POLICY PREDICAMENT

Public housing was created as a response to the Great Depression in the 1930s. Today, more than 1.3 million units of public housing exist in the United States. Some argue that these areas of concentrated poverty are riddled with drugs, crime, and other social problems, and residents should therefore be removed and assimilated into "mainstream" communities. To illustrate policy analysis, we discuss at the end of this chapter the debate surrounding whether even low-income persons, particularly African Americans, benefit when they are relocated from areas of concentrated poverty and integrated into mixed-income, largely Caucasian communities. We also discuss how vast populations of destitute persons have migrated from rural to urban areas in many developing nations, but mostly live in segregated communities on their periphery with scant economic, educational, and medical services.

LEARNING OUTCOMES

By the end of this chapter, you will be able to discuss how:

1. Policy advocates use a six-step approach for developing and defending policy proposals
2. During the first step, policy advocates familiarize themselves with a specific social problem or issue or interrelated problems or issues and set a goal or goals
3. During the first step, policy advocates analyze the causes of social problems or issues using relevant theory and research
4. During the first step, policy advocates develop interventions and programs
5. During the first step, policy advocates develop preventive programs
6. During the first step, policy advocates measure the magnitude of problems and locate problems spatially
7. During the first step, policy advocates contend with the slippery nature of many social problems
8. During the first step, policy analysts can use visual aids, such as flowcharts, to map out a social issue in the context of familial, community, and economic factors

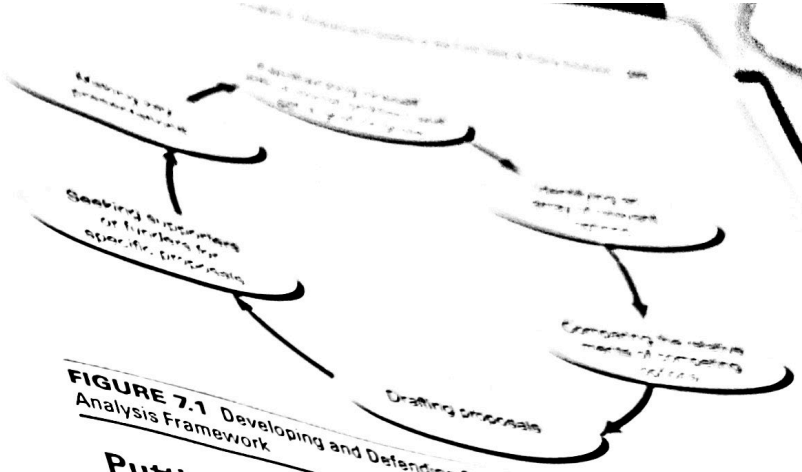


FIGURE 7.1 Developing and Defending Policy Proposals Using a Six-Step Policy Analysis Framework

Putting It All Together: A Six-Step Policy Analysis Framework

Please recall that our Policy Practice Framework that we presented in Chapter Three in Figure 3.1 identified eight tasks that policy advocates undertake. Now that we have discussed the first three of these tasks in preceding chapters (deciding what is right and wrong, navigating policy and advocacy systems, and agenda-setting), we are ready to turn to the fourth and fifth tasks in our Systems Approach to Policy Making Framework, that is, analyzing problems and writing proposals. These two tasks lie at the heart of policy advocates. They allow them to improve society by developing and defending policy proposals that will prevent or address major social problems.

We engage these two tasks by using a six-step policy analysis framework that is portrayed in Figure 7.1. We summarize the six steps in this chapter and then discuss the first of these steps in the remainder of this chapter, that is, familiarizing oneself with a social problem or issue. We discuss the remaining five steps in the next two chapters.[1]

A Six-Step Policy Analysis, Proposal-Writing, and Presentation Framework

1. Familiarize oneself with a specific social problem or issue or interrelated pro
and set a goal or goals. Policy analysis begins with the selection of a speci
problem or issue that can include victimization of persons by landlords
inability of persons to meet their basic or survival needs; inability of perso
opportunity-enhancing services; inability of persons and families to

specific needs or issues; infringement of the rights of members of specific vulnerable populations by employers or others; excessive levels of inequality; inability of persons to acquire needed assets such as housing and savings; insufficient access to loans, capital, and resources by specific geographic areas; and inequities in the political process such as unfair electoral districts. It can involve ways to rebuild disaster-torn areas, such as the Gulf Coast after the BP oil spill, the devastation of communities in Louisiana and North Carolina in 2016, or Haiti after its catastrophic earthquake, or the problem or issue can involve defects in the implementation of specific programs or regulations. Perhaps a specific program, such as medical services in the Latino community, fails to connect with substance abuse programs even when a substantial number of Latinos possess this problem. Perhaps public schools do not implement the mainstreaming of developmentally challenged youth in their classrooms as required by federal law. Policy advocates may select inequality as a problem they wish to address by seeking to increase resources of a specific population (such as single mothers) or by raising the taxes of super-affluent persons.

Policy advocates have to establish goals that can include the following:

- Deciding whether to prevent a problem such as reducing hunger or homelessness
- Deciding whether to help persons who already possess a problem such as helping hungry people obtain food or helping homeless people obtain housing
- Deciding how many people to help, whether by preventing problems they could develop or by assisting them when they have specific problems
- Deciding what eligibility requirements to establish, such as helping persons who fall under the Federal Poverty Level, helping persons in the bottom 50 percent of the economic distribution, or providing universal coverage

Policy advocates who want to increase the taxes of super-affluent people to reduce economic inequality have to decide whether they seek small or large revenues.

Policy advocates realize that ambitious goals often lead to proposals that are relatively costly as compared to proposals with less ambitious goals. As one example, Senator Bernie Sanders proposed that the federal government fund the tuition of all students seeking bachelor degrees at public universities (an ambitious goal), whereas Hillary Clinton wanted only to fund the tuition of students whose families earned less than $120,000 (a less ambitious goal). This is an important trade-off that all policy advocates frequently confront.

Policy advocates need to ask the following questions:

- What political, fiscal, cultural, or other factors led to a specific festering problem or issue, which can often be stated by using words such as "too many people possess XYZ condition or problem" such as homelessness, poverty, or lack of access to specific services. Or "too few persons with depression receive optimal services for their condition." Or they can use a value-based perspective to state a specific problem, such as by contending that too many low-income persons lack adequate housing when compared with the broader population.
- What remedies or solutions (if any) currently exist for the social problem or issue, and why are they insufficient in strategy, relative size, or implementation? Can they be reformed or changed, and, if so, how, or are new remedies or solutions needed?
- What is the magnitude of current expenditures on the program or issue? From what sources do these funds come? Are they sufficient or insufficient?
- What adverse consequences does the current problem or issue pose for specific persons, communities, and society? What is the level or amount of these consequences? Do the adverse consequences suggest that the problem requires

urgent action? (If policy advocates cannot make a strong case that the problem or issue is not trivial or not unimportant, they will find it difficult to generate support for solutions from decision makers.)

When developing proposals that address specific social problems, policy advocates need to use social science and other literature to better understand how they evolve or develop in specific populations. They need to understand where these populations go for assistance with these problems or issues both within organized programs and from nontraditional agencies. They need to understand how specific populations perceive specific conditions and whether they even view them as "problems." They need to examine an array of strategies currently used to redress or solve them, such as empowerment approaches, remedial strategies, use of regulations, or some combination of these approaches.

They need to identify **theories** that shed light on why specific kinds of persons or populations develop a specific social problem. Take the case of youth who drop out of school before obtaining their high school degree. **Social capital theory** identifies attributes of people that make it more likely that they will obtain education, move into well-paying jobs, and avoid serious mental health problems. These include growing up in families that have two parents, own their home, and live in safe neighborhoods. This theory predicts whether specific youth will drop out of high school, even though many youth defy these odds and do receive their degrees even when they possess relatively low levels of social capital (Wu et al. 2010). Considerable theory exists about the negative impacts of poverty on people including higher rates of mental illness, disabilities, chronic diseases, and diminished longevity, as well as failure to complete high school (Wilkerson & Pickett 2009).

They also need to ask what policy solutions might be considered:

- In what specific policy arenas can remedies for this social problem be developed and enacted, including local, state, or federal legislatures; specific local, state, or federal bureaucracies; the courts; the private sector; specific social agencies, whether public ones or nongovernmental organizations; and nonpublic entities such as faith-based or for-profit organizations.
- Or should the issue or problem be addressed by a combination of these organizations, such as by a strategy that links public and nonpublic agencies?

Even at the outset, policy advocates often involve other persons in their work. Policy advocacy usually involves collaborative work by task forces, teams, coalitions, or advocacy groups that seek solutions to specific social problems or issues.

2. *Policy advocates* **brainstorm** *an array of relevant policy, programmatic, and resource options that, singly and together, might define a strategy for addressing the social problem or issue.* These can include several options depending on the complexity of the proposal that is ultimately developed during the analytic process, including:

- The elements of a new social program, such as its intake procedures, the content of its services or benefits, where the program is positioned in an existing or new agency, the nature of its staff, and how it is linked to other social programs
- The content of a proposed or modified regulation, such as ones that protect rights of members of specific vulnerable populations
- The proposed modifications in an existing social program or in the way it is implemented
- A proposed change in the amount of resources dedicated to a specific program or issue, such as a proposal to increase these resources

- A proposed modification in a specific protocol or procedure for helping specific persons, such as a proposal to require social workers' involvement in end-of-life decision making

To identify and compare options, policy advocates collect information from a variety of sources, including interviews with persons knowledgeable about existing programs and policies. They use social science and other research and theory to develop options that appear promising for addressing or solving a specific social problem such as homelessness or substance abuse.

EP 5a
EP 5c

3. Policy advocates analyze the relative merits of competing options so that, on balance, they can select a specific one from two or more options. To compare the options, they must first identify specific criteria they will use to contrast the options and to decide, on balance, which of them is meritorious.

Several kinds of criteria are commonly used in policy analysis. **Value-based criteria** are critical since they provide a normative basis for comparing options. A policy analyst might want to consider, for example, whether and to what extent specific options meet social justice or fairness criteria and whether they preserve persons' confidentiality or self-determination rights. To underscore the importance of values, imagine a proponent of free-market capitalism developing a proposal for rebuilding areas of the South and Midwest that were hit by deadly tornadoes in April 2011. The free-market advocate might not even include values such as "social justice" or fairness in his or her analysis, and this decision would lead him or her to favor policy options such as letting private developers decide how to rebuild specific areas, even if their housing was primarily purchased by affluent persons. Contrast this free-market advocate with a policy advocate who believes that government must intervene when private markets will not suffice. He or she would want government to offer disaster relief to poor people, housing subsidies to help low- and moderate-income families build or rent housing, and monies to make repairs to damaged infrastructure to hasten economic recovery. As this example reveals, *the selection of criteria pivotally shapes the recommendations of policy analysts, so they must be chosen with care.*

EP 1a

Most policy analyses also include criteria that deal with the *effectiveness* of specific options. Decision makers usually want to know whether a specific option will actually prevent, address, or solve an issue or problem effectively, particularly given the competition for programs for scarce resources. In the case of rebuilding New Orleans, for example, federal Department of Housing and Urban Development (HUD) officials would want to know how to get affordable housing constructed in a timely way in key parts of the city. In the case of social problems such as homelessness or substance abuse, policy analysts *have to* use available social science research and theory to make the case that a specific option will effectively address a specific social problem. (We use the term **evidence-based policy** in Chapter Fourteen when discussing how policy analysts use research to buttress the case for specific policies.)

They would also want to compare policies by their *cost*. If the cost of a specific option is prohibitive in light of available resources, decision makers may reject it even if it scores high on other criteria.

Decision makers sometimes combine criteria, such as by asking if the options are **cost effective.** In this case, they favor policy options that are *both* effective *and* relatively inexpensive.

Still other criteria have to do with practical **political and implementation considerations**. Assume, for example, that a specific option is cost effective, but will attract such opposition from legislators that it has no chance of passage. In this case,

a policy analyst might recommend a policy option that is less cost effective, but that has a greater chance of being enacted. Policies that cannot easily be implemented may also be rejected. Perhaps, for example, a policy option is sufficiently complex that implementing agencies will be unlikely to understand it, much less to put in place some of its provisions. Here, too, an otherwise meritorious option may be rejected by decision makers on implementation grounds.

The term **trade-offs** is used to describe how policy analysts deal with the fact that a specific policy often ranks higher on one or more criteria but lower on others. Faced with this situation, a policy analyst might conclude that *on balance* he or she prefers a specific policy option, even though it does not rank high on all criteria.

Criteria often include:

- Cost
- Effectiveness
- Political feasibility
- Ease of implementation
- Specific values such as social justice, fairness, confidentiality, and self-determination

In simple proposals, such as changing an intake procedure in an agency or a protocol for helping certain kinds of persons, such as battered women in hospital settings, relatively few options will need to be considered. Policy advocates who advance more complex proposals may need to examine a variety of options with respect to several facets of this larger proposal. (We discuss how proposals are fashioned in more detail in Chapter Eight.)

4. *Policy advocates draft a specific policy proposal that flows from their brainstorming and conceptual work during the preceding three stages of policy analysis.* The proposals can be relatively simple or complex, modest or ambitious, and inexpensive or costly. Policy advocates can propose new policies or modifications of existing ones, such as new programs or improvements. The proposals often include proposed budgets.

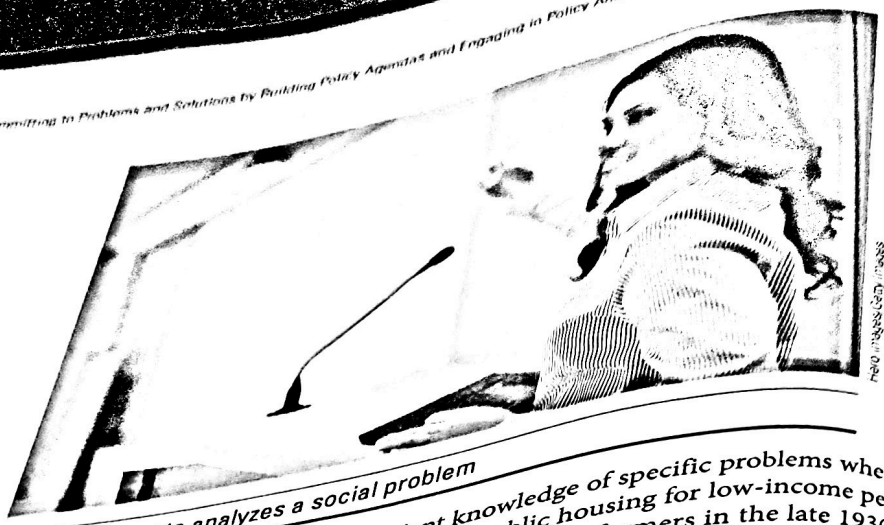
   Policy advocates often get feedback during the drafting process from other policy advocates and decision makers and modify their proposals as needed. They might decide, for example, to downsize or upsize proposals. They might decide to delete certain contentious provisions from them or add some if they think they have sufficient political support for them.

5. *Policy advocates seek supporters for their proposals.* As we noted in Step 1, they will have involved other persons in their work from the outset.

6. *Policy advocates make key presentations* to public officials or decision makers to persuade them that their policy proposal is meritorious as they enter the policy-enacting phase of the policy-advocacy process as discussed in Chapters Nine, Ten, and Eleven.

Do Policy Advocates Have to Analyze Problems?

Some people may believe that policy advocates do not have to analyze problems because their work is driven by their progressive values, such as their commitment to social justice and fairness. In fact, advocates must analyze problems for several reasons. Were they not to base their recommendations (at least in part) on hardheaded analysis of specific problems, including the use of up-to-date research, they would often find their proposals dismissed as lacking a substantive base (see Policy Advocacy Challenge 7.1). Moreover, a candid assessment of the social reforms of prior eras suggests that they have often not worked,



A policy advocate analyzes a social problem

partly because their advocates lacked sufficient knowledge of specific problems when they proposed specific reforms. The classic example is public housing for low-income persons. Believing that they were providing a long-term solution, reformers in the late 1930s and the next two decades obtained federal funding for huge public housing projects, not fully realizing that they would become segregated by class and race and bedeviled by high rates of crime and drug use.

Policy Advocacy Challenge 7.1

Using the Web as a Tool in Policy Analysis

Stephanie Davis, Research Librarian, University of California, Irvine

Analysis is an essential part of policy work and advocacy. Analysis can take many forms, such as statistics, reports, and case studies. The goals of analysis (in part) establish a definition for the problem; investigate the causes, history, and impacts of the problem; and determine who the problem affects. Your research will lead you to ask these questions and more. A few examples of websites that present analysis are listed as follows:

- Center on Budget and Policy Priorities: **www.cbpp.org**
- Fedstats: **fedstats.sites.usa.gov/**
- John F. Kennedy School of Government at Harvard University: **www.hks.harvard.edu**

Using these sites and others that you find for your specific issue or problem, assess how well the sites address your topic or issue.

Websites are also useful for finding statistics. Why are statistics important? First of all, they provide a picture of our country—information about our population, pastimes, habits, how we spend our money, where we work, and the problems we face as a nation. Using statistics to back up your words or show the impact of a specific problem on a population can be powerful.

EP 9a
EP 9b

When searching for new solutions to problems, policy advocates must realize that persons, groups, and institutions often select policies that will enhance their prestige, income, and power, sometimes with scant regard for citizens who need assistance. Tradition often shapes policies, even when existing policies are obviously outmoded and ineffective. Professional wisdom, which often fosters effective services, sometimes promotes dysfunctional policies, such as many surgeons' excessive reliance on radical mastectomies, hysterectomies, and heart bypass operations. Policy advocates are not immune to social prejudices and misconceptions as well as fads and presumed panaceas. So policy advocates must subject their policy choices to careful deliberation to minimize the effects of power, tradition, fuzzy intentions, and intuition.

Using a Flowchart to Analyze Some Social Problems in Step 1

It is useful to diagram social problems so that we can develop solutions or ameliorating policies. Flowcharts are particularly useful when seeking policy solutions to social problems that social workers emphasize, such as welfare reform, homelessness, and substance abuse, since they place the problems in a developmental context. Let us begin with an overarching diagram that can be used, in whole or part, to analyze many social problems. Then let us develop a diagram specifically geared to the welfare-to-work problem to show how to apply the overarching diagram to a specific problem.

Using a Flowchart in Step 1

EP 6a

As can be seen in Figure 7.2, our flowchart begins with the context that includes familial, community, and economic factors. The context is identified in numerous places at the periphery of Figure 7.2 because of its importance to social problems and human services. Family members, peers, and social networks powerfully shape how people address their needs, whether they seek organized services, how they respond to organized services, and whether they develop specific problems and how they deal with them. Persons in affluent communities with outstanding schools and services, for example, have a head start compared with those in low-income communities with poor schools, poor housing, and high rates of crime. We should also not forget cultural factors that influence how people define specific problems and whether they seek help from organized institutions and programs.

The cell at the far left of Figure 7.2 represents the **prevention arena**, which describes persons who have not yet developed a problem such as substance abuse, mental illness, poverty, or diabetes. The prevention arena shows interventions we can use to stop persons from developing such specific problems. We can sometimes identify risk factors that allow us to target interventions that decrease the odds of a specific person developing a specific problem. In some cases, we find out by luck that specific interventions prevent certain problems, such as when medical researchers discovered that the daily intake of small amounts of aspirin lessened persons' likelihood of contracting colon cancer. In other cases, we have no idea how to prevent certain problems, and sometimes considerable controversy exists about the effectiveness of specific interventions. Preventive strategies sometimes require the active involvement of people, for example, changing their lifestyles (such as diet) in an effort to avert a specific social problem. In addition, society sometimes attempts to prevent certain social problems, by instituting changes in peoples' environment, such as decreasing pollutants, improving the safety of automobiles, or preventing cigarette sales to youth.

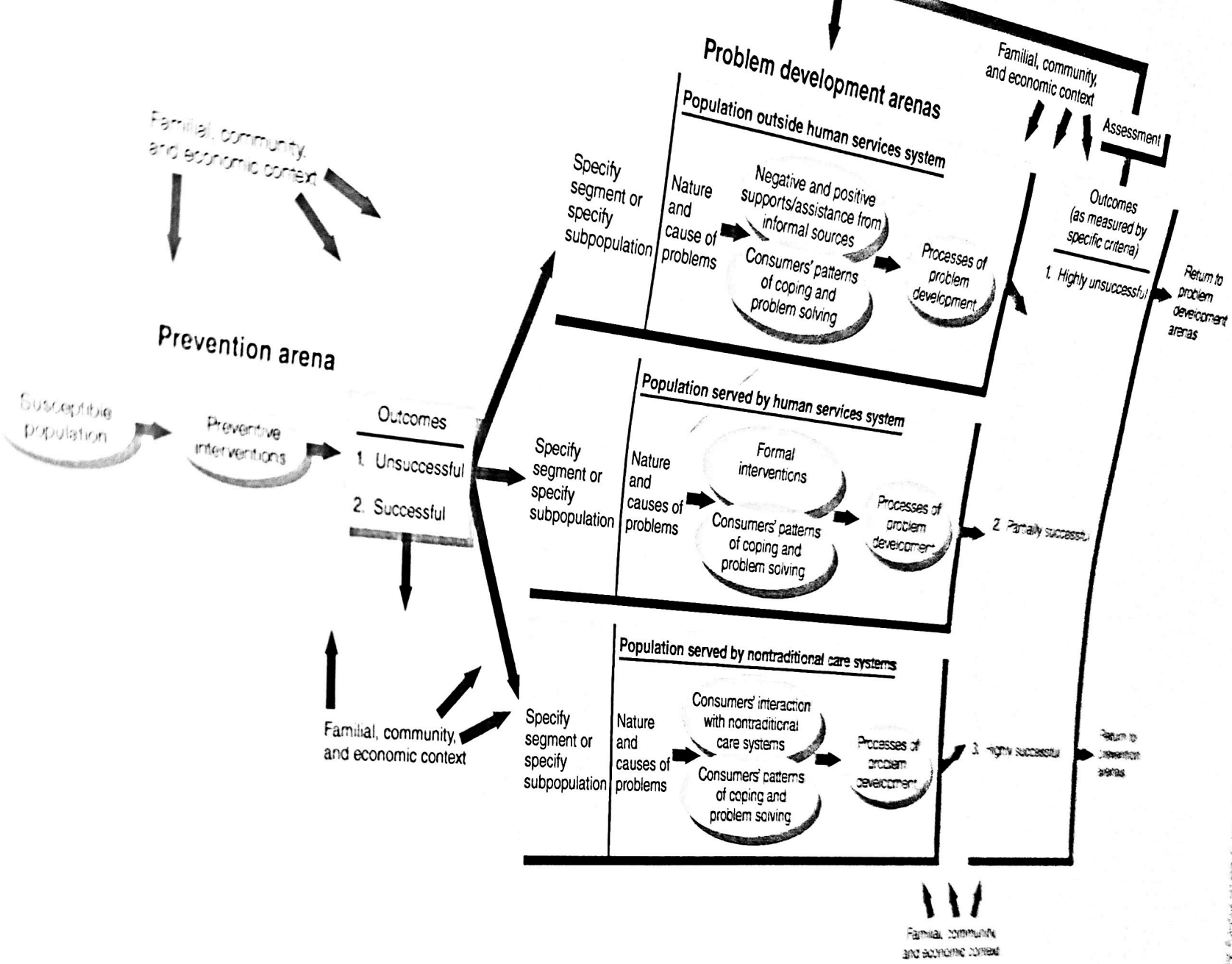
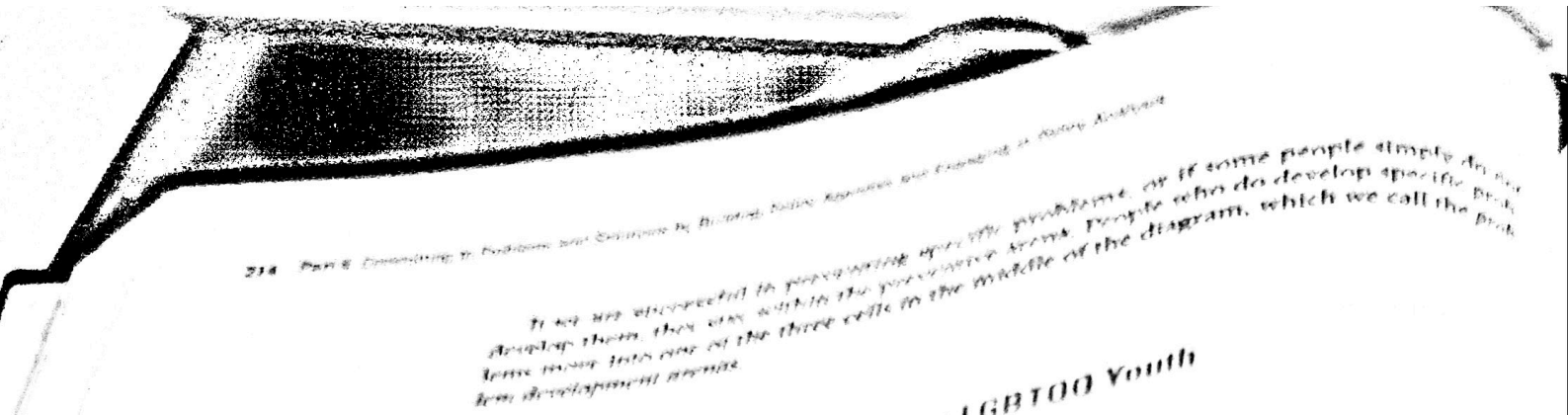


FIGURE 7.2 An Ecological Model of Social Problems



Preventing Homelessness Among LGBTQQ Youth

Jessica Van Tuyl, MSW

Go to **www.cengage.com** to watch this video clip.

Prior to pursuing a master's degree in social work, I worked with lesbian, gay, bisexual, transgender, queer, and questioning youth (LGBTQQ). I became shocked by the prevalence of homelessness among these youth.

According to a report by the Lambda Legal Defense and Education Fund, LGBTQQ youth make up 20 to 40 percent of the national youth homeless population each year.[1] LGBTQQ youth become homeless for a number of reasons both related and unrelated to their sexual orientation or gender identity. Many become homeless due to forced departure from their homes as a result of family rejection of their sexual orientation or gender identity. In addition, LGBTQQ youth become homeless due to family discord, abuse, neglect, and religious or cultural conflict. Some LGBTQQ homeless youth do not identify as LGBTQQ upon becoming homeless, but discover their identities through exposure to the LGBTQQ community while they are homeless.[2]

After they become homeless, LGBTQQ youth under the age of 18 are funneled into the foster care system, oftentimes to families who are not affirming their identities. Consequently, many LGBTQQ youth run away from their foster care placements, beginning an endless cycle in the child welfare system.[3] These youth may be placed in congregate care settings where they are often verbally and physically harassed by youth and/or staff and are unable to access the services they need.[4]

After emancipation from foster care at age 18, a disproportionate number of LGBTQQ youth end up back on the streets.[5] While the experience of homelessness often allows LGBTQQ youth to explore their identities and attain a sense of belonging through membership in the larger LGBTQQ community, they face a number of challenges while they are homeless, including emotional distress, depression, post-traumatic stress disorder (PTSD), suicidal ideation, drug and alcohol abuse, coming out issues, homophobia, and invisibility. They often struggle to come to terms with the withdrawal of love and acceptance from their families. Research shows that these youth are more likely to engage in prostitution and report higher rates of sexual victimization than their heterosexual peers. They are more likely to contract HIV while homeless than heterosexual youth.[6]

Broad-based structural change is needed within the child welfare system to prevent homelessness in this population. First, LGBTQQ family reunification programs must be created. Second, child welfare agencies must offer training for foster parents and child welfare workers to improve their skills in working with this population to promote greater success in placements. Third, child welfare agencies must recruit foster parents interested in helping these youths and create additional LGBTQQ congregate care settings. Fourth, child welfare agencies must offer transitional housing services, life skills training, education, substance

Relationships Among the Cells People move among the three cells in the middle of Figure 7.2 in interesting and complex ways. For example, someone may begin in organized services, drop out of them, and then be helped by a community-based empowerment program. Someone else may solve a problem with the assistance of family members and move back into the prevention arena. Or people can use organized institutions and empowerment programs simultaneously, such as when a physically challenged person uses traditional health services while getting help from a community-based organization run by physically challenged people (see Policy Advocacy Challenge 7.3).

An important issue in social policy is whether the organized system of services can successfully draw upon family and neighborhood resources (the top-middle cell in Figure 7.2) or the work of agencies using an empowerment paradigm (the bottom-middle cell). It would seem advisable for social agencies, for example, to use community leaders and caregivers, such as barbers and beauticians, to refer cases (such as depressed persons) to trained professionals working in agencies and even to use them to give therapeutic services that supplement professional ones. It would also seem logical for organized systems of care to organize support networks for persons with mental and other problems, since considerable research suggests that persons with social supports fare better than many others in addressing their problems.

However, a number of researchers and theorists suggest these courses of action need to be taken with awareness of certain risks. Social supports are not always helpful to clients, such as when dysfunctional relationships exist within them that may even exacerbate someone's problems. When family and neighborhood persons relate to professionals, they may lose their natural way of relating to a client.

Nor is it easy for organized systems of care to relate to empowerment-focused programs such as those for persons who are physically challenged. Empowerment-focused groups are often suspicious of professionals, such as physicians, who they believe label them and treat them paternalistically. They may fear overmedication and excessive use of surgery. In some cases, traditional organized systems of care incorporate units or programs with an empowerment perspective, such as a birthing clinic in a hospital that uses midwives and places less emphasis on traditional medical ways of delivering babies.

Assessment of Outcomes On the far right side of Figure 7.2, *outcomes* are depicted. Successful outcomes can include eradicating a problem or lessening its severity or impact. If we use an empowerment approach, successful outcomes would include mobilizing persons'

Diagramming a Social Problem in Step 1

Bruce Jansson, Ph.D.

ake a social problem that interests you and diagram it following the format of Figure 7.2. e certain to include the prevention arena and persons who are not part of and do receive lp from the organized service-delivery system. What does this exercise teach about the llowing?

The relative numbers of persons who remain outside the human services system
The roles of families, communities, and self-help groups
The potential promise of preventive strategies
The sheer number of outcomes that are possible for clients, patients, and consumers of

move through and

recipients often fall into several of them. Persons who construct typologies often encounter a dilemma regarding the breadth of their categories. If relatively few categories are used, it is difficult to develop specialized programs that focus on the needs of specific subgroups. If too many categories are used, policy practitioners may fail to see the commonalities of persons in different subgroups, such as the common problems that welfare recipients confront as they enter job markets.[8] In the case of mental health typologies, such as those in the *DSM-IV*, many critics wonder whether some of the categories have been invented by psychiatrists or actually describe existing mental conditions.[9]

Analyzing the Causes of Social Problems in Step 1

EP 7a

Problems are caused by physiological, personal, familial, community, and societal factors. (See Box 7.1 for various causes of welfare dependency.) Welfare dependency is linked to personal and familial factors such as levels of education, job-related experiences, family size, whether a woman has been divorced or widowed or has had children out of wedlock, how much child support a woman receives, personal orientations toward welfare, the physical or mental disabilities of a head of household, and whether a woman has a child or children with disabilities.[10] These personal factors operate not only singly but also together to cause welfare dependency. A woman's risk of welfare dependency increases, for example, if she is the single head of a household, does not receive child support, and has a child with disabilities.

BOX 7.1 Some Causes of Welfare Dependency

- Physiological and mental causes
- Physical disabilities
- Developmental disabilities
- Mental disabilities
- Personal and familial causes
- Age (e.g., teenage mothers)
- Educational deficits
- Skill deficits
- Lack of work experience
- Lack of role models that facilitate job entry
- Lack of child support
- Subjection to abuse by spouse or others
- Environmental causes
- Lack of jobs in local area
- Lack of jobs in local area that pay sufficiently to allow economic independence
- Lack of job placement and training programs
- Lack of public or subsidized transportation to job sites
- Discrimination by employers against welfare recipients
- Competition for scarce jobs from other people, such as unemployed persons, new job entrants, persons reentering the labor force, and immigrants
- Interacting causes placing some people at higher risk of welfare dependency
- Persons associated with two of the preceding at-risk factors
- Persons associated with three of the preceding at-risk factors
- Persons associated with four or more of the preceding at-risk factors

Welfare is also shaped by a host of community factors, such as rates of unemployment, wage levels, the availability of child care, the receptivity of employers to hiring welfare recipients, and the availability of transportation and job-training programs.[11] The likelihood of high rates of welfare in a community increases as multiple factors interact, such as low-wage employment, unavailability of day care, and high rates of unemployment.

Various personal, familial, and environmental factors often act together to place some people in higher-risk categories than persons who are exposed to only one factor. A woman may experience short-term risk, for example, when her husband leaves, rendering her economically dependent on government programs. But her chances of securing employment that pays enough to allow her to leave the welfare rolls increase if she has prior work experience, has a college degree, lives in a neighborhood with expanding economic opportunities, and has access to affordable transportation and child care. By contrast, a woman who lacks all these advantages and who is also left by her husband is less likely to find employment that pays enough to make her economically independent.

Policy advocates use both quantitative and qualitative research to analyze the causes of specific problems. Four approaches are common. First, they compare persons with a social problem with those who do not have it, to infer from their differences why only certain persons develop the problem. Because welfare dependency is strongly associated with single-parent families, for example, we can infer that persons in families with single wages are more vulnerable to poverty, and welfare, than those in families with dual wages.[12] Second, they follow people through time to discover why they develop a problem, such as following teen women to discern why some of them become pregnant and join welfare rolls. To conduct the second kind of research is more difficult, because it requires gathering data at many intervals from participants who must agree to participate for an extended period.[13] Third, they evaluate existing programs to find clues to a problem's causes. If recipients who received ongoing and substantial day-care subsidies after they left the rolls have lower rates of recidivism than those who did not receive them, policy practitioners can surmise that day-care expenses force many women onto the rolls.[14] Fourth, they get information directly from persons who are experiencing a specific problem, by observing (as in anthropological studies) or interviewing them.[15]

Rather than limiting ourselves to examining the immediate causes of welfare dependency, we can analyze a sequence of factors that causes dependency. If low wages cause welfare dependency for many single mothers, for example, we can ask what causes low wages. If many poverty-stricken inner-city persons do not live near job sites, we can ask what caused residential segregation by race and social class. The answers to these kinds of questions force us to consider social reforms that might address the economic and social forces that ultimately cause welfare dependency, such as raising the minimum wage or securing housing for low-income persons in suburban areas, where jobs are increasingly located.[16]

When researchers examine the causes of social problems, their perspectives influence their work, such as whether they emphasize personal, psychological, economic, biological, or environmental causes. Researchers with **public health or ecological perspectives** emphasize occupational, economic, familial, peer, and neighborhood factors.[17] When examining the causes of welfare, for example, these researchers implicate low-wage industries, the sheer cost of day care, the lack of transportation, and the placement of many jobs in suburban areas that are distant from inner-city residents. They also cite discrimination against welfare recipients by many employers.

Persons with **radical perspectives** implicate economic and social inequalities, the reduced economic opportunities of certain populations, and the practices of corporations as causes of specific social problems.[18] With the globalization of the economy, for example,