Family Development and Self-Sufficiency Research Compendium for Program Core Components

FaDSS

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Self-Sufficiency Program Trends

Iowa's Family Development and Self- Sufficiency (FaDSS) Program provides services to families with significant or multiple barriers to reaching economic security. Participants often require assistance with many basic needs including housing, health and nutrition, as well as support in obtaining a work-related skill or educational goal. Not uncommon is the need for support in mental health or substance abuse treatment or accommodations for disabilities or special circumstances. The FaDSS approach is multi-layered and based on the belief that it is imperative to build a family's stability and relationships of family members before addressing issues related to economic self-sufficiency. This means Family Development Specialists (FDS) work with clients to identify necessary supports such as assistance with child care or transportation, which are important to the long-term success of not only the individual working with the Family Development Specialist, but of the family as a whole.

This Research Compendium is designed to complement the Evaluation Framework for Iowa's FaDSS Program (insert link here) which was developed to enhance the evaluation capacity and guide future data analysis associated with evaluation efforts. The research methods and evidence of program effectiveness provide the basis for the FaDSS program's activities, standards, data collection efforts and measurable objectives; all of which are summarized by the logic model included in the plan.

In working with vulnerable populations, the FaDSS program has made it a priority to identify the efforts that have been shown elsewhere to contribute to positive changes in family systems, economic stability, and generally reducing poverty and social inequality. The research and resources included here are not exhaustive; given the overlap between social services, family support, child abuse and neglect prevention, education, disabilities services and even substance use treatment, there are many credible and useful studies to reference. That said, this Compendium provides a solid starting place from which self-sufficiency program staff can build. The research topics are organized by the program's fundamental characteristics. Examples of specific program evaluations that are commonly discussed in the references here are: Building Nebraska Families (BNF) and the Minnesota Family Investment Program. In addition, many credible resources that have been included are from: the Family Strengthening Policy Center, Mathematica, the Urban Institute, MDRC, and the Maryland Family Welfare Research and Training Group to name a few.

The common characteristics of programs found to be effective in promoting family self-sufficiency fit within six main categories, though these are not exclusive of one another, and some are not necessarily applicable to all programs or service types. These are referred to as Core Components in the Iowa FaDSS program:

- Assessment
- Goal Setting
- Home Visiting
- Referrals and Collaboration
- Support
- Advocacy and Self-Empowerment

In Iowa, there are two other required elements, somewhat customizable by program: flexible funding and group activities. Given the inter-related nature of these elements they are included here as subsets of the larger domains. That is, *Flexible Funding* is listed under *Referrals and Collaboration*, and *Group Activities* can be found under *Support*. Aside from these combined categories, this document provides a brief overview of each category separately, with a cross-reference table which displays the overlap. Programs that offer support in economic security and long-term financial stability must do so with a family-driven, strengths-based approach (Abt Associates, 2011; Babcock, 2014; Landsman, 2013). This is done with a carefully coordinated blending of each of these components.

Assessment

Most family support programs begin with an assessment of strengths and needs. A variety of approaches can be used here, with a combination of formal and informal assessment techniques; however the more highly-regarded programs reviewed use a formal assessment that is known to be valid and reliable, (usually referred to as evidence-based) or at the very least: research-based (which is usually referred to as "promising" or showing the potential for becoming validated through current or on-going research). Using the right assessment tool, administered in the correct way and at the right time will improve the likelihood that designated resources and/or services are suitable for the family's needs at a given point in time (Bloom *et al*., 2011; Pavetti, Derr & Martin, 2008; Williamson *et al*., 2011). A common assessment tool used in Iowa and other states is the Self-Sufficiency Matrix. The use of this tool allows programs to track up to 25 measures related to family self-sufficiency (such as housing, health care, life skills, income and safety, to name a few), providing a baseline and follow up rating between 'empowered' and 'in crisis' for each participant. Assessments are important in establishing the best-fit of services and also in making the determination about all subsequent

actions and plans toward self-sufficiency (Abt Associates, 2011; Bloom et al., 2011; Family Strengthening Policy Center, 2007; Pavetti, Derr & Martin, 2008).

Goal Setting

The research related to goal setting promotes the importance of working directly with the family in empowering them to set goals on their own behalf that are achievable and realistic with consideration to their immediate circumstance (Babcock, 2014; Golden et al., 2012; Landsman, 2013; Pavetti, Derr & Martin, 2008). Goals that are program-driven or without consideration of the family's limitations, and without incorporating the self-assessment results are not ideal and are likely to be undesirable and/or unattainable. Family support programs gauge their successes on the degree to which families achieve their goals. It is recommended by the research (as promoted by other family-support initiatives) that self-sufficiency programs develop systematic ways to track individual and family-level information; the ability to track progress gives the program insight on the changes in education, employment and other goal areas. This type of information also allows a program such as FaDSS the ability to share accomplishments directly with participants while documenting the effectiveness of their efforts at the same time.

Home Visiting

While much of the current research regarding home visiting concerns maternal and early childhood services, targeting pregnant women and parents of young children, there are some fundamental principles applied in the administration of FaDSS services that deserve mention. Most importantly, perhaps, is the interest in developing a trusting relationship between program participant and the FDS. This was, in fact, a finding of the evaluation of the FaDSS program conducted in the 1990s: "The critical element of the FaDSS Program appeared to be the one-on-one, warm and accepting relationship between the participant, their family and the FDS" (Alter & Losby, 1995). Numerous studies describe more positive results (for high risk groups, in particular) when families receive a greater intensity of services. Simply stated: more home visits are better for the families who are struggling the most (Golden *et al.*, 2012; Gomby, 2005; Hegland & Hughes, 2005; Meckstroth *et al.*, 2008; 2009). The results of the most recent studies go on to explain the importance of individualizing the approach to the particular needs and interests of families, not unlike the approach of the FaDSS program.

Other benefits to Family Development Specialists working in the home include: the intimacy and security (in most cases) of meeting in a familiar home environment compared to a clinical setting; the subtle pieces of information about personal preferences that are passed on in a home

setting; a deeper understanding of the family dynamic which helps the FDS support the family in setting goals; and meeting families in the most culturally-respectful way possible.

Referrals and Collaboration

Without the support of the FDS, families struggling with multiple barriers to employment and self-sufficiency may not be aware of the range of services and programs available to them. Following the progression of service from the initial assessment, relationship-building and on-going interaction (e.g., home visiting), identification and setting of goals, the FDS must be extremely adept at working with other community providers and making referrals. Referrals to ancillary services assure program participants get connected with treatment, other case management and additional support (e.g., child care, supplemental nutrition, and SSI to name a few), all of which increase the likelihood of employment and healthy family functioning (Abt Associates; 2011; Golden *et al.*, 2012; Meckstroth *et al.*, 2008; Williamson, 2011). Countless studies verify that the success of self-sufficiency program participants is highly dependent upon the effective collaboration between multiple disciplines in health, education, social services and business sectors (Abt Associates, 2011; Bloom *et al.*, 2011; Boteach & Martin, 2014; Family Strengthening Policy Center, 2007; Golden *et al.*, 2012; Hamilton, 2012; Zedlewski, 2012).

Support

The Core Component of *Support* overlaps with every other component that is discussed here. It is separated to place emphasis on the idea that support in the FaDSS program must be strengths-based and family-focused with careful consideration to the individual and ongoing needs of participants.

When parents have employment security, clearly the entire family benefits, however it may be a difficult balance for the parents finding their way back in to the workforce to have enough quality time with their children or to find child care support outside of the home. The Children's Bureau cites numerous studies regarding the connection between poverty and child abuse and neglect, as poverty and economic hardship are risk factors for neglect. One strategy toward reducing the severity of poverty and therefore likelihood of neglect is to decrease the family stressors, in many cases by supporting them toward employment (Berns *et al.*, 2013; Bloom *et al.*, 2011; Zedlewski, 2012). The FDS plays an important role here in helping program participants identify what resources they have to build on, followed by what is then needed for them to be successfully employed: Does the family need reliable transportation? Do the children have a safe place to be while the parents are at work or school? What kinds of credentials or training is needed before they can be hired? Once the needs are articulated, the FDS may then

work to determine the appropriate programs or organizations that could be accessed. The research related to supporting families with a strengths-based approach tends to show that success comes from integrating and drawing from a variety of resources, not exclusively one provider or another (Abt Associates, 2011; Berns *et al.*, 2013; Bloom *et al.*, 2011; Family Strengthening Policy Center, 2007; Golden *et al.*, 2012; Hamilton, 2012; Meckstroth *et al.*, 2008; 2009).

Advocacy and Self-Empowerment

Empowerment is a critical construct in the field of social work, both as a theory of practice model and a desired outcome among those served; countless books and chapters have been written on the subject. Family Development Specialists recognize that the families they are working for have complex, yet in some cases, common needs. Families may access the FaDSS program because they have vulnerabilities in basic needs, physical or mental health, or parenting or life skills domains; these domains can occur in conjunction with each other, and all of them have the potential of preventing a person from living in a self-sufficient way (Abt Associates, 2011; Bloom et al., 2011; Golden *et al.*, 2012; Williamson *et al.*, 2011). Working with a population that is hard to employ requires a positive approach with a wide-range of support services; the FDS is needed to bridge the connection between families and community services, requiring them to be fully knowledgeable about what is available and what effort is required to navigate various systems. Ultimately, this ability is transferred to the families since the program is based on a philosophy that self-empowerment is key to sustainable self-sufficiency (Family Strengthening Policy Center, 2007; Madsen, 2009; Nachshen, 2004).

Matrix of Research by Core Component

The table below provides a quick reference to the research included in this compendium. In many cases, one source provides the evidence of effectiveness or best practices for multiple Core Component areas. Each source is described under the primary component area in the next section.

Author	Year	Assessment	Goal Setting	Home Visiting	Referrals	Support	Advocacy
		Core Component Included in Resource					
Abt Associates	2011	✓			✓	✓	✓
Alter & Losby	1995	✓	✓	✓	✓	✓	✓
Babcock, E. D.	2014	✓	✓			✓	
Bloom, Loprest & Zedlewski	2011	✓	✓			✓	✓
Boteach & Martin	2014				✓	✓	✓
Briar-Lawson, McCarthy & Dickinson	2013	✓	✓	✓	✓	✓	✓
Bridgman, A.	2009				✓	✓	✓
Family Strengthening Policy Center, No. 22	2007				✓	✓	✓	✓
Family Strengthening Policy Center, No. 23	2007		✓	✓	✓	✓	✓
Golden, Loprest & Mills	2012				✓	✓	
Hamilton, G.	2012	✓	✓		✓	✓	✓
Hegland & Hughes	2005			✓		✓	
Hornby Zeller Associates, Inc.	2014			✓	✓	✓	
Madsen, W. C.	2009				✓	✓	
Meckstroth, Burwick & Moore	2008, 2009	✓	✓	✓	✓	✓	
Nicoli, Passarella & Born	2014		✓			✓	
Nachshen, J.S.	2004					✓	✓
Passarella, Born & Roll	2013				✓	✓	✓
Richmond & Mooney	2012	✓					
Walter & Petr	2011				✓		✓
Williamson, Saunders & Born	2011	✓	✓		✓		
Zedlewski, S. R.	2012					✓	

Relevant Research by Core Components

I. ASSESSMENT

Assessment is an intense self-reflection process that is completed with each family. The assessment tools that may be used are the genogram (family tree), ecomap (depicts family support system) time line (significant events), and a basic strengths assessment. All families are assessed using the FaDSS Self-Sufficiency Matrix. Other assessments may be used depending on the specific criteria outlined in the grantee application or the families' unique situation.

Bloom, D. Loprest, P.J., and Zedlewski, S. R. (2011). *TANF Recipients with barriers to employment.* Temporary **Assistance for Needy Families Program – Research Synthesis Brief Series. Brief No. 1. Urban Institute, Washington, DC.**

The Urban Institute has produced a series of briefs such as this one that summarizes the most prominent or otherwise noteworthy studies concerning promoting economic self-sufficiency. In this article, the authors stress the importance of carefully-timed and implemented assessment in order for service providers to fully understand the multiple barriers to employment or even plan individualized goals that suit the participant's needs. In general, the more barriers a person has, the more difficult it will be for them to obtain economic security. Using evidence-based assessment assures programs can advocate for appropriate ancillary services and select the right strategies that will help the participant get a job, if appropriate.

Pavetti, L., Derr, M., and Sama Martin, E. (2008*). Conducting in-depth assessments: Assisting TANF recipients living with disabilities to obtain and maintain employment***. Mathematica Policy Research, Inc. Retrieved August 2014, from www.mathematica-mpr.com**

This research brief provides a concise overview of the different types of in-depth needs assessments. It is produced by Mathematica Policy Research who has many resources related to family support and economic self-sufficiency. For each type of functional assessment, the authors have included a brief description, "focusing on the purpose and the content followed by a description of how the assessment can be integrated into the TANF service delivery system."

Richmond, F., and Mooney, B. (2012). *Introduction to results-oriented management and accountability (ROMA).* **The Center for Applied Management Practices, Inc., Camp Hill, PA.**

This document provides an overview of how family support (and similar) programs can use an "Outcomes Scale" and the group of scales (called the Outcomes Matrix) as a common framework for capturing benchmark data for participants followed by changes in each scale over time. The ROMA has been useful in helping self-sufficiency programs articulate common domains to measure in hopes of identifying correlations between and among domains and also in effort to report on program-level outcomes.

Santa Clara County Collaborative on Affordable Housing and Homeless Issues. (2010). *Self-Sufficiency Matrix assessment standards.* **Retrieved September 2014, from**
http://www.ctagroup.org/wp-content/uploads/SSM-Standards-2010-Oct.pdf

This resource is another example of a community agency effectively using the Self-Sufficiency Matrix as both a case management tool and a participant self-assessment tool. From here, further information is provided about consistency in assessment, the purpose and intent of using the SSM and an overview of domains included in the assessment.

Snohomish County Self-Sufficiency Taskforce. (2004). Self-Sufficiency Matrix: An Assessment and Measurement Tool Created Through a Collaborative Partnership of the Human Services Community in Snohomish County.

Iowa uses a ROMA-based self-sufficiency matrix similar to this one developed in Washington. It is the most common assessment instrument referenced for use with social service or family support type programs. The matrix is used in a variety of ways: as a case management tool to document client progress towards self-sufficiency, as a self-assessment tool for individuals to determine their strengths and barriers, as a program management tool for agencies to assess the effectiveness of services, as a measurement tool for funders to clearly articulate their funding priorities, and as a communication tool for demonstrating the success of program participants, and sharing information about the population served with the general public and policymakers.

Williamson, S., Saunders, C., and Born, C. E. (2011). *Online work readiness assessment: Barriers to work and post-assessment experiences.* **Family Welfare Research and Training Group. University of Maryland School of Social Work, Baltimore, MD. Retrieved September 2014, from** http://www.familywelfare.umaryland.edu/reports1/ow2.pdf

This comprehensive article provides a thorough description of the changes at the Federal level that have impacted family support staff and TANF recipients alike. It articulates general and specific barriers to work and the life trajectory of those with barriers. The authors also provide an in-depth discussion about the importance and impact of assessment. The following is a quoted description of the OWRA for reference purposes: "Funded by the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Family Assistance, the Web-based OWRA Tool offers social service agency caseworkers and staff services for clients through four modules, including a detailed, comprehensive assessment of client's strengths, barriers, and work readiness. OWRA offers an innovative approach to creating a plan for clients that summarizes their strengths and barriers, and makes recommendations on placement into work activities and work supports."

II. GOAL SETTING

Goal setting is directed by the family with guidance from the Family Development Specialist. The family develops short- and long-term goals aimed at family stabilization (short-term) and achieving economic self-sufficiency (long-term). Goal setting complements the Family Investment Agreement (FIA) goals developed with PROMISE JOBS.

Babcock, E. D. (2014). *Using brain science to design new pathways out of poverty.* **Crittenton Women's Union, Boston, MA. Retrieved September 2014, from**
http://www.aecf.org/m/resourcedoc/aecf.using-brain-science-2014.pdf

This white paper clearly and concisely spells out connections between adverse experiences and extreme poverty and deficiencies in executive functioning (EF) which ultimately impact an individual's decision-making skills and ability to achieve life-long success in many domains. This is relevant to family support programs and the information contained here can influence how assessment, goal setting skill building and support are implemented. The author describes the importance of educating staff and policy-makers about this direct connection in order to plan and execute appropriate services "targeting those impacted by social bias, persistent poverty and trauma" (p.12).

Family Strengthening Policy Center. (2007). *Family strengthening writ large: On becoming a nation that promotes strong families and successful youth.* **Policy Brief No. 23. Washington, DC: National Human Services Assembly. Retrieved September 2014, from**
www.nassembly.org/fspc

Another in the series of Policy Briefs, this particular article provides as easy to follow overview of the family strengthening approach. This is essentially the foundation to all work with families, with careful consideration of culture and context to assure that goal-planning and all related activities are an appropriate match to program participants. This document clearly spells out steps toward promoting financial stability including: workforce training; increasing assets and income; sustaining assets and promoting positive family and community connections. Basic recommendations for family-centered programs are included.

Hamilton, G. (2012). *Improving employment and earnings for TANF recipients.* **Temporary Assistance for Needy Families Program – Research Synthesis Brief Series. Brief No. 6. Urban Institute, Washington, DC.**

This brief synthesizes numerous studies which highlight effective strategies for increasing employment and income for TANF participants. The program components examined include: job search, education, subsidized work and specialized training – all potential elements of a family support program. When programs implemented a mandatory jobs search, participants were more likely to secure a job when compared to the education or training- first strategy; though both were more beneficial in helping participants secure jobs than those with no support. When programs provided support through education and skill building, including setting clear goals related to future employment in a particular job sector, participants were more likely to be successful. This brief also describes the positive results of rigorous studies

examining the effects of supplementing wages with other benefits or subsidies, as well as the potential benefits of providing incentives for increasing educational attainment. The author concludes that while the programs examined did improve employment and increase income, increasing self-sufficiency over the long-term needs further investigation.

Nicoli, L.T., Passarella, L.L., and Born, C. (2014). *Industries among employed welfare leavers.* **Family Welfare Research and Training Group. University of Maryland School of Social Work. Retrieved August 2014, from** http://www.familywelfare.umaryland.edu/reports1/industriesbrief.pdf

This brief details outcomes for participants in a Temporary Cash Assistance (TCA) program in Maryland. The researchers review ten major industries and highlight five most common and five more promising industries for welfare "leavers" and/or employment seekers. By demonstrating that some industries lead to higher earnings and decreased likelihood of returning to the TCA program, they demonstrate that targeting particular industries in family goal-setting and connecting participants with particular employers has the potential to improve outcomes for participants.

III. HOME VISITING

Home visits are the foundation for all FaDSS services. During these visits a trusting relationship is fostered between the FaDSS Specialist and each family member. The home visits continue until the family requests them to end or until three months after the family is no longer receiving cash assistance from the Family Investment Program (FIP). Families receive a minimum of two home visits per month for the first three months and a minimum of one monthly thereafter.

Bridgman, A. (2009). *Home Visitation: Part of a Comprehensive Approach to Improving Lives of Poor Families***. Research on Social Policy Topics Concerning Children and Families. Vol. 23, Issue 4.**

This fact sheet expresses the importance of home visitation as an intervention strategy for working with families in poverty. The researchers from the Society for Research in Child Development suggest that home visiting should be considered as part of a comprehensive system of services to vulnerable families, as children living in compromising situations are more likely to experience problems in their growth and development. The authors reiterate that results of research in home visiting, regardless of the curricular models show varied outcomes, and that further research is necessary to fully understand the qualities of strong, effective programs. One of the noteworthy implications for policy-makers is the importance of incorporating rigorous evaluation using a variety of methods in demonstrating improvement over time, with consideration of the characteristics of communities who receive the services.

Family Strengthening Policy Center. (2007). *Home Visiting: Strengthening Families by Promoting Parenting Success. Policy Brief No.* 23. **Washington, DC: National Human Services Assembly. Retrieved August 2014, from www.nassembly.org/fspc**

This article is part of a series of briefs that address issues with raising children in low-income communities. The authors describe home visiting as one method of service delivery that can be helpful in improving caregiver and child outcomes, and discusses the connection policy has to underlying societal challenges that need to be addressed. This brief includes a concise cost-benefit analysis, stating that home visiting services contribute to: a decrease in use of child welfare systems, increases in income for caregivers, increases in tax revenue from caregiver income, and decrease in crime or involvement in the justice system for both caregivers and their children. They also discuss the elements of high-quality programs which are: 1. High level of involvement and engagement of participants; 2. Clear goals and objectives for the program which includes "rigorous quality assurance" and data collection as well as ongoing staff supervision; and 3. Highly trained and qualified home visitors who "have the right knowledge and skills to meet the needs of families they serve" (p.10).

Hegland, S., and Hughes, K. (2005). *Ten Evidence-Based Practices for Home Visiting Programs.* **Department of Human Development and Family Studies, Iowa State University. (not published.)**

This very brief article describes ten strategies and recommendations for evidence-based practices that home visiting programs should follow. Each of the ten strategies and recommendations includes a short list of supporting and relevant research.

Meckstroth, A., Burwick, A., and Moore, Q. (2008). *Teaching self-sufficiency: An impact and benefit-cost analysis of a home visitation and life skills education program. Findings from the welfare-to-work strategies demonstration evaluation.* **Final Report. Mathematica Policy Research, Inc.**

See next entry.

Meckstroth, A., Burwick, A., Moore, Q., and Ponza, M. (2009). *Teaching self-sufficiency through home visitation and life skills education.* **Issue Brief No. 3. Mathematica Policy Research, Inc.**

This reference includes two resources, the full Final Report for the Building Nebraska Families (BNF) evaluation and a more concise Brief describing the BNF program. BNF is targeted for hard-to-employ TANF clients; it uses two main strategies to promote self-sufficiency: home visiting and life skills education. This program emphasized individualized and interactive instruction using "research-based curricula" to increase skills and ultimately employment particularly for the very-hard-to-employ population. Important components of this home visiting program included a long-standing partnership with the university, hiring well-qualified staff and maintaining small caseloads. While this is a relatively costly program, it is effective in

improving employment rates for participants and is most effective with those that have multiple barriers to employment.

IV. REFERRAL and COLLABORATION

Referrals made by the Family Development Specialist assist families in accessing community resources to better meet their needs. Family Development Specialists collaborate with other programs and services to strategize case planning efforts.

Family Strengthening Policy Center. (2007). *The parenting imperative: Investing in parents so children and youth succeed.* **Policy Brief No. 22. Washington, DC: National Human Services Assembly. Retrieved August 2014, from www.nassembly.org/fspc**

The Family Strengthening Policy Center has a wealth of relevant resources that would be useful in referencing for the planning and development of programs and activities that carefully consider the ecological context families live within. This brief, in particular, outlines the components of community programming and family engagement that are considered best practices when serving those with multiple risks and extraordinary need. Suggestions are compiled from various research projects referenced in this review of literature and include: identifying higher risk families (through assessment); approaching their situations with individualized plans; partnering with other community supports to address needs holistically; and considering intensity and duration of interaction (as is done with home visiting frequency). The underlying premise of this article is that competent parents contribute to strong family systems that provide support and resources to their community, which builds capacity and reduces burden on larger systems.

a. Flexible Funding

Flexible funding is listed here as a subset of Referral and Collaboration, *though it could also be part of any other component. This component is for supportive services that may be provided by the FaDSS program (where available), when no other resources exist in the community.*

Walter, U. M., and Petr, C. G. (2011). Best practices in wraparound: A multidimensional view of the evidence. *Social Work, Vol. 56, No. 1.* **p. 73-80. Retrieved September 2014, from https://depts.washington.edu/wrapeval/docs/Best_Practices_in_Wraparound_Walter_andPetr. pdf**

This article succinctly explains the need to consider the family in the context of their community and the importance of working with families to elicit their natural supports, beginning with an overview of the wraparound approach, which is a great example of individualized, family-centered, community-based, outcomes-centered, flexible support. All these are desired conditions of the Family Support program, though this service belongs to a slightly different social service niche. The authors continue with descriptions of the research regarding the effectiveness of wraparound services. This article is listed as a reference for the rationale behind maintaining flexible funding and ancillary services that may not be defined in advance because

it speaks of social services in a global sense; that is social services connotes emphasis on providing the "least-restrictive environment, taking the ecological approach that honors clients self-determination" (p.78). Wrap-around service providers have parallel positions to FDS staff in that they are the link between the individual or family and a number of necessary community programs that can effectively support them on a path to self-sufficiency and flexible funding is strong component of the model.

V. SUPPORT

Support provided by the Family Development Specialist is ongoing, strength-based and solution focused.

Auspos, P., Miller, C., Hunter, J., and Manpower Demonstration Research Corporation, (2000). *Final report on the implementation and impacts of the Minnesota family investment program in Ramsey County.* **Retrieved September 2014, from http://files.eric.ed.gov/fulltext/ED450260.pdf**

This is a final report of the implementation of the Minnesota FIP in Ramsey County. The results indicated that the program was well received by staff and participants. Most participants reported participating in a work- related activity within the first year of the program, as well as the majority reporting finding a job within that year. This program has a work-first approach, providing an example of solutions-focused support provided to the participants. The result of this evaluation overall revealed that participation in work-related activities was higher in this population than in other counties without such support.

Golden, O., Loprest, P., and Mills, G. (2012). *Economic security for extremely vulnerable families: Themes and options for workforce development and asset strategies.* **Urban Institute, Washington DC.**

"This report explores workforce and asset development strategies for improving the economic security of extremely vulnerable families, those facing major challenges beyond poverty." Here, workforce development is necessary for creating long-term stability for families, and asset building is helpful in buffering against short term emergencies and family stressors with the potential of encouraging longer-term investments such as home ownership. With consideration of evaluation results from a few credible programs, their suggestions for targeting vulnerable families combining these two approaches include: combining skill building, work experience, targeted treatment and support specifically designed to address the known challenges (i.e., substance use, disability or mental health issue); assisting families with asset-building (i.e., savings accounts, child development accounts); providing intensive and high-quality case management or partnering with a community agency such as home visiting where families develop a connection over time.

Madsen, W. C. (2009). Collaborative helping: A proactive framework for family-centered services. *Family Process, Vol. 48, No. 1.*

This journal article provides a succinct framework for all collaborative work with families. It explains how to partner with families, capitalize on their strengths, and develop positive relationships that are honest and productive using various techniques such as motivational interviewing. The author gives straight-forward guidance and specific examples for working with participants that may be reluctant to engage (especially if they had any prior negative experiences with the "helping" professions).

Passarella, L. L., Born, C., and Roll, S. (2013). Child care subsidies among new TCA families: Baseline utilization rates and outcomes. Family Welfare Research and Training Group. University of Maryland School of Social Work. Retrieved September 2014, from http://www.familywelfare.umaryland.edu/reports1/childcarebrief13.pdf

To support families in their transitions from welfare to work, subsidized child care is available through The Child Care and Development Fund and other sources. According to this brief, child care subsidies and support in obtaining assistance with child care has a substantial and positive impact on parents' abilities to secure and maintain employment; this not only benefits the families but reduces their need for government support (p.10). The findings of this particular study showed that "women using subsidized child care are more likely to be employed than those that were eligible but did not use the subsidy. In fact, employment participation was higher in every quarter for those that received the child care subsidy." This brief provides a sound recommendation for encouraging self-sufficiency programs to develop (or improve) partnerships with community programs that can support families in need of child care assistance which contributes to sustained employment and better outcomes.

Zedlewski, S. R. (2012). *Welfare reform: What have we learned in fifteen years?* **Brief 24: Perspectives on Low-Income Working Families. The Urban institute, Washington DC.**

This brief summarizes the background information on TANF and related legislation and describes the impact on service delivery and families accessing support. Of particular interest with regard to the Core Component of providing strengths-based and solution-focus support as defined by the FaDSS program, this articles summarizes the most effective education and employment programs found to increase self-sufficiency. Citing authors Hamilton and Scrivener, "both work-first and education-first strategies can increase work and earnings…but mandatory job search gets people into jobs sooner" (p.6). These authors state that a combined approach of providing high-quality programming such as case management or support services, working with community colleges with a strong employment focus is ideal. In addition, skills training and working directly with particular business sectors and industries is highly promising in increasing employment and earnings. Lastly, these authors suggest supplementing low-wage worker earnings and providing incentives in job search services.

a. Group Activities

Group activities can be delivered in many different ways and is listed here as a subset to the larger Core Component of Support. Where available, group activities are offered as a means of reducing social isolation and encouraging community connectedness.

Family Strengthening Policy Center. (2007). *The parenting imperative: Investing in parents so children and youth succeed. Policy Brief No. 22.* **Washington, DC: National Human Services Assembly. Retrieved August 2014, from** http://www.nassembly.org/fspc *****

This article describes the best practices for promoting community involvement, providing peer support and any other specialized programming which suits the needs of the families in a given community. The Family Strengthening Policy Center takes the stance of capitalizing on existing resources and infrastructure, though emphasizes improving the quality of programs for the benefit of children and families. It provides examples of strengths-based programs which address isolation including Triple P and Parents Anonymous, both sound examples to consider for encouraging community connections. *****This brief is also listed under *Referral and Collaboration*, though it is relevant to the Core Component intended to reduce isolation, often referred to as *Group Activities* by FaDSS providers.

Hornby Zeller Associates, Inc. (2014). *Social support for families participating in prevention programs. A research review and report provided for Prevent Child Abuse Iowa.* **Retrieved September 2014, from** http://www.pcaiowa.org/grantees/

Iowa's Child Abuse Prevention Program (ICAPP) examined the applicable research addressing parental social support, one of the protective factors addressed by community-based prevention efforts. The major objective of this white paper is to answer two questions about support provided by group-based parent education activities in child abuse prevention: What efforts have been proven to be effective in parent education programs? and How can programs intentionally build positive social support? To answer these questions, this report summarizes the literature focusing on the factors addressed through prevention programs, provides examples of specific programs and curricular models, and concludes with a summary of common elements of effective programs.

VI. ADVOCACY

Family Development Specialists partner with families to develop self-advocacy skills through a combination of modeling and empowerment with the goal of ensuring that services are equitable, inclusive and responsive.

Boteach, M., and Martin, M. (2014). *Improving economic opportunity: Alternatives to the Opportunity Grants.* **Center for American Progress. Retrieved September 2014, from The Center for the Study of Social Policy,** http://www.cssp.org

This article provides a useful summary of the shift in economic support provide by the US government in various attempts to address the poverty gap. The language contained here could be helpful in structuring public reports and large-scale advocacy efforts more than in advocating for specific families. Nonetheless, it is helpful to understand the evolution of federal assistance policies and can help staff relate to participants' experiences with various requirements.

Nachshen, J.S. (2004). Empowerment and families: Building bridges between parents and professionals, theory and research. *Journal of Developmental Disabilities, Vol. 11, No. 1.*

This research-based article goes into great detail about empowerment at three levels (community, organizational and individual), describing how the theoretical concept can be applied to working with families of children with disabilities. This resource includes a thorough definition of empowerment and an overview of the research-to-date concerning the examination of empowerment as it contributes to family experiences.

Useful Websites for Related Information

Alliance for Children and Families (search term: Self Sufficiency)—
http://www.alliance1.org/grant-funded-programs/strategy-counts/blog/what-gets-measured-gets-done-assessing-self-sufficiency-a

Mathematica (Family Support) — http://www.mathematica-mpr.com/our-focus-areas/family-support

MDRC Work and Income Security Projects — http://www.mdrc.org/search/projects?issue=3675

Office of Planning, Research and Evaluation (Office of the Administration for Children and Families) — http://www.acf.hhs.gov/programs/opre/resource-library/search?area[2765]=2765

The Urban Institute — http://www.urban.org/family/index.cfm

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Hong, P., Young, P., and Choi, S. (2013). The Employment Hope Scale: Measuring an empowerment pathway to employment success. *School of Social Work: Faculty Publications & Other Works.* Paper 25. Retrieved September 2014, from http://ecommons.luc.edu/socialwork_facpubs/25

Hsueh, J., and Farrell, M.E. (2012). *Enhanced Early Head Start with employment services: 42-month impacts from the Kansas and Missouri sites of the enhanced services for the hard-to-employ demonstration and evaluation project*. OPRE Report 2012-05. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Laird, E., and Holcomb, P. (2011). *Effective case management: Key elements and practices from the field*. Issue Brief. Mathematica Policy Research, Inc. as part of the Technical Assistance and Training initiative of the Department of Labor's Employment and Training Administration.

Lee, J. B. (2001). *The empowerment approach to social work practice.* Second Edition. Columbia University Press.

Loprest, P., and Martin, K. (2008). Supporting work for low-income people with significant challenges. New Safety Net Paper 5. The Urban Institute. Retrieved September 2014, from http://www.urban.org/publications/411726.html

Ovwigho, P. C., Saunders, C., and Born, C. (2005). *Barriers to independence among TANF recipients: Comparing caseworker records and client surveys*. Family Welfare Research and Training Group. University of Maryland School of Social Work: Baltimore, MD.