



Research Brief



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Get a Job AND Keep a Job: What Makes a Difference for Homeless People?

Results of a Focus Group of Professionals Working with Homeless People in the Boston area

Considering the chronic problems of poor health, low job skills, limited experience, poor education, troubles with the law, stereotypes and social stigma associated with homelessness and disability, the difficulty in seeking meaningful employment and a livable wage by a homeless person with a disability appears insurmountable and overwhelming.

In reality, high unemployment levels and low earned-income levels for homeless people are significant. A meta-analysis of studies over the past decades reported an average unemployment rate of 81 percent and an average monthly income of \$103. More recently, among federal employment programs for the homeless, only 10 percent of participants had any form of employment upon admission. In another national study, of the nearly 20 percent of homeless people who work, the wage levels were insufficient to maintain housing, and the jobs that were held were not expected to last longer than three months. Most individuals reported that they had not held a “steady” job in the past four years.

Homeless people do engage in work, however, with studies showing that between 75 and 97 percent of homeless people having worked “at some point in the past.” However, the recent work experience typically involved unskilled work, part-time work, temporary work, and low paying positions with no health or other benefits. Some individuals work on jobs for a single day and others resort to mendicant behavior.

Employment Research. Although homeless people face substantial employment barriers, few programs have been developed to address these needs, and little empirical research has been conducted to investigate effective approaches to place individuals in meaningful jobs. Of those programs focusing on employment outcomes, findings reflect that:

- Coordinated services, including housing, medical and health, and financial support was critical, especially for individuals who are homeless with a disability
- Employment skills must be linked with psychosocial stabilization
- Successful employment is related to job training and placement services, not just housing and healthcare services
- Program flexibility is necessary to respond to the range of employment, health, social, leisure, housing, and other needs

Significantly, many programs did not study homeless people with identified disabilities, or did not provide meaningful follow up to document sustained benefits of their program. All too often, programs report only short-term outcomes, fail to provide long term and coordinated support, and do not provide extended follow up.

Project Independence is a longitudinal employment program of Community Work Services, Inc., that is part of the City of Boston's "Continuum of Care" system for hard-to-place homeless persons with severe disabilities. The program is funded through a grant from the US Department of HUD under the McKinney program and provides vocational assessment and counseling, job training, paid work experience, job placement, and post-employment follow-up services. Since 1997, ***Project Independence*** has served approximately 337 homeless adults with disabilities. At the time of the last evaluation, 166 individuals had been placed in successful and sustained competitive employment. Although the program considers an individual "rehabbed" after 3 months of successful employment, an ongoing concern is the ability to sustain employment beyond the "traditional" outcome markers. CWS staff finds that significant factors occur approximately 120-180 days after placement, but little empirical research has been completed to identify those factors contributing to sustained employment and those factors influencing job loss.

Job Retention Research. As part of a NIDRR funded Field Initiated Program, Boston University and Community Work Services are studying job retention factors impacting the sustained employment for homeless people with disabilities who have participated in their vocational program.

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.

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. Results from the focus group analysis were that three broad determinant areas were critical to job retention and sustained employment for homeless people with disabilities:

- I. **Individual Determinants.** The homeless person contributes significantly to success or failure in sustaining employment. Three specific areas were identified as linked to the individual's ability to keep a job:

First, Subjective Factors of the individual, such as motivation to stay on a job and to keep productive, commitment to stay sober, desire to find ways to overcome obstacles to external issues, to have patience and trust in others, fear of failure, etc.

Second, Individual Skills & coping strategies, such as employment and life care skills, ability to manage finances, manage time, care for health/medical/psychological needs, utilize social skills on the job, to handle conflict and respond to crisis effectively, etc.

Third, Individual Characteristics, such as past work experience, educational level, CORI history and involvement with the law, ethnic and cultural background, ESL ability, health care coverage, family support, etc.

II. **Structural Determinants.** These factors include the services, supports, and resources of the range of agencies serving homeless people. These factors included the following specific areas:

Housing & Shelter programs that provide, or fail to provide, structure, expectations, trust, and realistic boundaries to residents; the availability & flexibility of affordable housing during transition and employment; the coordination of housing opportunities with other health care, transitional employment, and court/police services.

Employment Programs including transitional programs with training resulting in livable wage; programs that provide immediate and rapid involvement in paid work; training that is coordinated with housing and life skill/social skill/anger management/interview skills; extended follow up beyond traditional periods, etc.

Health & Disability Services that are affordable and accessible to prevent relapse, to support sobriety, to maintain medication compliance; health care systems that are flexible when the individual is in transition from unemployment to employment; training of health care staff about unique characteristics of homeless people such as “self defeating” or “self destructive” actions.

Workplace Supports such as “job coaches” or natural supports in the workplace; support of the supervisor and co-workers; flexibility of the workplace in order to keep medical appointments; extended post-employment support resources, etc.

Case Management to provide a mentoring relationship, to form the trusting relationship; to coordinate the multiple training, health & life care, transportation, child care, and agency resources; caseload size of CM; availability and commitment to have extended CM services; communication between agencies to support healthy behavior.

III. **Policies and Regulations.** Participants noted that policies, regulations, and guidelines across health care, benefits, employment, housing, and legal systems could provide incentives, disincentive, and barriers to sustained employment. Factors critical to sustained employment include the following:

Housing policies that are coordinated with employment or earnings level.

Benefit policies that function as incentives/disincentives to transition from unemployment to part-time and full-time employment.

Employment policies that are inclusive and proactively involve homeless people in employment programs.

Health care policies that are flexible and responsive to the multiple needs of homeless individuals.

Implications. A significant result from the focus groups was that factors that contribute to job retention for homeless people can be identified and described, and that professionals providing a range of services and perspectives can agree upon these factors.

- When participants were asked to rank, prioritize, or identify the importance of job retention factors in relation to each other, responses varied widely. It appears that professionals providing different services view specific factors in different ways and from different perspectives. This points to the need for evidence-based research to identify how different factors and characteristics influence the process of transitioning from chronic unemployment to employment.
- Results of the focus group indicate that there are multiple factors related to job retention and that these factors are not separate and distinct, but interact dynamically in either a positive or negative way to influence job retention. Participants point out that individuals who are homeless and have

- a disability have their own unique ability to manage, or mismanage, the multiple factors of housing, health, employment, social attitudes, bureaucratic regulations, and personal crises during the transition process. The employment experience of the individual who is homeless with a history of substance abuse is different than the individual who has a mental illness or dual diagnosis. While focus group participants identified different factors, and cited specific examples, it is clear that more questions were raised than were answered during the process. Participants cited the need for evidence-based research rather than anecdotal examples as important in supporting their work. The question becomes,

“How do we manage the varied and disparate resources, services, and individual needs of the person in transition?”

- In order to respond to the multiple housing, health care, and individual needs of homeless individuals, Boston has developed a Continuum of Care as the vehicle for coordinating, monitoring, and ensuring both timely and effective delivery of services. However, on an individual basis, the theoretical service-provision construct is realized only with sound case management practices that hold all members of the Continuum to their agreed upon tasks/services/commitments on behalf of the person served. The case management component must engender trust, confidence, and a “can achieve” attitude among all partners in the Continuum. Establishment and utilization of the title “Continuum of Care” is no guarantee that a constellation of services requisite to obtaining and retaining employment and housing is actually going to work. Spontaneous service delivery is not the answer: rather, carefully planned, carefully crafted, cohesive and competently delivered services that are timely – from the homeless person’s timeline – appear to be effective in providing solution-based interventions for each individual.

A significant implication of the focus group results is not only the recognition of multiple and interrelated factors that influence sustained employment, and that vary according to each individual. It is also the prominent role of an effective case manager who can be interactive with the individual and other agencies over an extended period of transition and recovery. Points related to effective case management include:

- Importance of maintaining a trusting relationship
- Developing a mentorship relationship with the individual
- Coordinating a network of resources and agencies
- Evaluating and developing life care & community services, including transportation, banking, childcare, and health care
- Having knowledge and ability to interpret and apply housing, health care, and disability benefits
- Extending support beyond current regulated follow up periods
- Restricted case load size

Conclusions. Information from focus group participants will be used in the next step of the research. This step involves interviewing homeless individuals who have been employed through ***Project Independence*** to identify their perspectives and experiences related to job retention and sustained employment.

Comments and reactions to the **Research Briefs** are welcome and encouraged.