recipient to the wider community. Visibility is an additional contingency faced by recipients in their attempt to manage the stigma of social assistance. Previous studies of welfare experiences have identified the practice of requiring recipients to go to the welfare office, and the delivery of in-kind benefits, as procedures which reveal the recipient's identity to others in the community. The absence of these practices in a guaranteed income program led to the formulation of the

general hypothesis that recipients of such a program will tend to experience fewer difficulties with members of the community than welfare recipients.¹⁰ This section will examine the reaction that the two types of recipients evoke in the community.

Based on the series of questions regarding their use of and difficulties with various types of public services, a variety of professionals, landlords and various financial institutions, it would appear that individuals in the sample encountered few problems and difficulties. Within the control group, difficulties with "children's teachers" were mentioned most frequently, followed by problems with Autopact (the Manitoba Government automobile insurance scheme), the telephone company and doctors. Guaranteed income recipients were slightly less likely to encounter difficulties than members of the control group. However, there was a fairly consistent difference between the welfare respondents and the control group. In virtually every area covered by these questions, the incidence of difficulties reported by the welfare respondents was higher. Welfare recipients differed from the other groups to the greatest extent in the incidence of difficulties with social workers and the police.

With respect to various commercial institutions, the control group encountered more problems with banks than with other financial institutions, such as trust companies and credit companies. The largest

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¹⁰ Hypothesis 2 as set out in Chapter II, page 54.

difference among the groups existed with respect to credit, where 2 per cent of the control group reported difficulties, compared with 6 per cent of the welfare group. Finally, compared to the control group and guaranteed income recipients, welfare recipients had greater difficulties with landlords and renting arrangements.

In summary, the incidence of reporting difficulties with specific individuals or institutions was very low for all groups in the sample. The welfare recipients were only slightly more likely to report difficulties with any one specific institution than the other groups, but this was a consistent trend across all types of institutions.

By taking all the questions together and determining whether any difficulties were reported with any of the individuals or services, a summary measure was created which indicated whether or not the respondent had ever experienced difficulties. The data in Table 6 show that welfare recipients were more likely, by 10 per cent, to report some difficulties than guaranteed income recipients, and that the guaranteed income recipients were slightly less likely to encounter difficulties than the control group. Thus there is some support for the hypothesis that guaranteed income recipients encounter fewer aversive responses in the community.

Table 6: DIFFICULTIES ENCOUNTERED BY PROGRAM

	Welfare	G.A.I.	Controls
No Difficulties	53%	60%	63%
Difficulties	47%	40%	37%
Total Number	165	506	1,243

In fact, the guaranteed income recipients were slightly less likely to encounter difficulties than the controls. It is possible that the guaranteed income facilitated the meeting of payments for public services, and other financial obligations, simply by making a little extra money available. Some comments by recipients of guaranteed income suggest that, in general, they were able to breathe a little more easily --

"I found it would make it easier for my family to pay bills and live without so many money worries."

and, in particular, to budget for expenses --

"I do like being on Mincome because it helps our income to be more stable. I am a believer in guaranteed income providing I can work each day and earn a good living for the support of my family. The program has been very beneficial to us, not only financially but also to help us keep track of our use of our monies and how we spend it. It helps us think about what we are using our money for. It helps us to manage things better."

"I like it, keeps my budget fairly organized. I at least have some record of money received, and spent."

"Now we keep track of our income and we always know exactly how much is earned."

"I like the prompt payments, I can count on that. I am able to stay on a budget".

An examination of the number of difficulties experienced, in relation to the length of time the recipient had been on the program, produced evidence to suggest that the effects of these two programs on the recipients' experiences in the community were qualitatively different. Welfare recipients, who had been on that program for a long time (over two and a half years), appeared more likely to report difficulties than those who had only been on for less than six months. Although we were only able to observe guaranteed income recipients over two and a half years, the data did indicate a decreasing tendency to experience difficulties over time. Guaranteed income payments, by ensuring a stable and secure income, reduce the problems low-income families tend to face, rather than increase them as part of the stigmatization process.

The hypothesis regarding recipients' relative tendency to encounter difficulties was broken down into several sub-hypotheses, relating the frequency of difficulties to specific program procedures believed to contribute to the visibility of the recipient. To summarize these, it was hypothesized that recipients who (1) picked up their cheques, (2) received vouchers, or (3) had certain expenses paid directly, would tend to experience more difficulties with members of the community and consequently be more withdrawn.¹¹

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¹¹ This set of hypotheses is presented in Chapter II, page 57.

Among the guaranteed income recipients only 5 reported that they picked up their cheques at the office. This was not a routine procedure, therefore these individuals must have arranged to do this for some specific reason, such as in the event of a move or poor mail service. The data presented in Table 7 do not support the hypothesis that recipients who are required to go to the office to pick up their cheques become subject to more difficulties. The number of welfare recipients who are subject to this procedure are a small minority. The method of payment was mentioned, however, within the comments on the programs; for example, one guaranteed income recipient compared the two programs on this basis:

"The program is approached in a way in which the person receiving Mincome payments is never embarrassed or harrassed in any way. Receiving payments by mail is good."

Table 7: DIFFICULTIES ENCOUNTERED BY METHOD OF PAYMENT

	Welfare		G.A.I.		
	By Mail	Pick Up	By Mail	Deposit	Pick Up
No Difficulties	51%	58%	97%	98%	—
Difficulties	49%	42%	3%	2%	—
Total Number	107	31	1,016	163	5

The guaranteed income payments procedures did allow for deposit of the benefits directly into the recipient's bank account. The data revealed that this procedure was accompanied by an increase in the difficulties experienced with financial institutions and public services. The

introduction of the experimental guaranteed income program was monitored very closely in Dauphin. Certain information collected at that time may add significance to this finding. After the initial set of interviews with certain bank managers in the town regarding the possibility of using the direct deposit method, it was reported by the participant observer at the site that some of these managers were contemplating sending letters to all those recipients who had loans, to encourage them to increase their monthly payments on these loans while they were on the guaranteed income program. The method of direct deposit does have the potential for increasing the visibility of recipients in the financial circle of the community, an area where they already have considerable difficulty because of their low incomes.

The other two program parameters that were hypothesized to reveal the recipient's status were the procedure of paying certain expenses directly (Hypothesis 2.2), such as doctor's bills, and the use of food vouchers (Hypothesis 2.3). Among the sample of welfare recipients only 13 individuals received vouchers, a group too small for comparative analysis. The data from these very small samples supported the hypotheses. Throughout the remainder of the study, however, welfare benefits should probably be considered a combination of cash benefits and direct payment of expenses, in contrast with the guaranteed income, which consists purely of

cash benefits. In light of this, it should be noted that professionals and landlords; people who tend to receive direct payment, created more problems for welfare recipients compared to guaranteed income recipients.¹²

Although the data do not allow us to draw any conclusions regarding the role of certain program parameters in eliciting negative responses from members of the community, there is evidence in the data that welfare recipients in general are more likely to encounter difficulties. One aspect of the findings that is puzzling is that recipients in Dauphin had a lower propensity to report difficulties. It is precisely in this site that one would expect the recipient's status to be more generally known, and therefore, the recipient to experience more frequently the discriminating responses from others in the community. In small towns it tends to be more difficult to hide one's source of income and activities. Further, the respondents in Dauphin were not a dispersed sample, as was the case in Winnipeg and other rural communities. The probability that recipients would become known was greater. This finding is consistent, however, with other findings which will be presented later regarding the impact of stigma in Dauphin.

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¹² The incidence of specific types of difficulties is discussed in Chapter IV, page 98.

Table 8: PERCENTAGE OF RECIPIENTS REPORTING SPECIFIC DIFFICULTIES BY SITE

	Controls	Welfare	G.A.I.
Winnipeg	41% (405)	49% (121)	40% (944)
Dauphin	—	39% (28)	31% (387)
Rural Dispersed	39% (99)	50% (16)	37% (91)
All Sites	41% (506)	47% (165)	37% (1,422)

Certain individuals encounter difficulties more often than others for a number of reasons, having to do with their status in the community, their use of the program, their condition, poverty or their contact with others. An attempt was made to assess the extent to which various individual characteristics help to explain the relatively small differences between the recipient groups with respect to difficulties encountered.

When sex, age, marital status and the presence of children were controlled in the analysis, it became apparent that certain types of individuals were more likely to meet difficulties when on welfare. The greatest increase in the frequency of difficulties occurred among welfare recipients who were women, married and over 35 years of age. The likelihood of experiencing difficulties did not vary significantly among the guaranteed income recipients. The fact that it was those types of individuals within the control group, who normally encountered few difficulties, who encountered the greatest difficulties on welfare,

suggests that there are other sources of discrimination that mask the welfare effect within most groups. Some types of individuals tend to encounter more difficulties, even without being on welfare. Therefore, broad comparisons between welfare recipients and guaranteed income recipients understate the tendency of the receipt of welfare to increase the probability of experiencing difficulties.

Table 9: DIFFICULTIES EXPERIENCED BY DEBTS

	Welfare		G.A.I.		Controls	
	No Debts	Debts	No Debts	Debts	No Debts	Debts
No Difficulties	61%	43%	60%	62%	62%	59%
Difficulties	39%	57%	34%	38%	38%	41%
Total Number	92	73	412	1,006	130	376

An examination of the incidence of difficulties among the control group indicates that those who have debts tend to experience difficulties with only a slightly higher frequency (Table 9). However, if they also receive welfare, the likelihood of experiencing difficulties increases by 16 percentage points. The findings were similar with respect to housing subsidies. Those receiving housing subsidies were slightly more inclined to report difficulties. The receipt of welfare in addition increases this tendency. Surprisingly perhaps, it was the group of individuals who had jobs who were more likely to experience difficulties in the absence of social assistance. The combination of having a job and being on welfare

increased the likelihood of experiencing difficulties by 20 percentage points. The receipt of guaranteed income had no effect on the relative propensity of these different groups to experience difficulties in the community.

Findings discussed earlier revealed that family heads with children tended to maintain the same level of social participation, regardless of whether or not they were on guaranteed income. This could be interpreted to mean that mothers with children escape from the stigma. There is adequate evidence among the respondents' written comments that having children to care for was an acceptable reason for being on welfare. However, the following table demonstrates that those who have children also tend to experience a considerable increase in the number of difficulties they encounter. This further suggests that the continued high participation of families with children is not likely a result of being exempt from discriminating responses, but of having no options.

Table 10: DIFFICULTIES EXPERIENCED BY PRESENCE OF CHILDREN

	Welfare		G.A.I.	
	No Children	Children	No Children	Children
No Difficulties	76%	44%	63%	63%
Difficulties	24%	56%	37%	37%
Total Number	45	120	352	891

The general hypothesis regarding the role of the response of others in the community implies that increased difficulties would lead to increased social isolation. The data presented in Table 11, however, indicate that participation is greater among those who experience difficulties, regardless of whether the individual is a recipient of welfare or the guaranteed income.

Table 11: PARTICIPATION BY NUMBER OF DIFFICULTIES

	Welfare		G.A.I.	
	No Difficulties	Difficulties	No Difficulties	Difficulties
No Participation	32%	27%	23%	17%
One Activity	26%	27%	20%	18%
Two or More	41%	46%	57%	65%
Total Number	82	78	782	461

Withdrawal from organized activities may be a long-term effect. However, the evidence so far suggests: first, that certain groups are constrained to a minimum level of participation; and second, that participation may be a condition for experiencing difficulties. Experiencing difficulties is likely to be partly a function of the frequency of contact with others in the community. Table 12 suggests that the greater the tendency to be active in the community organizations, the greater the probability that an individual will encounter difficulties. Looked at in this light, some of the other findings begin to make sense. For example, those with jobs in the control group were more likely to experience difficulties. Among

welfare recipients those with jobs were less likely to withdraw from activities, the job being a significant tie to the community, and they were particularly susceptible to difficulties. The tendency to experience fewer difficulties in Dauphin may have been a result of the generally low level of participation in community activities in that site.

Table 12: DIFFICULTIES BY COMMUNITY PARTICIPATION

Number of Activities:	Welfare			G.A.I.		
	0	1	2+	0	1	2+
No Difficulties	57%	52%	50%	70%	65%	60%
Difficulties	43%	48%	50%	30%	35%	40%
Total Number	49	44	72	261	237	745

E. Other Behavioural Responses

Where behaviour is so constrained that the stigmatized cannot avoid interaction with "normals", an analysis of the behavioural response moves into the realm of impression management. Goffman makes the distinction between the discredited and the discreditable, the latter being those who believe that their stigmatized status is not immediately evident. The behavioural response in this case becomes guided by an attempt to control the information generated in the interaction, to conceal certain strategic pieces of information.

"I dislike telling people I'm on welfare and I prefer to say that I am retired. At times being on welfare presents some difficulty in writing cheques. So I don't mention that I'm on welfare."

Recipients of both the welfare and guaranteed income programs were asked whether they ever attempted to hide the fact of being on the program from significant others, including their parents; their children, friends, relatives and workmates. The data indicate that welfare recipients were 20 per cent more likely to report that they had attempted to hide the fact of being on welfare from the individuals listed than were guaranteed income recipients. Municipal welfare recipients had a greater tendency to do so than provincial welfare recipients (Table 13).

Table 13: ATTEMPTS TO HIDE PARTICIPATION

	Municipal	Provincial	G.A.I.
No Attempt	59%	69%	87%
Attempted to Hide	41%	31%	13%
Total Number	32	112	1,238

As might be expected, the tendency to hide the fact of receiving assistance was greatest among those most involved in organized activities in the community (Table 14). This association holds true for both the welfare recipients and guaranteed income recipients.

Table 14: ATTEMPTS TO HIDE BY NUMBER OF ACTIVITIES

Number of Activities:	Welfare			G.A.I.		
	0	1	2+	0	1	2+
No Attempt	74%	64%	64%	92%	91%	84%
Attempt	26%	36%	36%	8%	9%	16%
Total Number	46	39	61	258	236	744

Although the sample was very small, welfare recipients who had a job were twice as likely to attempt to hide their receipt of assistance than those without a job. This is consistent with the previous finding that the difficulties experienced by the workers increased considerably on receiving welfare assistance. Within the guaranteed income group, whether one had a job or not made no difference to the propensity to hide the recipient's status.

Table 15: ATTEMPTS TO HIDE BY EMPLOYMENT

	Welfare		G.A.I.	
	Not Employed	Employed	Not Employed	Employed
No Attempt	71%	35%	87%	87%
Attempt	29%	65%	13%	13%
Total Number	129	17	538	700

As the model was formulated, the degree of stigma associated with receiving assistance was assumed to be the extent of behavioural change evoked in the recipients. The hypotheses were developed to emphasize the importance of social acceptance by linking the rate of involvement in community organizations to the program parameters, which are believed to be important stimuli. The data suggest that the link between the recipients' experiences with the welfare agency and their social activities in the broader community are not strong, if they exist at all. The open-ended responses reveal that the restrictions faced by recipients are more basic, and have to do with the economic dimensions of their situation.

Recipients felt that one could not work and receive welfare at the same time, and, even if the rules allowed it, there were very real deterrents to doing so.

"Welfare refuses to allow me to work and declare what I pay my 13 year old for babysitting from my cheque. I end up losing all the money I have left after paying babysitting, bus pass and lunch. My children are penalized for working and earning a few dollars a month".

Another area of their life where they felt restrictions was in their role as parents.

"Also they have no right to tell me I shouldn't have any more children."

Typically the respondents' complaints are more general, however:

"Living on welfare it like you if I was behind prison. I mean by it where not free people. We have to do what they said and is no chance for a person to get off welfare because they don't give a person a chance to get on there or two feel. That how I think off welfare."

"I am finding it harder and harder to maintain my dignity when someone is telling me I am allowed or not allowed to do certain things."

The restrictions on recipients' behaviours are considered to have two effects. On the one hand, they are assumed to discourage others from enrolling in the program. Individuals not on welfare were aware of the types of restrictions faced by recipients, as illustrated by the following reasons given for not seeking welfare assistance.

"Too many problems with welfare plus it does not allow you to work."

"Because welfare is degrading. I would rather starve first. Also welfare must always be paid back or they put a lien on you and you must save receipts of payments or they still put a lien on you."

"It just means regulating purchasing."

"It may affect my situation at a later date, e.g., buying a house, credit availability, etc."

The alternative response is an increased dependency on the program itself. This may lead to a relatively high level of contact being initiated by the client. For example, a delivery system, which provides no public information regarding rules of eligibility and types of benefits.

available, forces the recipient to rely on communication with program officers for information regarding the effect of any change in his circumstances, on the amount or kind of benefits he can receive.

Another way in which client dependence is encouraged is through the process of paying the recipient's medical or rental expenses directly, or contacting other agencies or professionals on behalf of recipients. These procedures could very well encourage the recipients to become dependent on the judgement or intervention of welfare workers in other areas of their life. The amounts of client-initiated contact can be seen as a result of the rules or procedures, in the same way as program-initiated contact is viewed, but also as an indirect behavioural response to a complex of stimuli that led recipients to see themselves as not being capable of independent action or decision making, not being capable of budgeting for food or rent, and, consequently, to assume the stance of being dependent upon others to make decisions or contact people for them.

The data indicate that welfare recipients had a considerably greater tendency to call on the program officers than did guaranteed income recipients. This is in contrast to the small difference found between the two programs in terms of the frequency with which the officers initiated this contact.

Table 16: CLIENT-INITIATED CONTACTS BY PROGRAM

	Welfare	G.A.I.
No Contact	25%	53%
One Contact	12%	16%
Two or More Contacts	63%	31%
Total	146	1,238

Cato Wadel, in his study of unemployed welfare recipients, noted that welfare officers interpreted the gradual change in recipient behaviour the observed in the following manner:

"The first time they come to the office they may be shy, look down and talk quietly, on the whole looking ashamed. However after some time, they don't seem to mind at all; they even argue and demand. Eventually the people who are on able-bodied relief think that the government owes them a living."

Welfare officers tended to interpret this change as a sign of increased dependence and a loss of all pride. The alternative explanation put forward by Wadel is that recipients tend to make more requests as they come to realize they are being shut off from possibilities and alternatives outside welfare.

F. Summary

A pattern of behaviour does tend to emerge distinguishing the life situation of welfare recipients from that of guaranteed income recipients. Welfare recipients were less involved in organized activities in the community and spent less time with friends and neighbours outside their immediate family. The tendency to be less involved in community activities did not, however, appear to be associated with specific characteristics of the delivery of assistance. Although welfare recipients reported encountering difficulties more often than the guaranteed income recipients, the study was unable to demonstrate an association between experiencing difficulties and methods of delivering payments.

Thus, while the data support the general hypotheses regarding the relative degree of social isolation and discrimination associated with welfare and a guaranteed income, it failed to provide support for the hypotheses that these behaviour patterns were associated with specific program parameters. Kunkel indicates, in his discussions of the application of the behavioural model to the analysis of social change, that individuals are typically confronted by a number of schedules of reinforcement. Consequently, social participation may be more usefully examined in terms of alternative sets of schedules of reinforcement.

The fact that recipients, in their various comments, revealed a number of areas in which they restricted or altered their behaviour suggests that stigma does have behavioural consequences. However, indices of social

participation may not be sensitive to the presence of stigma. The areas most affected appeared to be work and consumer activities. Additional data might support an alternative hypothesis -- that social participation increases the probability of experiencing stigmatizing "schedules of reinforcement" and thereby stigma effects, such as attempting to hide participation and experiencing difficulties in the community. Finally, there is some evidence that recipients of welfare respond differently to the assistance program itself, initiating contact more frequently with the officers. In the next chapter, additional indicators of stigma will be examined in an attempt to investigate further the possible factors involved in the stigmatization process.

Chapter V

PERCEPTUAL ANALYSIS

The stigmatization process has been dealt with on two levels, the behavioural dimension, which is emphasized in the model developed in an earlier part of this paper, and the attitudinal or perceptual level which is the focus of many of the empirical studies reviewed earlier. The model of the stigma of social assistance set out in this work relates the behavioural aspects of the stigmatization process; and predicts that the behavioural patterns of the providers of assistance and the community at large, in reaction to the recipient, will induce a change in the recipient's behaviour, in particular, a withdrawal from social activities. The model implies that there is no need to examine internal feelings of embarrassment* or sense of discrimination.

Because previous studies, on the other hand, concentrated on the attitudinal dimension, several of their indicators of internal feelings of stigma were used in this study to ensure a capacity to compare the

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* The term "embarrassment" was used in the question the recipients were asked to respond to, and it will be repeatedly used throughout this paper to refer to this particular indicator of stigma. However, as the reader will perhaps become aware, it more accurately reflects a sense of shame or guilt, a much stronger feeling than is conveyed by the term "embarrassment". The comments of the recipients better convey this feeling of stigma; for example, the comments on pages 128 and 165.

findings. However, preliminary analyses of the data indicated that the differences between welfare recipients and recipients of guaranteed income were considerably greater with respect to these indicators than were the differences along the behavioural dimensions. Furthermore, the tendency on the part of recipients to feel embarrassed or to perceive discrimination was related to some of the program parameters hypothesized to be significant stimuli in the stigmatization process. After a review of the findings regarding the amount of embarrassment and discrimination associated with welfare and the guaranteed income program, this chapter will analyze these effects from the perspective of the model of social assistance.

A. Perceptual Indicators

Embarrassment: Recipients of both the welfare and guaranteed income programs were asked how often they felt embarrassment when they were with people who were not receiving social assistance. The difference between welfare and guaranteed income respondents in their responses to the question was dramatic. Recipients of welfare were more likely by 46 percentage points to report being embarrassed. Only 7 per cent of the guaranteed income recipients reported being embarrassed when with others not receiving a guaranteed income (Table 17). The level of stigma among welfare recipients found here is not very different than that found in previous studies. Handler and Hollingsworth found that 49 per cent of AFDC recipients experienced some feelings of stigma (1969:4). In the study of

welfare recipients in Montreal, 66 per cent reported feeling stigma (Heppner, 1974:117), compared to 53 per cent of the welfare recipients in this sample.

Table 17: FEELING OF EMBARRASSMENT BY PROGRAM

	Welfare	G.A.I.
Never Feel Embarrassed	47%	93%
Sometimes Feel Embarrassed	53%	7%
Total Number	140	1,204

The percentage of welfare recipients who felt embarrassed was considerably lower in Dauphin than in Winnipeg. Again this appears surprising, since the informal means of social control in smaller communities is assumed to be stronger than in the more impersonal large cities. It is assumed that recipients are more visible, that it is harder for them to remain anonymous in a small community. However, this follows the pattern observed in the analyses of the behavioural responses to the programs. The lower tendency to feel embarrassed is consistent with the finding that the respondents in Dauphin had a lower tendency to experience difficulties, a lower propensity to attempt to hide their status, and were less involved in informal social activities outside of their immediate family.

Table 18: PERCENTAGE FEELING EMBARRASSED BY SITE

Site	Welfare	G.A.I.	% Difference
Winnipeg	59% (104)	7% (847)	52%
Dauphin	26% (23)	8% (280)	18%
Rural Dispersed	64% (13)	3% (77)	61%

A possible reason for the apparently low level of stigma among welfare recipients in Dauphin is that those who were highly stigmatized, or who were affected the most, refused to complete the stigma questionnaire. There was a high refusal rate in Dauphin on this self-administered questionnaire, particularly among welfare recipients. This refusal process may have been selective, perhaps with the respondents suffering from shame or embarrassment being more likely to refuse to continue with this part of the interview. Because Dauphin is a small town there may have been greater fear among welfare recipients that their comments would get back to the welfare officers. Certain observations with respect to the data suggest that factors associated with the stigmatization process were also associated with the refusal process. Among the open-ended responses only 3 welfare recipients in Dauphin volunteered comments about their experience on the program, none of whom made any reference to their experience with the officers. In Winnipeg more than half the comments made by welfare

recipients criticized welfare for the way they were treated by the officers. This suggests that there may have been some under-reporting of problems associated with welfare.

The substantial difference between welfare and guaranteed income recipients, in their tendency to feel embarrassed or uncomfortable, persisted among all recipients regardless of their age, sex, marital status or employment history. This is in contrast to the impact that the two programs had on social participation, which was observed to be somewhat selective. For example, the fact of being on welfare rather than the guaranteed income program was found to have no effect on the social participation of female-headed one-parent families.

Among welfare recipients there was some variation, the recipients with the greatest tendency to report feeling embarrassed being males, couples with children and individuals who were employed. There was very little variation in the relatively low level of embarrassment exhibited by guaranteed income recipients, except in the case of the unemployed and the disabled (Table 19), who exhibited a greater tendency to report embarrassment.

Table 19: PERCENTAGE FEELING EMBARRASSMENT BY DISABILITY AND BY EMPLOYMENT

	Welfare	G.A.I.
Disabled	44% (44)	22% (123)
Not Disabled	53% (102)	8% (108)
With a job	88% (16)	5% (634)
Without a job	48% (124)	10% (520)

It is interesting to consider these variations in light of who the target groups for these two programs are. Both the welfare program and the guaranteed income program have particular groups to whom their benefits are aimed. In the case of welfare this is clear in the eligibility criteria and in the manner in which benefits are calculated. Persons in need, which is the general description of the target group, are largely considered to be those who cannot work because of illness or disability and mothers with dependent children. Although the guaranteed income program is often envisaged as a universal type of assistance, the level of the benefits and the built-in incentive to work via the tax-back rate clearly make it most appropriate for those who are working but not earning enough to support a family. It is interesting that the types of individuals who experience embarrassment on these two programs are those falling outside the target groups for each. The unemployed and the disabled who are the focus of attention in the welfare system are more embarrassed on the guaranteed income program. The process of self-reporting of income and earnings each

month might, for those who have no earnings to report, reinforce any embarrassment at being dependent. This monthly reporting system would certainly be a reminder of their inability to earn. In the eyes of the recipients these programs may be viewed quite differently.

Discrimination: Respondents were asked whether they or their children ever encountered "difficulties or problems with people or businesses in the community" which they thought happened because they were on welfare or the guaranteed income program. Among the welfare recipients, 30 per cent as opposed to 3 per cent of the guaranteed income recipients reported such experiences. There was virtually no difference among the three sites. There was, however, considerable difference between municipal and provincial welfare. Of the municipal welfare recipients, 19 per cent experienced difficulties compared to 34 per cent of the provincial welfare group. This indicator of stigma was used by Handler and Hollingsworth in their study of the stigma experienced by AFDC recipients in the United States. In that previous study, the findings indicated that 20 per cent of the recipients felt some discrimination (Handler and Hollingsworth, 1969: 5).

Table 20: DISCRIMINATION PERCEIVED BY TYPE OF ASSISTANCE

	Welfare	G.A.I.
Never Perceived Discrimination	70%	97%
Sometimes Perceived Discrimination	30%	3%
Total Number	139	1,199

It could be argued that the people most likely to be eligible for welfare are also the most likely to have difficulties in their everyday life situations. The data indicated that, when age, employment, marital status and rental subsidies were controlled, there was an interaction effect such that the difference in the tendency to report discrimination on the part of guaranteed income recipients and welfare recipients was greater for certain types of individuals. The variation in the program differences was largely due to the greater propensity on the part of welfare recipients who were employed, under 35 years of age, married with children and living in subsidized housing to report discrimination. The tendency to perceive discrimination among guaranteed income recipients was very low and did not vary from one type of recipient to the next.

For example, when the analysis controlled for employment status, the difference between respondent groups persisted. In the case of those with a job, the difference in the tendency to perceive discrimination increased due to the fact that welfare recipients with jobs were more inclined to report feeling discrimination (Table 21).

Table 21: DISCRIMINATION BY EMPLOYMENT

	Welfare		G.A.I.	
	Employed	Unemployed	Employed	Unemployed
Never Perceived Discrimination	63%	71%	97%	98%
Sometimes Perceived Discrimination	37%	29%	3%	2%
Total Number	16	123	516	683

Similarly, for the two broad age groups, Table 22 shows the greater tendency among the under-35's on welfare to report discrimination. In general, the welfare recipients who did tend to perceive discrimination were the same types of respondents who were more active in organized activities in the community.

The fact of being on welfare and being active in the community increases the probability of the recipient perceiving discrimination, as it also increases the probability of encountering difficulties. Being on the guaranteed income program and maintaining a certain level of community participation does not have the same effect. The extent to which welfare or guaranteed income recipients participate in organized activities did not appear to influence the probability that they would feel embarrassment.

Table 22: DISCRIMINATION BY AGE

Age:	Welfare		G.A.I.	
	Under 35	35 and Over	Under 35	35 and Over
Never Perceived Discrimination	64%	74%	97%	98%
Sometimes Perceived Discrimination	36%	26%	3%	2%
Total Number	58	81	790	533

Table 23: DISCRIMINATION BY SOCIAL PARTICIPATION

Number of Activities:	Welfare			G.A.I.		
	0	1	2+	0	1	2+
Never Perceived Discrimination	79%	73%	62%	98%	96%	98%
Sometimes Perceived Discrimination	21%	27%	38%	2%	4%	2%
Total Number	42	37	60	250	227	722

In summary, if the study were to rely on the perceptual indicators used in previous studies of the stigma of social assistance, the data would support the general hypothesis that a guaranteed income program would be less stigmatizing than welfare. The perceptual effects of stigma differ greatly between welfare and guaranteed income recipients. Welfare recipients felt more embarrassment and had a greater tendency to report that they experienced difficulties due to their receipt of assistance. In addition, the findings based on the perceptual data differ from those relating to the behavioural effects in that they are not restricted to certain types of individuals, although the tendency to feel discrimination was greater for those welfare recipients who were more active in the community.

B. The Impact of Program Parameters

It was hypothesized that certain characteristics of the delivery of income assistance contribute to the stigmatization process and that this would be revealed through an analysis of the relationship between indicators of social isolation and various program parameters. The data reviewed in the previous chapter did not support these hypotheses. The analyses suggested that the behavioural differences in participation in organized activities were restricted to certain types of individuals such that the difference between welfare and guaranteed annual income, on the basis of the entire sample, was not large.

This section will test the series of hypotheses regarding the role of the size of benefits, program contact, method of payment, irregular payments, program comprehension and other aversive procedures in the stigmatization process using the sense of embarrassment and perceived discrimination as the measures of the stigma effect.

Size of the Benefits: It was hypothesized that the level of benefits received by the recipient would be a stimulus in the stigmatization process in that it would be taken as an indication of their low social worth (Hypothesis 1.1). The following comment made by one of the welfare recipients suggests that recipients do in fact make these kinds of interpretations.

"I dislike welfare, it is degrading. Surely I should have an income that compares to Old Age Pensions if not better. My needs and that of my daughter are greater than that of Old Age Pensioners. I would like to have adequate income and have welfare provide all my health needs. My health has failed me, I have an incurable skin disease, arthritis, have had cancer. Surely we are entitled to live in dignity. When a serious health problem exists I see no reason for degrading poverty such as I have had to cope with. Welfare such as I've had to cope with is inhuman."

However, the cross-tabulation analysis of the association between the tendency to feel embarrassed and average monthly payment does not provide support for this hypothesis (Table 24).

Table 24: PERCENTAGE FEELING EMBARRASSED BY AVERAGE PAYMENT

	0 to 10	11 to 99	100 to 199	200 to 299	300 to 399	400+
Welfare	—	46% (20)	37% (30)	72% (36)	58% (26)	46% (26)
G.A.I.	2% (262)	5% (401)	8% (256)	8% (183)	19% (63)	17% (30)

Where there was an association between the actual amount of the payment and the feeling of stigma among the guaranteed income recipients, the data indicated that the tendency was to exhibit increased embarrassment as the size of the guaranteed income payment increased. The relationship between the size of the welfare benefit and embarrassment, however, is not clear.

The findings were very similar with respect to the association between the tendency to perceive discrimination and the average amount of payment. (Table 25).

Table 25: PERCENTAGE WHO PERCEIVE DISCRIMINATION BY AVERAGE PAYMENT

	0 to 10	11 to 99	100 to 199	200 to 299	300 to 399	400+
Welfare		50% (20)	28% (29)	39% (36)	35% (26)	27% (26)
G.A.I.S.	10% (263)	2% (400)	2% (256)	6% (181)	6% (63)	10% (30)

Seven payments plans were used in the Manitoba Experiment combining three different support levels and tax-back rates. Consequently, the guaranteed income recipients in our sample were experiencing benefit programs of varying generosity in terms of the potential standard of living they supported. If the plans are ranked according to their break-even levels -- the income level the family must attain before their benefits are reduced to zero -- it is possible to compare the amount of stigma experienced with the potential standard of living the recipient faces (Table 26).

Table 26: PAYMENT PLANS GENEROSITY

	Support Level	Tax Rate	Break-Even
1	\$5,994	.75	\$7,996
2	\$7,104	.75	\$9,472
3	\$4,884	.50	\$9,768
4	\$5,994	.50	\$11,988
5	\$4,884	.35	\$13,954
6	\$7,104	.50	\$14,208
7	\$5,994	.35	\$17,125

A cross-tabulation analysis of the association between each of these perceptual indicators and the treatment plan revealed no clear evidence that the generosity of the benefit structure affects the propensity of respondents to perceive discrimination or feel embarrassed.

Neither the responses of the welfare recipients nor those of the guaranteed income recipients supported the hypothesis that lower levels of assistance lead to a greater sense of stigma. Any effects that the size of benefits might have could well have been suppressed by other factors. The size of the average payment is a function of a number of individual characteristics, such as the size of the family and its earnings. Further, the method of calculating benefits differs considerably from the welfare program to the guaranteed income program.

In Manitoba the welfare payments were calculated using a "budget deficit method". If the total cost of the applicant's basic necessities (food, clothing, shelter, utilities and fuel, personal needs and household

supplies), as laid down in the regulations of the Social Service Act, exceeded his total financial resources, then he received an allowance. The maximum allowance available to a family of four (January 1975) was \$3,991. This can be compared to the guaranteed income support levels at that time which were \$3,800, \$4,800 and \$5,800 for a family of four with no income.

The programs differed in terms of how they treated earned income. The welfare program allowed an earnings exemption of \$50 a month. Earnings above that amount were taxed at a rate of 100 per cent. The recipient's benefits were then reduced by the amount earned over \$50. The guaranteed income program used in the Manitoba Experiment did not have a basic exemption, but rather taxed earnings at a rate no higher than 75 per cent. Thus, guaranteed income recipients always retained some portion of what they earned at the same time that they received benefits.

The data show that the average monthly welfare payment was considerably higher than the average guaranteed income payments; welfare recipients received an average of \$214 (or \$2,568 annually), whereas the average monthly guaranteed income payment was \$117. There was a considerable difference between municipal and provincial welfare, the average monthly payment being \$166 for municipal welfare and \$254 for provincial welfare. In addition, there was considerable variation in the amount of provincial welfare benefits and guaranteed income payments from site to site (there were only three cases on municipal welfare outside of Winnipeg). In the case of provincial welfare, recipients in Dauphin received \$194, which was considerably less than recipients in either

Winnipeg (\$283) or the rural dispersed sites (\$292). Recipients in Winnipeg received on the average \$130 in guaranteed income payments, compared to \$95 in Dauphin and \$60 in the rural dispersed sites.

A large percentage of the welfare recipients were single female-headed families with no earnings, which might be thought to account for the difference in average payments. However, guaranteed income recipients in this category also receive less than those on provincial welfare (Table 27).

Table 27: AVERAGE MONTHLY PAYMENTS BY FAMILY TYPE

	Municipal Welfare	Provincial Welfare	G.A.I.
Single Individual, Non-Earner	\$121	\$123	\$105
Single Female Head, Earner	\$ 62	\$283	\$117
Single Female Head, Non-Earner	\$250	\$286	\$267
Single Male Head, Non-Earner	—	\$243	\$262
Single Male Head, Earner	\$146	\$355	\$ 90

Among single-headed families, only single male head non-earners receive more on guaranteed income than on welfare (there are only three such units on the guaranteed income program and two on welfare in the sample of recipients). Among the double-headed families, only

double-headed families with one earner received more on guaranteed income — an average of \$289 monthly compared to \$220 on provincial welfare (there were only 11 such cases on welfare in this sample).

In summary, the data clearly indicate that for those families that welfare is designed to help, welfare benefits were higher than the guaranteed income payments, yet these more generous benefits were associated with greater embarrassment. These were essentially one-parent families with very little income. Because of the tax-back rate of less than 100 per cent in the guaranteed income scheme, the double-headed families with an earner were likely to receive more from that program.

In terms of the hypothesis that the actual amount of the benefit is an aversive stimulus in the stigmatization process (Hypothesis 1.1), there was little support in the data. However, the respondents' comments did indicate that meaning for their self-worth was drawn from the level of the benefits. Furthermore, welfare recipients tended to view their benefits as inadequate more often than guaranteed income recipients.

Perceived Adequacy of Benefits: Recipients were asked how often they worried about whether their next month's payments would be adequate to meet their expenses. The responses indicated that, despite the fact that the guaranteed income plan introduced in Manitoba was of a temporary and experimental nature, and that the amount of the benefits was, on the

average, almost one half the average monthly welfare benefits, a smaller percentage of the guaranteed income recipients reported being concerned about whether their next month's payments would be adequate (Table 28).

There was a difference of 20 per cent between the proportion of welfare recipients who worried about the adequacy of their benefits compared to guaranteed income recipients. Provincial welfare recipients worried slightly less than municipal welfare recipients.

Table 28: PERCEIVED ADEQUACY OF BENEFITS

	Welfare	G.A.I.
Never Worry About Adequacy	33%	54%
Sometimes Worry About Adequacy	66%	46%
Total Number	122	1,272

Further analysis of these data indicated that there was a greater tendency to feel embarrassed and to sense discrimination among those who perceived the benefits to be inadequate (Table 29).

Table 29: PERCEPTUAL INDICATORS BY PERCEIVED ADEQUACY OF BENEFIT

	Welfare		G.A.I.	
	Perceived Adequate	Perceived Inadequate	Perceived Adequate	Perceived Inadequate
Sometimes Embarrassed	23% (30)	65% (99)	2% (684)	13% (499)
Perceived Discrimination	13% (40)	38% (98)	1% (684)	5% (493)

The findings with regard to the amount of the benefit raise two related questions: first, why the tendency to feel embarrassment increased rather than decreased with the size of the guaranteed income payment; and second, why welfare benefits which were on the average larger than the guaranteed income benefits were more likely to be perceived as inadequate.

The relationship between perceived adequacy and the average monthly payment suggests increasing insecurity with an increased size of payment. Up to an average of \$200 to \$299 a month, there is an inverse relationship between the amount of the payment and the probability that the payment will be viewed as adequate (see Table 30).

Table 30: PERCEIVED ADEQUACY BY AVERAGE MONTHLY PAYMENT

	\$0-10	\$11-99	\$100-199	\$200-299	\$300-399	\$400+
Never Worry	80%	56%	43%	34%	37%	44%
Sometimes Worry	20%	44%	57%	66%	63%	56%
Total Number	278	432	294	223	92	57

In examining the difference between programs in terms of the adequacy of benefits, if we standardized for the amount of the payment, this difference is reduced from 22 per cent to 13 per cent (see Table 31). This would suggest that the actual size of the benefit contributes to the insecurity felt by the recipient.

Table 31: PERCEIVED ADEQUACY BY PROGRAM
STANDARDIZED ON AVERAGE MONTHLY PAYMENT⁽¹³⁾

	Welfare	G.A.I.
Never Worry	33%	47%
Sometimes Worry	66%	53%
Total Number	122	1,272

13 The procedure of standardization used here is described in Morris Robenberg, "Test Factor Standardization as a Method of Interpretation", Social Forces, 41 (1962), pp. 58-61.

The positive association found between the size of the guaranteed income benefits and embarrassment, and between benefits and perceived discrimination, is contrary to the hypothesis that higher levels of benefits reflect higher social worth and thereby reduce the amount of stigma. However, this finding can be interpreted differently, knowing that recipients perceive larger benefits to be inadequate and that their sense of embarrassment is associated with inadequate benefits that are perceived to be inadequate.

The benefit structure of the guaranteed income is such that payments increase only as earnings decrease. The fact that the tendency to feel embarrassment and perceive benefits as inadequate increases with the size of the payment suggests that it may be earnings, not assistance benefits, that have meaning for the recipient's self-image.

The guaranteed income program was designed largely as a supplement for the working poor. Both the rules of eligibility and payments calculations suggest that there should have been a higher proportion of recipients who were only partially dependent upon the benefits as they should have had other wage income. They would, therefore, be expected to be less concerned about the size of the benefit (Table 34).

An alternative measure was created which indicated the proportion of the family's income that was made up of social assistance benefits, and this ratio was used to analyze the relationship between the size of the

benefit and the tendency to perceive the benefits as inadequate. Table 32 indicates that there was a considerable difference between the programs in terms of the financial dependence of the recipients.

Table 32: PROGRAM DEPENDENCY BY PROGRAM

	Welfare	G.A.I.
Low (less than .33)	19%	84%
Medium (.34 to .66)	33%	8%
High (over .66)	48%	8%
Total Number	90	1,232

In order to test this interpretation, that adequacy may be related to dependence and thus indirectly to earnings, we standardized on the welfare group using the test factor, degree of dependence on the program. By comparing Tables 28 and 33, it is possible to see that at least one half of the original difference between these groups has vanished, indicating that the degree of dependence partly accounts for the relationship between the perceived adequacy of the benefits and the program. This is consistent with the finding that the degree of insecurity increases with the size of the payment in the case of guaranteed income, and the finding that the highest degree of security occurs with the least generous plans.

Table 33: PERCEIVED ADEQUACY OF BENEFITS BY
PROGRAM STANDARDIZED ON THE DEGREE OF PROGRAM DEPENDENCE

	Welfare	G.A.I.
Never Worry	33%	42%
Sometimes Worry	66%	57%
Total Number	122	1,272

The generosity of the treatment plan experienced by guaranteed income recipients was found to be unrelated to feelings of embarrassment or discrimination. Consequently, it might be assumed that the benefit structure had no direct meaning for the recipient in terms of his self worth. The generosity of the treatment plan did, however, seem to have some meaning in terms of the financial security it provided. The data suggest that the benefits of the more generous plans are more frequently considered inadequate by those receiving them. The inverse relationship between the perceived adequacy of the benefits and the generosity of the plan, although statistically significant, is not very strong (Table 34).

Table 34: PERCEIVED ADEQUACY OF BENEFITS BY TREATMENT PLAN GENEROSITY

	Lowest	2	3	4	5	6	Highest
Tax Rate	75%	50%	75%	50%	35%	50%	35%
Support Level	\$5,997	\$4,884	\$7,104	\$5,994	\$4,884	\$7,104	\$5,994
Worried About Adequacy	30%	44%	30%	49%	36%	40%	56%
Total Number	127	489	88	202	99	91	95

The highest incidence of insecurity was with the most generous treatment plan, which has the lowest tax rate and the middle support level. The highest degree of security occurs among the least generous plans -- the two plans with the highest tax rate. These are also the programs where the degree of dependence is decreased most rapidly through the tax-back rate.

The tendency to feel embarrassed was also found to be directly related to this measure of financial dependence among guaranteed income recipients (Table 35). Among welfare recipients, there was a large number for whom no payments data were available, so that the sample was too small for any conclusive analysis.

Table 35: FEELINGS OF EMBARRASSMENT BY PROGRAM DEPENDENCE

	Dependence on Welfare			Dependence on G.A.I.		
	Low	Medium	High	Low	Medium	High
Never Embarrassed	25%	46%	44%	95%	88%	81%
Sometimes Embarrassed	75%	54%	56%	5%	12%	19%
Total Number	16	28	41	1,002	103	93

The relationship between discrimination and program dependence was not as clear, for either welfare recipients or guaranteed income recipients (Table 36).

Table 36: PERCEIVED DISCRIMINATION BY PROGRAM DEPENDENCE

	Dependence on Welfare			Dependence on G.A.I.		
	Low	Medium	High	Low	Medium	High
Never Perceived Discrimination	62%	71%	68%	98%	92%	95%
Sometimes Perceived Discrimination	38%	29%	32%	2%	8%	5%
Total Number	16	28	40	997	103	93

Program Contact: Previous studies of the experiences of welfare recipients revealed that an important source of negative stimuli in the receipt of welfare was the contact with program officials. In the welfare situation they are often perceived to have a considerable amount of

discretion with regard to determining eligibility and need, and are the only source of information about the program. If this contact is typically unpleasant to the recipient -- that is, ~~it~~ conveys an image of the recipient as socially unacceptable -- the frequency of the contact may have an effect on the degree of stigmatization (Hypothesis 1.2), as indicated by the degree of embarrassment or discrimination perceived.

There is little support for the hypothesis that the frequency of contact itself is an aversive stimulus. The data show no association between the amount of program-initiated contact and feeling of embarrassment. There was, however, a greater tendency to report discrimination among those welfare recipients who reported at least some program contact in the last year (Table 37).

Table 37: PERCEIVED DISCRIMINATION BY PROGRAM CONTACT

Number of Contacts:	Welfare			G.A.I.		
	0	1	2+	0	1	2+
Never Perceive Discrimination	80%	54%	63%	98%	98%	97%
Sometimes Perceive Discrimination	20%	46%	37%	2%	2%	3%
Total	61	13	65	649	202	348

The assumption that a self-reporting system would require less personal contact between officers and clients of the program was only partly borne out by the data (Table 38). It is interesting that, while

welfare recipients were more likely, by 16 percentage points, to be contacted by their program than guaranteed income recipients, they were 32 per cent more likely to contact the office on their own initiative. If the sample is broken down in order to distinguish provincial from municipal welfare recipients, it becomes apparent that guaranteed income recipients were only 6 per cent more likely to avoid any contact than provincial recipients. Thus, it would appear that the difference between the guaranteed income and welfare, with respect to the personal contact that accompanies each program, results from the lower frequency with which the clients contact the guaranteed income program (client-initiated contact), together with the very high frequency with which the municipal welfare office contacts recipients (program-initiated contact).

Table 38: PROGRAM CONTACT BY PROGRAM

Amount of Contact	Welfare	G.A.I.
No Contact	46%	55%
1 Contact	9%	14%
2+ Contacts	45%	29%
Total	146	1,238

The frequency with which the program contacts recipients is likely to be a function of the procedures of the program, but will also be a function of the type of situation the recipient is in. For example, if we control for the number of earners in the unit -- no earners or at least one earner -- the data provide evidence that earners were more likely, by 22

percentage points, to be contacted by the welfare office than non-earners. This difference is not evident among guaranteed income recipients. The longer one has been on welfare, the less likely one is to be contacted by the office. Again, there is no difference with respect to this variable within the guaranteed income group.

The frequent contact and discretionary power given welfare workers serve the purpose of tailoring the social assistance to the client's needs. The situation of the part-time or full-time earner within the framework of the welfare system is far more complicated than that of a family with no alternative source of income. Consequently, it would appear reasonable that such recipients would tend to experience more contact; and the longer one is on welfare, the more established are the benefits a family receives. The guaranteed income concept has been presented as being a more objective method of delivering assistance. The data seem to support this in that the frequency of contact did not vary with individual characteristics.

Program contact was thought to be related to the degree of program comprehension exhibited by recipients, particularly in the guaranteed income group, where inability to comprehend rules and procedures would inevitably lead to errors in reporting, and, consequently, the necessity for the program officers to contact the recipient to clarify information provided. Because there was no measure of program comprehension, the association between frequency of contact and program was standardized on years of schooling (i.e., less than seven years, seven years or more).

Level of education was not a factor in the relationship. However, the data do indicate that the self-reporting system is accompanied by a relatively high level of contact on the part of payments officers, mainly to clarify aspects of the income report forms received from recipients. This contact is, in contrast to welfare, relatively universal and does not appear to be associated with feelings of stigma.

Nature of the Contact: The model of the stigmatization process outlined earlier relates the stigma effects to the behaviour of the officials of the welfare program. It was hypothesized that the more recipients experience responses on the part of the program officials reflecting a lack of trust or a lack of respect, the more the recipients would be affected by the stigmatization process (Hypothesis 1.6). Previous studies of the experiences of welfare recipients highlighted a variety of behaviours and responses of welfare officers that recipients considered humiliating or degrading. These were presented in a list of items and recipients were asked to indicate which they had experienced.

The data provide evidence of a clear association between the feelings of embarrassment and sense of discrimination and negative experiences with program officers. Those recipients who reported incidents with program officials had a greater propensity to feel embarrassed or perceive discrimination in the behaviour of others.

Table 39: EMBARRASSMENT BY NEGATIVE PROGRAM EXPERIENCE

Number of Experiences:	Welfare			G.A.I.		
	0	1 to 3	4+	0	1 to 3	4+
Never	71%	36%	30%	96%	88%	—
Some	29%	64%	70%	4%	12%	—
Total Number	30	66	40	834	365	5

Table 40: PERCEIVED DISCRIMINATION BY NEGATIVE PROGRAM EXPERIENCES

Number of Experiences:	Welfare			G.A.I.		
	0	1 to 3	4+	0	1 to 3	4+
Discrimination:						
Never	79%	79%	47%	99%	95%	—
Sometimes	21%	21%	53%	1%	5%	—
Total Number	33	66	40	831	363	5

The assumption that guaranteed income recipients would be treated differently (or would perceive the treatment they received by the program in a different light) than welfare recipients is given some support by the data. Significant percentages of welfare recipients reported (a) having been made to wait for long periods of time in the welfare office before receiving attention, (b) being required to provide proof of things such as income or marital status, and (c) being subject to unannounced visits by welfare officials. The only unpleasant experience reported by any number

of guaranteed income recipients was requests for proof of income. Welfare recipients were more likely by 43 percentage points to report negative treatment by officials of the program.

This measure of the treatment recipients experience from officers of the social assistance program was based on the common experience of welfare recipients as reported by previous studies. Respondents were also given an opportunity in this study to make any comments they wished regarding their experience with social assistance. These responses were categorized and tabulated. The first observation to be made is that all comments regarding welfare by welfare recipients were criticisms, whereas only 21 per cent of the guaranteed income recipients made unfavourable comments about that program. Among the welfare comments, 54 per cent were related to the way recipients had been treated by the program officers. These comments provided some evidence of the validity of the structured questions regarding welfare experiences. Among the things that welfare recipients did not like were the unannounced visits of welfare workers, and the tendency of workers to criticize the way they did things, to treat them like handout cases, to ask personal questions, and to try to tell them what they could or could not do. The poor attitude of the officers was mentioned by only 1 per cent of the guaranteed income recipients. Approximately 33 per cent of the welfare recipients simply referred to the overall attitude of the workers in comments such as:

"I dislike being on welfare for the reasons being a lot of times when my husband and I would go to see them the interviewers were rude".

or

"Received the impression that I was not trusted and that I had to prove my movements to welfare. Some counsellors seem to be very impersonal and cold."

In this latter comment, the recipient is clearly perceiving an image of himself projected by the behaviour of the welfare officers. Recipients perceived the workers to be unsympathetic and less than helpful. Among their reasons for not complaining about these aspects of their experience with welfare were comments such as:

"They wouldn't listen anyway."

or

"I just didn't feel it could make any difference as I have a worker that does not care what happens."

Some recipients attributed the cause of the worker attitude to be lack of experience with life.

"If they had married people interviewing, it seems to me that they would understand better the situation easier, not that I am complaining but it is my opinion."

Others were far less charitable:

"I dislike being on welfare due to the way that I have been treated by the workers. As far as I am concerned, the workers are ignorant and completely unsuitable for their positions. I believe if they had a bit of experience (I mean experience in living without) they

might have a better understanding. People are not herded cattle on a box and should not be treated as such."

The comments of the welfare recipients presented a picture of the experience of being on welfare that closely resembles the findings in two previous studies: Cato Wadel's study of a Newfoundland recipient (Wadel, 1973) and the in-depth interviews of AFDC clients in the United States (Briar, 1966). The difference between welfare and the guaranteed income program, where the number of critical comments was very low, was reflected in the more objective measure discussed earlier.

Certainty Regarding Eligibility: It was hypothesized that the more certain or knowledgeable the recipient is of the factors determining his eligibility and the calculation of his benefits, the less stigmatized he will tend to be (Hypothesis 1.4). Recipients were asked how often they worried about how long they would continue to be eligible for benefits.

Welfare recipients are more likely, by 16 percentage points, to feel uncertain about their eligibility than guaranteed income recipients (Table 41). A consistently larger percentage of the municipal welfare recipients reported worrying about their continued eligibility. Municipal welfare does tend to be short-term assistance and therefore continually subject to review in anticipation that the client's circumstances will change.

Table 41: UNCERTAINTY ABOUT ELIGIBILITY BY PROGRAM

	Welfare	G.A.I.
Never Uncertain	47%	63%
Sometimes Uncertain	53%	37%
Total	140	1,202

The analysis of the association between the tendency to be uncertain about continued eligibility and the perceptual indicators provides support for the hypothesis (Table 42). The tendencies to feel embarrassed and to perceive discrimination were greater among those who worried about their continued eligibility for benefits.

Table 42: PERCEPTUAL INDICATORS BY UNCERTAINTY ABOUT ELIGIBILITY

Degree of Uncertainty:	Welfare		G.A.I.	
	Never	Sometimes	Never	Sometimes
Embarrassed	30% (66)	73% (73)	4% (750)	12% (442)
Discrimination Perceived	18% (65)	41% (73)	1% (748)	5% (438)

Uncertainty about eligibility is in part a measure of the security provided by the programs, in that it indicates the extent to which an individual can count on a certain level of resources over the long term. To a large extent, we would expect this to depend on how well the recipient

understands the rules and procedures regarding how long he could expect to receive assistance, and under what conditions he might expect benefits to cease. However, the data indicate that the degree of financial dependence accounts for almost all of the difference between welfare and guaranteed income, in terms of the uncertainty attached to them (Table 41 and 43).

Table 43: UNCERTAINTY ABOUT ELIGIBILITY BY
PROGRAM STANDARDIZED FOR PROGRAM DEPENDENCE

	Welfare	G.A.I.
Never Uncertain	47%	51%
Sometimes Uncertain	53%	49%
Total Number	140	1,202

The respondents' comments suggest that one important factor in the degree of uncertainty about their continued eligibility was the amount of discretion welfare workers were seen to have. The power of welfare officers to cut recipients off at will was referred to in a number of contexts. Among the comments on welfare in general were the following statements:

"The thing I don't like is practically having to beg for any other or extra money for expenses and the idea that if they don't like your attitude you can be cut off. This can be a very strong weapon in some of the workers' hands and creates bad feelings between people as it seems to make some of them adopt a very snobby attitude toward people unfortunate enough to be on welfare."

Among the reasons for not complaining or questioning officers of the guaranteed income program were the following:

"The program is outlined sufficiently. Worked at one time: extras monies held over monthly periods against you: because of yearly income totaled."

It is difficult to tell how well this respondent actually understood the carry-over mechanism in the payments calculations; however, he certainly felt that he understood it. There was also an underlying belief that the guaranteed income benefits were calculated in an objective and fair manner.

"I understand that you get a cheque for one's necessary needs and that's all."

"I believe payments are set and special needs occasionally exceed payments."

"Figure it is done fair by your net earnings in the month and never asked for any more than what they sent."

It would appear from these comments regarding the guaranteed income program that the recipients consider the payments officers to have very little discretion in the matter of calculating benefits. Furthermore, there was no indication in the comments that the recipients believed they could be cut off guaranteed income for the kinds of reasons mentioned by welfare recipients.

Benefit Regularity: With regard to the regularity of the benefits, recipients were asked how often their payments were received late. To the extent that the payments act as a reinforcer in the stigmatization process, the more irregular they are, the more effective they are in eliciting a stigma response. This appears to be the case among the welfare recipients.

Table 44: PERCEPTUAL INDICATORS BY REGULARITY OF BENEFITS

Incidence of Late Benefits:	Welfare		G.A.I.	
	Never	Sometimes	Never	Sometimes
Sometimes Embarrassed	41% (86)	73% (51)	6% (727)	9% (449)
Perceived Discrimination	25% (85)	41% (51)	2% (725)	3% (446)

Those welfare recipients whose benefits had been late on occasion had a greater propensity to feel embarrassed. Similarly, they were more likely to perceive discrimination.

However, there is no difference between guaranteed income and welfare regarding the regularity of benefits.

Table 15: REGULARITY OF BENEFITS BY PROGRAM

	Welfare	G.A.I.
Never Late	63%	62%
Sometimes Late	37%	38%
Total Number	138	1,208

C. Community Response

The reaction of people in the broader community to the stigmatized, or potentially stigmatized, is an important factor in the stigmatization process to the extent that it expresses a withdrawal of social acceptance. The visibility of the stigmatizing attribute was an important element of Goffman's conceptualization of the process. Consequently, it was hypothesized that stigmatizing responses on the part of significant others in the community depended on the recipients' status being revealed. Those procedures in the delivery of social assistance, which have generally been considered to increase the visibility of welfare clients, included having the recipient pick up his cheque at the office, the use of food vouchers, and paying certain expenses, such as rent, directly.

The study was unable to examine the relative effect of any one of these procedures due to the lack of variation in the welfare sample. According to the responses to the questionnaire, almost all welfare recipients benefit from some direct payments, while very few received

vouchers or had to go to the office to pick up their cheque. The analysis could go no further than to provide evidence that welfare recipients do tend to experience difficulties with specific services and institutions in the community with greater frequency, although the difference was not great.

In order to test the hypothesis that the response of members of the community play a role in the stigmatization process, the relationships between the tendency to report difficulties and embarrassment, or perceived discrimination, were examined. Table 46 below indicates that there was only a slightly greater tendency for those who had experienced specific difficulties to also report feeling embarrassment.

Table 46: PERCENTAGE FEELING EMBARRASSMENT BY DIFFICULTIES EXPERIENCED

	Welfare	G.A.I.
✓ No Difficulties	49% (74)	5% (756)
Difficulties	58% (66)	9% (448)

There was, however, a significant association between the tendency of the respondent to report encountering specific difficulties with businesses or professionals in the community and the probability that he would attribute difficulties experienced to his status as a social assistance recipient — but only among welfare recipients. The combination of

experiencing difficulties and being on welfare increases the probability that the welfare recipient will sense discrimination from .3 (Table 20) to .52 (Table 47). Whether the recipient experiences difficulties or not while on the guaranteed income program makes little difference to the tendency to perceive discrimination. What this suggests is that, while there is only a small difference between the welfare recipients' and guaranteed income recipients' experiences in the community, welfare recipients tend to put a certain interpretation on their experiences.

Table 47: PERCENTAGE ATTRIBUTING DIFFICULTIES
TO THE RECEIPT OF ASSISTANCE, BY DIFFICULTIES EXPERIENCED

	Welfare		G.A.I.	
	No Difficulties	One or More	No Difficulties	One or More
Never Perceived Discrimination	82%	48%	98%	96%
Sometimes Perceived Discrimination	18%	52%	2%	4%
Total	74	75	754	445

The tendency to interpret the behaviour of others as a form of discrimination, due to their receipt of social assistance, is virtually absent among guaranteed income recipients. Previous analyses demonstrated that the tendency to perceive discrimination was associated with previous experiences with program officers. Further analysis reveals that this relationship is particularly strong where the degree of dependence on the

program is high (Table 48). Thus, this interpretative process appears to have been working to some extent at high levels of program dependence, even among guaranteed income recipients.

Table 48: PERCENTAGE PERCEIVING DISCRIMINATION BY
NATURE OF PROGRAM CONTACT AND PROGRAM DEPENDENCE -- G.A.I.

Nature of Contact:	No Negative Experiences	Some Negative Experiences
Program Dependence:		
Low	1% (694)	4% (298)
Medium	8% (64)	8% (39)
High	1% (69)	17% (24)

These findings would also suggest that particular behavioural responses on the part of members of the community are not a sufficient condition for the development of feelings of stigma. It would appear that certain experiences with the program itself become important to the development of this perceptual dimension of stigma.

In terms of the amount of embarrassment associated with the program, negative contacts and the degree of dependence were important factors. However, neither their combined nor separate effects explained as much of the difference in the amount of embarrassment as they did in the case of discrimination.

It would appear that feelings of embarrassment and the sense of discrimination are slightly different processes. The latter process, the tendency to interpret the actions of others as a form of discrimination, is virtually absent from the experience of guaranteed income recipients, although it would appear to be associated with the same factors that partly explain the development of feelings of embarrassment.

One possible explanation for the absence of this interpretive process is that recipients have not had sufficient experience with the guaranteed income program to develop this perspective. The stigmatization process is assumed to be an interaction pattern that develops over time. In fact, if we examine the data over time, it reveals that feelings of embarrassment were reported at a high frequency during the first year that the respondent was on the program, and increased slightly with time. In contrast, the tendency to perceive discrimination was low in the first year and increased over time, although the incidence of actual difficulties changed very little (Table 49).

Table 49: EFFECT OF TIME ON EMBARRASSMENT AND
PERCEIVED DISCRIMINATION AMONG WELFARE RECIPIENTS

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	1 to 12 months	13 to 30 months	31 months plus
Discrimination Perceived	15% (26)	25% (16)	35% (90)
Embarrassment	50% (26)	44% (16)	57% (90)

In summary, the findings based upon the perceptual indicators supported a number of the original hypotheses stated in behavioural terms. The tendency to feel embarrassed was associated with inadequate benefits (Hypothesis 1.1), a high degree of financial dependence on the program, unpleasant experiences with officers (Hypothesis 1.6), a degree of uncertainty regarding their eligibility (Hypothesis 1.4), and late payments (Hypothesis 1.5). There was no direct association between the frequency of the contact (Hypothesis 1.2) and the tendency to feel embarrassed.

The program effect was not specific to any particular groups. That is, the difference in the tendency to feel embarrassed between welfare and guaranteed income recipients was evident among all subgroups according to age, sex, family type and employment. There was evidence of an interaction effect: such that welfare recipients who also had jobs exhibited considerably more embarrassment, as did double-headed families with children. Among guaranteed income recipients, those who experienced the greatest embarrassment were the unemployed and the disabled. These differences were related to the differences in the target groups of the two programs.

A second indicator of the perceptual dimension of stigma was used to test the set of hypotheses regarding the determinants of stigma. The study found that there was a greater tendency to sense discrimination among those who perceived the benefits to be inadequate (Hypothesis 1.1), who were uncertain about their continued eligibility (Hypothesis 1.4), who experienced late payments (Hypothesis 1.5), and who perceived negative treatment by officers of the program (Hypothesis 1.6). There was no

support for Hypothesis 1.2, that the more frequent the contact the greater the tendency to perceive discrimination. Nor was there a direct relationship between discrimination and the degree of financial dependence on the program.

The program effects were not specific to any particular groups. As was the case with the tendency to feel embarrassed, certain types of welfare recipients had a greater tendency to sense discrimination. However, guaranteed income recipients exhibited very little tendency to perceive discrimination.

In terms of Hypothesis 2, regarding the response recipients elicit from others in the community, visibility does not appear to be an important factor. Although the study was unable to test this proposition directly, there were a number of findings which suggest such a conclusion. First, the actual frequency of difficulties faced by welfare recipients, relative to guaranteed income recipients, differed only by 10 percentage points. There was little difference among sites with respect to the difficulties encountered. The experience of difficulties was not a sufficient condition for the development of feelings of stigma, as indicated by the relationship between the sense of discrimination and the number of difficulties experienced. And finally, there was only a weak association between feelings of embarrassment and number of difficulties. A much stronger relationship was detected between embarrassment and the tendency to perceive difficulties that were related to the receipt of assistance. It would appear that the factors that contribute to the tendency to place a

certain interpretation on the reactions of others in the community are more important to the stigmatization process than factors that increase the visibility of the stigmatizing attribute.

The factor having the largest effect on whether recipients perceived discrimination was negative contact with program officers. The guaranteed income program and welfare differed significantly in terms of the nature of this contact, as well as the degree of dependence on the benefits. Analysis of the guaranteed income group indicated that there was a tendency to perceive discrimination among those who had negative experiences with the officers, and who had a high degree of dependence on the program. Thus, there was some evidence of this interpretative process, but only among guaranteed income recipients whose experience with that program was most similar to that of welfare.

D. Behavioural Impact

Thus, the analysis of the effects of various program parameters, which were hypothesized to be factors in the stigmatization process, provides evidence that the manner in which social assistance is delivered does affect the likelihood that recipients will feel embarrassed or will interpret the actions of others as forms of discrimination. However, the underlying concern of the study is the extent to which stigma becomes translated into behavioural responses: in particular, behaviour patterns that will decrease the recipient's chances of improving his life situation.

Social participation, as measured by the number of organized activities engaged in, was adopted as an indicator of the recipients' willingness to enter into the community.

The association between perceptual indicators of stigma and social participation was examined in order to determine whether feelings of embarrassment and the sense of discrimination resulted in reduced social participation. There was an association between the tendency to perceive discrimination and the number of activities in which recipients participated, but only among welfare clients. Furthermore, the relationship was of high levels of social participation, rather than social isolation, with a greater tendency to perceive discrimination. The analysis of this relationship suggests that, rather than being a consequence of the feeling of stigma, social participation was partly a condition for its development.

There was, however, an association between certain other behaviours thought to be associated with stigma and the tendency to feel embarrassment or perceive discrimination. This final section will discuss the possibility that feelings of stigma lead to a greater tendency to attempt to hide the fact of receiving assistance, a greater dependence on the program, as indicated by the frequency with which recipients initiate contact with the program officers, and the failure to seek assistance among those not receiving welfare.

The analysis has indicated that a very small percentage of guaranteed income recipients report feeling embarrassed. However, the sample was large enough to make it possible to examine the association between feeling embarrassed and attempting to hide the fact of receiving assistance. The same process appeared to be occurring among the guaranteed income recipients as was evident among welfare recipients. A considerable percentage of those who reported feeling embarrassed also reported attempting to hide the fact of receiving assistance, but there was by no means a one-to-one correspondence between the internal feeling and action (Table 50).

Table 50: ATTEMPTS TO HIDE BY FEELING EMBARRASSED

	Welfare		G.A.I.	
	Never Embarrassed	Sometimes	Never Embarrassed	Sometimes
No Attempt	83%	51%	89%	59%
Attempt	17%	49%	11%	41%
Total	66	74	1,123	81

The difference between welfare recipients and guaranteed income recipients, in terms of the tendency to try to hide the fact that they are receiving assistance, can be explained, in part, by the same factors that affect the tendency to perceive discrimination.

Table 51: ATTEMPTS TO HIDE BY PROGRAM STATUS
STANDARDIZED FOR PROGRAM DEPENDENCE AND NEGATIVE PROGRAM CONTACT

	Original Relationship		Standardized	
	Welfare	G.A.I.	Welfare	G.A.I.
No Attempt to Hide	67%	87%	72%	82%
Some Attempts	33%	13%	28%	18%
	144	1,239	80	1,232

When the guaranteed income sample is standardized on the welfare sample using program dependence and nature of contact as test factors, the difference between welfare and guaranteed income in terms of the tendency to hide participation is reduced by one half (Table 51). Where dependence on the program was "high" and there were no negative contacts experienced by the recipients, the difference between the two programs in terms of this behaviour dropped to zero. Where dependence on the program was high and recipients experienced negative contacts with the officers, the tendency among guaranteed income recipients to hide their status was as great as among welfare recipients.

The tendency to contact the office did not appear to be associated with comprehension of the program, as indicated by earlier analysis of the recipients' relative levels of education. Previous studies have suggested that a recipient's reliance on the officers is indicative of a form of dependency that develops between recipient and agency. Cato Wadel argued

that this may have resulted from the diminishing alternatives recipients face, as they experience the stigma of welfare over time. The recipients in this study associated this dependency with a developing attitude:

"Welfare to me is low graded in other words, I think it makes people to lazy or to dependel on their system."

"Welfare does not give incentive to those who are receiving. It creates an atmosphere of apathy and depression."

"It creates a negative passive attitude toward life."

"Welfare is degrading, demoralizing, system aimed at sucking people dry when they're down."

These comments, which were among reasons for not wanting to seek welfare assistance, suggest a fear that welfare will generate a form of dependency or apathy, that will not only prevent the recipient from improving his situation, but will have an effect on his children.

"The children must see father going out to work to get the proper view of responsibilities. They must see that they have to work also to obtain a healthy perspective on life."

Although the study was not able to provide a systematic analysis of the failure to seek assistance on the part of recipients (take-up rate), there was adequate descriptive evidence that the lower status attributed to public assistance recipients through the stigmatization process is a factor

in the unwillingness of certain families to apply for welfare. Among the reasons for not going on welfare given by individuals in the control group, were the following:

"Prefer to work and help out my husband. People give you a low account of yourself when found out. Besides I wouldn't feel right."

"Because of the stigma attached to welfare recipients."

"I feel welfare is degrading and denotes failures".

There was little difference overall between the guaranteed income recipients and members of the control group with regard to the reasons they gave for not going on welfare. The largest percentage stated that they preferred to make it on their own (36 to 37 per cent). The next most frequent response gave pride or stigma as the reason (16 to 17 per cent). The following comments were made by guaranteed income recipients:

"It makes a bad image on the family, in Dauphin."

"I wouldn't like to be specified as a welfare bum."

"There is too much of a social stigma attached to it. Also, if you buy a house they put a lien on it."

The types of reasons given by welfare recipients and controls for not going on the guaranteed income program were mainly that they didn't need it, were satisfied the way they were (32 per cent); would rather earn their own living, or would rather work (32 per cent); and didn't believe in it

(24 per cent). There was no reference to stigma or a degrading effect, although two respondents did offer the opinion that the guaranteed income program was no different from welfare.

The comments of the respondents do indicate that the effect on one's social status, that accompanies the receipt of welfare is a deterrent to seeking assistance. In addition, earlier discussions presented comments indicating that specific aspects of the delivery system also acted as deterrents, including the behaviour of the officers. There is little evidence of the same process being involved in the case of the guaranteed income program.

Chapter VI

CONCLUSIONS

This study of the stigma of social assistance provides some evidence in defence of the proposition that a guaranteed income program, such as the one experimentally introduced in Manitoba, is a less stigmatizing way in which to deliver income assistance than the welfare system. Recipients of the guaranteed income program did not exhibit the same degree of social isolation as welfare recipients, nor the same form of dependence on the program itself. They expressed far less embarrassment about receiving the assistance, and almost no tendency to ascribe discrimination to the reactions of others in the community.

The findings demonstrate that the symbolic nature of social interaction -- the meaning individuals attach to certain behaviours -- is, as Goffman indicates, an important aspect of the stigmatization process. The manner in which social recipients interpreted various procedures adopted by the agency administering the assistance, and the actions of its officers, was an important aspect of the stigmatization process. The data suggests that the nature of the contact between recipients and officers of the program is crucial in the process by which the recipient learns to interpret the behaviour of others toward him as an indication of his lower social status. And, it is the extent to which recipients consider procedures adopted by welfare agencies or their officers as hassling, an

invasion of privacy, disrespectful or distrustful, and the degree of discretion that officers are perceived to have, that distinguish the experiences of those on welfare from those of guaranteed income recipients.

Whereas Goffman's analysis of stigma highlights the nature of the discriminant stimuli in the stigmatization process, the social exchange perspective helps to explain the conditions under which this learning process is most effective. The conditions under which social assistance tends to be most stigmatizing are a high degree of financial dependence on the program and a sense of insecurity regarding the benefits. These characteristics relate to the efficacy of the reward and the schedule of reinforcement and tend to affect the extent to which behaviour patterns are modified. The data indicate that even among guaranteed income recipients where there is aversive contact with officers, at the same time as there is a high degree of dependence on the program, there is some evidence of stigma.

A. The Findings

The following section will briefly review the major findings of the study, and then discuss these findings within the context of the model of social assistance developed earlier.

It was hypothesized that welfare recipients would exhibit a greater degree of social isolation than guaranteed income recipients. The data indicate that welfare recipients did participate to a lesser extent in

social activities than either the guaranteed income recipients or the non-recipients, although the differences among the groups were small. Welfare recipients were less likely to participate in organized activities in the community. With respect to informal social relations, welfare recipients were more likely to spend time by themselves than were guaranteed income recipients.

The difference between the welfare and the guaranteed income recipients was greater for some organizations and some sub-classes of recipients. For example, welfare recipients were as likely to participate in Home and School associations or neighbourhood associations, but they were less likely to be involved in sports clubs, labour unions, business and professional associations, or cultural groups. The type of welfare recipients who were least affected -- that is, who participated to the same extent as guaranteed income recipients -- were individuals assumed to have more permanent ties to community life by reason of being parents with children or being employed.

Thus, while evidence was found of broad differences between welfare and guaranteed income recipients in terms of their involvement in the community, the magnitude of this difference was considered to be suppressed by the effects of other factors in the life situation of the recipients. Furthermore, the observed variation in the level of involvement was found to be unrelated to the program parameters hypothesized to be factors in the stigmatization process.

The most dramatic differences between the experiences of the welfare and guaranteed income recipients occurred at the perceptual level. While 53 per cent of the welfare recipients reported feelings of embarrassment when in the company of those not receiving welfare, only 7 per cent of the guaranteed income recipients reported such feelings. In contrast to the findings regarding participation, the greater tendency to feel embarrassment among welfare recipients occurred regardless of age, employment status, or family type.

There was a clear difference between recipients of welfare and guaranteed income recipients regarding the extent to which they reported experiencing discrimination; that is, difficulties with other people they believed to be caused by their receipt of social assistance. Only 6 per cent of the guaranteed income recipients experienced discrimination, compared to 34 per cent of the welfare recipients.

These perceptual indicators of stigma were found to be related to specific program procedures in the delivery of assistance and these effects were not restricted to specific types of recipients. Feelings of stigma, as measured by these indicators, were associated with tendencies to worry about the adequacy of benefits, continued eligibility, irregular benefits, unpleasant contact with program officers, and a high degree of financial dependence on the benefits.

The guaranteed income program differed from the welfare program on all these factors except the frequency with which benefits were received late.

The data showed a significant difference between the proportions of welfare recipients (66 per cent) and guaranteed income recipients (46 per cent) who reported being concerned about whether their benefits would allow them to meet their expenses. This difference emerged despite the fact that the guaranteed income program introduced in Manitoba was of a temporary and experimental nature, and that the amount of the benefits was on the average almost one-half the amount of welfare benefits. Welfare recipients were more likely to feel uncertain about their continued eligibility than guaranteed income recipients (53 per cent compared to 37 per cent). The tendency to worry about the adequacy of the benefits and continued eligibility were found to increase with increasing levels of financial dependence on the program. The fact that the guaranteed income program was designed largely as a supplement to the working poor was evident in the degree of dependence associated with its benefits. Only 16 per cent of the guaranteed income recipients depended on the benefits for more than 33 per cent of their income, whereas 81 per cent of the welfare recipients were dependent upon it to this degree.

The tendency to feel embarrassed was not related to the actual frequency with which officials of welfare or the guaranteed income program contacted the recipients. In fact, the data indicate that there was very little difference in the frequency with which provincial welfare recipients were contacted by the office, and guaranteed income recipients were called regarding the self-reporting of income. Among the guaranteed income recipients, 45 per cent reported being contacted at least once during the previous year, compared to 51 per cent of the welfare recipients.

The tendency to feel embarrassment or perceive discrimination was related to particular types of experience with program officials. Welfare recipients who reported having to wait for long periods of time in the welfare office before receiving attention, being required to provide proof of things such as income or marital status, and being subject to unannounced visits by welfare officials, had a greater tendency to feel embarrassment. The only humiliating experience reported by any number of guaranteed income recipients was the request for proof of income, and recipients who experienced these requests tended to report feeling embarrassed more frequently.

There was evidence of a behaviour pattern associated with the feeling of embarrassment and the tendency to perceive discrimination in the reports of recipients attempting to hide their status. Almost 50 per cent of the welfare recipients, who reported feeling embarrassed, also reported that they attempted to hide the fact of receiving benefits from certain friends or relatives. Although the tendency to feel embarrassed about the guaranteed income was not as great, 41 per cent of these recipients reported attempting to hide the fact of being on guaranteed income. Except for female-headed one-parent families, the more active groups in the community were the ones who attempted to hide their participation. There was evidence also that the embarrassment and discrimination associated with receipt of assistance led to recipients initiating greater contact with the program, and to a greater reluctance to seek assistance on the part of other low-income families who might have been eligible.

Recipients were also asked what difficulties they actually experienced with individuals or services in the community. Being on welfare tended, on the average, to increase the probability that an individual would encounter difficulties with financial institutions, public services, professionals or landlords in the community, but did so only slightly, relative to low-income families in general. Recipients of the guaranteed income experienced somewhat fewer difficulties than the welfare group.

The more active recipients were in community organizations, the greater the tendency to encounter difficulties with individuals or services in the community. One interesting difference between the welfare and the guaranteed income experience is that the guaranteed income program appeared to decrease the probability of encountering difficulties among those with a job, while welfare tended to increase the probability of difficulties for job-holders, as compared with the remaining low-income population.

One of the more revealing aspects of these findings is, that while the guaranteed income recipients experienced almost the same level of difficulties in the community, they did not tend to attribute the cause of these difficulties to the fact that they were receiving social assistance. Among those who reported specific difficulties in the community, the probability of attributing these to the receipt of assistance was 42 per cent for welfare recipients and only 4 per cent for guaranteed income recipients.

This interpretive process, then, was almost totally absent from the experience of guaranteed income recipients. The tendency to perceive discrimination occurred only where recipients experienced negative contact with the program, under the condition of a high degree of financial dependence on the program. Furthermore, this tendency to attribute difficulties to their receipt of assistance was a process that developed over time.

The tendency to feel embarrassed and the tendency to perceive discrimination appear to be different aspects of the stigmatization process. Embarrassment appears to be the anticipation on the part of the stigmatized, or potentially stigmatized, of the type of reaction his behaviour might elicit from others, on the basis of what he knows are the norms of the community. Although welfare recipients were much more likely to report that they had felt embarrassed or uncomfortable, this reaction was also evident among guaranteed income recipients. Further, the response of being embarrassed was an immediate reaction to the situation requiring little demonstration of the fact that receiving assistance was an unacceptable means of supporting one's self.

The indicator of perceived discrimination measures the tendency of the recipient to attribute to the behaviour of others a particular meaning — that he does not deserve the minimum amount of social respect because of his reliance on welfare. The development of this interpretive process takes place over time and was not fully developed among the guaranteed income recipients. Contact with the officers was an important factor in

learning what the consequences of receiving welfare are for recipients. The type of program contact that reflected a loss of status to welfare recipients was not evident among the experiences of the guaranteed income recipients. Thus regardless of the length of time the program was in place, it is unlikely that they will develop the same perspective.

The factors which tend to distinguish the experiences of those who feel stigma from those who do not are demeaning interpersonal contact, a high degree of dependency and a greater tendency to worry about adequacy and eligibility. These factors are much less prevalent among the recipients of guaranteed income.

What the data would appear to indicate is that while recipients are aware from the time of enrolment that they are not conforming to certain ideals or norms regarding one's responsibility to support oneself, and therefore feel varying degrees of embarrassment, it is over a longer period of time that they learn the consequences of their use of assistance in terms of how others will respond to them. It is evident from the reasons provided for not seeking welfare assistance that the value of independence, the belief in the work ethic, or the notion that "where there is a will there is a way", are involved.

"Only people that think the world owes them a living go on welfare."

Embarrassment follows where an individual is unable to conform to these norms. Recipients are also aware of the way in which members of the community think of recipients of social welfare.

"When anyone finds out you are on welfare you might as well be called a skid row bum."

"Everyone thinks you are a lazy person."

In these comments, the recipient is assuming the perspective of the generalized other.

The basis of stigma, as Goffman has conceptualized it, is the acceptance of a set of categories which tend to facilitate social interaction. These categories anticipate attributes associated with certain types of people and guide the reaction of individuals toward one another. In the case of stigma, an undesirable attribute such as reliance on government assistance becomes associated with a whole range of imperfections. Ultimately what this means for the recipient is a loss of social status in the community. One of the welfare respondents commented:

"You never know what proper place in community is, as some people think you seem to be inferior to them."

The receipt of guaranteed income payments is not totally free of embarrassment although the percentage of recipients who report feeling embarrassed or uncomfortable is low. There was evidence that the recipients were afraid that it might carry the same social identity as

the receipt of welfare. Further, efforts were made on the part of guaranteed income recipients to distinguish themselves from the welfare recipient.

"I think that Mincome is an excellent program for people like my husband and myself, who are using Mincome as a chance to better our educations, so that we will not have to rely on financial assistance forever. Mincome has helped many people who deserve financial assistance as opposed to welfare. I personally would like to see Mincome replace welfare because with the Mincome system, only deserving people would receive help."

"I feel that (welfare) is more for disable or people which are too lazy to work, it doesn't include us, were both able and willing to work but can't get a job -- due to low employment rate."

Previous studies of social assistance recipients found that, even among welfare recipients there was a tendency to separate themselves from the "discredited" by explaining how their situation was beyond their control; that it was a matter of fate that they are ill and unable to work, or were injured or deserted. These examples found in the comments of the guaranteed income recipients reflect a similar process.

In Goffman's analysis of mental hospitals, for example, (see Goffman, 1971:335), he examines the way in which certain institutions play a role in the stigmatization process and ultimately reinforce the social structure. The welfare system has certain procedures which reflect an unfavourable image of its clients. It also sets the conditions for interaction between workers and clients. And, it is through social interaction that the

stigmatized come to learn what the consequences of the stigma are for him. There was evidence, particularly among the comments of respondents, that the behaviour of the officers expressed moral judgements regarding the receipt of assistance, as well as exerted control over the day-to-day activities of recipients. The absence of such contact among guaranteed income recipients is perhaps the most significant factor in understanding the relative lack of stigma attached to it. Perhaps one of the most effective responses on the part of officers is the tendency to criticize aspects of the recipient's situation, which are the very reason for the program considering him or her eligible for assistance. Women were susceptible to this type of response, reporting that they were criticized for wanting to stay at home with their young children or for even having children.

In Goffman's analysis of stigma, the response to the stigmatized is not limited to expressions of moral indignation, but involves actions that result in controlling or restricting of their behaviour. Evidence of this may be the lower level of participation in organized activities in the community. However, the level of social involvement, as measured in this study, is also likely to be a function of other factors. The findings suggest that it is in other dimensions of the respondents' situation that meaningful restrictions are felt by recipients of welfare, in comparison with guaranteed income recipients. Recipients reported being pressured to move to cheaper apartments, being told what they could buy and what not,

and even whether they should have more children. In the following comment, made by a guaranteed income recipient, the two programs are contrasted in terms of the control that they imply for the activities of recipients.

"No one knows about it (guaranteed income program). It help ~~the~~ below the average earnings without having to go through doctors etc. . You can live where you want to. You can spend your money when you need to and save for the next month when more will be needed ... "

Various procedures set out in the welfare regulations set the conditions for this type of control over recipients' lives. The close calculation of payments through the budget deficit method means that welfare officers obtain considerable control over the recipient's ability to maintain his previous standing in the community. Cato Wadel's study describes the frustration of recipients who want to keep up the condition of their house, a significant symbol of one's status.

A more recent study of welfare experience conducted through the Canadian Civil Liberties Education Trust (1975) argues that a number of procedures lead to the denial of certain civil rights. This study was based on a survey of welfare recipients and administrators across Canada. The extent to which the stigmatized are subjected to unusual restrictions is exemplified by the following discussion.

In most common law countries, husbands and wives cannot legally be forced to testify against one another. However, it was found that approximately 50 per cent of women on welfare had been urged by the welfare

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department to take their husband to court for support payments (C.C.L.E.T.; 1975:11). Thus, while society is willing to accept the added risk to its safety by allowing individuals accused of murder and other criminal acts to escape justice in not forcing wives to testify against their husbands, they are not willing to suffer the loss of money.

A second area where recipients lose the rights of normal citizens is in the right to privacy of the home. Although the criminal code restricts the circumstances under which forcible entry of a citizen's home is permitted, the welfare practices imply that welfare recipients are not protected by these laws. General Welfare Assistance regulations (the example used is Ontario) set out procedures which require a visit to the recipient's home, mainly for the purpose of investigating living conditions relevant to the eligibility of the client. The actual manner in which these regulations are put into effect is left to the discretion of the worker (C.C.L.E.T.:35). About 50 per cent of the recipients reported experiencing unannounced visits, and interviews with administrators confirmed that this element of surprise was a tactic used in attempts to ascertain the real situation of the recipient.

The meaning the recipient derives from his treatment by the welfare agency alters his self-concept. He learns to expect a certain type of treatment from others in the community because he receives welfare. The findings of this study suggest that the difficulties and restrictions the recipient faces begin to be interpreted in light of his receipt of assistance.

Goffman's conceptualization of stigma has had little empirical application. The value of this perspective in the analysis of the stigma of social assistance is that it focusses on the role of the symbolic meaning attached to behaviours in social interaction. It helps to explain how the nature of the contact between officers of the program and clients leads to a generalized perspective that others will treat him differently because he is on welfare, and consequently why he alters his behaviour in anticipation of the restrictions that accompany his new status.

In the model of social assistance developed at the outset of this study, the various principles of learning theory and the social exchange paradigm generated a set of hypotheses regarding the relative effect of different types of social assistance. In brief, a set of welfare procedures were identified as being discriminant stimuli in the process of learning one's new position in society attendant upon receiving welfare. The social exchange conceptualized was compliance with the expectations of others, or social deference for benefits. Welfare has been conceptualized as a system of social exchange by Robert Pinker in his theoretical discussions of the relative merits of universal versus categorical services (1971). The application of this perspective in the empirical analysis of the process of stigmatization not only accounts for the role of certain behavioural responses in the development of various patterns of behaviour typical of recipients, but helps to explain the conditions under which the stigmatization process is most effective.

The conceptualization of welfare as a system of social exchange is not simply a sociological tool. "It is a social fact. Recipients and non-recipients view welfare as a matter of exchange. Recipients perceive that they are expected to show social deference in exchange for the benefits.

"Welfare means they own you body and soul ...."

"Some workers are rude and make you feel uncomfortable. They act as if the money's coming out of their pockets ..."

"I think some of the social workers should check on their attitude towards the recipients as a lot of them think they are giving the money out of their pockets and tend to degrade people."

The taxpayers perceive themselves as givers in the exchange. This is reflected in the following comment explaining why this particular respondent would not go on welfare:

"Because I will just cheat the government and the people who are paying their taxes to support the welfare."

The process of stigmatization can be expected to be more effective under conditions where one party to the exchange is in a position of greater power. Welfare, in contrast to the guaranteed income program, represents a situation of unequal exchange. Recipients reported being intimidated, "completely overtaken" in situations where they were dealing with the workers. The power of the workers is related to the discretion

they are perceived to have over the amount of assistance the client will receive and over his eligibility for assistance. There was evidence in this study of the recipients' fear that complaints would jeopardize their benefit. The study done by the Canadian Civil Liberties Education Trust (1975) revealed that there were cases where requests that recipients do something, or not do something, were accompanied by explicit threats that benefits might be cancelled. One example of this was the instance of a female recipient who wanted to take in a male boarder. The welfare office, being opposed to this, suggested that if she followed through, her eligibility would be reassessed. In addition, there were reports that recipients were instructed to change their hairstyle or alter the manner in which they dressed in order to enhance their job prospects.

However, a possible threat did not have to be confirmed before the recipient would conform to the wishes of the workers. There was a sense among the sample interviewed in the above study that, where the recipient could see that a particular response would make him unpopular with the officer, he assumed the possibility of the sanction being applied. It was the conclusion of their study that:

"The power to grant and withhold financial benefits can represent an enormous source of control over those who seek such benefits." (C.C.L.E.T., 1975:1)

The authors go on to speculate that:

"People's vulnerability to control depends more on the intensity of their want than on the enforceability of their claims." (C.C.L.E.T., 1975:2).

The relationship between officers and clients under the guaranteed income system is quite different. The distribution of power is more equal not only because the officers do not have the same amount of discretion and recipients were provided with a sufficient level of information regarding eligibility and benefit levels, but the recipients see the officers in this objective payments system as being victims of government bureaucracy as well. In response to the question of why they did not complain to the officers about certain aspects of the program they did not like, the guaranteed income recipients replied with comments such as:

"I feel they don't have enough money in their budget even if they wanted to."

or

"They can't help anyway. They have to follow rules."

This is a very different interpretation to that evident among welfare recipients, which suggests that the welfare workers are intentionally unhelpful.

From the perspective of the social exchange paradigm, the welfare program is an institutionalized response in the exchange process. As was discussed above, certain procedures are discriminant stimuli in themselves, but also the rules and regulations provide the conditions for the nature of the interaction between the clients and recipient -- in particular the relative distribution of power. In this system of exchange, where

taxpayers perceive themselves as givers, the welfare workers are subject to certain expectations and sanctions. The workers are perceived from the perspective of the "givers" as distributing the taxpayers' money to freeloaders." Some recipients are particularly perceptive:

"Somebody has to pay for the welfare in taxes if only the needed received welfare it would be all right but there are a lot of freeloaders and the way the welfare system is set up the welfare worker has to have so many clients or he will be out of a job?"

Welfare workers and social workers at large are subject to certain sanctions such as the not-uncommon criticism that these "do-gooders" are fostering the sloth and dependence of the poor and disadvantaged. As long as there is a limit on public funds and particularly in times when citizens are complaining of over-taxation or high government spending, welfare officers feel compelled to demonstrate that they are taking all measures possible to ensure that only those who deserve assistance get it.

In conclusion, if the stigma of welfare is conceptualized as a learning process involving a redefinition of the individual's self-concept and, consequently, changes in his behavioural repertoire, the important discriminant stimuli include the behaviour of the officers toward the recipients. The rules of operation in the case of guaranteed income recipients or welfare regulations embodied in provincial legislation set the bounds within which the officers operate. The experiences of welfare recipients reveal that a certain pattern of behaviour is learned and reinforced which in general terms can be described as dependent and

circumscribed. The loss of status that this behaviour pattern represents is the sanction and the benefits are the rewards. The way in which the benefits are dispersed, the schedule of reinforcement, affects the strength of the association between the discriminant stimuli and the behavioural response. The regularity of the benefits and the security of those benefits are important factors. The stigma effects were much more likely to be observed among recipients who are continually worried about how long they will remain eligible for benefits, or whether their next month's benefits will be sufficient to meet their expenses. The association between the discriminant stimuli and the stigma effects was also affected by the value of the reward as measured by the recipient's financial dependence on the program. The important conditions for an effective stigmatization process were largely absent from the guaranteed income program.

One of the features of J. Kunkel's application of the learning principles is the attention it draws to the distinctly human process of vicarious learning. Non-recipients perceive the restrictions that welfare recipients face, and this acts as a deterrent to seeking assistance. Among the reasons for not going on welfare are specific examples:

"You just don't feel free to purchase what you really need and would like to do."

The effect that the treatment experienced by recipients at the hands of the officers has on their self-esteem becomes a factor in the refusal process:

"They make you feel like dirt. They degrade, embarrass, and insult your intelligence and cheat you every chance they can get. This is personal experience."

"They make you feel cheap and like a bum."

"Welfare to apply for it they make you feel cheap and degraded we applied for it 6 years ago and I'd never go on it again unless I was destitute."

"It would be an extremely humiliating experience -- welfare workers treat people like sub-humans."

The insecurity that is experienced by recipients of welfare with regard to the assistance they receive is associated with greater evidence of stigma effects. Within the context of the guaranteed income program one of the most significant benefits of assistance in the eyes of the recipients was the security provided. A picture is derived from the interviews with individuals in the sample of a very tenuous existence, of a considerable amount of fear and worry in their day-to-day life regarding their ability to feed and clothe their families. They do not escape this type of existence on welfare, and in many cases it is worsened. The guaranteed income payments, on the other hand, provide a sense of security that becomes a reward in itself.

"Being on Mincome has helped our family tremendously. Before Mincome there were many days when 1 meal had to suffice our family. Wife is a little more bearable now
..."

The financial security in many cases was used to take steps toward future independence. Some recipients under the guaranteed income program claimed

to have furthered their education, acquired job-related training in order to improve their chances of getting a job, and started small businesses. The guaranteed income payments were viewed very differently from welfare payments. Not being high enough to be totally depended upon, the security they did provide in the "marginal work world" was capitalized on. Welfare benefits were on the other hand considered "uncertain", and subject to the whim of the officers. Further, they were considered to incur a host of restrictions, including the opportunity to work.

B. The Behavioural Model

The stigma of social assistance is conceptualized in this study as a pattern of behaviour manifested by recipients reflecting a degree of social isolation. Stigmatization is then a learning process which occurs through the interaction between recipients and non-recipients -- the behavioural responses of non-recipients acting as stimuli or reinforcers for the behaviour of recipients. Social isolation is seen as having two dimensions at least: social withdrawal -- a learned response, and social rejection -- attempted exclusion by non-recipients.

Both the set of independent variables and the dependent variable were conceptualized in terms of shared behavioural patterns and linked in the model by means of a number of learning theory propositions. The objective of the study was to systematically examine the extent to which certain

characteristics of the program, that had in previous studies been identified as aversive stimuli or unpleasant responses, appeared associated with certain behaviours that were assumed to indicate social isolation.

Stigmatization has been variously conceived as a process of attitude formation among some members of society toward others (stereotypes), the internalization of attitudes (self-concepts) or the development of behaviour patterns. The behavioural approach adopted in this study was chosen for pragmatic reasons associated with the policy environment in which the research was conducted. From the author's point of view, the main reason that stigma is considered a policy issue is that it has become related to two kinds of behaviours: the rate of participation in assistance programs which affects the cost of the programs, and the degree to which it encourages dependence on the government (or discourages individual initiative) thus affecting future expenditures. The assumption underlying the study is that the life situation of the low-income population, and how it is affected by the assistance program, is more relevant than the attitudes of those outside the target population in determining whether a program should be implemented. Further, while the study does not deny the existence of attitudes, or other mental states, or the ability to measure them, attitudes were not considered good indicators of the way in which the public would respond to recipients in personal contacts, or how recipients would behave (Deutscher, 1973). In effect, stigma only becomes a policy issue when it results in a modification of

more than attitudes; that is, it becomes translated into withdrawal behaviour, a passive stance from which the recipient is unlikely to take positive steps to improve his situation.

The findings of this study showed smaller differences in the rate of participation in various organizations in the community between welfare and guaranteed income recipients. These differences were, however, consistently in the hypothesized direction and were supported by similar, but small, differences in informal social interaction. Strong evidence was produced of the stigmatization process using the perceptual indicators. However, it is likely that the behavioural indicators used to measure social isolation were not sensitive enough. A behaviour as general as community involvement is a function of many factors in the person's situation and environment. As the data suggest, individuals with child responsibilities are less likely to alter their activities, and are probably less able to in the face of the stigma.

The findings of the study do not automatically lead to the conclusion that behavioural indicators are in general not sensitive enough. The data on the attempts to hide the fact of receiving assistance would suggest that self-reports of behaviour can be used to distinguish groups. One of the important differences between this indicator and the index of community involvement is that it has a closer conceptual link to the phenomenon under study. The act of withdrawal from community activities is a part of the stigmatization process to the extent that it is an attempt to protect one's image, to reduce the possibility that others will find out that one is

receiving assistance, or to avoid negative reactions where the status is unknown. However, withdrawing from social activities is not the only way to manage the welfare stigma, and non-involvement is not necessarily a consequence of stigma. The "attempt to hide" indicator would appear to get at this more directly.

The problem, therefore, is in developing an indicator of the social isolation or tendency to withdraw associated with the stigma of welfare. Withdrawal from social activities was not a factor raised by respondents in the open-ended questions. In terms of activities or behaviours they felt obliged to refrain from were "buying little extras", spending the benefits the way they wanted to, owning any major item -- particularly a house. Thus, it would appear that the important restrictions the stigma of welfare placed on them were related to maintaining a good self-image in the community and, more importantly, maintaining their attachment to the labour force. The impact and restrictions lay in the economic sphere of their life situation. The responses by welfare recipients indicate very clearly that they are frustrated by being forced to make a choice between welfare and work.

When the hypotheses were tested using the perceptual indicators of embarrassment and discrimination, an association was established between these internal effects of stigma and certain of the program parameters hypothesized to be factors in the stigmatization process. I would not argue on the basis of this study that the behavioural model, which incorporates learning principles, should be abandoned. In fact, what the

findings indicate are that where there is a high degree of unpleasant program contact (negative stimuli) combined with a high degree of dependence (value of the reward), the probability of feelings of embarrassment, and subsequently of attempts to hide status, is high.

Furthermore, although the study has related the perceptual indicators to the program parameters whose causal significance lies in their role in the learning process, this should not be taken to indicate that behavioural and perceptual indicators can be interchanged. In fact, the data indicate that while there is some association between the two in the case of "feeling embarrassment" and "attempts to hide", there is by no means a one-to-one correspondence.

One of the important differences between the experiences of welfare recipients and those of guaranteed income recipients was revealed by the combined use of the behavioural and the perceptual indicators. It was hypothesized that welfare recipients, being more visible in the community by virtue of certain delivery procedures, would experience more difficulties with professionals or businesses. The incidence of specific difficulties that recipients could report was low, and there was little difference between the two programs. There was, however, a distinct difference in the frequency with which recipients attributed the difficulties they had to their receipt of assistance. Indeed, this interpretive process was virtually non-existent in the guaranteed income program.

This finding underlines the importance of the assumptions regarding the symbolic nature of reinforcers which was the major contribution of Goffman's work to the behavioural model developed in this study. In the social exchange paradigm, social interaction is an on-going process of reinforcement and stimulus presentation, with the consequence that previous social interaction shapes subsequent interaction. The assumption is, however, that social interaction is symbolic. Actors do not respond reflexively to the behaviour of others, but to the meaning or significance imputed to it. In the model of stigma, the behaviour of others becomes significant stimuli or reinforcers to the extent that they are imputed to have meaning for the status of the recipient. Experiencing difficulties in the community took on a certain meaning only among a subset of recipients. There was very little evidence of this among the guaranteed income recipients.

The tendency to interpret encounters as a form of discrimination against recipients for receiving assistance was associated with a high degree of financial dependence on the program, a high degree of insecurity, and a tendency to experience aversive reactions on the part of program officers. In addition, the incidence of discrimination was found to increase over time. This would suggest that the perspective of the generalized other, in Goffman's terminology, develops more slowly over time than the feeling of embarrassment. It is the development of this perspective that allows an individual to construct his behaviour in terms of the expectations of others.

The sense of discrimination would appear to be more closely associated with the recipients' experiences on the program than their experiences in the community -- the significance of their status for their self-concept being developed through interaction with program officers and generalized to other individuals in the community. One of the anomalies of the study is that both guaranteed income and welfare appear to have less stigma attached to them in Dauphin. Because Dauphin was a relatively small rural community where visibility would be higher, and in addition was not subjected to the dispersed sampling technique, the development of stigma was assumed to be greater or more effective. Visibility of program status may be a much less important factor in the development of stigma than had been supposed.

C. Policy Implications

Proponents of a guaranteed income have argued that this alternative method of delivering income assistance would be accompanied by less stigma than the present system of welfare. Our findings, based on the experiences of recipients of the experimental guaranteed income program introduced in Manitoba and welfare recipients in that province, provide some basis from which to make such an argument. A guaranteed income program, if it incorporates an objective income test, a system of self-reporting of income, and a tax-back rate that does not discourage recipients from increasing their wage income, will tend to have less stigmatizing effects. However, it is not the frequency of contact between program officers and clients but the conditions under which that contact occurs that are

important for understanding the stigma of social assistance. The most significant conditions, a degree of discretion in the hands of program officers and considerable dependence on the program, are less likely to exist in a guaranteed income designed on a negative income tax model.

It has been generally assumed that a self-reporting system would effectively eliminate the need for client-officer contact. The experience in Manitoba reflected only a slightly lower amount of contact among guaranteed income recipients compared to welfare recipients. Had the program been in effect longer, the frequency of contact might have dropped as the guaranteed income recipients improved their income reporting. The high rate of interaction that does occur in the welfare system is largely a result of a greater tendency for all welfare recipients to initiate contact themselves, and of municipal welfare officials to contact short-term clients. This finding was interpreted in light of the greater dependency welfare recipients come to have on the program.

Although self-reporting of income could not be attributed with eliminating contact, it did appear to have certain positive effects at both the behavioural and attitudinal levels which warrant further study. Recipients reported that they had learned how to keep a budget and found it easier to manage their finances. The monthly income-reporting system increased their awareness of their various sources of income which, in turn, allowed them to better budget for expenses. Their comments reflected an increased sense of control over their financial situation. Further study would be required in order to determine whether these perceptions of

the recipients might be followed by fewer difficulties in their financial and consumer dealings in the community. Better control over their financial resources, or simply an awareness of financial resources, could have implications for the regularity with which they pay bills, their ability to repay loans, and to save, inter alia. Direct payments or vouchers used by some welfare administrations tend to have the opposite effect.

The objective means test removes the discretion that currently is in the hands of welfare officers; discretion in terms of eligibility and amount of assistance. The behaviour of the officers in the guaranteed income program cannot be interpreted in terms of demands that the client behave in a certain way or maintain a particular attitudinal stance. The officers did not have the power to back up such requests or threats. In fact, the payment officers of the guaranteed income program were perceived to be as helpless in the face of the bureaucracy and its accompanying rules and regulations. Furthermore, they received fewer complaints and fewer requests for additional assistance. The extent to which guaranteed income recipients perceived the program officers to be powerless and perceived the method of calculating payments as objective and fair could probably be related to the much lower level of client-initiated contact and a lower level of dependence on the program. The program design issue is whether special needs or circumstances can be adequately accommodated within this reporting framework. The payments system used in the Manitoba Experiment went some way toward adjusting for some of the more prevalent special

circumstances, such as those arising from different levels of net worth and assets, income from self-employment, day care and housing subsidies, and changing family circumstances.

The analyses and the comments of the respondents suggest that the tax-back rate on earnings, as it is used in the existing system of welfare, was an important factor in the stigmatization process. In the welfare system, benefits are reduced by the amount of earnings above a very low level. This tends to eliminate any benefits from going out to work or maintaining a job. Not unreasonably, welfare recipients see this as a penalty for working and a way to keep them in poverty. Consequently, there is a strong feeling of financial dependence on the program as well as a high degree of actual dependence. Recipients who are highly dependent upon the benefits tend to be more sensitive to the reactions they evoke in others and more likely to interpret the response as projecting a stigma.

There is another aspect, however. Stigma is really the absence of social status. Recipients referred to not knowing their place in the community. An important source of status is one's job. Thus, to the extent that welfare isolates the recipient from the work world by discouraging earnings, the program cuts them off from an important source of social status. The negative income tax mechanism facilitates the integration of the poor into the job world. It provides the measure of security that is absent in the marginal work world, where there are few fringe benefits (such as sick leave), a greater incidence of work stoppage, and seasonal cut-backs and lower wages. The extent to which the tax-back

rates increase labour force participation, including retraining and increased job search, or reduce hours of work, is still a matter of debate despite the fact that this was the major research question addressed by each of the American Income Maintenance Experiments. All that this study can say is that the outlook that guaranteed income recipients had on employment and earnings prospects was dramatically different from that of welfare recipients. There was very little sense of ambition or optimism among the comments of the welfare recipients.

Finally, this study confirms that stigma results in social isolation and destruction of the individual's self-confidence and drive toward independence. As such, it works against the objectives of anti-poverty programs. However, the most significant restrictions in the minds of recipients are economic rather than social. This would suggest that a comprehensive understanding of the consequences of stigma can only be gained by further studies along the lines of Caplowitz's Do the Poor Pay More, which systematically examine the access recipients have to economic spheres of life, including job market, credit and mortgages, inter alia, and the ease with which they can purchase the services of tradesmen, repairmen, and professionals.

The essential features of a guaranteed income or negative income tax are the support level and tax-back rate which define the benefit structure. The manner in which the payments are delivered and the administrative structure that is established to operate the program, may involve a variety of procedures. Proponents of a guaranteed income tend to envision the

program as a self-reporting system with universal eligibility. These characteristics are not inherent in the definition of a negative income tax. There is nothing to prevent bureaucrats from designing a categorical type of income maintenance program, incorporating a negative income tax, or to retain the use of case workers in the enrolment or income reporting procedures. Furthermore, there are a number of other dimensions of the delivery of assistance that can be implemented in a variety of ways, including the actual form in which the benefit is delivered, reconciliation procedures, audit procedures, the treatment and reporting of individual assets as a part of income, and the frequency of reporting income. The results of this study reflect the impact of one particular type of guaranteed income, although an attempt was made to isolate the effect of specific aspects of the delivery system.

The experimental guaranteed income program and welfare delivery system did differ along many of these dimensions. This study was not able to examine the contribution of all these program parameters to the stigmatization process. It was hypothesized that the method of payment would influence the recipient's ability to maintain his status; however, there were not enough respondents in some of the groups to allow for adequate comparison. Guaranteed income recipients were given a choice of receiving their benefits by mail or having them deposited directly in a bank. Only 14 per cent of the guaranteed income recipients opted for direct deposit. Among the guaranteed income respondents, only six recipients reported that they picked up their cheques at the office.

Welfare recipients receive their benefits either by mail or by picking them up: 21 per cent of the welfare recipients (approximately 31) picked up their cheques at the office.

The findings of the study indicate that the extent to which different methods of payment increase the visibility of the recipient makes little difference to the development of stigma. There were some questions raised with respect to direct deposit of benefits in the guaranteed income program which call for further study.

The guaranteed income program provided only cash benefits. Welfare recipients, in addition to receiving cash benefits, often receive food vouchers or direct payments of their rent, medical costs, etc. Less than 10 per cent of the welfare sample received vouchers, but 85 per cent received at least one type of direct payment. The provision of in-kind benefits was much more the norm than was generally thought to be the case. While the study was unable to assess whether provision of in-kind benefits was a significant sign to recipients of their lower social status, there was some evidence that the procedure frustrated recipients' attempts to budget and save for contingencies they felt important.

Finally, the two programs differed in terms of the application process. The guaranteed income program used three different enrollment processes, all of which differed from welfare enrollment procedures. Two types of enrollment procedures were used for the dispersed sample in Winnipeg: (1) a self-enrollment process for the main sample of

aproximately 442 individuals, and (2) an assisted enrollment process for the supplementary sample, the 256 individuals who were enrolled one year later. In Dauphin, the major portion of the guaranteed income recipients experienced the same self-enrollment process as in Winnipeg. There was, however, a general invitation extended to residents of Dauphin to enroll in the program. Those who had not received an enrolment package in the mail (as was the procedure for self-enrolment) could go to the guaranteed income office and pick up an application form. If they met the residence requirements, they could enrol by completing an income report form. There were 35 individuals in the sample at the time of the interview who were enrolled in this manner.

The particular enrolment procedure incorporated into the design of a guaranteed income program could have a substantial effect on the stigmatizing potential of the program. An assisted enrolment process leaves open the possibility of stigmatizing interaction, and therefore should be designed with that in mind.

In conclusion, stigma is very likely to occur under certain conditions, in particular, a high degree of financial dependence on the program and a high degree of discretion in the determination of benefits. Under these conditions, there is a greater tendency to interpret the behaviours of others as demanding a certain compliance. Other factors often assumed to be stigmatizing, such as frequent interaction between clients and officers, a high degree of visibility and stingy benefits, can reinforce the process, but are not factors by themselves.

APPENDIX "A"

Self-Administered Questionnaires

MODULE 12

WELFARE
AND
COMMUNITY EXPERIENCE

MINCOME MANITOBA

A Joint Research Project
of the Governments of
Canada and Manitoba

7th Periodic 1977

WHAT THIS IS ABOUT:

These questions have to do with your activities and your experiences in the community and with your experience with the Welfare program. People often have things they like or dislike about the way they are treated by others. We would like to give you the chance to tell us about your experiences.

Please be frank and open in answering the questions. For each question give the answer which is true for you. At the end of the questionnaire we have left space for any other comments you would like to make.

It is very important to us that you answer all the questions so that we can learn how well income assistance programs work.

In order to make sure that your answers will be kept completely confidential, please place the completed questionnaire in the envelope and seal it before returning it to the interviewer. DO NOT write your name anywhere on the questionnaire.

Thank you for your co-operation. Our study could not be done without your help.

PLEASE TURN TO PAGE 1.

SECTION 1: COMMUNITY EXPERIENCE

The questions in this section ask about things you do and experiences you have had with other groups in your neighbourhood or community. Please read each question carefully and circle the correct answer or fill in your answer in the space provided.

1. When were you born?

____/____/____
DAY MONTH YEAR

2. (a) How often do you attend the meetings or activities of the groups listed below:

CIRCLE THE NUMBER CORRESPONDING TO HOW OFTEN YOU ATTEND

	<u>NEVER</u>	<u>OCCASIONALLY</u>	<u>REGULARLY</u>
Neighbourhood associations	1	2	3
Home and School	1	2	3
Sports clubs or teams	1	2	3
Labour unions	1	2	3
Veterans' organizations	1	2	3
Civil rights organizations	1	2	3
Cultural organizations	1	2	3
Political clubs or organizations	1	2	3
Church groups	1	2	3
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2	3
Boy Scouts, Girl Guides, 4-H Clubs	1	2	3
Musical groups and clubs	1	2	3
Science clubs, historical and art associations	1	2	3
Social clubs	1	2	3
Recreational or hobby clubs	1	2	3
Business or professional associations	1	2	3
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.O.F.)	1	2	3

2. (b) Do you hold a position such as secretary, chairman, etc. in any of these groups?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER IN EACH CASE

	<u>YES</u>	<u>NO</u>
Neighbourhood associations	1	2
Parent-teacher associations	1	2
Sports clubs or teams	1	2
Labour unions	1	2
Veterans' organizations	1	2
Civil rights organizations	1	2
Cultural organizations	1	2
Political clubs or organizations	1	2
Church groups	1	2
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2
Boy Scouts, Girl Guides, 4-H Clubs	1	2
Musical groups and clubs	1	2
Science clubs; historical and art associations	1	2
Social clubs	1	2
Recreational or hobby clubs	1	2
Business or professional associations	1	2
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.D.E.)	1	2

3. During a normal week, how much of your spare time do you spend with the following people? (By spare time we mean the time when you are not sleeping, at work, or doing house work).

CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF TIME YOU SPEND WITH EACH

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
Immediate family?	1	2	3	4	5
Neighbours?	1	2	3	4	5
Relatives?	1	2	3	4	5
Workmates or former workmates?	1	2	3	4	5
Other friends?	1	2	3	4	5
By yourself?	1	2	3	4	5

4. During a normal week, how much of your spare time do you spend in each of the following places?

CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF SPARE TIME YOU SPEND IN EACH OF THESE PLACES

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
At home?	1	2	3	4	5
At other people's homes?	1	2	3	4	5
At community halls, parks, arenas?	1	2	3	4	5
At movie theaters?	1	2	3	4	5
At stores?	1	2	3	4	5

5. How would you describe the services that you received from the following people during the last year? Were you ever refused their services, or would you say the services you did receive were inadequate, or adequate, or did you not need the services of these people?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER FOR EACH

	<u>WAS REFUSED SERVICE</u>	<u>RECEIVED INADEQUATE SERVICE</u>	<u>RECEIVED ADEQUATE SERVICE</u>	<u>HAVEN'T NEEDED SUCH SERVICES</u>
A doctor	1	2	3	4
A lawyer	1	2	3	4
A social worker	1	2	3	4
A dentist	1	2	3	4
A minister or a priest	1	2	3	4
A day care worker	1	2	3	4
A public official	1	2	3	4

6. During the last year, have you or members of your family had any problems or difficulties with the following types of people:

	<u>YES</u>	<u>NO</u>
Politicians	1	2
Police	1	2
Telephone company	1	2
Hydro company	1	2
Autopac	1	2 Or, 3 (I have no car)
Manitoba Medical Services	1	2
Your children's teachers	1	2 Or, 3 (No, I have no children in school)

7. (a) During the last year has any bank, credit union or trust company given you any trouble about a loan you have had?

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN THE
LAST YEAR _____ 3

7. (b) Did any bank, credit union or trust company refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN IN
THE LAST YEAR _____ 3

8. (a) During the last year has any finance company or private lending institution given you any trouble about a loan you have had?

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN THE
LAST YEAR _____ 3

8. (b) Did a finance company or private lending institution refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN
IN THE LAST YEAR _____ 3

9. (a) During the last year have creditors or stores given you any trouble about a purchase you made on credit or on time?

YES _____ 1

NO _____ 2

HAVE NOT BOUGHT ANYTHING ON
CREDIT OR TIME IN THE LAST
YEAR _____ 3

9. (b) Has a merchant ever refused to let you buy something on time or on credit in the last year?

YES _____ 1

NO _____ 2

HAVE NOT TRIED TO BUY ANYTHING
ON TIME OR CREDIT IN THE LAST
YEAR _____ 3

10. (a) Has your landlord given you any trouble during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (b) Has any landlord asked you to move out of an apartment during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (c) Has any landlord refused to rent to you during the last year?

YES _____ 1

NO _____ 2

HAVEN'T TRIED TO RENT
ANOTHER APARTMENT _____ 3

11.

If you have had difficulties with people in the community do you think it is because of your income?

YES _____ 1

NO _____ 2

HAVE HAD NO DIFFICULTIES _____ 3

SECTION 2: WELFARE EXPERIENCE

The questions in this section have to do with your experience with the Municipal or Provincial welfare programs.

YOUR ANSWERS TO THESE QUESTIONS WILL BE KEPT STRICTLY CONFIDENTIAL AND WILL IN NO WAY AFFECT YOUR WELFARE PAYMENTS

12. When did you or your family first start receiving welfare?

MONTH — / — YEAR

13. (a) How many times in the last year has someone from the welfare office phoned you?

NUMBER OF TIMES

13. (b) How many times in the last year has someone from welfare come to your home?

NUMBER OF TIMES

14. How many times have you phoned the welfare office in the last year?

NUMBER OF TIMES

To get help with filling out forms?

To get further information about the welfare regulations?

To ask about a late cheque?

To ask about the amount of the cheque?

For other reasons?(SPECIFY)

15. How many times have you gone to the welfare office in the last year?

NUMBER OF TIMES

To get help with filling out forms?

To get further information about the rules?

To ask about a late cheque?

To ask about the amount of the cheque?

To pick up a cheque?

For other reasons?(SPECIFY)

16. (a) Has anyone from the welfare office ever asked you a question that you feel they had no right to ask?

CIRCLE THE NUMBER BESIDE YOUR ANSWER

YES _____ 1

NO _____ 2

16. (b) Has anyone from welfare ever criticized the way you or members of your family do things?

YES _____ 1

NO _____ 2

16. (c) Has anyone from welfare ever asked your friends or neighbours questions about you or your family?

YES _____ 1

NO _____ 2

DON'T KNOW _____ 3

16. (d) Has anyone from welfare ever come to your home without checking with you beforehand?

YES _____ 1

NO _____ 2

16. (e) Has anyone from welfare ever contacted another individual or agency about your situation? (For example: a teacher, doctor, lawyer, creditor or counsellor).

YES _____ 1

NO _____ 2

DON'T KNOW _____ 3

16. (f) Has anyone from welfare ever asked you to do anything besides reporting income in order to receive benefits? (For example: go to see a family counsellor, a lawyer, etc.)

YES _____ 1

NO _____ 2

16. (g) Were you ever asked to provide proof of your income before receiving welfare payments?

YES _____ 1

NO _____ 2

16. (h) Were you ever asked to provide proof of marriage before receiving welfare payments?

YES _____ 1

NO _____ 2

16. (i) Have you ever been made to wait for more than an hour in the welfare office before being looked after?

YES _____ 1

NO _____ 2

16. (j) Have you ever had difficulty getting enough money from welfare for the special needs of your family?

YES _____ 1

NO _____ 2

17. (a) Have you ever complained to welfare officials about these things mentioned above when they happened?

NEVER HAPPENED _____ 1

YES _____ 2

NO _____ 3: If NO, is there any reason why you didn't?

_____
_____
_____
_____

17. (b) Have you ever questioned officials at welfare about a decision they have made about your situation?

YES _____ 1

NO _____ 2

17. (c) Have you ever asked that your payments be increased?

YES _____ 1

NO _____ 2

18. (a) Do your monthly welfare payments ever arrive late?

NEVER _____ 1

HARDLY EVER _____ 2

OCCASIONALLY _____ 3

OFTEN _____ 4

ALWAYS _____ 5

18. (b) Have you ever felt uncertain about the length of time you would be allowed to stay on welfare?

NEVER _____ 1

HARDLY EVER _____ 2

OCCASIONALLY _____ 3

OFTEN _____ 4

ALWAYS _____ 5

18. (c) Do you ever worry about whether or not your next month's payment will be large enough to cover your expenses for that month?

NEVER _____ 1

HARDLY EVER _____ 2

OCCASIONALLY _____ 3

OFTEN _____ 4

ALWAYS _____ 5

19. (a) How do you usually get your payments?

BY MAIL _____ 1

DEPOSITED DIRECTLY IN
THE BANK _____ 2

MUST PICK THEM UP AT
THE OFFICE _____ 3

19. (b) Below, circle the number beside each of the expenses welfare pays directly for you.

UTILITIES _____ 1

MORTGAGE _____ 2

RENT _____ 3

DEBTS _____ 4

MEDICAL-OR DENTAL BILLS _____ 5

TRAINING, SCHOOL EXPENSES _____ 6

OTHER (SPECIFY) _____ 7

NONE OF THESE _____ 8

19. (c) Do you receive vouchers or coupons as part of your benefits?

YES _____ 1

NO _____ 2

20. Indicate the main reason why you decided to go on welfare.

_____
_____

21. (a) Have you or your children had any difficulties or problems with people or businesses in the community which you think happened because you were on welfare?

NEVER _____ 1

HARDLY EVER _____ 2

OCCASIONALLY _____ 3

OFTEN _____ 4

ALWAYS _____ 5

21. (b) Do you ever feel embarrassed or uncomfortable when you are with people who are not on welfare?

NEVER _____ 1

HARDLY EVER _____ 2

OCCASIONALLY _____ 3

OFTEN _____ 4

ALWAYS _____ 5

22. Have you ever attempted to hide the fact that you are receiving welfare from any of the following people?

CIRCLE THE NUMBER BESIDE THE BEST ANSWER FOR EACH

	<u>YES</u>	<u>NO</u>	<u>DON'T CARE WHETHER THEY KNOW</u>
From your parents?	1	2	3
From your relatives?	1	2	3
From your neighbours?	1	2	3
From your workmates or former workmates?	1	2	3
From your other friends?	1	2	3
From any storekeepers?	1	2	3
From your children?	1	2	3 Or, 4 (I have no children)
From your children's teachers?	1	2	3 Or, 4 (I have no children in school)

23. If it would improve your income, would you be willing to go on a program like Mincome?

YES _____ 1

DON'T KNOW _____ 2

ONLY IF NECESSARY _____ 3

NO _____ 4: If NO, why wouldn't you?

COMMENTS

If you have other things you would like to tell us about what you like or dislike about being on Welfare, please use the space below.

[illegible]

WHEN YOU HAVE ANSWERED ALL THE QUESTIONS, PLEASE
PLACE THE QUESTIONNAIRE IN THE ENVELOPE, SEAL IT,
AND RETURN IT TO THE INTERVIEWER.

THANK YOU FOR YOUR ASSISTANCE.

MODULE 13

COMMUNITY PARTICIPATION

MINCOME MANITOBA

A Joint Research Project
of the Governments of
Canada and Manitoba

7th Periodic 1977

WHAT THIS IS ABOUT:

These questions have to do with your activities and your experiences in the community. People often have things they like or dislike about the way they are treated by others. We would like to give you the chance to tell us about your experiences.

Please be frank and open in answering the questions. For each question give the answer which is true for you.

It is very important to us that you answer all the questions so that we can learn how well income assistance programs work.

In order to make sure that your answers will be kept completely confidential, please place the completed questionnaire in the envelope and seal it before returning it to the interviewer. DO NOT write your name anywhere on the questionnaire.

Thank you for your co-operation. Our study could not be done without your help.

PLEASE TURN TO PAGE 1.

SECTION 1: COMMUNITY EXPERIENCE

The questions in this section ask about things you do and experiences you have had with other groups in your neighbourhood or community. Please read each question carefully and circle the correct answer or fill in your answer in the space provided.

1. When were you born?

_____
DAY MONTH YEAR

2. (a) How often do you attend the meetings or activities of the groups listed below:

CIRCLE THE NUMBER CORRESPONDING TO HOW OFTEN YOU ATTEND

	<u>NEVER</u>	<u>OCCASIONALLY</u>	<u>REGULARLY</u>
Neighbourhood associations	1	2	3
Home and School	1	2	3
Sports clubs or teams	1	2	3
Labour unions	1	2	3
Veterans' organizations	1	2	3
Civil rights organizations	1	2	3
Cultural organizations	1	2	3
Political clubs or organizations	1	2	3
Church groups	1	2	3
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2	3
Boy Scouts, Girl Guides, 4-H Clubs	1	2	3
Musical groups and clubs	1	2	3
Science clubs, historical and art associations	1	2	3
Social clubs	1	2	3
Recreational or hobby clubs	1	2	3
Business or professional associations	1	2	3
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.D.E.)	1	2	3

2. (b) Do you hold a position such as secretary, chairman, etc. in any of these groups?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER IN EACH CASE

	<u>YES</u>	<u>NO</u>
Neighbourhood associations	1	2
Parent-teacher associations	1	2
Sports clubs or teams	1	2
Labour unions	1	2
Veterans' organizations	1	2
Civil rights organizations	1	2
Cultural organizations	1	2
Political clubs or organizations	1	2
Church groups	1	2
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2
Boy Scouts, Girl Guides, 4-H Clubs	1	2
Musical groups and clubs	1	2
Science clubs, historical and art associations	1	2
Social clubs	1	2
Recreational or hobby clubs	1	2
Business or professional associations	1	2
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.D.E.)	1	2

During a normal week, how much of your spare time do you spend with the following people? (By spare time we mean the time when you are not sleeping, at work, or doing house work).

3. CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF TIME YOU SPEND WITH EACH

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
Immediate family?	1	2	3	4	5
Neighbours?	1	2	3	4	5
Relatives?	1	2	3	4	5
Workmates or former workmates?	1	2	3	4	5
Other friends?	1	2	3	4	5
By yourself?	1	2	3	4	5

4. During a normal week, how much of your spare time do you spend in each of the following places?

CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF SPARE TIME YOU SPEND IN EACH OF THESE PLACES

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
At home?	1	2	3	4	5
At other people's homes?	1	2	3	4	5
At community halls, parks, arenas?	1	2	3	4	5
At movie theaters?	1	2	3	4	5
At stores?	1	2	3	4	5

5. How would you describe the services that you received from the following people during the last year? Were you ever refused their services, or would you say the services you did receive were inadequate or adequate, or did you not need the services of these people?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER FOR EACH

	<u>WAS REFUSED SERVICE</u>	<u>RECEIVED INADEQUATE SERVICE</u>	<u>RECEIVED ADEQUATE SERVICE</u>	<u>HAVEN'T NEEDED SUCH SERVICES</u>
A doctor	1	2	3	4
A lawyer	1	2	3	4
A social worker	1	2	3	4
A dentist	1	2	3	4
A minister or a priest	1	2	3	4
A day care worker	1	2	3	4
A public official	1	2	3	4

6. During the last year, have you or members of your family had any problems or difficulties with the following types of people:

	<u>YES</u>	<u>NO</u>
Politicians	1	2
Police	1	2
Telephone company	1	2
Hydro company	1	2
Autopac	1	2 Or, 3 (I have no car)
Manitoba Medical Services	1	2
Your children's teachers	1	2 Or, 3 (No, I have no children in school)

7. (a) During the last year has any bank, credit union or trust company given you any trouble about a loan you have had?

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN
THE LAST YEAR _____ 3

7. (b) Did any bank, credit union or trust company refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN IN
THE LAST YEAR _____ 3

8. (a) During the last year has any finance company or private lending institution given you any trouble about a loan you have had?

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN
THE LAST YEAR _____ 3

8. (b) Did a finance company or private lending institution refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN
IN THE LAST YEAR _____ 3

9. (a) During the last year have creditors or stores given you any trouble about a purchase you made on credit or on time?

YES _____ 1

NO _____ 2

HAVE NOT BOUGHT ANYTHING ON
CREDIT OR TIME IN THE LAST
YEAR _____ 3

9. (b) Has a merchant ever refused to let you buy something on time or on credit in the last year?

YES _____ 1

NO _____ 2

HAVE NOT TRIED TO BUY ANYTHING
ON TIME OR CREDIT IN THE LAST
YEAR _____ 3

10. (a) Has your landlord given you any trouble during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (b) Has any landlord asked you to move out of an apartment during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (c) Has any landlord refused to rent to you during the last year?

YES _____ 1

NO _____ 2

HAVEN'T TRIED TO RENT
ANOTHER APARTMENT _____ 3

11. If you have had difficulties with people in the community do you think it is because of your income?

YES _____ 1

NO _____ 2

HAVE HAD NO DIFFICULTIES _____ 3

12. (a) If it would improve your income, would you be willing to go on welfare?

YES _____ 1

DON'T KNOW _____ 2

ONLY IF NECESSARY _____ 3

NO _____ 4: If NO, why not?

_____
_____

12. (b) If it would improve your income, would you be willing to go on a program like Mincome?

YES _____ 1

DON'T KNOW _____ 2

ONLY IF NECESSARY _____ 3

NO _____ 4: If NO, why not?

_____
_____

6

WHEN YOU HAVE ANSWERED ALL THE QUESTIONS, PLEASE
PLACE THE QUESTIONNAIRE IN THE ENVELOPE, SEAL IT,
AND RETURN IT TO THE INTERVIEWER.

THANK YOU FOR YOUR ASSISTANCE

MODULE 14

MINCOME
AND
COMMUNITY EXPERIENCE

MINCOME MANITOBA

A Joint Research Project
of the Governments of
Canada and Manitoba

7th Periodic 1977

WHAT THIS IS ABOUT:

These questions have to do with your activities and your experiences in the community and with your experience with the Mincome program. People often have things they like or dislike about the way they are treated by others. We would like to give you the chance to tell us about your experiences.

Please be frank and open in answering the questions. For each question give the answer which is true for you. At the end of the questionnaire we have left space for any other comments you would like to make.

It is very important to us that you answer all the questions so that we can learn how well income assistance programs work.

In order to make sure that your answers will be kept completely confidential, please place the completed questionnaire in the envelope and seal it before returning it to the interviewer. DO NOT write your name anywhere on the questionnaire.

Thank you for your co-operation. Our study could not be done without your help.

PLEASE TURN TO PAGE 1.

SECTION 1: COMMUNITY EXPERIENCE

The questions in this section ask about things you do and experiences you have had with other groups in your neighbourhood or community. Please read each question carefully and circle the correct answer or fill in your answer in the space provided.

1. When were you born?

_____/_____/_____
DAY MONTH YEAR

2. (a) How often do you attend the meetings or activities of the groups listed below:

CIRCLE THE NUMBER CORRESPONDING TO HOW OFTEN YOU ATTEND

	<u>NEVER</u>	<u>OCCASIONALLY</u>	<u>REGULARLY</u>
Neighbourhood associations	1	2	3
Home and School	1	2	3
Sports clubs or teams	1	2	3
Labour unions	1	2	3
Veterans' organizations	1	2	3
Civil rights organizations	1	2	3
Cultural organizations	1	2	3
Political clubs or organizations	1	2	3
Church groups	1	2	3
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2	3
Boy Scouts, Girl Guides, 4-H Clubs	1	2	3
Musical groups and clubs	1	2	3
Science clubs, historical and art associations	1	2	3
Social clubs	1	2	3
Recreational or hobby clubs	1	2	3
Business or professional associations	1	2	3
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.D.E.)	1	2	3

2. (b) Do you hold a position such as secretary, chairman, etc. in any of these groups?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER IN EACH CASE

	<u>YES</u>	<u>NO</u>
Neighbourhood associations	1	2
Parent-teacher associations	1	2
Sports clubs or teams	1	2
Labour unions	1	2
Veterans' organizations	1	2
Civil rights organizations	1	2
Cultural organizations	1	2
Political clubs or organizations	1	2
Church groups	1	2
Service clubs (such as Lions, Rotary, Kiwanis, Big Brothers, Kinsmen, Legion)	1	2
Boy Scouts, Girl Guides, 4-H Clubs	1	2
Musical groups and clubs	1	2
Science clubs, historical and art associations	1	2
Social clubs	1	2
Recreational or hobby clubs	1	2
Business or professional associations	1	2
Lodges (such as Masonic, Orange, Elks, Rebekah, I.O.D.E.)	1	2

3. During a normal week, how much of your spare time do you spend with the following people? (By spare time we mean the time when you are not sleeping, at work, or doing house work).

CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF TIME YOU SPEND WITH EACH

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
Immediate family?	1	2	3	4	5
Neighbours?	1	2	3	4	5
Relatives?	1	2	3	4	5
Workmates or former workmates?	1	2	3	4	5
Other friends?	1	2	3	4	5
By yourself?	1	2	3	4	5

4. During a normal week, how much of your spare time do you spend in each of the following places?

CIRCLE THE NUMBER WHICH CORRESPONDS TO THE AMOUNT OF SPARE TIME YOU SPEND IN EACH OF THESE PLACES

	<u>NONE OF MY TIME</u>	<u>A LITTLE</u>	<u>SOME</u>	<u>A GREAT DEAL</u>	<u>ALMOST ALL OF MY TIME</u>
At home?	1	2	3	4	5
At other people's homes?	1	2	3	4	5
At community halls, parks, arenas?	1	2	3	4	5
At movie theaters?	1	2	3	4	5
At stores?	1	2	3	4	5

5. How would you describe the services that you received from the following people during the last year? Were you ever refused their services, or would you say the services you did receive were inadequate or adequate, or did you not need the services of these people?

CIRCLE THE NUMBER WHICH CORRESPONDS TO YOUR ANSWER FOR EACH

	<u>WAS REFUSED SERVICE</u>	<u>RECEIVED INADEQUATE SERVICE</u>	<u>RECEIVED ADEQUATE SERVICE</u>	<u>HAVEN'T NEEDED SUCH SERVICES</u>
A doctor	1	2	3	4
A lawyer	1	2	3	4
A social worker	1	2	3	4
A dentist	1	2	3	4
A minister or a priest	1	2	3	4
A day care worker	1	2	3	4
A public official	1	2	3	4

6. During the last year, have you or members of your family had any problems or difficulties with the following types of people:

	<u>YES</u>	<u>NO</u>
Politicians	1	2
Police	1	2
Telephone company	1	2
Hydro company	1	2
Autopac	1	2 Or, 3 (I have no car)
Manitoba Medical Services	1	2
Your children's teachers	1	2 Or, 3 (No, I have no children in school)

7. (a) During the last year has any bank, credit union or trust company given you any trouble about a loan you have had?

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN THE
LAST YEAR _____ 3

7. (b) Did any bank, credit union or trust company refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN IN
THE LAST YEAR _____ 3

8. (a) During the last year has any finance company or private lending institution given you any trouble about a loan you have had? _____

YES _____ 1

NO _____ 2

HAVE NOT HAD A LOAN IN THE
LAST YEAR _____ 3

8. (b) Did a finance company or private lending institution refuse to give you a loan in the last year?

YES _____ 1

NO _____ 2

HAVE NOT ASKED FOR A LOAN
IN THE LAST YEAR _____ 3

9. (a) During the last year have creditors or stores given you any trouble about a purchase you made on credit or on time?

YES _____ 1

NO _____ 2

HAVE NOT BOUGHT ANYTHING ON
CREDIT OR TIME IN THE LAST
YEAR _____ 3

9. (b) Has a merchant ever refused to let you buy something on time or on credit in the last year?

YES _____ 1

NO _____ 2

HAVE NOT TRIED TO BUY ANYTHING
ON TIME OR CREDIT IN THE LAST
YEAR _____ 3

10. (a) Has your landlord given you any trouble during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (b) Has any landlord asked you to move out of an apartment during the last year?

YES _____ 1

NO _____ 2

OWN MY OWN HOME _____ 3

10. (c) Has any landlord refused to rent to you during the last year?

YES _____ 1

NO _____ 2

HAVEN'T TRIED TO RENT
ANOTHER APARTMENT _____ 3

11. If you have had difficulties with people in the community do you think it is because of your income?

YES _____ 1

NO _____ 2

HAVE HAD NO DIFFICULTIES _____ 3

SECTION 2: MINCOME EXPERIENCE

The questions in this section have to do with your experience with the Mincome program. These questions refer to your experience with the Payments Office and officers, NOT to your experience with the interviewers.

YOUR ANSWERS TO THESE QUESTIONS WILL BE KEPT STRICTLY CONFIDENTIAL AND WILL IN NO WAY AFFECT YOUR MINCOME PAYMENTS

12. How many times in the last year has someone from the Mincome payments office phoned you?

DO NOT COUNT CALLS FROM INTERVIEWERS

Phoned you about your income report form?

_____
NUMBER OF TIMES

Phoned you about your tax return?

_____
NUMBER OF TIMES

Phoned you about staying on the program?

_____
NUMBER OF TIMES

For other reasons (SPECIFY) _____

_____
NUMBER OF TIMES

13. How many times in the last year has someone from the Mincome payments office come to your home?

DO NOT COUNT INTERVIEWERS

Come to talk to you about your income report form?

_____
NUMBER OF TIMES

Come to talk to you about your tax return?

_____
NUMBER OF TIMES

Come to talk to you about staying on the program?

_____
NUMBER OF TIMES

For other reasons (SPECIFY) _____

_____
NUMBER OF TIMES

14. How many times have you phoned the Mincome payments office in the last year?

NUMBER OF TIMES

To get help with filling out forms? _____

To get further information about the Mincome regulations? _____

To ask about a late cheque? _____

To ask about the amount of the cheque? _____

For other reasons? (SPECIFY) _____
_____

15. How many times have you gone to the Mincome payments office in the last year?

NUMBER OF TIMES

To get help with filling out forms? _____

To get further information about the rules? _____

To ask about a late cheque? _____

To ask about the amount of the cheque? _____

To pick up a cheque? _____

For other reasons? (SPECIFY) _____
_____

16. The following questions relate to your experience with Mincome payments officers.

THESE QUESTIONS DO NOT REFER TO YOUR CONTACT WITH THE INTERVIEWERS

16. (a) Has anyone from the Mincome payments office ever asked you a question that you feel they had no right to ask?

CIRCLE THE NUMBER BESIDE YOUR ANSWER

YES _____ 1

NO _____ 2

16. (b) Has anyone from the Mincome payments office criticized the way you or members of your family do things?

YES _____ 1

NO _____ 2

16. (c) Has anyone from the Mincome payments office ever asked your friends or neighbours questions about you or your family?

YES _____ 1

NO _____ 2

DON'T KNOW _____ 3

16. (d) Has anyone from the Mincome payments office ever come to your home without checking with you beforehand?

YES _____ 1

NO _____ 2

16. (e) Has anyone from the Mincome payments office ever contacted another individual or agency about your situation? (For example: a teacher, doctor, lawyer, creditor or counsellor)?

YES _____ 1

NO _____ 2

DON'T KNOW _____ 3

16. (f) Has anyone from the Mincome payments office ever asked you to do anything besides reporting income in order to receive benefits? (For example: go to see a family counsellor, a lawyer, etc.)

YES _____ 1

NO _____ 2

16. (g) Were you ever asked to provide proof of your income before receiving Mincome payments?

YES _____ 1

NO _____ 2

16. (h) Were you ever asked to provide proof of marriage before receiving Mincome payments?

YES _____ 1

NO _____ 2

16. (i) Have you ever been made to wait for more than an hour in the Mincome payments office before being looked after?

YES _____ 1

NO _____ 2

16. (j) Have you ever had difficulty getting enough money from Mincome for the special needs of your family?

YES _____ 1

NO _____ 2

17. (a) Have you ever complained to Mincome officials about these things mentioned above when they happened?

NEVER HAPPENED _____ 1

YES _____ 2

NO _____ 3: If NO, is there any reason why you didn't?

_____
_____
_____
_____

17. (b) Have you ever questioned officials at Mincome about a decision they have made about your situation?

YES _____ 1

NO _____ 2

17. (c) Have you ever asked that your payments be increased?

YES _____ 1

NO _____ 2

18. (a) Do your monthly payments from Mincome ever arrive late?

NEVER _____ 1
HARDLY EVER _____ 2
OCCASIONALLY _____ 3
OFTEN _____ 4
ALWAYS _____ 5

18. (b) Have you ever felt uncertain about the length of time you would be allowed to stay on the Mincome program?

NEVER _____ 1
HARDLY EVER _____ 2
OCCASIONALLY _____ 3
OFTEN _____ 4
ALWAYS _____ 5

18. (c) Do you ever worry about whether or not your next month's payment will be large enough to cover your expenses for that month?

NEVER _____ 1
HARDLY EVER _____ 2
OCCASIONALLY _____ 3
OFTEN _____ 4
ALWAYS _____ 5

19. How do you usually get your payments?

BY MAIL _____ 1
DEPOSITED DIRECTLY IN THE BANK _____ 2
MUST PICK THEM UP AT THE OFFICE _____ 3

20. Indicate the main reason why you decided to go on the Mincome program.

---

21. (a) Have you or your children had any difficulties or problems with people or businesses in the community which you think happened because you were on Mincome?

NEVER _____ 1
HARDLY EVER _____ 2
OCCASIONALLY _____ 3
OFTEN _____ 4
ALWAYS _____ 5

21. (b) Do you ever feel embarrassed or uncomfortable when you are with people who are not on Mincome?

NEVER _____ 1
HARDLY EVER _____ 2
OCCASIONALLY _____ 3
OFTEN _____ 4
ALWAYS _____ 5

22. Have you ever attempted to hide the fact that you are receiving Mincome from any of the following people?

CIRCLE THE BEST ANSWER FOR EACH

	<u>YES</u>	<u>NO</u>	<u>DON'T CARE WHETHER THEY KNOW</u>
From your parents?	1	2	3
From your relatives?	1	2	3
From your neighbours?	1	2	3
From your workmates or former workmates?	1	2	3
From your other friends?	1	2	3
From any storekeepers?	1	2	3
From your children?	1	2	3 Or, 4 (I have no children)
From your children's teachers?	1	2	3 Or, 4 (I have no children in school)

23. If it would improve your income, would you be willing to go on welfare?

YES _____ 1

DON'T KNOW _____ 2

ONLY IF NECESSARY _____ 3

NO _____ 4: If NO, why wouldn't you?

COMMENTS

If you have other things you would like to tell us about what you like or dislike about being on Mincome, please use the space below.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are some small dark specks and faint marks scattered across the surface, possibly from scanning or handling. A small, handwritten mark resembling a checkmark or a stylized 'e' is visible on the right side, about halfway down the page. Another similar mark is located near the bottom right corner. The overall appearance is that of a clean but slightly worn piece of stationery.

WHEN YOU HAVE ANSWERED ALL THE QUESTIONS, PLEASE
PLACE THE QUESTIONNAIRE IN THE ENVELOPE, SEAL IT,
AND RETURN IT TO THE INTERVIEWER.

THANK YOU FOR YOUR ASSISTANCE.

APPENDIX "B"

Interviewer Instructions

INTERVIEWER INSTRUCTIONS FOR MODULES 12, 13 and 14

1. Introduction

Each head in all sites is to receive one of these three modules. The questionnaires have been designed specifically for self-administration; however, successful administration of the modules will depend, in part, on the ability of the interviewer:

- (1) to get the respondent to fill out the right module for his family; and
- (2) to get him to fill it out correctly and completely.

These modules are somewhat shorter than the self-administered husband and wife modules administered at the 5th Periodic -- Modules 12 and 14 having 22 questions and Module 13 having only 13 questions. There is no skip logic contained within the modules so that each respondent should answer every question in the particular module he has been given. The format and instructions for answering the questions are very similar to the previous self-administered modules. To answer a question the respondent must circle the number corresponding to his answer, or in some cases fill in an answer in the space provided.

The time required to read and mark the answers on the questionnaire will vary with the individual; however, most respondents will be able to complete the questionnaire in about 15 minutes or less.

You can expect:

- (1) that respondents will inquire about the purpose of the questionnaire;
- (2) that some respondents will need to be encouraged to fill it out;
- (3) that some will require additional assurances that their answer will never be connected with their name;
- (4) and that there will be a few who will have difficulty reading the questions and following the instructions.

2. Purpose of the Questionnaire

Briefly, the objective of the Modules 12, 13 and 14 is to study the experiences of those people who are on public assistance programs as compared to those in the same income range who are not receiving assistance. We are concerned about the amount of stigma recipients experience and to what extent various aspects of the way in which assistance is delivered contribute to certain negative and discriminating experiences commonly experienced by recipients of assistance.

The questions have been designed to provide information on the types of activities people participate in, the types of professional and commercial services they use, what difficulties they have encountered in attempting to avail themselves of the various services; and for those who are on guaranteed income or welfare, how much contact they have had with the program, the nature of this contact, and the specific manner in which they receive the income assistance. At the end of the questionnaires (except

Module 13), respondents are given the opportunity to make any comments they wish about the program that they are on. This survey will provide information indicating whether or in what way receiving assistance affects people's daily round of activities. It will also indicate whether any such effect varies with the way in which social assistance is administered or delivered.

The study is important because it is one of few attempts to systematically examine the manner in which the stigma of receiving social assistance affects the daily lives of recipients, and addresses the question of whether a change in the manner in which social assistance is delivered can reduce the stigma.

3. Administration

Each head in all sites should receive one module and an envelope. On completing Module 2, you will find two questions (see Questions #42 and 43) which will determine which of the Modules 12, 13 and 14 you will give to the heads of that family.

Question #42: (a) If the family is receiving welfare according to Question #30 of Module 2, then hand each head a pink "Welfare and Community Experience" Module (#12) and an envelope. Disregard the instructions in Question #43.

(b) If the family is not receiving welfare, proceed to Question #43.

Question #43: (a) If the family has a "9" in their assignment cell (i.e., they are not enrolled in Mincome payments), hand each head a yellow "Community Participation" Module (#13). These families, not enrolled for either welfare or Mincome payments, will be asked only about their community experiences.

(b) The heads of all other families should be given a green "Mincome and Community Experience" Module (#14). This group should include all those enrolled in Mincome payments and who do not also receive welfare.

You might introduce the self-administered module with the following type of statement:

This questionnaire will help us to gather information about the way in which income assistance programs affect other areas of a person's life, such as his daily activities and experiences with others in the community. We are depending on your assistance in filling out this questionnaire. This additional information will make an important contribution to our study of how well different types of assistance programs work.

In addition, it would help to emphasize:

(1) how important it is that each person complete the questionnaire;

- (2) that it is extremely important that they answer every question;
- (3) that the respondent should use this opportunity to be frank, open, and honest; and
- (4) that their answers will never be connected with their names, and that to ensure complete confidentiality they should place the completed questionnaire in the envelope and seal it before returning it to the interviewer.

When the respondent has completed the questionnaire, see that he puts it in the envelope and seals it. When he returns the envelope to you, please an I.D. label on the upper right hand corner and mark M or F on the label for male or female. Place the envelope in the folder with all the other completed modules. The envelopes should remain sealed but in the folder throughout the records and Q.C. processes, to be opened only by the researcher.

Although the questionnaire was designed specifically as a self-administered module, there will be some respondents who will ask for assistance:

- (1) as to how to indicate their answer;
  - (2) as to the meaning of a particular word;
  - (3) as to the particular meaning of a question.
1. If the instructions on how to answer a question are inadequate, you may assist by explaining it to them.

2. If they do not know what a particular word means, you may explain the meaning for them.
3. If they say they do not understand a particular question, it may help to read it aloud for them; however, do not attempt to paraphrase it, interpret it or elaborate on it. By and large, if they have had any of the types of experience referred to in the questions, the questions will be meaningful to them. A more specific meaning conveyed to them by one interviewer may be quite different from that of another interviewer.

If the respondent begins to comment on the questionnaire or the subject of any of the questions, ask him to write his comments down, either beside the question or at the end of the questionnaire.

Because of the small number of certain types of individuals and families which are of particular interest to this study, it is crucial that we have as few incompletes and refusals as possible. However, some may be inclined to refuse. It may help to emphasize the importance of the information provided by each individual to the success of the study, and that their responses will be kept strictly confidential, and, therefore, cannot affect their payments from any government program. The success of this survey will depend to a large degree on the ability of the interviewer to sell the respondent on the importance of the survey and their participation in it, and to convince them of the confidentiality.

APPENDIX "C"

File Construction and Data Cleaning

File Construction and Data Cleaning

1. Data File Construction

The data for the stigma study were keypunched directly from the coding worksheets by Data Key Systems and Datacap Ltd. A raw data tape was created and loaded at the Computer Science Centre, EMR from which a SPSS system file (version 6.5) was created. The data file construction was done at the Department of National Health and Welfare, using CDC Cyber 74 and operating system NOS/BE.

2. Data Cleaning

The data cleaning process involved a number of steps, starting with the application of range checks and continuing through the assignment of missing values, variable construction and some preliminary analyses. The frequency distributions of all discrete variables were examined for ineligible codes. There were two types of errors detected and corrected: some systematic and obvious coding errors or inconsistencies, and some random keypunch errors. Range checks were applied to all continuous variables. Finally, the data were scrutinized for between-variable inconsistencies. For example, the data were checked to ensure that there was a start and an end date for each job reported or that the number of responses to self-administered questions were consistent with the numbered modules completed.

3. Defining the Subsamples

A temporary variable PROGRAM STATUS was created dividing the total sample along the lines that the interviewers were instructed to administer the three questionnaires. The three groups WELFARE, CONTROLS and MINCOME were examined in terms of the actual self-administered module they completed (V093), their activity status with respect to the experiment (V273), and their current treatment (V274).

A certain number of inconsistencies were found between the way in which the interviewer instructions divided up the sample, and the module that certain respondents actually received, or the treatment they actually experienced. In each case the hard copy document was checked for keypunch errors or a possible reason for the discrepancy. These inconsistencies resulted from:

- (a) interviewer errors where, for no apparent reason, the interviewer simply administered the wrong module (30 cases);
- (b) situations where the assignment cell was different from the actual treatment that the respondent was receiving at the time of the interview. There were cases where participants, assigned to a treatment plan, decided not to receive guaranteed income payments but to remain on welfare (38 cases), and cases where guaranteed income recipients had switched to welfare after enrolling (16 cases). In these cases the participants were converted to "controls" for the purposes of the experiment. Finally, a certain number of participants had been assigned

- treatment plans but refused to receive any guaranteed income benefits and thus received the same treatment as the controls;
- (c) the cases where the respondent was receiving both welfare and guaranteed income payments (16 cases).

In order to create a permanent variable indicating the program (treatment) that a respondent was subject to, these inconsistencies were resolved in the following manner. The sample was divided into the three groups in line with the interviewer's instructions, except:

- (a) where the respondent received both welfare and guaranteed income payments, in which case he was placed in a fourth group, "welfare-treatment";
- (b) in two cases, where the amount of welfare attributed to the unit was received by the parents of the respondent. In one case R was classified as a guaranteed income recipient; in the other, as a non-recipient.

Table 1: PROGRAM STATUS BY ACTIVITY STATUS

	Active Treatment	Active Controls	Not Active Controls	Treatment Attriter	Treatment Refuser	IRF Control Activities	Total
Welfare	0	117	46	5	34	6	208
Controls	0	200	311	0	0	26	537
Mincome	1,356	0	0	88	130	0	1,574
Welfare- Treatment	37	0	0	0	0	0	37
Total	1,393	317	357	93	164	32	2,356

4. The Subsamples -- Size and Composition (Table A)

The guaranteed income sample (n=1,574) includes those who were invited to enroll and did (guaranteed income recipients), those who were invited to enroll but refused (refusers), and those who enrolled but subsequently dropped out (referred to as attriters). The analyses were conducted on the guaranteed income recipients -- those who were still active participants in the guaranteed income payments program (n=1,356).

The control sample (n=537) is comprised of a group (37 per cent) who, in addition to being interviewed, completed monthly income report forms as did the guaranteed income recipients, and a group (58 per cent) who only received the interviews.

The welfare sample (n=208) is derived from the control group of the experimental interview panel. Fifty-six per cent of this group complete and filed income report forms, although they did not receive guaranteed income payments. It should be noted that 18 per cent of this sample were originally offered guaranteed income payments but refused to enroll (16 per cent), or enrolled but later reverted back to welfare (2 per cent).

The welfare-treatments (n=37) include those who received welfare benefits while being on guaranteed income. These benefits relate to special needs usually and are disregarded by the guaranteed income payments program when calculating the benefits, but show up in the interview schedules. This group was dropped out of the analyses.

5. Completeness of the Data (Table B)

The data for the stigma study derived from the following sources:

- the self-administered modules were the source of the data pertaining to the dependent variables and the intervening variables as well as the qualitative data. All three of the S/A modules contained questions relating to the dependent variable. The questions pertaining to the intervening program experience variables were in only the appropriate module;
- the interviewer-administered Periodic 7 Modules were the source of the various socio-economic background data, some of which were be used as control variables (e.g., labour force activity, etc.);
- the baseline interview was the source of socio-economic variables.
  - ethnicity and education, intended as control variables;
- the payments data were the source of family income data and guaranteed income payments data.

For sectors of the sample, sources of the data were not available for one of a number of reasons. In some cases, the availability of data is a random process; in some cases, not.

Welfare		Controls	
Correct	Incorrect	Correct	Incorrect
Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module
146	19	438	18
31	43	31	18
537	(8.8%)	537	(22.8%)

Correct		Incorrect		Correct		Incorrect	
Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module
146	19	438	18	438	18	438	18
31	43	31	18	31	18	31	18
537	(8.8%)	537	(22.8%)	537	(22.8%)	537	(22.8%)

Correct		Incorrect		Correct		Incorrect	
Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module	Self-Administered Module
146	19	438	18	438	18	438	18
31	43	31	18	31	18	31	18
537	(8.8%)	537	(22.8%)	537	(22.8%)	537	(22.8%)

Table B: SMIE (continued)

Mincome		Welfare-Treatments	
1,574 (66.8%)		37 (1.9%)	
Correct Self-Administered Module	Incorrect Self-Administered Module	Correct Self-Administered Module	Incorrect Self-Administered Module
1,413	9	16	17
152		4	
Payments Data	No Payments Data	Payments Data	No Payments Data
1,265	148	16	19
B N/B	B N/B	B N/B	B N/B
6	1	12	4
1,012	253	104	44
64.3		31.8	

A major concern lies with the welfare sample whose numbers are small to begin with.

A. Correct S/A Module Completed:

Ensuring that the respondent received the correct module was the responsibility of the interviewer. The completion of an inappropriate self-administered module can be attributed to interviewer error in 2 per cent (46) of the cases. In some cases, interviewers were misled by the Assignment Cell Code which was different from the actual treatment the individual was receiving. This is reflected in the high percentage of WELFARE/TREATMENTS who received the wrong S/A module (approximately 50 per cent) and the number of welfare recipients who received an incorrect module (given that 16 per cent of the welfare recipients were originally selected for guaranteed income but refused).

- Therefore, for 50 per cent of the WELFARE/TREATMENT group and 10 per cent of the welfare group, there are no data available on their program experiences.

B. No S/A Module Completed (Table C):

The absence of an S/A module is a result of a self-selection process, which can be examined to some extent in the reasons for refusing to complete the questionnaires. It is important to notice

that in Winnipeg the refusal rate for the WELFARE group is at least twice that of either the CONTROLS or the MINCOME group. This may be a result of different literacy rates or a greater fear on the part of welfare recipients of possible repercussions. Further, the refusal rate in Dauphin is extremely high (approximately 50 per cent) for the WELFARE and CONTROL families (reflecting either an interviewing problem or a greater reluctance to discuss programs in the community).

- For 20 per cent of the WELFARE group, there is no measure of the dependent variable.
- For 10 per cent of the MINCOME group, there is no measure of the dependent variable.

C. Payments Data:

Except for those who have refused to receive payments, the presence or absence of payments data is a random process associated with the original sample assignment to two controls groups: those who file monthly and those who do not.

- Fifty per cent of the WELFARE group, 100 respondents, have both data on the dependent variable and family income data.

D. Baseline Data:

The lack of baseline data occurs mainly in those cases where the respondent was not "the head" of a family unit at enrollment -- a youth who split and formed his own unit during the experiment or an adult who joined a unit by marriage or common-law relationship.

In order to indicate the availability of baseline data, a variable VEDUC was created where VEDUC = 0 where no data were available (i.e., V302 and V306 = .99), and VEDUC = 1 where data were available (i.e., V302 = 0 or V306 = 0).

- The lack of baseline data indicates the absence of data on ethnicity or education.

- Better sources of these data will be accessible in the future.

E. Completeness of Data -- Open-Ended Questions:

A number of the questions encouraged comments by asking for the reason for the respondent's behaviour. In addition, the respondents were given an opportunity to comment on the programs at the end of the questionnaire. A surprisingly large percentage of the respondents took advantage of some of these opportunities. The following table indicates the response rates (the percentage of those for whom it was appropriate to comment/respond).

Table C: RESPONSE TO OPEN-ENDED QUESTIONS

	Welfare (Module 12)	Controls (Module 13)	Mincome (Module 14)
Modules Completed	75% (156)	94% (506)	90% (1,422)
(a) Reason for not complaining	49% (72)	N/A	33% (101)
(b) Reason for enrolling	85% (139)	N/A	84% (1,227)
(c) Reason for not going on welfare	N/A	89%	81% (559)
(d) Reason for not going on Mincome	66% (3)	88%	N/A
	33% (51)	N/A	26% (382)

(a) (Modules 12 and 14, Question #17a)

"Have you ever complained to (Mincome/Welfare) officials about these things mentioned above when they happened? If NO, is there any reason why you didn't?"

(b) (Modules 12 and 14, Question #20)

"Indicate the main reason why you decided to go on the (Mincome/Welfare) programme."

(c) (Module 12, Question #23, and Module 13, Question #12a):

"If it would improve your income, would you be willing to go on welfare? If NO, why wouldn't you?"

(c) (Module 12, Question #23, and Module 13, Question #12a):

"If it would improve your income, would you be willing to go on welfare? If NO, why wouldn't you?"

(d) (Module 14, Question #23, and Module 13, Question #12b):

"If it would improve your income, would you be willing to go on Mincome? If NO, why wouldn't you?"

(e) (Modules 12 and 14)

"If you have other things you would like to tell us about what you like or dislike about being on (Mincome/Welfare) please use the space below."

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