

Chapter 1 : Chapter 07 - The Road to Revolution | CourseNotes

Two students with similar grades and test scores but different family backgrounds apply for admission to the same college. The student from a wealthy family is admitted with no financial aid, while the student from a working-class family is awarded a generous financial aid package.

Moffitt and Peter T. Gottschalk The general public in the United States has long linked welfare and race. This association has played a major role in attitudes toward the welfare system and in the politics of welfare reform. Attitudes toward welfare spending are correlated with racial attitudes Bobo and Smith, Many analysts have noted that the general popular perception that minority racial and ethnic groups dominate the welfare rolls has been historically incorrect, for minorities have historically accounted for no more of the welfare caseload than White families. Ethnic minorities do, however, have higher rates of participation in the welfare system than does the majority White population, given their lesser total numbers. Thus, the popular perception has some basis in fact, if interpreted to mean that minorities have higher propensities to make use of the welfare system. A natural question to which this observation gives rise concerns the source of the ethnic and racial differences in welfare receipt rates. The research in this area has noted that there are two conflicting general views. One is that the differences arise from differences in the underlying risk factors associated with welfare receipt rates of single motherhood, poverty, low earnings capability and job skills, high rates of unemployment, low levels of education, and similar variables. The other is that there are inherent differences in the propensity to take up welfare by different ethnic and racial groups, usually thought to arise from different cultural and social norms for the acceptability of being on welfare and different Page Share Cite Suggested Citation: The National Academies Press. This stigma can be either transmitted across families in a given neighborhood or city or transmitted across generations, as children of welfare recipients themselves learn to find welfare receipt more acceptable. This study documents and explores racial and ethnic differences in welfare-participation rates in the United States in two ways. First, we examine what those differences are today and how they have changed over the last decade. We find that substantial racial and ethnic differences in welfare participation exist, regardless of how they are measured, but we also find that these differences have not changed much over this period. Second, we explore the alternative sources for this difference by quantifying the relative importance of measurable risk factors, which differ across race and ethnic groups, on the one hand, and immeasurable differences, which include differences in cultural and social norms, on the other. We find that the majority of most differences in welfare receipt can be explained by measurable risk factors, including differences across race and ethnic groups in earnings and other forms of nonwelfare income, in family structure, in education, and in other variables representing disadvantaged status more generally. This implies that it is these underlying risk factors, and their underlying causes, that require policy attention if racial and ethnic disparities in welfare receipt are to be reduced. The most well known is the program that provides cash assistance to families with dependent children—defined as families in which one or both parents are not present—currently called the Temporary Assistance to Needy Families TANF program and called Aid to Families with Dependent Children AFDC prior to It originally provided benefits primarily to poor widows, but in the s its caseload shifted toward benefit provision to poor divorced and separated women with children, and has more recently shifted toward poor never-married women who have had out-of-wedlock births. Eligibility for the program also requires low income and low levels of assets. Currently, the TANF program has strict work requirements and a maximum five-year time limit as well. Page Share Cite Suggested Citation: These include Food Stamps, Medicaid, low-income housing assistance, and a host of other programs including job training, Head Start, and a variety of food assistance programs other than Food Stamps. Eligibility for all the programs is restricted to those with low income and assets, and usually there are additional restrictions on eligibility. The three largest noncash programs are Food Stamps, Medicaid, and housing assistance. The Food Stamp program is unique in providing benefits to families and individuals regardless of family structure, for neither the presence of children nor the absence of a parent, for example, is required. The Medicaid program historically provided benefits primarily to AFDC families but today provides significant benefits to children of

poor, nonwelfare families, resulting from a series of legislative expansions of eligibility in the late s and early s. Although it is not a transfer program, the Earned Income Tax Credit, if counted as a cash program, is also very large. Families with children and with earnings below certain thresholds receive tax credits and reductions in tax liability under the program. The AFDC rolls then flattened out from through , a result usually thought to be attributable to decreasing real AFDC 2 Medicaid also provides benefits to the elderly and disabled. We do not discuss those groups in this study. Note that the Medicaid caseload numbers illustrated in Figure 7â€™1 include only dependent children and adults, not the elderly. Social Security Administration , Table 7. E; , Tables 7. Department of Commerce The AFDC caseload then grew substantially, starting in the late s and early s, for reasons not fully understood, but has been decreasing since around The latter decrease has been judged to be partly the result of favorable economic conditions and partly the result of policy changes, both those subsequent to the August Personal Responsibility and Work Reconciliation Act PRWORA , as well as similar state policies that began before that legislation Council of Economic Advisers, Created by Congress in , the Food Stamp Program caseload grew rapidly from the late s through the early s, and then grew more slowly in the late s. The early s growth resulted from a mandate that the program be extended nationwide, and the late s growth was partly the result of the elimination of the purchase requirement i. The caseload decreased through most of the s, but then grew again in the late s and early s, along with AFDC. The Medicaid program was created in Figures for the caseload of dependent children and adults with dependent children are available Page Share Cite Suggested Citation: The caseload was relatively flat until the late s, at which time it began to grow rapidly. Much of that growth was the result of expanded eligibility enacted by Congress that allowed coverage for many children who were not on the AFDC rolls. The SSI program is considerably smaller than the other three but has grown markedly in percentage terms. Its caseload has doubled since and has grown by 50 percent since alone. This growth has been almost entirely among disabled adults and children, and larger for disabled children than adults. The numbers who qualify based on old age or blindness have remained constant or have even decreased. Participation rates vary markedly across the groups. American Indians and Alaska Natives have the highest rates of participation in all programs except housing assistance, and non-Hispanic Blacks have the second highest. Hispanics have high rates of participation in all programs except housing, and their rates overall are not far below those of non-Hispanic Blacks. Non-Hispanic Whites, and Asians and Pacific Islanders, on the other hand, have the lowest rates, with Asians and Pacific Islanders having somewhat higher rates of participation in most of the programs, especially Medicaid, than non-Hispanic Whites. Slightly more than 50 percent of all American Indians and Alaska Natives received at least one type of benefit, and more than 30 percent of Hispanic and non-Hispanic Black households did. These groups are very broad and disguise much intragroup variation, but such high participation nev- 4 Three years of the March Current Population Survey are pooled to increase sample sizes of the smaller race-ethnic groups. Participation in a program is defined as having any income from that program during the year. Housing assistance includes public housing and rent-subsidized housing.

Chapter 2 : Department for International Development - www.nxgvision.com

A sectoral analysis of British aid reveals a heavy bias towards cash crops and a lack of emphasis on sub-sectors critical to basic needs and human development.

Subjects Description With thirty-two original chapters reflecting cutting edge content throughout developed and developing Asia, Women of Asia: Table of Contents Preface; Part I: Introduction and Overviews of Women in Asia; Chapter 1: Globalization, Development, and Gender Equity: Gendering Aid and Development Policy: East Asia; Chapter 4: Globalization and Gender Equity in China; Chapter 5: Continuity and Change; Chapter 8: Gender Equality in the Japanese Workplace: What Has Changed Since ? Southeast Asia; Chapter Women as Natural Caregivers? Globalization and Increased Informalization of Labor: Women in the Informal Economy in Malaysia; Chapter Women Politicians in Cambodia: Challenging Gender Inequalities through Education and Activism: South Asia; Chapter Livelihoods, Households, and Womanhood in Nepal; Chapter Globalization and Urbanization in Contemporary India; Chapter Eurasia and Central Asia; Chapter Decades of Change and Challenges; Chapter Female Religious Leaders in Uzbekistan: Tradition, Islam, and the State: Women as Change Agents:

Start studying AP U.S. History- Chapter 7 Vocab. Learn vocabulary, terms, and more with flashcards, games, and other study tools.

Hearing in the Workplace Prevalence of Hearing Loss in the Workplace Although there have been numerous surveys used to estimate the prevalence of hearing loss in the general population, there is no comparable survey of prevalence in the workplace. Prevalence rates in the general population, broken down with respect to age and gender, can be used, with appropriate weights, to derive such estimates. For example, according to a survey of 80, households in the National Family Opinion NFO panel conducted in November, per 1,000 households reported having a person with a hearing difficulty, in one or both ears, without the use of hearing aid Kochkin, The NFO panel is balanced to reflect U.S. The disabling outcomes of hearing loss are likely to reduce this number, but as discussed by Mital, the median age of the population is increasing and many older workers are delaying retirement for financial reasons, thereby increasing the numbers of older adults in the workplace. As noted in Chapter 1, a great many factors influence employability and performance, and these must be taken into account when accurate prediction of disability for an individual is needed. Employment Status of Adults with Hearing Loss Educational level is a key factor in understanding the employment status of adults with hearing loss. For those individuals with early onset of hearing loss, the challenges for acquisition of spoken language, devel- 1 Although the sampling unit for this estimate is the household, the estimate is often reported and interpreted as the number of individuals with hearing loss. Because a given household can have more than one individual with hearing loss, Current estimates see Chapter 1 are closer to 34 million individuals. Page Share Cite Suggested Citation: Determining Eligibility for Social Security Benefits. The National Academies Press. These problems, combined with needs for better career guidance, job training, and job placement, result in poor preparation for entering the workforce on a competitive basis Phillippe and Auvenshine, Positive career outcomes are statistically related to educational level, although this relationship does not imply a causal linkage. Clarcq and Walter compared graduates of high schools for the deaf ages with individuals who had attended or graduated from the postsecondary National Technical Institute for the Deaf NTID. They found that 33 percent of the high school graduates were receiving SSI benefits compared with 12 percent of those with some college education and 0 percent of those who had graduated from NTID. Schroedel and Geyer examined the long-term career attainments of deaf and hard-of-hearing college graduates and found that most were successfully employed and satisfied with life. Many had completed graduate degrees and were employed in white-collar positions. When hearing loss occurs during adulthood, after the completion of formal education and after establishment of a work history or career, it poses challenges for job performance and future job mobility. Because these adults have already acquired the knowledge and skills needed to perform their jobs, the difficulties they face are related to communication barriers, such as working conditions and employer attitudes, as discussed in the following sections. Communication Barriers For an individual with hearing impairment, the most obvious communication problem in the workplace is the presence of background noise. Noise is highly prevalent in industrial settings and, among workers with noise-induced hearing loss, noise is mentioned most frequently as an obstacle and a source of annoyance in the workplace Hetu, ; Laroche, 3 It is clear that many variables, such as intelligence, motivation, family support, and academic preparation, influence which young people attend and graduate from college, among youth with normal hearing as well as those who are deaf and hard-of-hearing. These comparative studies did not control for such factors, but they provide evidence that, like their hearing peers, those deaf and hard-of-hearing youth who are able to attain a college education fare better in the world of work. Other surveys and focus groups of workers with hearing loss have highlighted physical aspects of the work environment, the need to use telephones or videoconferencing, the difficulty of group communication situations, and difficulties presented by various speaker characteristics Laroche et al. Employer attitudes are another barrier. Schroedel and Geyer cite studies indicating that communication stress, social isolation, and unsupportive supervisors are among the difficulties encountered by many deaf and hard-of-hearing workers.

Of concerns expressed by employers of adults with hearing loss, 62 percent were communication-related and 24 percent were safety-related Dowler and Walls, When these concerns are addressed, employer satisfaction tends to increase Dowler and Walls, Effectiveness of Sensory Aids, Prostheses, and Assistive Devices As described in Chapter 5 , there are a great many devices available today that can restore some of the function that is lost as a result of hearing impairment. However, most studies of the potential effectiveness of these devices are based on laboratory or clinical research, not on assessment of actual functioning in the workplace. For persons with severe or profound hearing loss, the literature on cochlear implants provides data showing significant restoration of function for many implant recipients. Studies have confirmed, however, that individuals with lifelong profound deafness who undergo cochlear implantation do not do as well with speech recognition as individuals with late-onset hearing loss e. Nonetheless, an increasing number of these adults with strong ties to the deaf community are considering cochlear implants in order to gain access to the world of sound Christiansen and Leigh, For the most part, these individuals desire to maintain contact with the deaf community and do not necessarily reject the values of Deaf Culture. The level of hearing loss is important only insofar as it qualifies them to become candidates for the surgery, if they are so inclined. After implantation, rarely do they pick up skills such as using telephones effectively or understanding speakers in groups and in other listening situations. Lack of knowledge on the part of both employees and employers concerning what is available and what is required by the ADA is one factor. Workers with hearing loss report high levels of psychological stress associated with fears of appearing or being incompetent, feelings of self-consciousness, overcompensation, and lowered self-esteem. Mark Ross , p. The earlier conceptualization, based on a medical model, viewed disability as a direct consequence of impairment and therefore measurement of impairment could be used, with suitable medical criteria, for disability determination. This approach is embodied in the medical listings used by the Social Security Administration SSA to determine that an individual is unable to work. In contrast, the approach taken by the World Health Organization, and embodied in the ADA, is based on a social model of disability. This approach is a more positive one, in which the emphasis is on what an individual with an impairment can do, and the capabilities the person does have. For example, is it reasonable for deaf adults to claim on one hand that they are disabled and hence entitled to accommodations at work, while at the same time arguing forcefully that hearing loss is not a disability and that the only thing a deaf person cannot do is to hear? In the sections that follow, disability assessment is discussed from a measurement perspective, and elements of both of these approaches are apparent. In agreement with the social model, however, we note that disability is usually not absolute, and that as conditions change and accommodations are made available and accessed , disability may be reversed. Direct Assessment In previous chapters the nature of hearing loss and its impact on auditory function was described in terms of clinical tests that have proven diagnostic value or that are assumed to assess auditory skills that are important in daily life. Conspicuously lacking, however, are empirical studies establishing the link between the clinical measures and performance in natural settings. In their review of the literature on sound localization, Middlebrooks and Green note that laboratory studies are designed to isolate the effects of one particular variable, with the effects of other factors controlled and held constant. In daily life, these factors are free to vary and to interact, and hence generalization from the laboratory to the real world cannot readily be made. This highlights the dilemma posed by trying to predict the consequences of hearing loss that occur in daily life: This implies that impairment in a specific auditory ability may not be strongly correlated with disability, and indeed this has been shown to be true for the relation between degree of hearing loss measured audiometrically and self-reported communication function in daily life. Correlations are high enough to support the assumption of a causal link between impairment and disability as well as the validity of the self-reports , but low enough to preclude accurate prediction of disability for individuals from the auditory measures alone. In principle, it is possible to develop clinical tests with acceptable predictive validity, but in practice it will likely require testing conditions Page Share Cite Suggested Citation: Some of the issues that would need to be considered are binaural versus monaural hearing, free field testing versus testing using headphones, testing with more complex stimulus materials such as real-world sounds and sentences, connected discourse, or competing noise , and the role of visual information and auditory-visual integration, to

name just a few. The challenge of validating clinical tests in terms of performance in daily life is magnified by the complexity of real-world auditory environments and by the fact that clinical tests differ from those that are needed for functional assessment. A model for the functional approach Laroche et al. First, hearing-critical tasks and locations in the workplace the Canadian Coast Guard and the conservation and protection departments of Fisheries and Oceans Canada were identified, and performance parameters for those tasks e. Noise recordings were made in those environments, simulated in the laboratory, and used with normal-hearing listeners to develop a screening test. Statistical modeling was used to derive performance tables, and the listening tests were then validated on listeners with hearing loss. In the final stage, minimal acceptable performance criteria were established and screening scores were determined. This comprehensive and systematic approach, integrating theoretical and statistical models, psychometric instrument evaluation, and empirical determination of workplace characteristics, clearly illustrates the challenges involved in direct assessment of functional hearing abilities.

Indirect Assessment Many forms of assessment can be considered indirect; that is, they do not involve direct observation of target behaviors. One way, discussed in previous chapters, is the use of a measurement on one variable such as a clinical test of pure-tone thresholds to predict or estimate performance on a different target variable such as speech communication at work. A strong relation between the predictor and the target validates the use of the predictor in place of direct measurement of the target. Another type of indirect assessment occurs when a self-report or self-assessment is used in lieu of direct behavioral observation. This method has been used extensively in audiology to obtain information about communication problems and communication strategies that could, in principle, be measured by direct observation. These cognitive and affective variables are not directly observable and, as a result, they are usually measured using self-reports. A third type of indirect assessment may be termed doubly indirect. This occurs when a self-report on one variable, or a difference between two such reports, is used as a measure of another variable. These measures are quite different from asking the individual to report on quality of life per se or using behavioral measures of performance to evaluate benefit from the cochlear implant. Doubly indirect assessment compounds the difficulties in arriving at valid conclusions because of the many additional assumptions that must be made about the relation between the target variable and the one actually assessed. In the sections that follow, examples of all three types of indirect assessment can be found.

Assessment of Hearing Disability, Handicap, and Benefit from Interventions Efforts to assess hearing handicap and disability through self-report questionnaires have been ongoing since publication of the Hearing Handicap Scale by High, Fairbanks, and Glorig and the Hearing Measurement Scale Noble and Atherley. The essential role of self-report in assessment of disability and handicap and the unique perspective of the affected individual are widely acknowledged and now generally accepted Baldwin, ; Dobie and Sakai. The earliest scales focused on self-reported abilities and difficulties experienced by the hearing-impaired individual in daily life. The Hearing Handicap Scale, for example, contains items dealing primarily with detection of sounds and understanding of speech—functions that today are considered aspects of hearing disability. Similarly, early surveys of hearing aid users did not adequately distinguish among hearing aid use, hearing aid benefit, and satisfaction with a hearing aid. Attention to psychometric principles in the development, evaluation, and application of self-assessment tools has been strongly advocated e. As sophistication in instrument design has increased, so has the conceptualization of the constructs to be measured. The most dramatic changes have occurred in the assessment of hearing aid outcomes, as documented by a collection of eight articles devoted to that topic in two issues of the volume of the Journal of the American Academy of Audiology Cox, a, b. Distinctions between objective and subjective outcomes, and conceptual distinctions among hearing aid benefit, satisfaction, and use, along with statistical analysis of their interrelationships, have led to the conclusion that hearing aid outcomes are truly multidimensional Humes. Another important development has been the recognition that standardized assessments, in which the same questions are asked of all respondents, can fail to assess areas of function that are important to the individual. Palmore and Luikart, Flanagan, and Bowling have taken an empirical approach to determining what is most important to adults in the general population. **Health-Related Quality of Life.** Given the impact of hearing loss on communication and interpersonal functioning and the importance of interpersonal relationships in determining quality of life, it is

not surprising that there has been significant interest in incorporating health-related quality- Page Share Cite Suggested Citation: In a causal chain that begins with hearing loss and its effects on disability and handicap World Health Organization, , quality of life is an ultimate state or outcome that is a function of all three Ebrahim, As might be expected, issues of conceptualization and operational definition have been no less difficult in audiology than in other behavioral domains. Global measures of health-related quality of life HRQL serve several purposes, both at a population level and at an individual level. Clinically, they may be useful in diagnosis of disease, assessment of prognosis, treatment outcome evaluation, and determination of etiology Ebrahim, There is evidence of an association between some global quality-of-life scales and degree of hearing loss. Bess, Lichtenstein, Logan, Burger, and Nelson found a systematic relation between degree of hearing impairment and scores on the physical, psychosocial, and overall scales of the Sickness Impact Profile. Similarly, Dalton et al. Despite the attractiveness of having such global measures, their usefulness has been questioned on conceptual and psychometric grounds Ebrahim, , and they have not been found to be sufficiently sensitive to detect clinically meaningful changes in adults with hearing loss. The benefits of amplification were typically found on the latter measures but not on the more general quality-of-life measures. This lack of sensitivity is understandable, given the myriad factors that influence outcomes far removed from the causal agents one wishes to evaluate. Perhaps for this reason, Ebrahim concludes that measures of impairment, disability, and handicap have advantages over global health-related quality-of-life measures for clinical purposes. Disease-specific instruments that are grounded in an understanding of predictable disease consequences and precise treatment outcome goals afford greater potential, ipso facto, of being sensitive to treatment effects.

Chapter 4 : Women of Asia: Globalization, Development, and Gender Equity, 1st Edition (Paperback) - Ro

Study 30 Chapter 7- Concepts of Self, Gender and Sex Roles flashcards from Sandy G. on StudyBlue. Chapter 7- Concepts of Self, Gender and Sex Roles - Psychology Development In Infancy And Childhood with Linda Allan at University Of British Columbia - Okanagan - StudyBlue.

Introduction to Gender [R] Chapter 1: Edited by Joan Wallach Scott. Oxford University Press, , pp. A Useful Category of Analysis. University of Chicago Press, A Reader in Feminist Theory. Edited by Linda Nicholson. Bodies and Sexuality in Gender History. Edited by Janet Price and Margrit Shildrick. Race, Reproduction, and the Meaning of Liberty. A New Reproductive Dystopia? Recommended reading Fausto-Sterling, Anne. Recommended viewing Be Like Others. Directed by Tanaz Eshaghian. Gender and Other Relations of Difference. Learning from Violence Against Women of Color. Pennsylvania State University Press, Gender Identity and the Concept of Woman. Edited by Elizabeth Hackett and Sally Haslanger. Oxford University Press, Edited by Craig Calhoun. Dynamic Resistance and the Central Role of Power. Recommended Young, Iris Marion. Edited and introduced by Seyla Benhabib and Drucilla Cornell. University of Minnesota Press, Karen Offen , Ph. The Life of a Sentence. Edited by Bonnie Mann and Martina Ferrari. Cambridge University Press, Yan, Chen, and Karen Offen. A Joint Paper in Two Voices. Recommended Janiewski, Dolores E. Historicizing Gender and Race. Indiana University Press,

Chapter 5 : SAGE Books - Gendering Welfare States

1 TRICARE Policy Manual M, February 1, Chapter 7 Medicine Section/Addendum Subject/Addendum Title Sexual Dysfunctions, Paraphilias, And Gender Identity Disorders.

Chapter 6 : BELIZE LEGAL INFORMATION NETWORK ONLINE

What, exactly, is deviance? And what is the relationship between deviance and crime? According to sociologist William Graham Sumner, deviance is a violation of established contextual, cultural, or social norms, whether folkways, mores, or codified law ().

Chapter 7 : Thatcher - Clare Beckett - Google Books

Assessing the Impact of Foreign Aid: Value for Money and Aid for Trade provides updated information on how to improve foreign aid programs, exploring the concept and practice of impact assessment within the sometimes-unproblematic approaches advocated in current literature of value for money and aid for trade.