NOTE ON THE 2002 DOMESTIC PURPOSES BENEFIT AND WIDOWS BENEFIT REFORMS

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Baker and Tippin’s research (2004) was undertaken when the 1999 Work Test policy was in place, under which Domestic Purposes Benefit (DPB) and Widows Benefit (WB) recipients were expected to participate in employment or employment-focused activities (e.g., training), part time or full time depending on the age of their youngest child.

Baker and Tippin’s research raises important issues, particularly on the impact of health on single parents’ ability to find and remain in paid employment. Their findings are similar to those from the joint Ministry of Social Development and Department of Labour (2002) evaluation of the Work Test policy, which found that on the whole DPB/WB clients were motivated to work, and were more likely to do so if there was:

• a greater understanding of their individual circumstances
• earlier identification of barriers and constraints (e.g., access to childcare)
• provision of, or referral to, appropriate support services (e.g., health, housing, education and training).

As a result, the 2002 DPB and WB reforms were introduced with the aim to:

• assist sole parents into sustainable employment as their individual circumstances and parenting responsibilities allow
• promote social development and employment outcomes for clients and their children.

The 2002 reforms included the removal of the Work Test, lowering of caseloads and case managers taking a more holistic and comprehensive approach to client assessment and support.

Enhanced case management broadens the previous case management focus on income support, budgeting, accommodation, employment, education and training to include physical and mental health, child health, social participation and parenting. Clients participate in a Personal Development Employment and Planning process, which identifies client-driven goals and action steps to achieve these.

Since the planning process and enhanced case management were introduced, case managers have begun to deliver more holistic support to DPB and WB clients, reflected in the statistically significant increase in clients reporting they discussed child health and social participation issues with their case manager. DPB and WB clients have also
reported higher levels of satisfaction with the case management received since enhanced case management began.

A key challenge with enhanced case management identified by DPB/WB case managers is how to provide more comprehensive assessment and support without going beyond their role as case managers. This is an evolving part of enhanced case management practice, and case managers are supported at the local level by discussion and feedback with colleagues and service centre managers. At the national and regional level there are also processes for identifying and responding to training needs for case managers.

During 2004, an evaluation of these reforms will focus on seeking the views and experiences of DPB/WB case managers, service centre managers and DPB and WB clients on enhanced case management overall, and the use of Personal Employment and Development Plans to identify and plan clients’ employment, parenting, health and social development goals and associated action steps.

Work will also be undertaken to identify (from both Work and Income and clients’ perspectives) gaps or access issues to key external services that are critical to delivering enhanced case management (e.g., employment-related services, education and training, physical and mental health services and parenting support programmes).

A final evaluation report on the 2002 reforms will be completed by the end of 2005, and interim findings will be provided to inform case management practice and overall service delivery throughout the life of the evaluation.

REFERENCES
