

Research Brief



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Housing, Employment, Health Care, and Legal Policies and Regulations: Impact on Homeless Individuals' Ability to Sustain Employment

Job Retention Research. As part of a NIDRR funded Field Initiated Program, Boston University and Community Work Services are collaborating to study job retention factors that impact sustained employment for homeless people with disabilities.

As a first step in the study, over 30 professionals working with homeless people in the Boston area were invited to participate in Subject Matter Expert Focus Groups to identify job retention factors critical to the success or failure of homeless people with disabilities to sustain employment. Participants were leaders from housing programs, shelters, health care agencies working with homeless individuals, employment programs, court and legal systems, multi-service agencies, government, education, and consumers. The groups of experts met over two mornings to discuss and identify the experiences of homeless people with disabilities who were transitioning from chronic homelessness to independent and productive work.

Focus Group Results. Participants were oriented to the goals of the meetings, provided opportunity for identification and discussion of job retention issues from their unique perspective, and provided with structured processes to clarify job retention determinants. Initial results from the focus group analysis identified two broad areas as critical to job retention and sustained employment for homeless people with disabilities:

1. **Individual Determinants to Job Retention.** Results identified significant individual characteristics that contribute to success or failure in sustaining employment. Three specific areas linked to the individual's ability to sustain employment were:
 - Subjective Factors, including motivation, commitment to sobriety, desire to overcome obstacles, ability to trust others, and to have patience, etc.
 - Individual Skills and coping strategies such as life care skills, ability to manage time, finances, free time, to handle conflict and respond to crisis, and to respond to employers and co-workers, etc.
 - Individual Characteristics such as past work experience, educational level, CORI history, ethnic and cultural background, ESL ability, health care coverage, family support, etc.

2. **Structural Determinants to Job Retention.** Results identified the services, supports, and resources of agencies serving homeless people. The following play a significant role:
- Housing and Shelter Program availability, structure, flexibility, and coordination with health care, transitional employment, and court/legal services.
 - Employment Programs’ potential to provide immediate involvement in paid work, training that is coordinated with housing and life skills/social skill/anger management/interview skills.
 - Health and Disability Services that are affordable and coordinated with transition stages of the individual.
 - Workplace Supports, including the presence of “job coaches,” natural supports, understanding employers, extended post-employment follow up.
 - Case Management that coordinates multiple agencies, keeps agencies informed, provides a mentoring and trusting relationship, and has extended and ongoing services.

In addition to the individual and structural determinants of job retention, participants found that policies, regulations, and guidelines across the health care, benefits systems, employment systems, and legal systems have potential to provide significant incentives or disincentives to sustained employment. These focus group discussions were significant to the degree that policy and procedures was identified as a third broad area that is critical to job retention and sustained employment for homeless people with disabilities.

3. **Policy and Procedures:** The focus group discussions led to the following findings:
- Definitions of “homeless” and “chronic homeless” under federal guidelines exclude many individuals from services who are “residing” in family or friend’s basements, or who may “couch hop” from night-to-night with different friends. They may be considered a “near homeless” group of individuals who nevertheless may benefit from services.
 - Benefit systems (SSI, SSDI) may compete with ongoing transitional work services and result in disincentives to increased work involvement. They may also provide necessary and critical financial and health care coverage. Community Work Services, Inc. (CWS) finds that less than 10 percent of participants receive SSDI or SSI benefits.
 - Health care policies may have inflexible guidelines, such as when a missed appointment results in canceled benefits or loss of future access to needed health care.
 - Workforce Investment Act programs and One-Stop Career Centers are not equipped to respond to the unique needs of individuals who are chronically homeless. Entry level jobs are seldom seen posted on Career Center job boards.
 - Cumbersome and time consuming eligibility and disability determination procedures in public vocational rehabilitation (PVR) result in the inability to deliver timely, proactive, or effective services.

- Court systems and release systems are not coordinated with housing and employment services.
- Shelter policy can be inflexible for people who are chronically homeless and who are transitioning to work. People who are homeless often obtain employment in the evening, on weekends, or off hours that may conflict with shelter program curfew requirements.
- Employment and training, health care, benefits, and housing/shelter policies frequently are not coordinated and are in conflict with each other, interfering with the process of transitioning to work.

In summary, the focus group found that policies and guidelines of the different agencies and services may be either supportive or counterproductive. Individuals who are homeless seek to manage multiple demands and responsibilities of life and living while transitioning to productive employment.

Bottom line – Homeless service providers and policy makers have not systematically examined how current policy and agency resources (SSA, health care, employment, legal, etc.) have potential to impact employment, retention, and career advancement in both positive and negative ways. The homeless provider community’s “Continuum of Care” can take active steps to confront policy inconsistencies and gaps and is a logical grassroots resource to advocate for system and policy integration.

Critical areas of policy need

There were specific areas where policies appear to be counterproductive in assisting in the transition from dependence to economic self-sufficiency:

- The principal implication for Public Vocational Rehabilitation (PVR) relates to service administration. Current referral, application and eligibility determination steps that are permitted to take up to sixty days can be significant deterrents to successful program entry and positive employment outcome. Delay in initiating services and the diminution of successful outcomes may well be correlative. As soon as a person has demonstrated that he or she can remain clean and sober for some protracted period (e.g. *Project Independence* has established sixty days “clean and sober” as a program admission criteria; *Project Place* has established 90 days as a criteria) and has expressed an interest in employment and permanent housing, a service plan for vocational rehabilitation should be developed and initiated as quickly as possible. Many find the waiting period for PVR services less than conducive to maintaining sobriety or mental health regimes. Following detox for five days and substance abuse rehabilitation services for another twenty-five days, and a period of stabilization for thirty days, a person should be in sufficient control and have enough supports to permit the successful initiation of a PVR plan. PVR should consider developing a program to assure timely and speedy initiation of services. Another consideration might be to contract with a community-based rehabilitation program to initiate services with an agreement for PVR to assume costs associated with service delivery at some future defined point in time.

- Corrections policy and practices that guide release and discharge planning are not adequate for individuals who have a history of chronic homelessness. Adequate funding must be made available to plan and coordinate family reintegration efforts, alternative supported living arrangements, health care, and vocational or job training services. Positive CORI findings place significant barriers to obtaining meaningful work and advancing a career. Corrections histories developed as a result of homelessness, substance abuse, and mental illness must be considered in light of a specific employer and job setting. Seventy one percent of individuals placed in employment by Community Work Services last year had positive CORI records.

(Please note that the next *Research Brief* will focus on CORI issues for individuals who are homeless.)

- While there have been valiant attempts to utilize existing sources of revenue to provide an income and benefit base for persons who are homeless, the lack of a consistent address, lack of ability to pursue a benefits claim for protracted periods, and the lack of permanence of personal support systems have all contributed to economic destabilization, homelessness and hopelessness. The policies developed to treat homelessness should encompass a modicum of economic stabilization through paid work experiences. Paid job training generates earnings for the program participant that leads to the feeling of being productive once again, and feeling capable of meeting one's own basic needs. A paycheck early on should be considered as a treatment instrument, a reinforcer, a learning (budgeting) tool, and as a pragmatic needs addressing vehicle. Significantly, the paycheck can represent another vehicle for reinforcing "clean and sober" behaviors.
- Finally, public policy – The Vocational Rehabilitation model requires 90 days of employment to consider one rehabilitated. The reality appears to be that 90 days is simply the "end of the beginning" of a road to successful recovery. While it is very early in this study, one can observe that difficulties arise some 120 to 180 days following a successful job placement. At this time, one of several stressful incidents may occur– a transition from a shelter bed to Single Room Occupancy (SRO), a traumatic family situation such as the death of a family member, a divorce, etc., or the individual may experience a time of boredom from just sitting night after night in front of a TV set. Regardless of cause, it appears to be a phenomenon that has policy implications, service delivery implications, and one that must be recognized, planned for and dealt with professionally. Ninety days is just not enough time for support. We need to look to the model of workplace supports that PVR provides through time in community-based settings.

Implications.

- Policies and procedures of the different agencies providing services to individuals who are homeless may obstruct or facilitate employment training and employment access.
- We need to review and restructure service policy and procedure so that the multiple agencies and resources servicing homeless people actually function in an integrated and seamless manner. Policies and procedures should be developed to drive this outcome and promote the bottom line of successful transition to employment and sustained productivity.

- Focus group participants recognized that policies and procedures have the greatest potential to impact homeless individuals, but are the most intractable and difficult aspects of the process to change.

As part of the research agenda of the research grant, Community Work Services and Boston University will interview and survey homeless individuals to identify how these areas impact their transition from chronic homelessness to employment and independence.

Comments and reactions to this **Research Briefs** are welcome and encouraged

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