

Intensive Case Management to Overcome Barriers to Self-Sufficiency in the United States

Researchers:

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Sector(s): Education, Labor Markets

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Location: New York, United States

Sample: 300 individuals

Target group: Job seekers Urban population Adults

Outcome of interest: Earnings and income Employment

Intervention type: Coaching and mentoring Job counseling Monetary incentives Psychosocial support

AEA RCT registration number: AEARCTR-0002074

Partner organization(s): Lab for Economic Opportunities (LEO) - University of Notre Dame, City of Rochester Mayor's Office of Innovation and Strategic Initiatives, Rochester-Monroe Anti-Poverty Initiative, Catholic Family Center of Rochester, Action for a Better Community, Community Place of Greater Rochester

Programs geared towards those living in poverty (such as food stamps or rental assistance) often yield temporary solutions, rather than helping individuals towards economic self-sufficiency. Prior evidence suggests that an approach based on intensive case management could be beneficial for certain under-resourced populations, but this model has never been tested through a randomized evaluation. Poverty in the City of Rochester ranks in the top two among similarly sized metropolitan areas. Researchers are working with the City of Rochester and local social service providers to evaluate the Bridges to Success program, in which participants are paired with mentors who help them move towards economic self-sufficiency.

Policy issue

Each year, through both public and private spending, the United States allocates close to \$1 trillion on resources for poverty alleviation. However, much of this money goes towards addressing the symptoms of poverty, rather than its causes. For example, programs like food stamps and welfare are designed to address an immediate need rather than a systemic problem. Social workers and service providers are often similarly tasked with working on in-the-moment crises, as the social services system is often too fragmented and overloaded to offer comprehensive services. Devoting resources to comprehensive services, such as those provided by case management, could remove barriers to long-term self-sufficiency for clients in need. Prior evidence supports the use of case management to improve outcomes for various types of clients, including those seeking housing and employment services. However, there is yet to be a randomized evaluation of intensive case management programs.

Context of the evaluation

In the City of Rochester, NY, around 34 percent of the population lives under the federal poverty level (FPL), with around 16 percent of the population living in extreme poverty (under half the FPL). Over half of the city's children live under the FPL, which is the highest rate of child poverty in comparably sized metropolitan areas. Furthermore, poverty disproportionately impacts African-American and Hispanic communities. Efforts like the Rochester-Monroe Anti-Poverty Initiative (RMAPI) and the IBM Smarter City Challenge have focused on programs that approach the needs of individuals and families holistically, rather than focusing on short-term relief.

Details of the intervention

Researchers will conduct a randomized evaluation of the Bridges to Success (BTS) program, a holistic program pairing adults to resource staff to help them overcome barriers to economic self-sufficiency. Professional resource staff are paired with participants and work with them to establish goals and create action plans. Participants receive financial incentives for meeting these established goals. Resource staff also connect participants to resources they may be unaware of or unable to access, and refer participants to partner organizations that can help them achieve their stated goals. Participants in the treatment group are also paired with an Employment Liaison and a Dependent Liaison. The Employment Liaison helps build relationships with employers and prepare participants for the work force. The Dependent Liaison helps participants with issues relating to their dependents such as education support, parenting skills, and child advocacy. In the full study, 150 individuals will be randomly assigned to the treatment group (who will participate in BTS) and 150 to the control group (who will not participate in BTS).

Results and policy lessons

Project ongoing; results forthcoming.