



U.S. Department of Health and Human Services
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CHILDREN & FAMILIES

A Second Look: Building and Leveraging Social Capital among TANF Participants to Improve Employment Outcomes 2.0

September 13th, 2016 -- 2:00 to 3:30 p.m. EDT

Moderated by:

Carol Mizoguchi, Family Assistance Program
Specialist, Office of Family Assistance




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Strengthening Self-sufficiency Pathways

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Introductions, Logistics, Agenda Overview

Carol Mizoguchi, OFA



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- **Jeremiah Program's Approach to Social Capital Development,** Wanda Walker, Director of Program Excellence
- **Tennessee's Approach to Social Capital Development,** Tracy Bell, Chief Officer of Workforce Development, Employment, and Transformation at the Tennessee Department of Human Services
- **The Center for Working Families' Approach to Social Capital Development,** Keren Cadet, 2-Gen Coordinator
- **Facilitated Q&A,** Carol Mizoguchi, OFA



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Audience Poll #1

How familiar are you with the use of social capital among low-income families?

- a) Currently using the practice in my work
- b) Familiar with the concept but not currently implementing
- c) Unfamiliar with the practice



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Jeremiah Program's Approach to Social Capital Development

Wanda Walker
Director of Program Excellence
Jeremiah Program

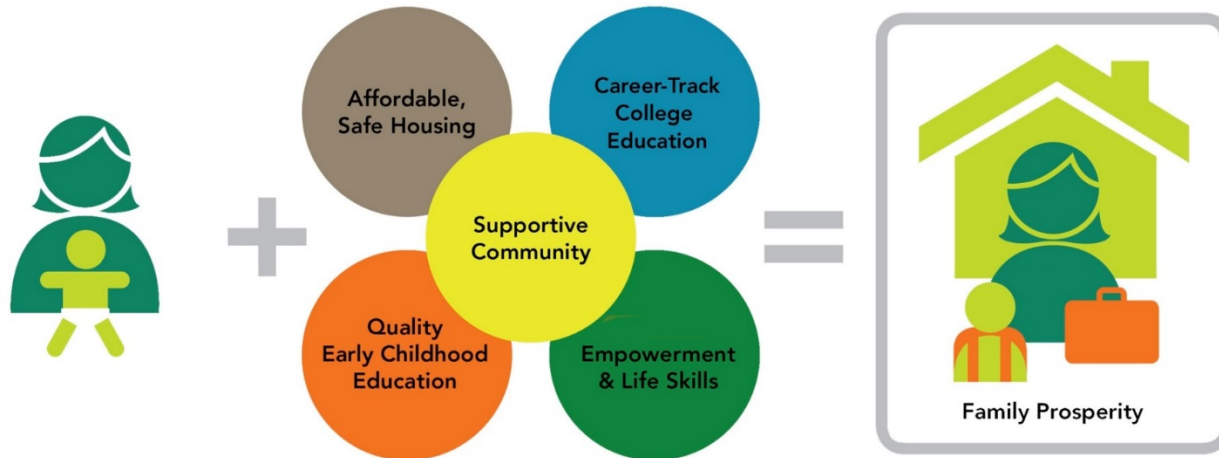


Wanda N. Walker, MSW
Director of Program Excellence

Social Capital at Jeremiah Program



JEREMIAH PROGRAM



Safe, Affordable Housing

St. Paul Campus

- Fully furnished, campus-style housing
- Residents pay no more than 30% of their income for rent (average \$135/month)
- Located near educational institutions, employment opportunities, public transportation
- Secure, supportive environment



Minneapolis Campus



**39 units in
downtown
Minneapolis,
next door to
Minneapolis
Community &
Technical
College**

Austin, TX, Phase 1 Campus



**4 units built with
Guadalupe
Neighborhood
Development
Corporation,
near Austin
Community
College**

Austin Phase 2 (Opening October 2016)



Jeremiah Program Community Center

A project of the Guadalupe Neighborhood Development Corporation and Jeremiah Program

Architect: hatch + ulland owen architects



Campus with 35 two-bedroom apartments and on-site child development center designed to serve 55-60 children

Jeremiah Families

- Living below poverty level
- Dependent upon public assistance
- 60-70% women of color
- 70-80% children of color
- Average age of mothers: 25
- Average age of children: 3

Child's Profile

- Ages 6 weeks–5 years old
- 5% diagnosed with a special need
- 60% have seen the abuse of drugs or alcohol in home
- 30% have witnessed or experienced violence



- *"A candle that lights another candle doesn't lose its light but the light shines brighter throughout the world." – Author unknown*

The Jeremiah Sisterhood

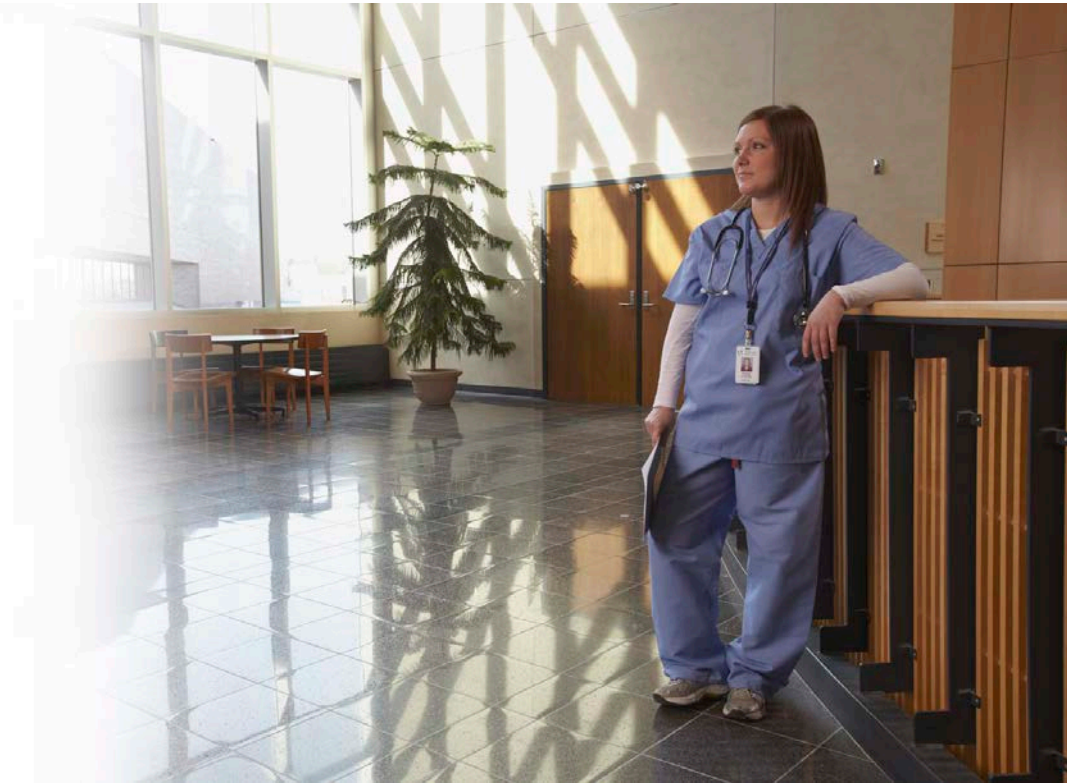
- Jeremiah was designed with data from single mothers trying to complete their education.
- These women talked about isolation as a barrier to their success. When asked about who they turn to for support, 100% of the women said they “had no one” (this reference was to having no one to encourage them, help them connect to resources that would help them realize their dreams).

Program Design

- The relationships have been developed through the following strategies:
 - Empowerment cohorts
 - Life Skills cohorts
 - Resident Council (it used to be conducted as an all building meeting once a month. Not sure how it is done today)
 - Informally- as mothers of children in the same classroom and as neighbors

Transformation Starts With Empowerment Classes

- Empowerment is increasing our capacity to control our states of mind internally
- Changes us from victim to powerful self
- Internal power enables us to function at the peak of our capability



Empowerment Helps Us...

- Find the best solutions to problems at home and work
- Get along with others better because our own defensiveness and fears are not sidetracking us
- Recognize the choices we have in every situation
- Make thoughtful and considerate decisions
- Be happy with who we are

Empowerment Results In...

- Learning to accept responsibility for behavior
- Demonstrating honesty
- Accountability and avoiding blaming others
- Self-management and self-control
- Listening
- Assertiveness

Life Skills & Resident Council

Life Skills Classes

- presents solutions to real issues participants face every day.
- allow participants to openly express themselves in ways not always possible in other settings.

Resident Council

- develops and support a sense of community among Jeremiah Program participants.

Anecdotes of Sisterhood

- From the time of our first graduation in 1999, graduates have attributed their success in completing the program to “the sisterhood” they developed while in the program.

Anecdotes

- Jeremiah women are inspired by their peers (they all have barriers they are trying to overcome and they all have similar dreams of improving their lives)
- Jeremiah women develop trusting relationships with other women (prior to Jeremiah, most participants say they do not have trusting relationships with other women). Their experiences have been filled with broken relationships, deceit, unreliability, lack of boundaries, etc.
- The formation of trusting relationships has given women examples/a framework for what trusting relationships look like. In addition to developing trusting relationships with Jeremiah women, they have also developed trusting relationships with staff and volunteers.



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Audience Poll #2

Does your program currently offer services that encourage TANF participants to leverage their social capital?

- a) Yes
- b) No
- c) Currently exploring the possibility



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Tennessee's Approach to Social Capital Development

Tracy Bell

Chief Officer of Workforce Development,
Employment, and Transformation

Tennessee Department of Human Services



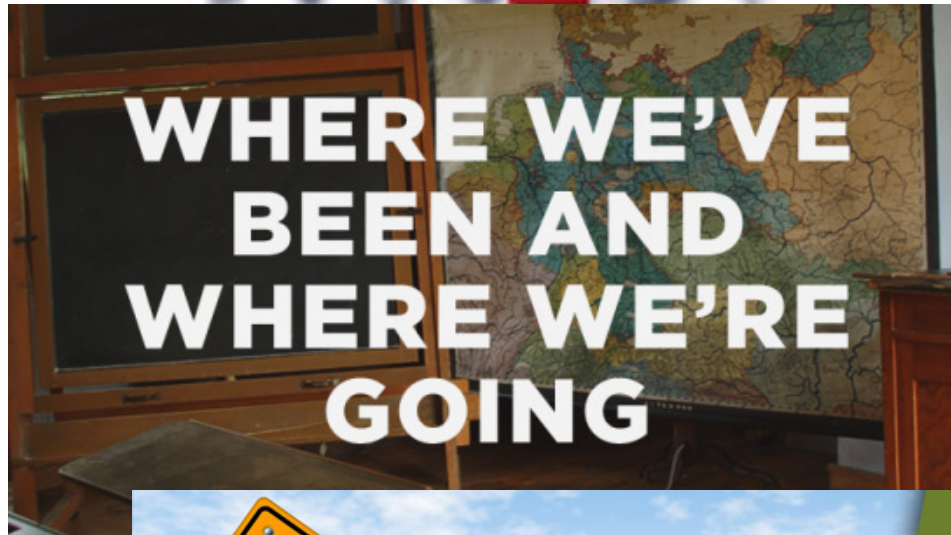
2G FOR TN

The Importance of Social Capital

**TN DEPARTMENT OF
HUMAN SERVICES**

Our Focus

Who we **Are?**



About DHS

Purpose and Mission:

- To offer temporary economic assistance, work opportunities, and protective services to improve the lives of Tennesseans.

Our Vision:

- To be a leader in effectively partnering with human service customers in establishing or re-establishing self-sufficiency to create a better quality of life.



About DHS



We are a Learning

Organization
“Growing Capacity, Reducing
Dependency”

About DHS

DHS Adheres to a Strength Perspective

Every individual, group, family, and community has strengths.

Trauma and abuse, illness and struggle may be injurious but they may also be sources of challenge and opportunity.

Assume that you don't know the upper limits of the capacity to grow and change and take individual, group, and community aspirations seriously.

We best serve clients by collaborating with them.

Every environment is full of resources.

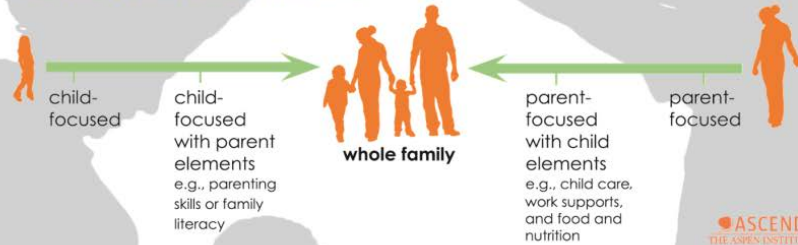
2G for Tennessee

Creating a 21st Century Human Services Delivery Model

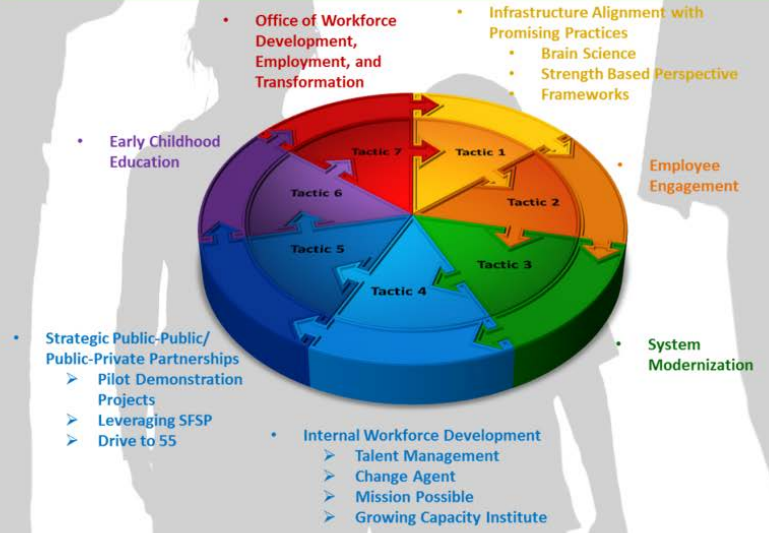
*Moving Families Forward: Transformational Pathways out of Poverty
By Operating at the Generative Level*

Overarching Strategy: 2 Generational Approach

The Two-Generation Continuum



Tactics:



Overview of 2G For Tennessee Action Plan

Project One: Programmatic

Implement a Two Generation Strategy for creating Cycles of Success (pathways out of poverty)

Key Milestone Highlights:

(Please note this is a working document and not all encompassing)

By December 2016

- Start enrolling CCDF youth in imagination library
- Enlist feedback for TN Promise parents of youth benefitting from TANF – In Progress
- Prepare to launch start of 2 Gen Services pilot
- Begin realigning contracts with identified partners to include a requirement to operate in accordance with promising practices – In Progress
- Evaluate the number of TN Promise youth who completed key milestones for this time period
- Announce 2-Gen Consortium members and hold first meeting
- Establish Workforce Council

By December 2017

- Enroll TANF youth in Tennessee Promise
- Graduate CAI 2.0
- Graduate MPLA 3.0 class
- Use baseline data from year 1 of pilots to determine effectiveness and scalability
- Align with WIOA requirements
- Review results of innovation grants
- Evaluate Childcare Certificate expansion
- Announce innovation grant opportunity
- Issue announcement on 2-Gen innovation grants and select awardee
- Expand CCC to Families not part of TANF

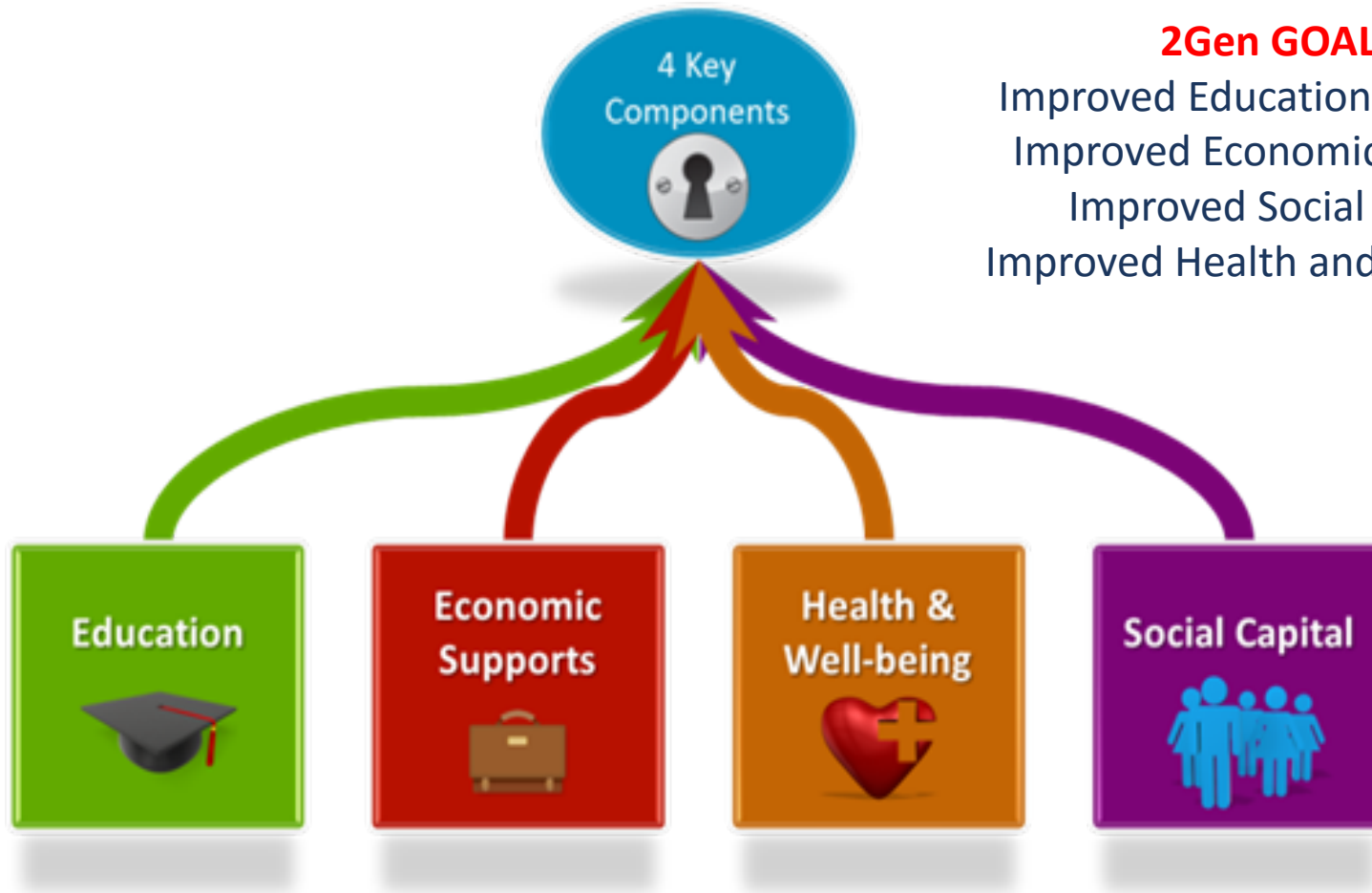
By December 2018

- Evaluate processes and identify opportunities for improvement



Growing Capacity, Reducing Dependency

TN 2Generational Approach



2Gen GOALS:

Improved Educational Progress
Improved Economic Supports
Improved Social Capital
Improved Health and Well Being

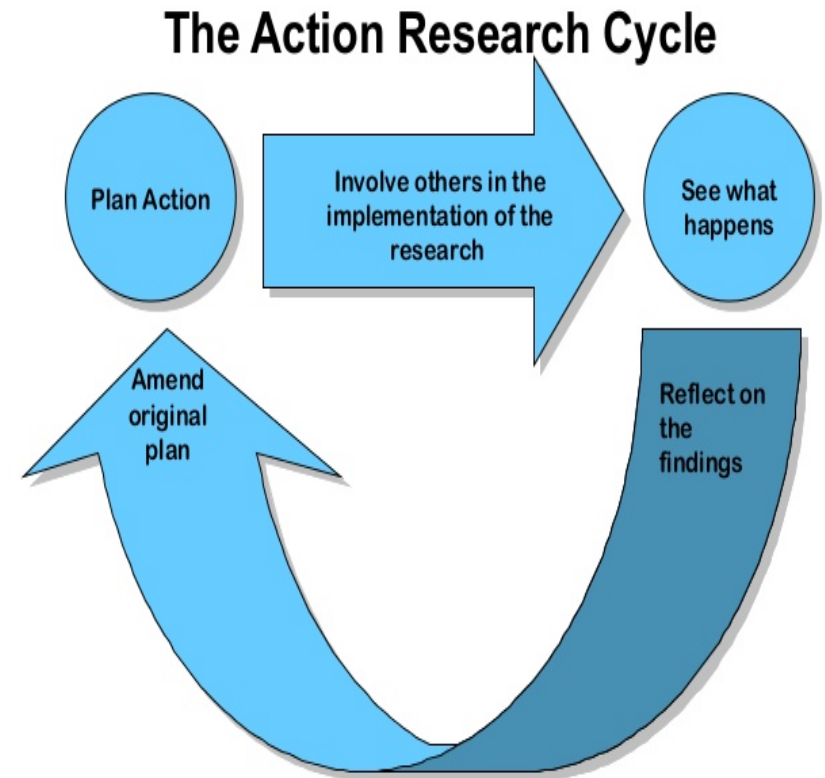
4 Key Components – Social Capital

SOCIAL CAPITAL: Social capital is a key success factor of the two-generation approach. Many years of research has shown that social capital manifests as peer support; contact with family, friends, and neighbors; participation in community and faith-based organizations; school and workplace contacts; leadership and empowerment programs; use of case managers or career coaches; social networks, such as cohort models and learning communities; and mental health services. Such support appears to be a powerful component in programs that help move families beyond poverty. Social capital builds on the strength and resilience of families, bolstering the aspirations parents have for their children and for themselves.



Pilot Overview– Action Research

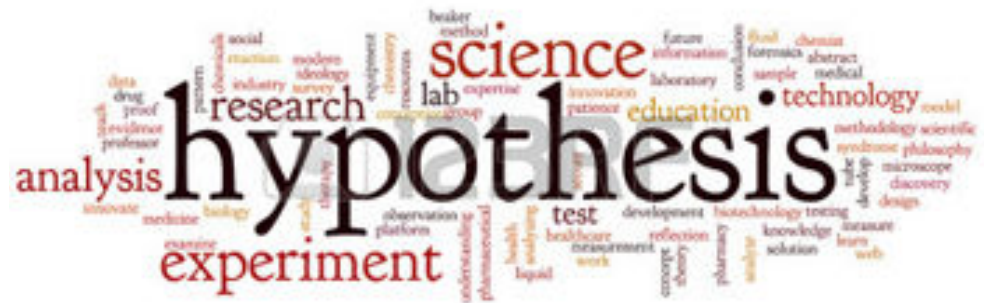
Action research sets out to address both the practical concerns of people in an immediate problematic situation and to further the goals of social science simultaneously. With that in mind, there is a dual commitment in action research to study a system while at the same time collaborating with members of the system in changing it in what is regarded as a desirable direction. Accomplishing this collective goal requires the active collaboration of researcher and client, and thus it stresses the importance of co-learning as a primary aspect of the research process.



Hypothesis

The Hypothesis
or basic premise
is that,

*Changing how
we deliver the
services and
engage the
customer, will
yield better
overall
outcomes for
the family unit.*



Program Staff – Roles and Responsibilities

Client Representative

Each Client Representative will be assigned a maximum caseload of 25?? families. The Client Representative will be responsible for:

- Engaging with the client to understand their immediate need and assess strengths by using Motivational Interviewing Techniques, Strength based, and Brain Science Informed Practices.
- Assisting with development of an action plan in partnership with the client that will identify goals, barriers, solutions, resources (social capital), action steps, and milestones allowing them to reach their full potential.
- Supporting the improvement in family functioning by providing information about community resources that build parents' sense of confidence and competence at home and in career pathway.
- Ensuring clients are linked with the resources and supports necessary to address and resolve barriers to self-sufficiency with internal divisions, community agencies, strategic partners, and community resources in a timely manner.
- Making intentional referrals and conduct the necessary follow up with community partners/agencies which include but not limited to:
 - o ECMS providers
 - o TALS partner
 - o Workforce Investment Network
 - o Family Focused Solutions (if applicable)
 - o TCAT through TN Reconnect
 - o Early Success Coalition
- Coordinating regular coaching sessions with the client and their family, as well as, ongoing, frequent contact with community agencies and strategic partners as needed to ensure goal progression and address any issues pertaining to reaching full potential.

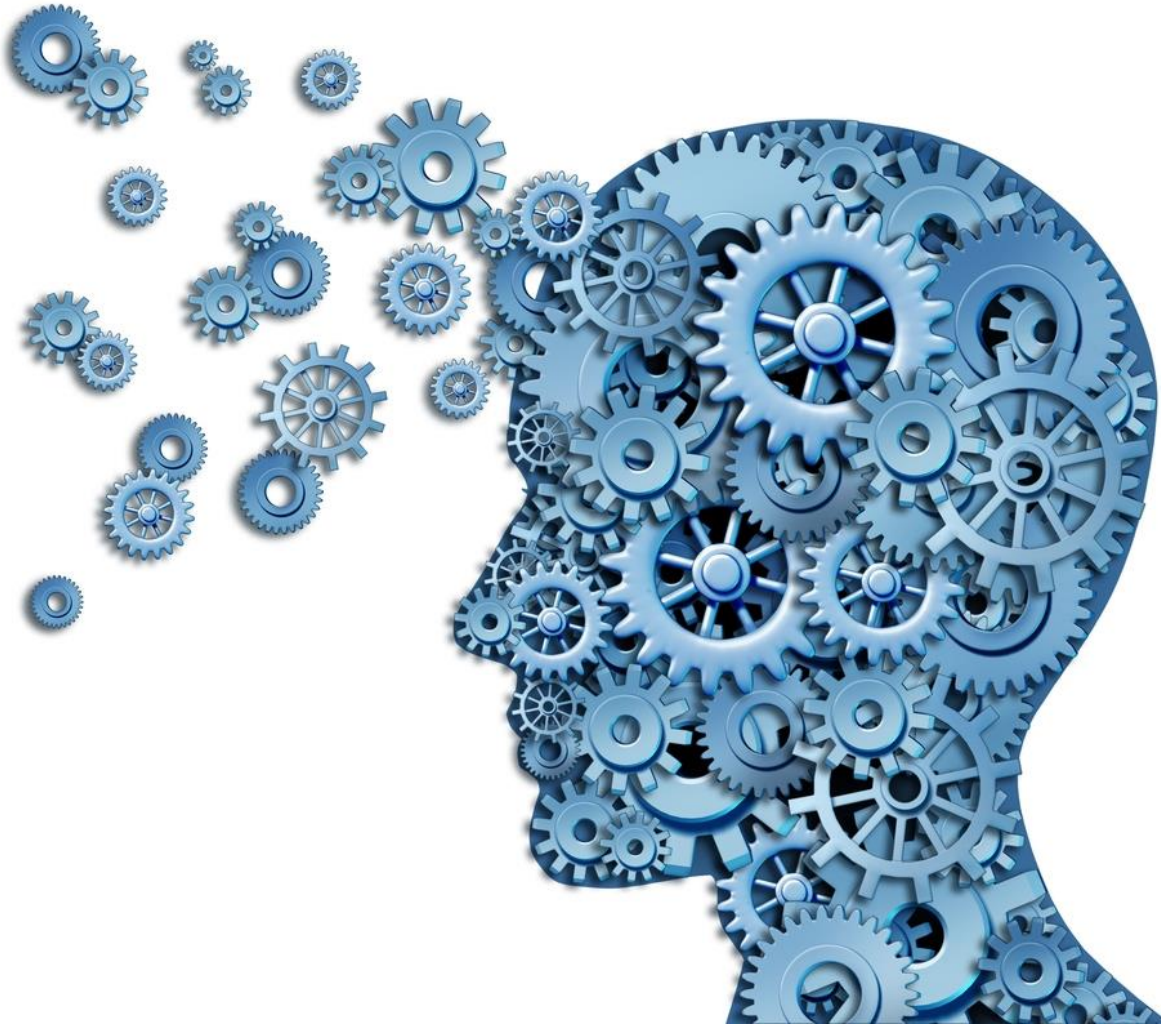
Staff/Client Interaction

- Pre-screen for new applicants and tier assignments (to be completed by intake scheduler - clerical staff)
- Notify CR of the scheduled appointment for SNAP and FF eligibility interview
- Refer up to 25 new applicants per CR with a tier 1 assignment
- Once the CR completes the SNAP and FF eligibility, the CR will complete the following steps with the customer:
 - FF Orientation (to include work requirement, time limits, support services and incentives offered, sanctions for non-participation, and transitional benefits)
 - Assessment (to include confirming the tier assignment, short/long term goals, FFS, VR, TALS, ADA screening, and other support services)
 - Personal Responsibility Plan
 - Child Care Certificate
 - ECMS referral and appointment
 - Individualized Career Plan (ICP) onsite with ECMS provider

Staff/Client Interaction

- Conduct coaching sessions with the customer to discuss progression or the need of other support services
 - Discuss weekly goals to include celebrating successes and identifying barriers preventing the customer from completing their weekly goals
 - Address any concerns/conflicts the customer may be experiencing with the ECMS provider
 - Check-in with child care needs and/or child's school attendance and educational progress
 - Periodic visits to the ECMS provider to participate with clients in provider activities/seminars
 - Check-in on any long term educational goals which includes working with the customer to register on the TN Reconnect website
- Facilitate twice monthly status meetings necessary providers(ECMS, TALS, FFS, VR, etc.) to discuss the customer's progression
 - Review the customers short and long term goals
 - Provide any feedback received from the customer regarding his/her progression
 - Resolve any pending concerns/conflicts shared by customer
- Conduct regular staffings with ECMS Provider, FFS Provider, and Customer to discuss obstacles and/or progression
- Document case record regularly to support customer and provider contacts
- CR to establish monthly meetings with caseload to establish a social network, and to allow the customers to learn from each other throughout the process

Mind-Shift





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Audience Poll #3

Does your TANF program encourage participants to support and communicate with one another through opportunities such as mentoring, job clubs, support groups, group/cohort training, etc?

- a) Yes
- b) No
- c) Currently exploring the possibility



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The Center for Working Families' Approach to Social Capital Development

Keren Cadet

2-Gen Coordinator

The Center for Working Families

2 Generation Leadership Cohort

TCWFI & Sheltering Arms/Educare – Social Capital Initiative
Keren Cadet, MSW
Two-Generation Coordinator
The Center for Working Families, Inc.



The Center for Working Families, Inc. (TCWFI)

MISSION: Advance economic success for hard-working families and their children through:

- Workforce development.
- Economic supports.
- Asset building.
- We believe that every family and individual is able to improve their lives through economic and career success.

TCWFI Core Initiatives and Programs

- **Family Economic Success Continuum.**
- **Employment Barriers:**
 - **Literacy 75%**
 - **Childcare 40%**
 - **Transportation 75%**
 - **Criminal Background.**
- **Employment and Education Services:**
 - **GED Classes.**
 - **Job Readiness Bootcamp.**
 - **Construction Ready Program.**
 - **Generations Program w/focus on Customer Service.**



Sheltering Arms - Educare

Early Learning and Education Center

- Housed on the first floor of the Paul Lawrence Dunbar Elementary School, Educare Atlanta connects children and families to a quality education from birth through fifth grade.
- The school offers year-round, weekly care, Monday through Friday from 6:30 am to 6:30 pm to children from six weeks of age through pre-kindergarten.



The Two-Generation Work

- Once a family enrolls in the Two-Generation Program, they have access to a comprehensive set of supports and services.



Supportive Services

- Childcare Subsidy.
 - Sheltering Arms Early Learning Center/EDUCARE.
- Family Coaching.
- Advocacy.
 - Transportation Assistance – Marta.
 - Rental Assistance.
 - Criminal Records.
- *Parent Capacity Building and Social Capital Programs.*
 - *All Pro Dads (Sheltering Arms).*
 - *Leadership Cohort (TCWFI).*



2Gen Leadership Cohort (LCH)

Mission & Definitions

To increase the social capital of participants; through education and practice. To provide an incentives to support the continued success of participants as they navigate through the bridge.



Starting Point

Mobility Mentoring

Self-Sufficiency

Family Stability		Well Being		Education and Training	Financial Management		Career Management	School Readiness/Child Development	
Housing	Child/Children	Health and Behavioral health	Social Networks	Educational Attainment	Savings	Debts	Earnings level	Child Development	Attendance
No subsidy; housing cost less than 1/3	Child/Children's needs met; serving as no barrier to parent/guardian school or work	Fully engaged in work, school, and/or family with no Health/behavioral issues.	Advocate/Networker: Uses own and other resources and connections to advance the mobility goals of others	Completed bachelor's degree or higher	Savings of three month expenses or more	Current on all balances and no outstanding debt other than mortgage or educational and/or car loans	Job with earnings >= index wage i.e. 1 adult, 2 children=\$47,000	Child meets the widely held expectations for their age according to the school reporting data or shows progress on identified educational plan. Child is up to date immunization and dental exam and attends regular schedule visits	Child's attendance = 95% or better for the school year
No subsidy; housing costs exceed 1/3 household take home pay	Child/Children's needs serving as minimal disruption to parent/guardian school or work	Minimal disruption to work, school, and/or family due to health/behavioral health issues	Developed Network: Consistent source of both support and leveraging connections	Completed associate's degree or postsecondary job training or certificate program	Savings of more than two months expenses but less than three months expenses	Current in payments and plans and paying more than minimum payments	Job with earnings of 66-99% of index wage i.e. 1 adult, 2 children=\$35,250	Child meeting developmental milestones for their age according to the ASQ developmental screening/school reported data or a referral for intervention is in process. Child is up to date immunization and dental exam and attends regular schedule visits	Child's attendance = 85% or better for the school year
Partial subsidy; paying \$200 or more towards rent	Child/Children's needs serving as intermittent disruption to parent/guardian school or work	Intermittent disruptions to work, school, and/or family due to health/behavioral health issues	Emerging network: Consistent source of support and occasional leveraging connections	Attending college or postsecondary job training program	Savings of at least one month and up to two months expenses.	Structured payment plans in place and meeting minimum payments	Job with earnings of between 33%-65% of wage index. i.e. 1 adult, 2 children: \$23,500	Child screened through the ASQ developmental screening or the child health check (physical from their doctor) and areas of developmental concern identified. Child is up to date on immunizations and dental exams.	Child's attendance = 75% or better for the school year
Full subsidy; permanent housing paying \$200 or less towards rent	Child/Children's needs serving as significant obstacle to parent/guardian school or work	Regular and recurring disruptions to work, school, and/or family due to health/behavior health issues.	Limited network: Occasional source of support	Completed postsecondary remedial education classes, college preparatory program prerequisites for job training/readiness program	Less than one month expenses	Debts in excess of ability to pay, behind in payments	Job with earnings less than 33% of wage index. i.e. 1 adult, 2 children = \$11,750	All children in the home are enrolled in an educational program or school and have a medical home	Child's attendance = 65% or better for the school year
Homeless	Recently emergent or not yet addressed dependent needs requiring additional attention	Severely limited engagement in work, school, and/or family due to significant health/behavioral health issues	Isolated or crumbing network	Attending postsecondary remedial education classes, college preparatory program or fulfilling prerequisites for job training/readiness program High school diploma or GED obtained No high school diploma or GED	No savings Monthly active budget completed	Defaults or non-payment on all or most	Unemployed	Unidentified child development needs - no child health check or developmental screening	Child not yet enrolled in a child care program

LCH INCENTIVE PROGRAM

Program Plan Goals:

1st Quarter	2nd Quarter	3rd Quarter	4 th Quarter
HEALTH & WELLBEING	FINANCIAL MANAGEMENT	CAREER MANAGEMENT	FAMILY STABILITY
Healthy Living	Budget Discipline	Job Promotion	Parent School Engagement
Regular Exercise	Understanding Credit	Networking	
Nutrition			
Mental Health			
Social Support			

Desired Incentives:

1st Quarter	2nd Quarter	3rd Quarter	4 th Quarter
HEALTH & WELLBEING	FINANCIAL MANAGEMENT	CAREER MANAGEMENT	FAMILY STABILITY
Fitness Training Stipend(Membership)	Banking Relationship Initial Savings Deposit	Networking Social	Free Family Activities (Tickets, Passes Etc) Summer Camp Fees
Tanita Screen Body Composition Analysis	Credit Report Analysis	Conversation Analysis	
Fitness Store Giftcard		Job Leads	
Grocery spending reimbursed (Gift Card)		Resume Update	

LCH Objectives & Goals

Improve social capital of 2Gen participants by:

- Increasing social connections; create opportunities to actively engage in advocacy for self and community.
- Increasing understanding of the role of social capital in building healthy communities.
- Creating opportunity for parents, children and partnering organizations to increase social capital.
- Linking families, community based organizations, government and communities of faith to the increase social capital of NPU-V.

Provide incentives to support the continued success of participants by:

- Hosting monthly meeting
- Facilitating workshops and discussions
- Offering giveaways and raffles



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The Center for
Working Families, Inc.



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Facilitated Q&A

Carol Mizoguchi, OFA




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Q & A

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Please submit your ideas by e-mail to peerta@icfi.com.

Please help us to expand our network and reach a greater number of people by directing interested colleagues from your local and state networks and agencies to <http://peerta.acf.hhs.gov>.

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