



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Family Assistance



OFA Webinar - The Whole Family Approach: How TANF Programs Can Engage Customers in Mental Health Services

January 26, 2023



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Family Assistance



Welcome

- James Butler, Family Assistance Program Specialist, Office of Family Assistance (OFA), Administration for Children and Families (ACF) (Moderator)



Using Zoom Webinar

Participation

Please submit your questions and comments using the Q&A option on the panel on the bottom of your screen. You will then see a popup of the Question and Answer box.



Chat



Raise Hand



Q&A

Question and Answer

Welcome to Q&A

Questions you ask will show up here. Only host and panelists will be able to see all questions.

Type your question here...

Who can see your questions?



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Family Assistance



**Mary Roberto,
Project Director, ICF**



Speakers on Today's Webinar

- Dr. Mary Beth Vogel-Ferguson, Research Associate Professor, Social Research Institute, University of Utah
- Dr. Maria Aguirre-Mendoza, Executive Director, Soboba Tribal TANF Program
- Arnold Ontiveros, Staff Manager, New Mexico Human Services
- Melisha Montaña, OPRE Program Manager, New Mexico Human Services
- Lisa Guetzkow, Integrated Programs Manager (FAST), Ramsey County, Minnesota



Polling Question #1

Poll #1: Which of the following statements do you believe is not true:

- A. 1 in 5 U.S. adults experience mental illness each year.
- B. 1 in 20 U.S. adults experience serious mental illness each year.
- C. 1 in 6 U.S. youth aged 6-17 experience a mental health disorder each year.
- D. 50% of all lifetime mental illness begins by age 14, and 75% by age 24.
- E. Suicide is the 10th leading cause of death among people aged 10-14 and 24-35.



THE UNIVERSITY OF UTAH
College of Social Work

TANF and Mental Health: Making the Connections – Making a Difference

Office Of Family Assistance Webinar

The Whole Family Approach

January 26, 2023

Mary Beth Vogel-Ferguson, PhD

Social Research Institute – University of Utah

Acknowledgements

Study conducted as part of grant partnership:

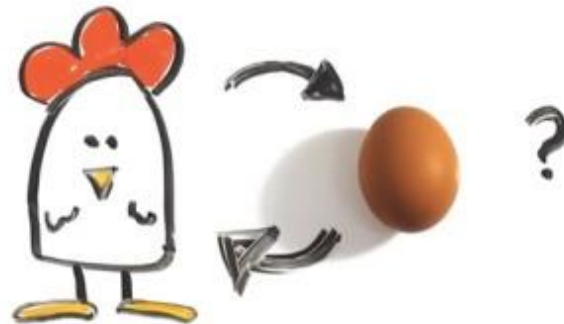
UTAH's



Social Research Institute

College of Social Work, The University of Utah

Poverty \neq Mental Health Issues



Poverty and Mental Health

- Infusions of cash into the hands of poor families has been shown to reduce mental health issues – depression, stress, worry
- Programs that provide support beyond cash assistance such as training, access to health care, saving incentives, etc., have higher impacts than simple cash transfers
- The correlation between living in poverty and mental health struggles is greatest when also related to exposure to toxic stress
- Few studies control for previous and current exposure to stress when measuring impacts of poverty



Study Sample/Data Collection – 2018/2019

Participant criteria (N = 1,001)

- Received between 2 – 9 months cash assistance
January 1997 - present
- TANF customer type requiring participation
- Open cash assistance case



Data Collection:

- Contact protocol: letters, calls, visits
- Voluntary Participation
- In-home, in-person interviews (Avg. 70 min.) by trained interviewers



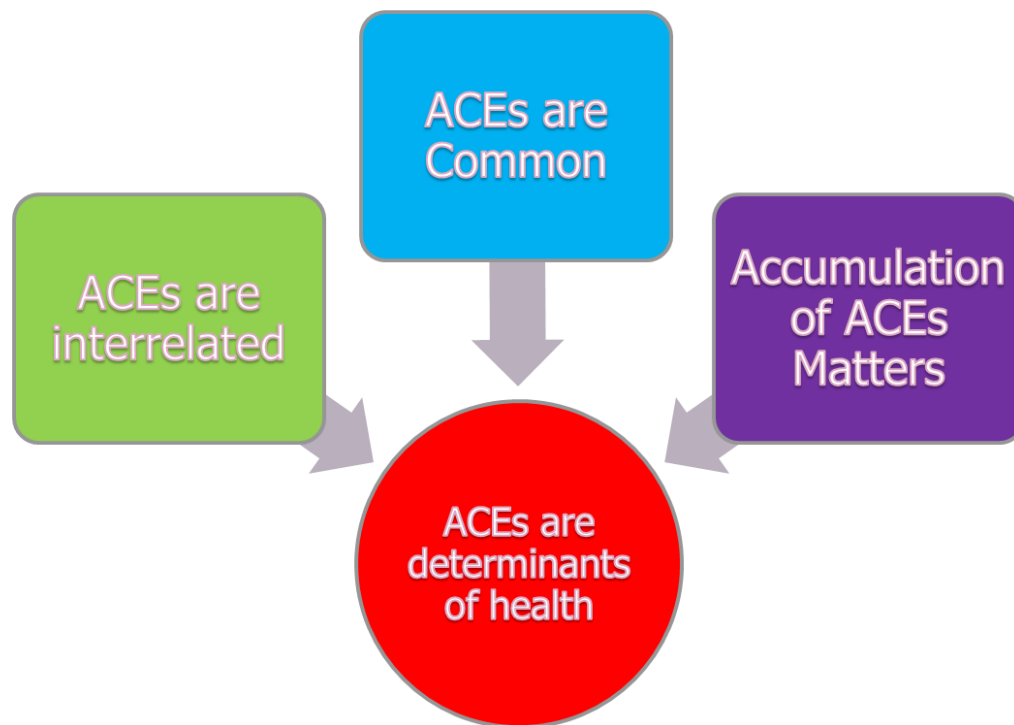
Adverse Childhood Experiences - ACES

1. Mentally ill, depressed or suicidal person in home
2. Problem drinker or alcoholic family member in home
3. Drug abuse/addiction by family member in home
4. Parental discord – divorce, separation, abandonment
5. Incarceration of any family member in home
6. Physical abuse between parents/adults in home
7. Experienced emotional abuse as a child
8. Experienced physical abuse as a child
9. Touched sexually by adult when you were a child
10. Forced to touch an adult sexually when you were a child
11. Forced to have sex with an adult when you were a child.



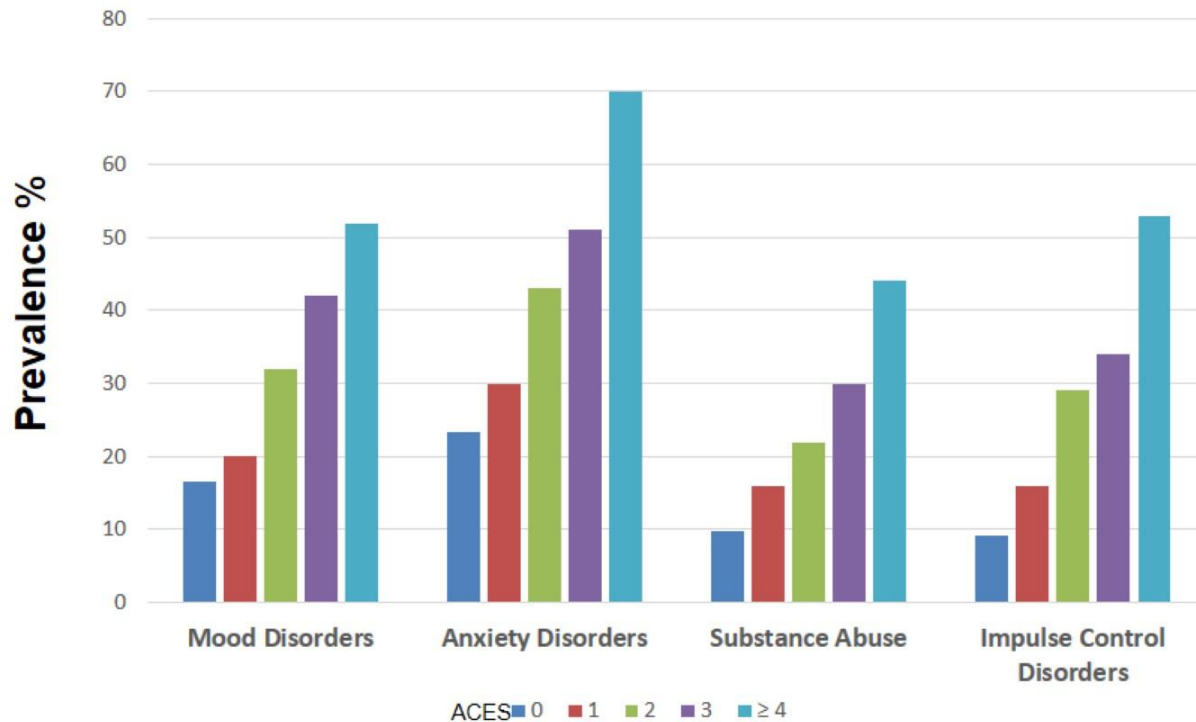
ACES – Major Findings

- *ACEs are a strong predictor of what happens later in life in terms of health behaviors, social problems, disease incidence, and early death*



Cumulative ACES & Mental Health

Cumulative ACES & Mental Health^{1,2}

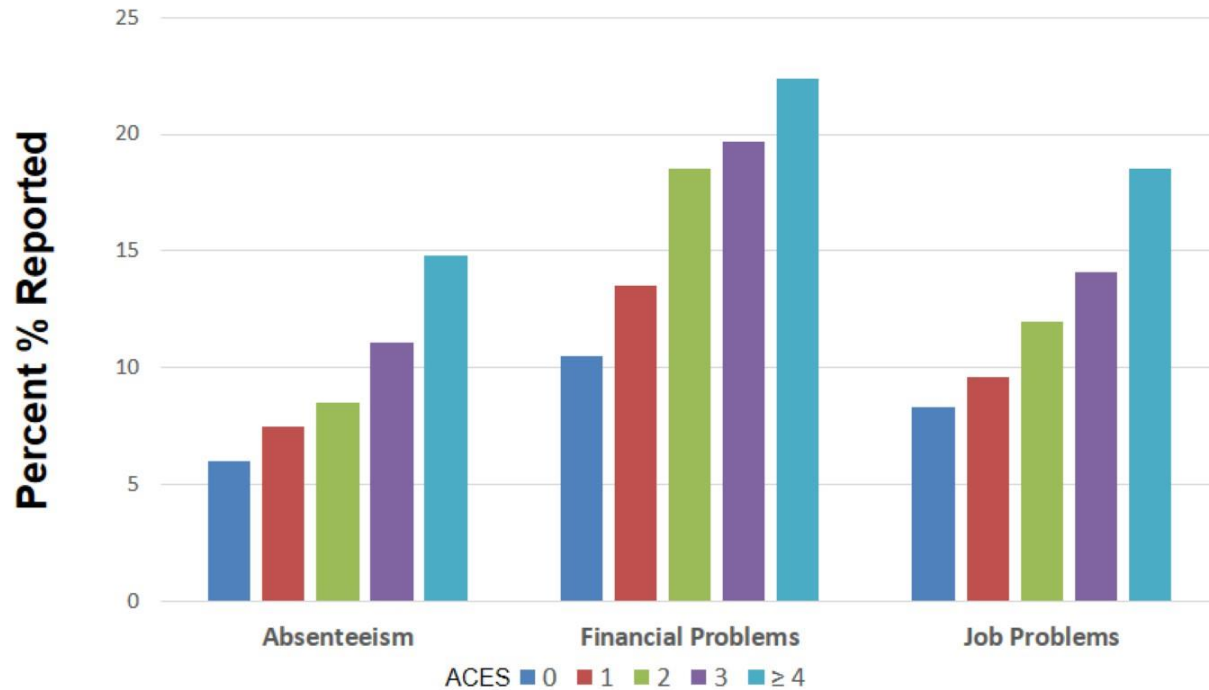


¹Data from the National Comorbidity Survey-Replication Sample (NCS-R).

²Putnam, Harris, Putnam, J Traumatic Stress, 26:435-442, 2013.

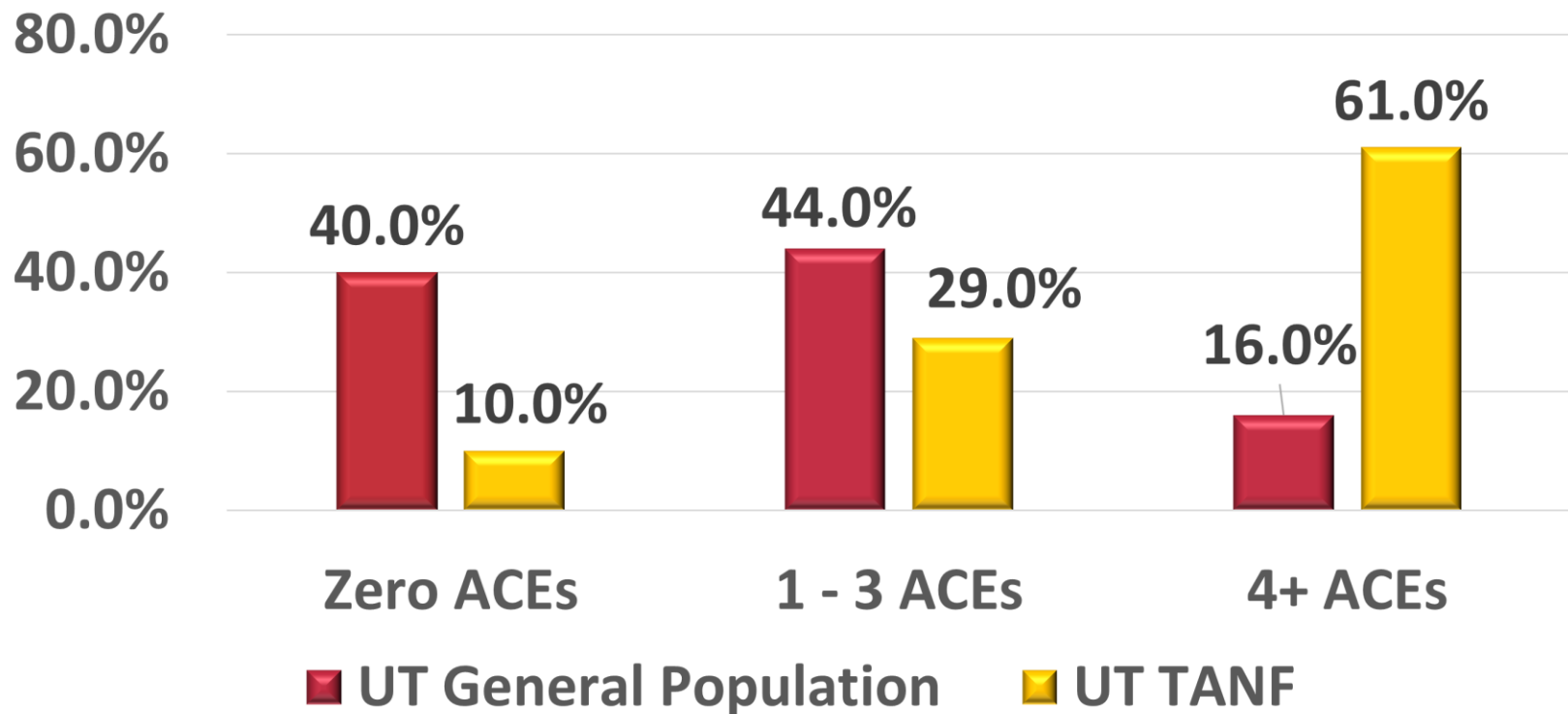
Cumulative ACES & Impaired Worker Performance

Cumulative ACES & Impaired Worker Performance¹



¹Anda et al., (2004) The Permanente Journal/Winter 8:30-38.

Utah ACES Data



Factors Influencing Work Success

- Supports

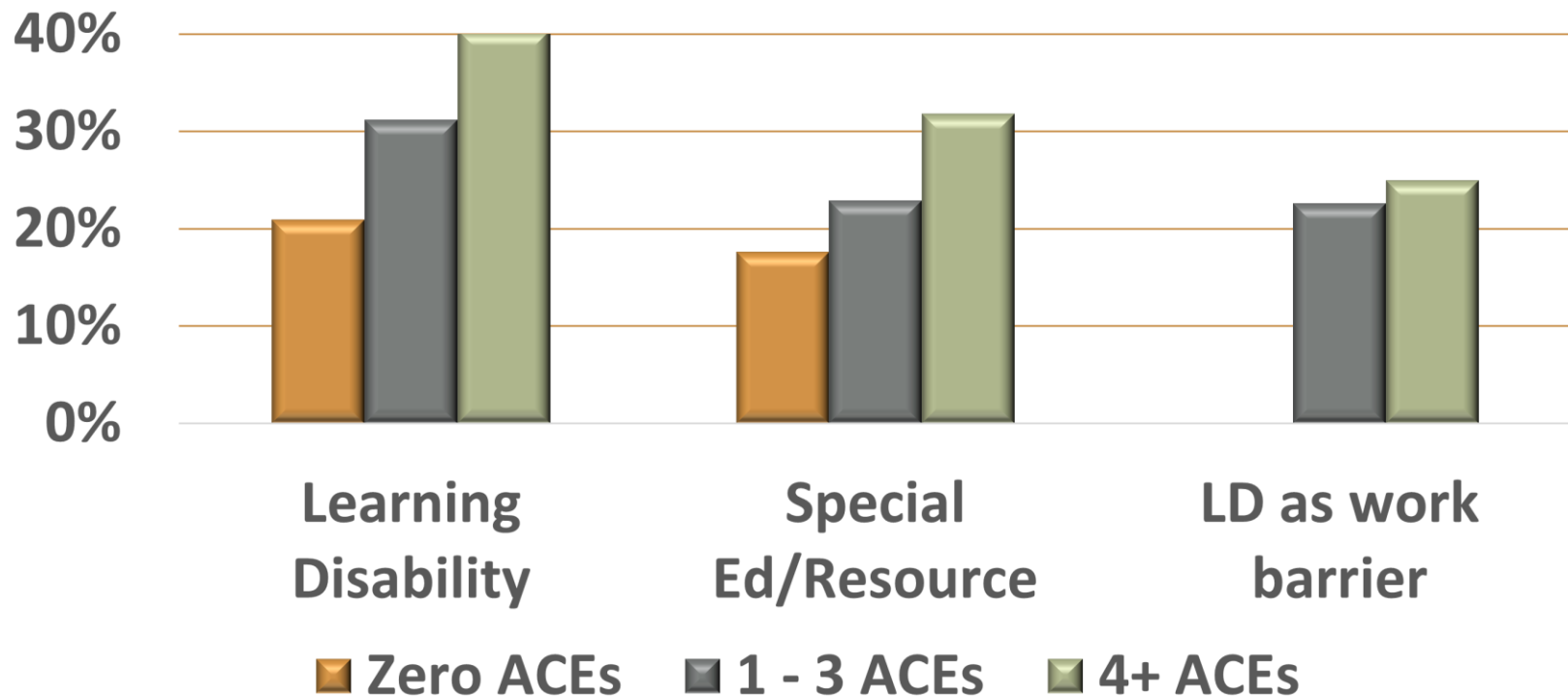
- Social Supports
- Social Capital
- Stable Family Background
- Educational Attainment
- Social Skill Development
- Access to Resources

- Barriers

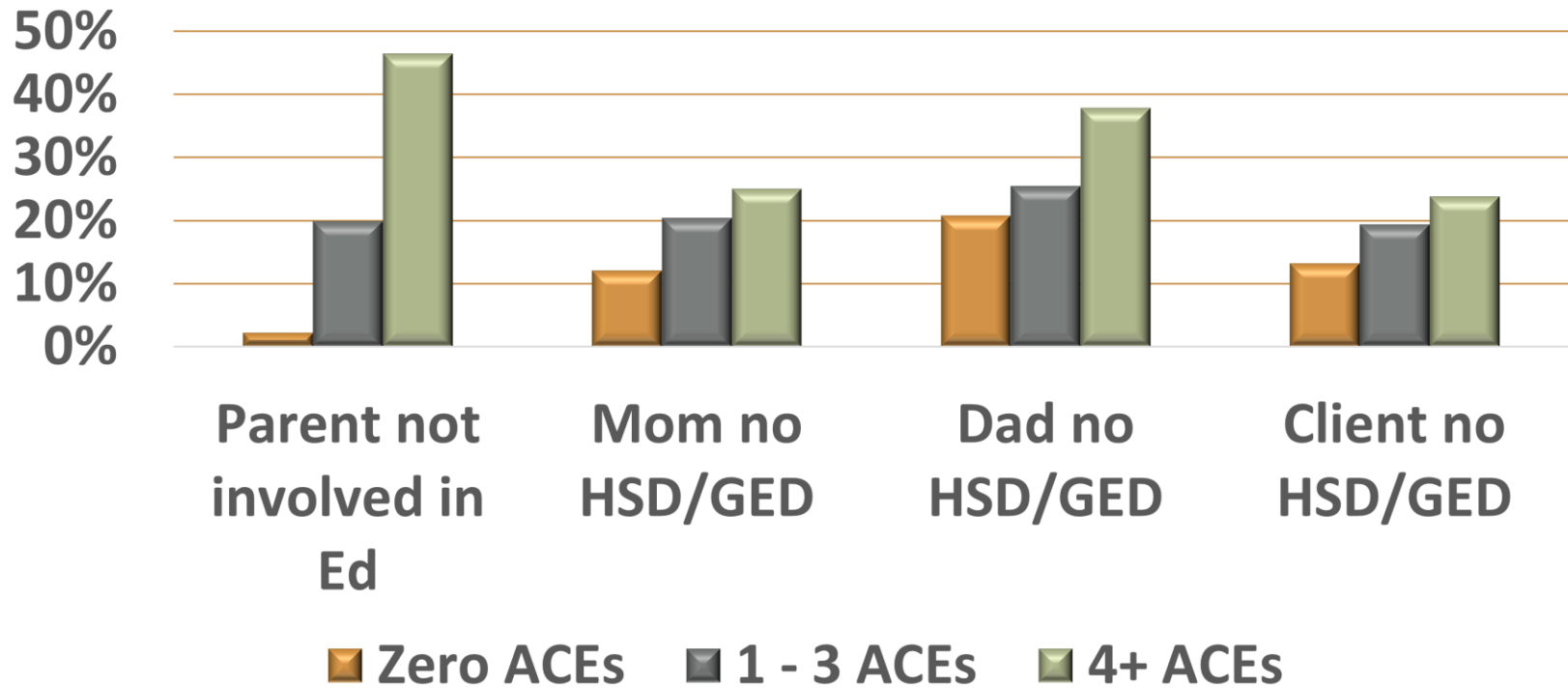
- Physical Health
- Mental Health
- Domestic Violence
- Housing Instability
- Limited Work History
- Executive Skills Challenges
- Criminal Record
- Learning Disabilities



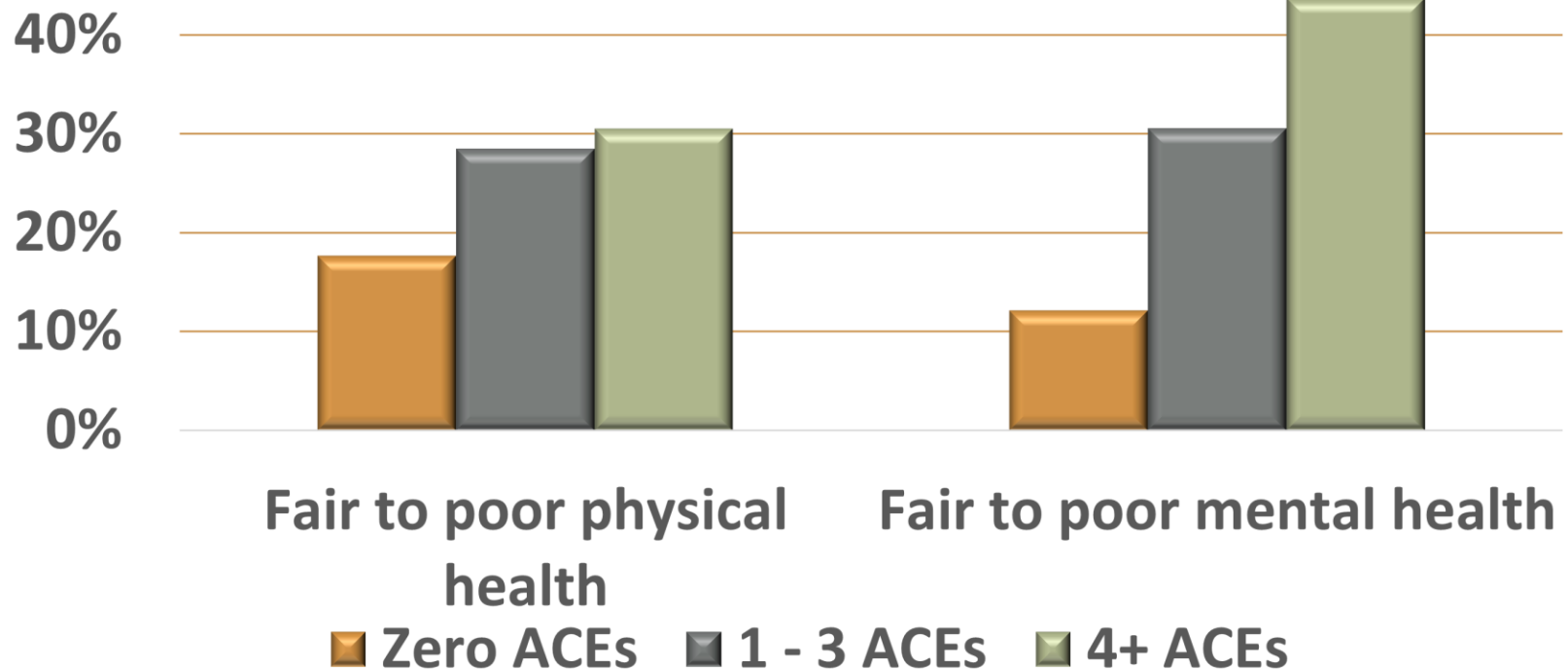
Learning Challenges



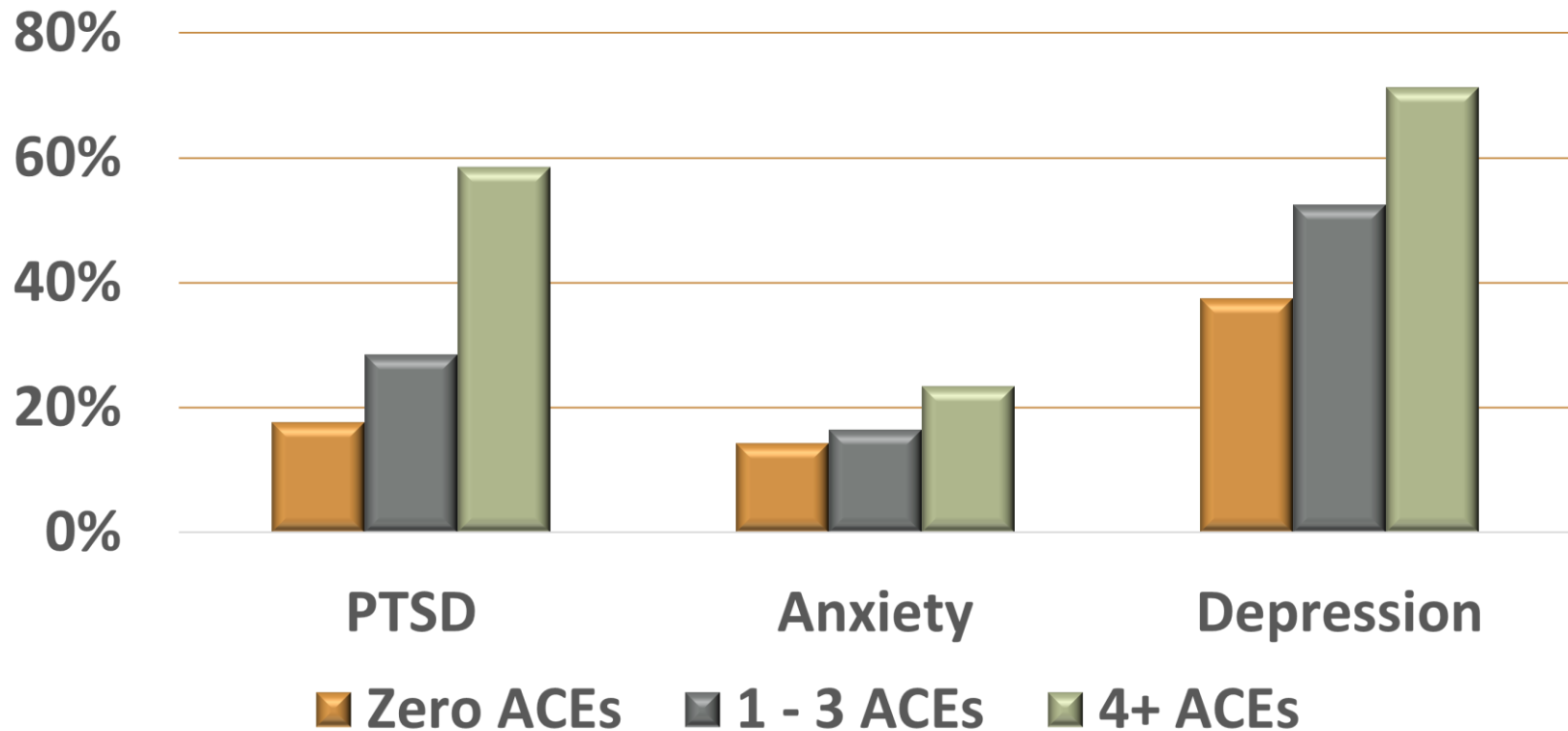
Education Experiences



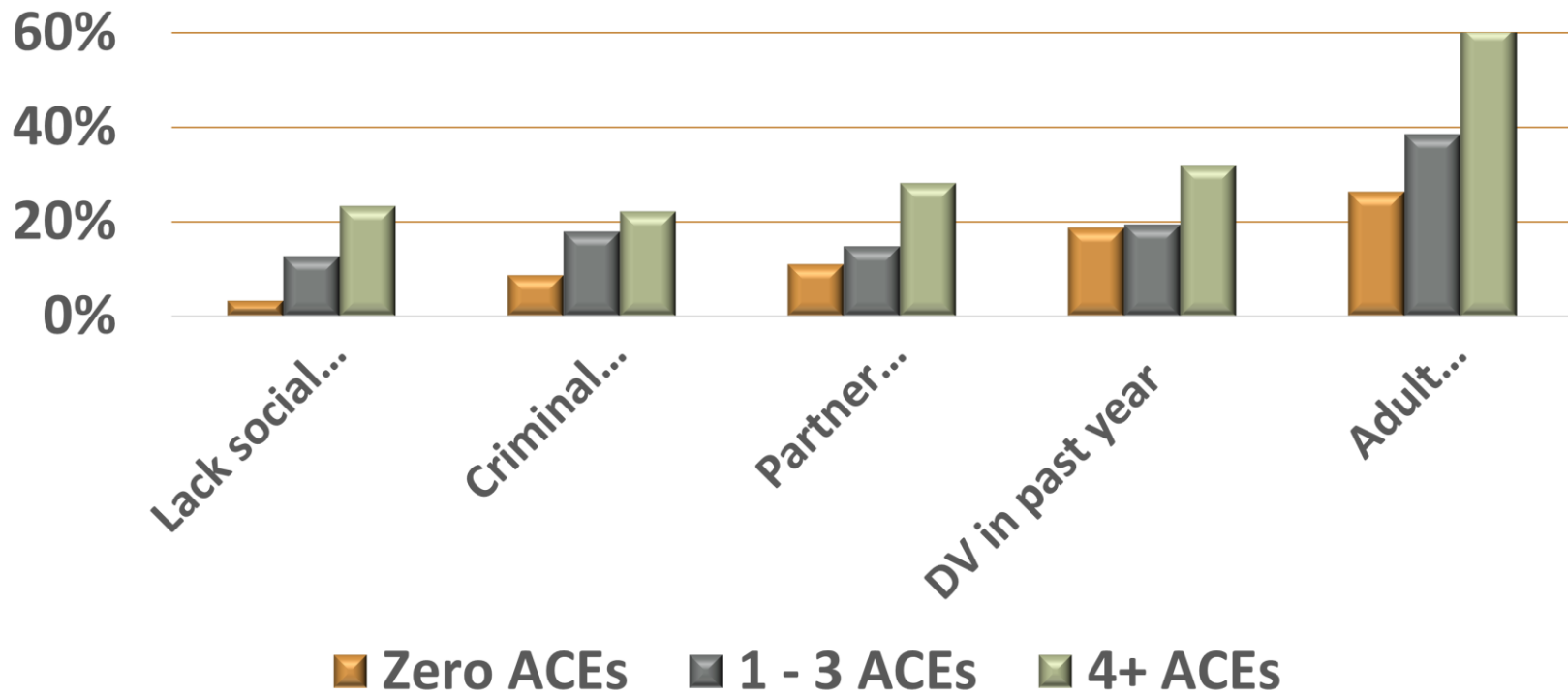
Mental and Physical Health - Global



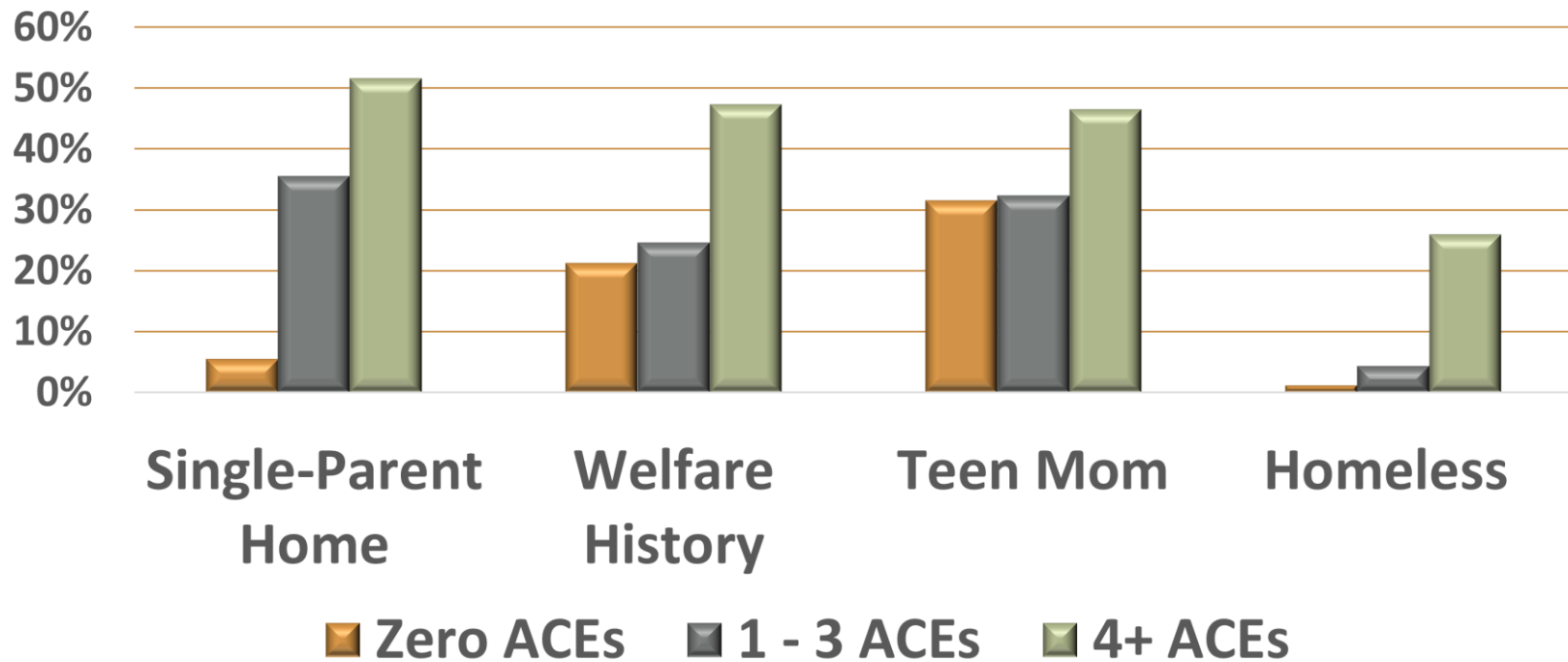
Specific Mental Health Issues



Social Issues



Family Background



Summary of Findings

- ACE scores are significantly higher in the TANF population vs. general population.
- Within TANF population, high ACE scores are correlated to a wide variety of employment barriers and challenges in the activities of daily living.
- TANF recipients with high ACE scores are engaged in work and work activities at the same rate as other TANF recipients; however, they are not achieving the same level of benefit from employment.
- Lower level of benefit from employment increases the likelihood of the family remaining in poverty for a longer time.

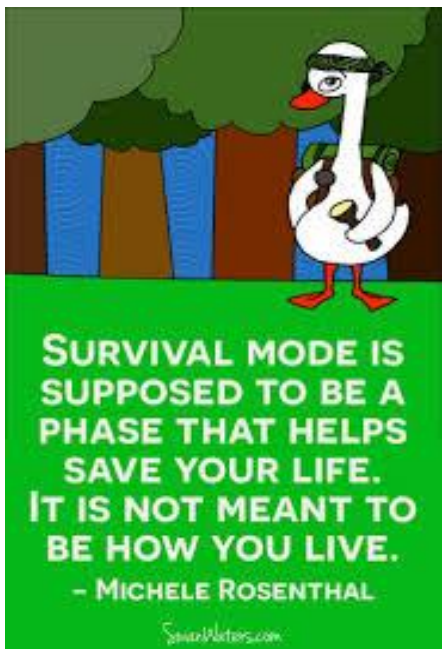


Limitations



ACE Histories instead of ACE scores

The Impact of ACEs

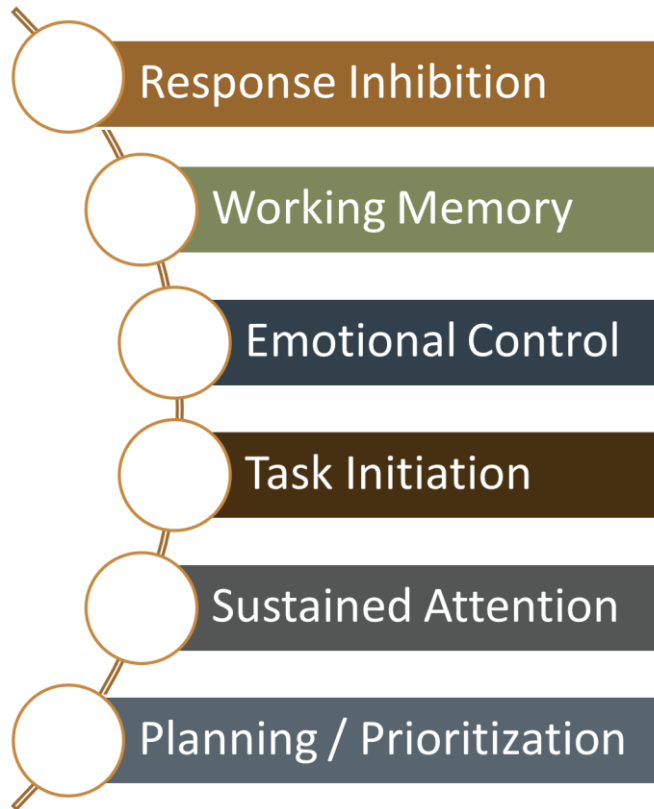


Toxic Stress

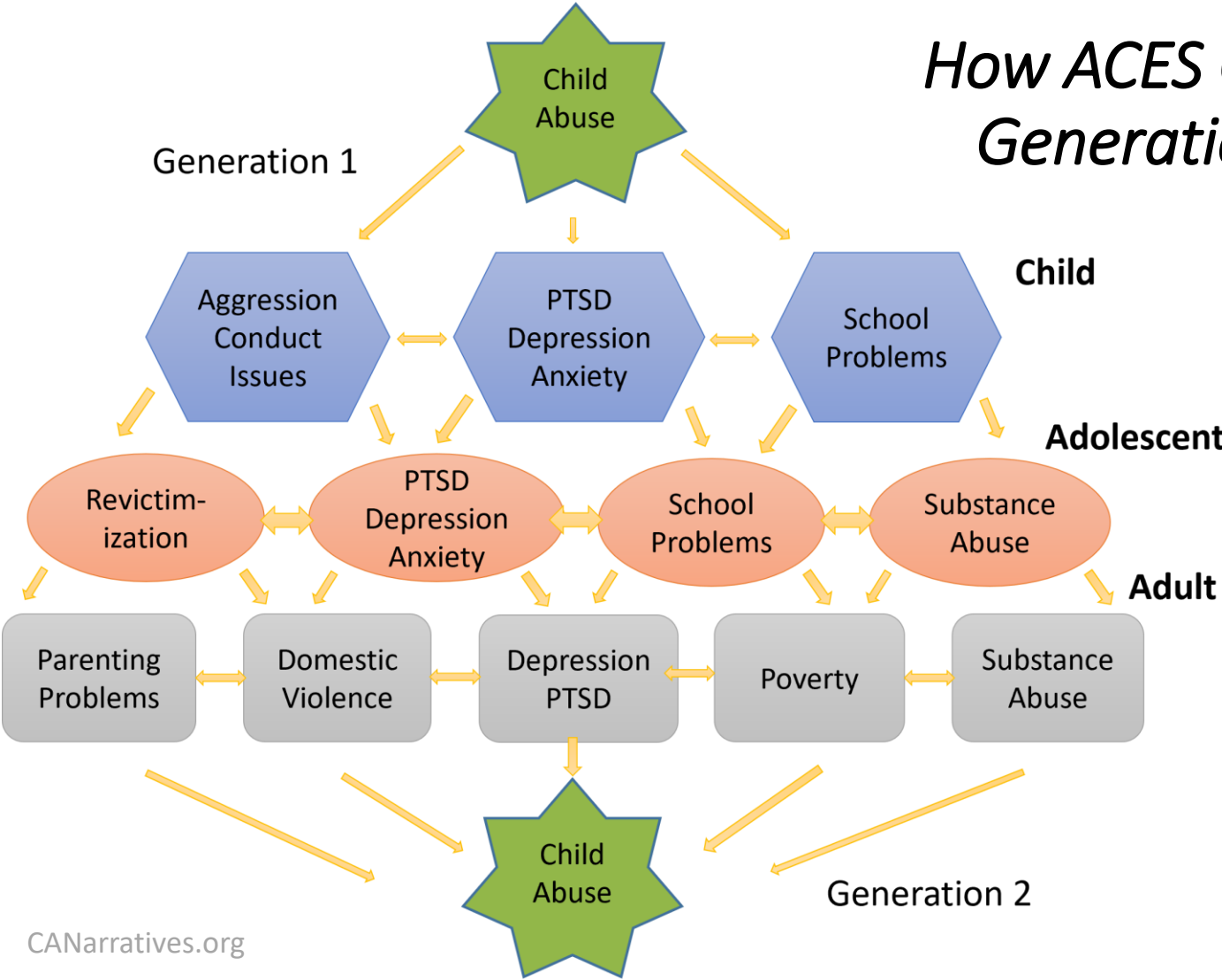
ACEs can affect children's brain development

ACEs can impact physical health development through suppressing the immune system

Executive Skills



How ACES Cross Generations

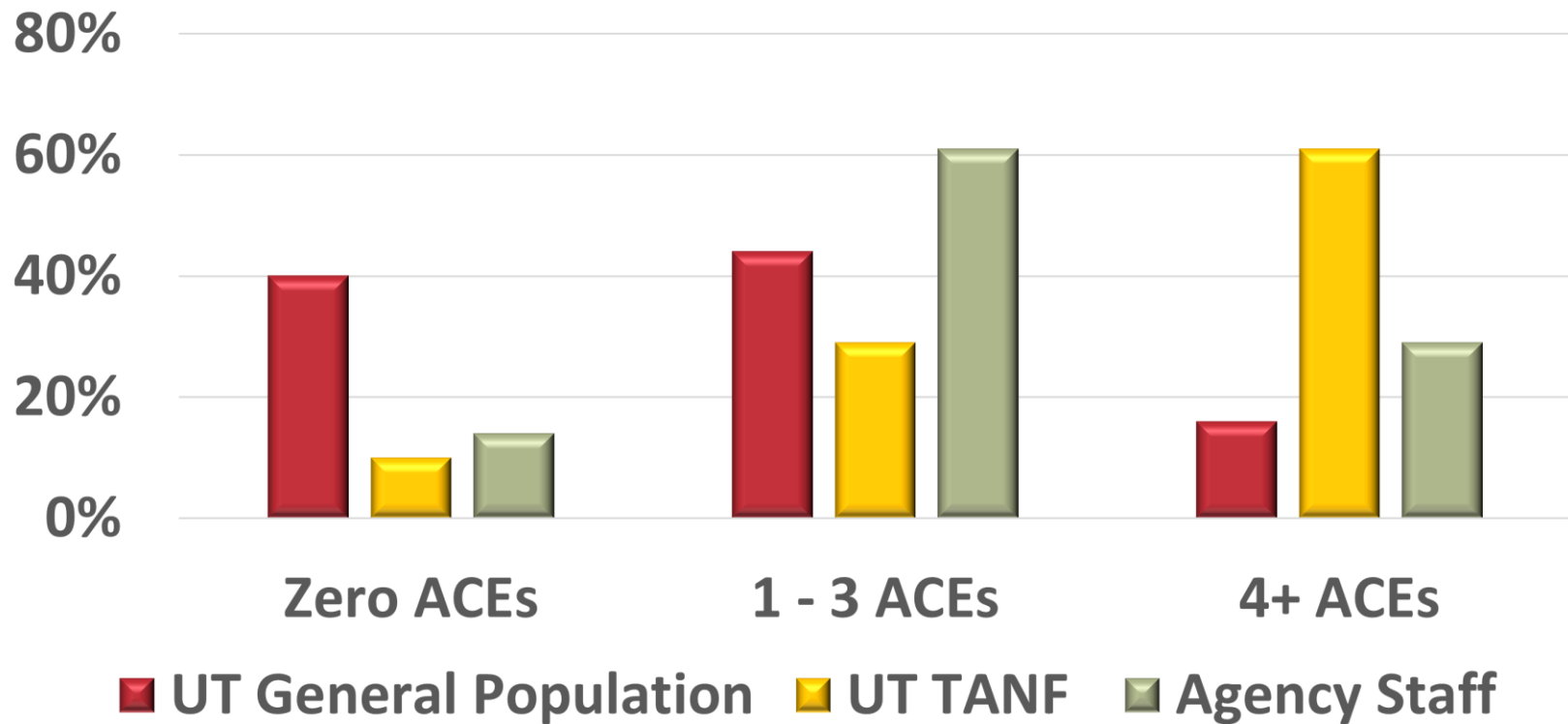


Implications for Policy and Practice

- TANF agency trainings could include information on childhood adversity and other sources of toxic stress
- Case plans with options for executive skill development & addressing mental and physical health issues are more effective
- Programs which acknowledge and address these issues are more likely to lead to long-term financial success
- ACEs education for staff and clients, reducing blame and shame and acknowledging challenges will reduce ACEs in the next generation
- Review TANF policy to recognize and make space for the potential impact of childhood adversity on a high portion of the population



More Utah ACES Data



Thank you!!!

- Additional Information:

Mary Beth Vogel-Ferguson

Social Research Institute, U of U

marybeth.vogel-ferguson@socwk.Utah.edu





Polling Question #2

Poll #2: How knowledgeable do you feel about the resources available to address mental health needs of TANF participants in your program/community?

- A. Very Comfortable
- B. Somewhat Comfortable
- C. Neutral
- D. Somewhat Uncomfortable

MENTAL HEALTH & CASE MANAGEMENT

SOBOBA TRIBAL TANF PROGRAM

PRESENTED BY: DR. MARIA AGUIRRE-MENDOZA

HISTORY

- Mental health has always been a part of our case management processes since the inception of the program
- Ongoing
- Aids the program in identifying the best path for a participant's self-sufficiency
- Breaks down barriers (known & unknown)

CASE MANAGEMENT PROCESSES

- After official approval, participants are referred for:
- 1. Mental Health Counseling Assessment
 - On-site at our TANF offices, at participant's home, or at our practitioner's office
 - Pandemic → Telehealth Appointments
 - Quick Response Times → High-Risk Situations
- 2. Vocational/Career Assessment
- 3. Drug Counseling Assessment if Tested Positive in the Application Process

BENEFITS TO CLIENTS

- Entered on participant's work plan
- Earn work participation hours
- Attend at least 1 session
- Helps identify barriers
- Foundation for future case management (referrals)
- Increased privacy

MENTAL HEALTH AWARENESS

- Wake up call
- Aids in personal growth & development
- Promotes family formation & unity
- Helps build positive:
 - Self-esteem
 - Family relationships
- Taking care of one's mental health

PROGRAM STANDPOINT

- Contract with a professional
- Offer it through our program at all sites
- Helps build trust between program staff and clients
- Holistic approach
- Creates a bridge between a participant's mental health and their self-sufficiency pathway
- Identification of barriers

QUESTIONS?

Contact:

Dr. Maria Aguirre-Mendoza

Soboba Tribal TANF Program

(951)654-5964, Ext. 6109

maguirre@Soboba-nsn.gov



WHOLE FAMILY APPROACH

WORK AND FAMILY SUPPORT BUREAU



MISSION AND GOALS

MISSION

To transform lives. Working with our partners, we design and deliver innovative, high quality health and human services that improve the security and promote independence for New Mexicans in their communities.



GOALS



We help NEW MEXICANS

1. Improve the value and range of services we provide to ensure that every qualified New Mexican receives timely and accurate benefits.



We communicate EFFECTIVELY

2. Create effective, transparent communication to enhance the public trust.



We make access EASIER

3. Successfully implement technology to give customers and staff the best and most convenient access to services and information.



We support EACH OTHER

4. Promote an environment of mutual respect, trust and open communication to grow and reach our professional goals.

ERA OF THE PEOPLE

ERA of the PEOPLE

Vision: Work as one team, centered around excellence and innovation, devoted to passionately serving and empowering New Mexicans to better their lives



Our customers

We commit to our customers - We commit to excellent customer service by treating each New Mexican with dignity and respect to ensure every qualified individual receives timely and accurate benefits



Our culture

We cultivate our culture - We cultivate an empowering, trusting, and collaborative environment to achieve excellence in our work and our impact on New Mexicans



Our people

We invest in our people - We invest in our people through recognition and development opportunities in order to grow passionate, committed leaders within ISD



Our systems

We innovate our systems - We harness innovation to ensure our systems facilitate efficient work, access to services, and communication



HUMAN SERVICES DEPARTMENT

Investing for tomorrow, delivering today.

BEFORE WE START...

On behalf of all colleagues at the Human Services Department, we humbly acknowledge we are on the unceded ancestral lands of the original peoples of the Apache, Diné and Pueblo past, present, and future.

With gratitude, we pay our respects to the land, the people, and the communities that contribute to what today is known as the State of New Mexico.

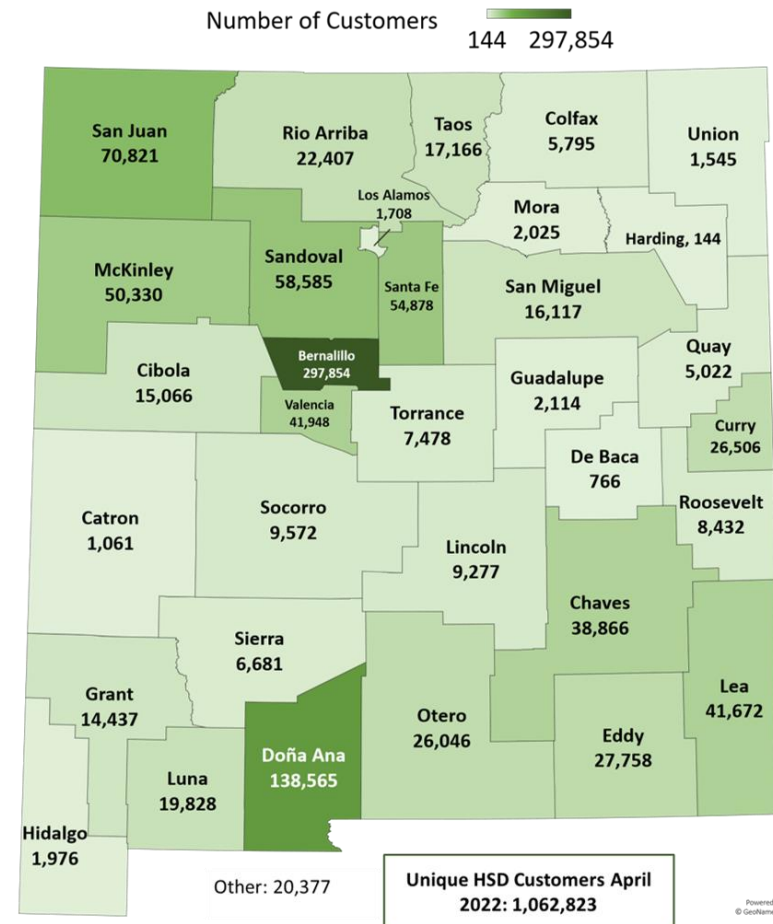


Evening drive through Corrales, NM in October 2021.
By HSD Employee, Marisa Vigil

Unique HSD Customers, April 2022

WHO WE SERVE

- 1,062,823 Unique Customers
- ISD has experienced a 10% increase in applications for services due to the Public Health Emergency
- ISD is committed to meeting customer expectations by enhanced technology and expanded call center services



NEW MEXICO STATISTICS

Adults (18-64) in NM
without college degrees



2 in 3

Working families in NM
that are low-income



2 in 5

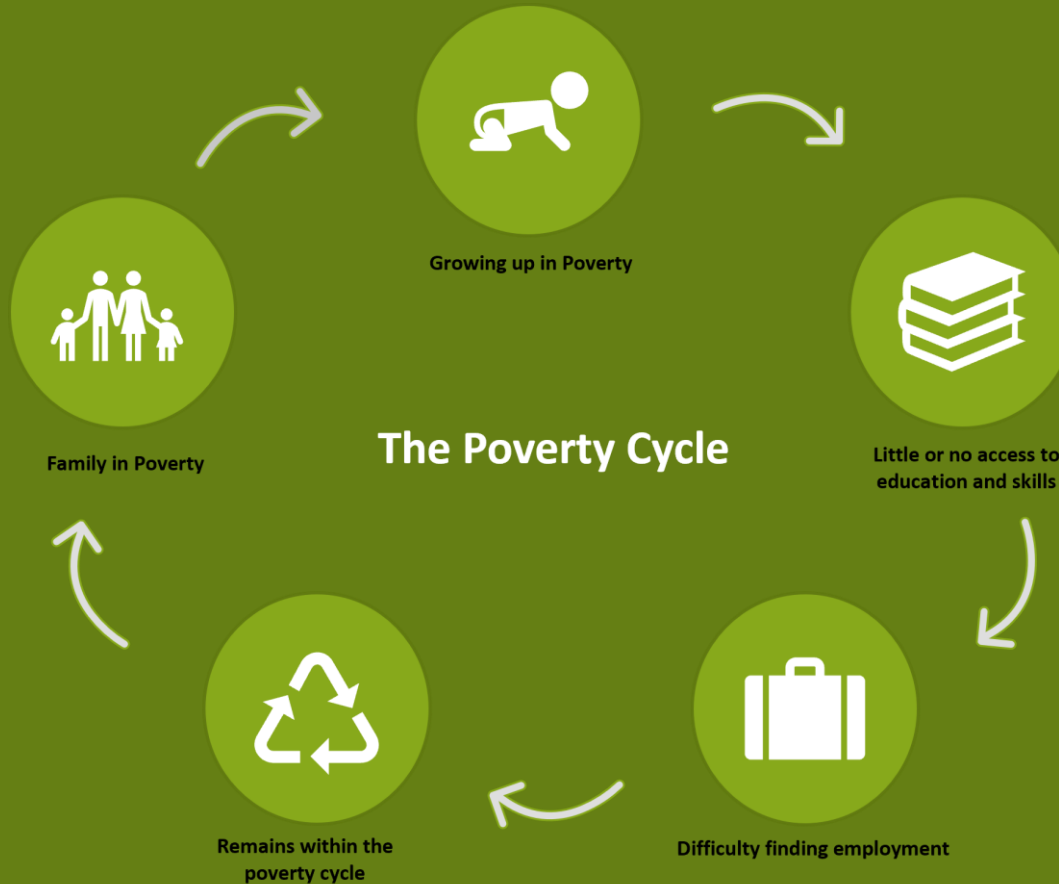
Children in NM living in
working families that
are low-income



1 in 2

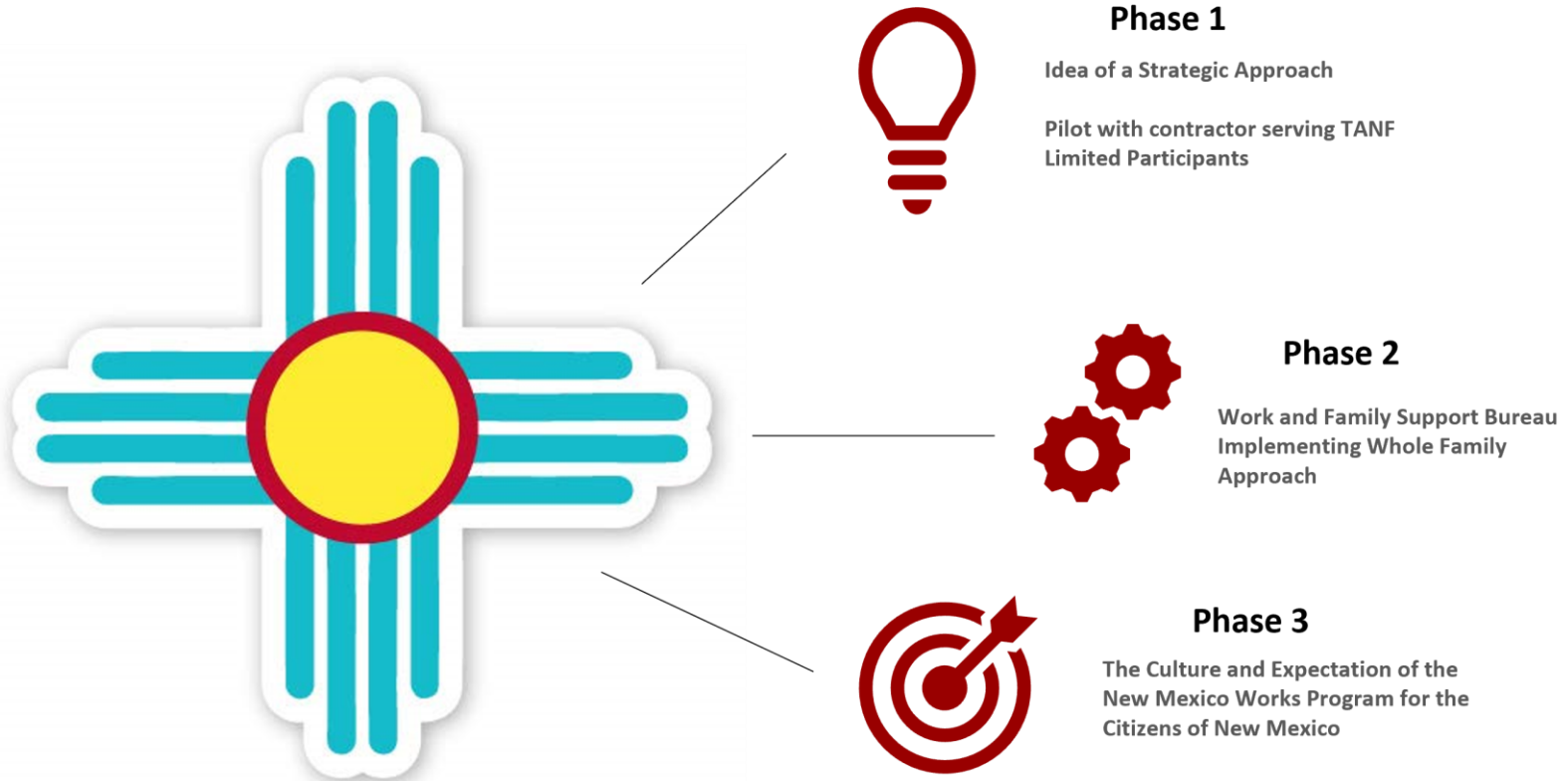
Source: Working Poor Families Project, analysis by Population Reference Bureau of 2012 American Community Survey

THE POVERTY CYCLE



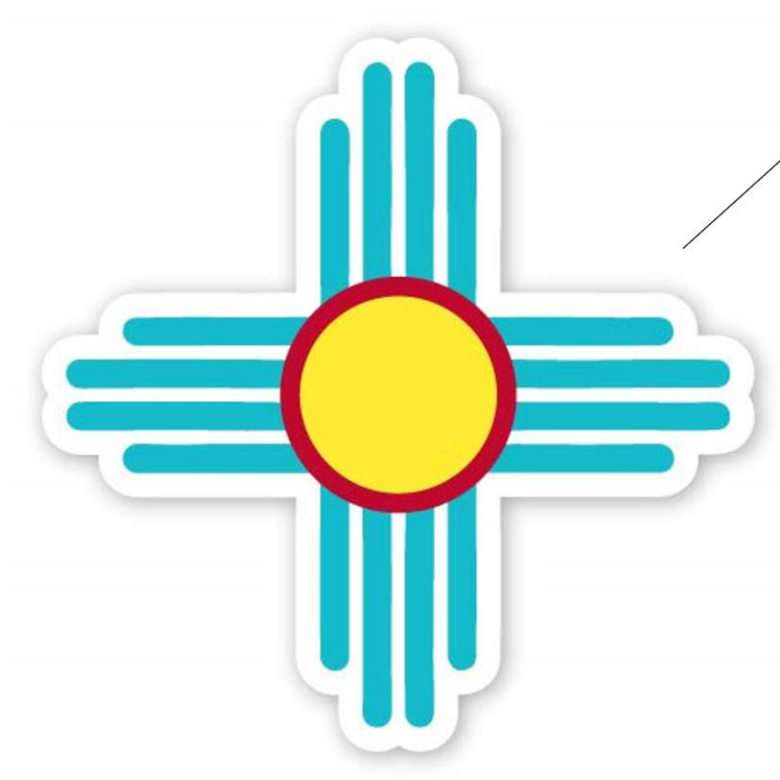
Investing for tomorrow, delivering today.

TRUST THE PROCESS



Investing for tomorrow, delivering today.

TRUST THE PROCESS – PHASE 1



Phase 1

Idea of a Strategic Approach

Pilot with contractor serving TANF
Limited Participants

Investing for tomorrow, delivering today.

WHOLE FAMILY APPROACH – PHASE 1



TRUST THE PROCESS – PHASE 2



Phase 2

Work and Family Support Bureau
Implementing Whole Family
Approach

Investing for tomorrow, delivering today.

WHOLE FAMILY APPROACH – PHASE 2



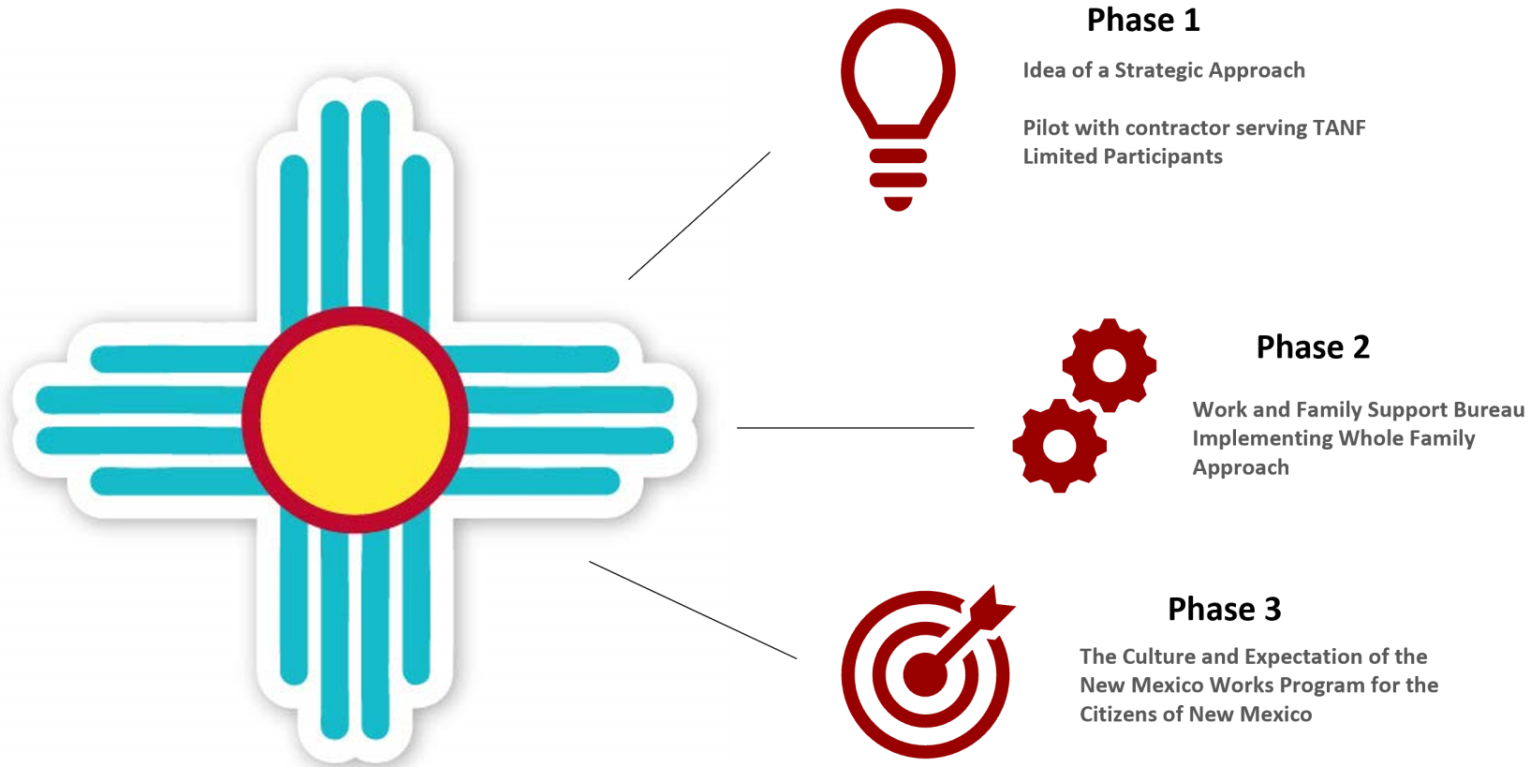
Supporting Agency Collaboration and Family Action

Supporting Success

Supporting Empowerment



TRUST THE PROCESS – PHASE 3



Investing for tomorrow, delivering today.

FAST

Families Achieving Success Today

Families Achieving Success Today (FAST)

Full family, participant-driven and builds on the strength and resiliency families already have

Believes that every person is capable and deserves to participate in the world of work

Service approach is always grounded in the respect and dignity of each family who seeks us out for services

Invests in the integration of intensive case management, adult and children's mental health services, physical health navigation, supported employment, and culturally responsive services to reach family goals and self-sufficiency

Families Achieving Success Today (FAST) (continued)

Award-winning program and the first in the nation to integrate evidence-based Adult Mental Health Supported Employment – Individualized Placement and Support (IPS) into TANF service delivery

Administered by Ramsey County Workforce Solutions for Family Stabilization Services (FSS) of the Minnesota Family Investment Program (MFIP)

Goodwill-Easter Seals Minnesota is the contracted lead agency of FAST and the IPS provider

*FAST uses the Individual Placement and Support Supported Employment Model – a holistic approach to work.
Learn more at ipsworks.org*

Multi-Disciplinary Approach – Current Partners

- **FSS Coordinators (TANF) – Ramsey County Workforce Solutions**
- **Individual Placement and Support- Goodwill-Easter Seals Minnesota**
- **Adult Mental Health- Minnesota CarePartner**
- **Children’s Mental Health Case Management- Minnesota CarePartner & Ramsey County Children’s Mental Health**
- **Health and Housing Navigation- Minnesota Community Care**
- **Cultural Consultant – MKB & Associates**



FAST Beginnings

Desire to improve health and financial circumstances for TANF families who are a part of **Family Stabilization Services (FSS)** in the **Minnesota Family Investment Program (MFIP)** during 2010

Need to increase access and coordination of services in a manner that meets the needs of full family

Began as a pilot via a study for the TANF/SSI Disability Transition Project (TSDTP) conducted by MDRC

FAST Beginnings

Positive pilot study results led Ramsey County and Minnesota Department of Human Services to fund additional 3-year local study beyond the pilot

Received grant from Minnesota Department of Human Services Innovation Fund for Racial Disparity Reduction in 2015 specifically serving African American and American Indian participants because both groups have experienced long-standing racial disparities. This integrated cultural workshops, mentoring, consulting and culturally specific organizations for FAST

FAST continues as a permanent program through Ramsey County MFIP (TANF) services for Family Stabilization Services (FSS) participants

Early Learnings and Impact

FAST Pilot results from TSDTP report 2013:

Key measures: engagement, work, SSI application, and family stability

FAST program was well delivered, **high level** of collaboration

Increased participants' wages in its first year

The IPS model can be adapted to a TANF program

The model should be replicated and evaluated in other locations recognizing that adaptations to local conditions will be needed.

FAST Eligibility

Age 19 to 59 in Family Stabilizations Services of MFIP (TANF)

And:

Parent, primary caregiver, 2nd parent or dependent child has a medically documented disability: mental or physical health condition

Or

Is needed in the home to take care of someone with a mental or physical disability

Or

Has an IQ less than 80

**FAST eligibility has always focused on Family Stabilization Services; however, specific criteria shifted with each phase of funding and/or evaluation.*

Individual Placement and Support (IPS)

Evidence-Based Supported Employment Model for people living with mental health conditions to work at regular jobs of their choosing

Focus of employment is an essential part of mental health recovery

Focus of employment improves self esteem, increased social and quality of life, reduced substance use, better control of mental health symptoms

IPS includes integration and collaboration of Vocational Rehabilitation (VR), Mental Health Services, and Job Placement Specialist (FAST adapted the model to use in TANF and does not include VR)

IPS Core Principles

- Eligibility is based on individual choice
- Supported Employment is closely integrated with mental health treatment
- Competitive employment is the goal
- Job search starts when an individual expresses an interest in working
- Systematic Job Development
- Follow-along supports are continuous
- Individual preferences are important
- Benefits counseling is part of the employment decision-making process.

Family Stabilization Services Coordination in FAST

- Serve up to 300 families at any point in time
- Referrals from all MFIP providers in Ramsey County
- Referral is participant choice
- FAST Family Questionnaire – Intake
- Employment Plan and Goals
- Referrals to FAST program partners: Adult and Children’s Mental Health, Career Navigators (IPS) and Health navigation
- Connections and referrals to community resources, life skills supports, child care, etc.
- Resources and referrals for children
- Tangible Support Services
- Case Consult plus “real time” coordination with FAST partners
- TANF Case Management
- Employment Services Coordination



Key Components of FAST

- Strengths-Based Approach
 - Evidence-Based: IPS Model
 - Motivational Interviewing
 - Promote everyone's ability to pursue and succeed in employment
 - Reduced competing demands across disciplines
 - Streamlined referral and coordination
 - Personal Choice, Advocacy, Guidance
 - Culturally specific mentoring and consultation
 - Lower TANF caseloads, deeper engagement
 - Holistic wraparound support
 - Bring families together: Family Fun Nights, Conversations That Matter, PLUS group
-



True Integration

- Co-location and strong collaboration of program partners
 - Multidisciplinary service coordination – weekly case consultation
 - Program partners with **shared philosophy and values**
 - Monthly Supervisor/Operations meeting
 - Leadership support + oversight committee
 - Serve Full Family, not just parent
 - Cross-training and shared resources
 - County-level commitment to continue funding
 - Referring partners develop long-standing service relationships
-

Current Indicators

Employment FAST enrollees more likely to be employed (+4%)

Social Services FAST enrollees more likely to enroll in Social Services (+14.2%)

Job Search FAST enrollees more likely to be looking for a job (+6.5%)

Education FAST enrollees more likely to enroll in Education (+3.7%)

Success Story

“Prior to connecting with us, Kiara had not worked since 2008. She had the desire to work, but I wanted her to be comfortable with the environment of interviewing and talking to managers,” says her career navigator.

Her personable nature and can-do attitude landed her a job almost immediately at a local bakery, even during a pandemic. Kiara told her career navigator she wanted to find a position closer to home and she found a job at a laundromat that requires her to take only one bus.

Kiara is no longer receiving MFIP assistance, is able to pay her rent and lives on her own. “I hope my kids are excited for me on this new journey,” says Kiara. “I want to show them that I can do this and be on my own. “Don’t let anyone tell you that you can’t do something; believe in yourself.”

Thank you!

Lisa Guetzkow, Integrated Programs Manager

Ramsey County, Workforce Solutions

Lisa.Guetzkow@co.ramsey.mn.us

651-266-6006

Michelle Belitz, Integrated Planning Manager

Ramsey County, Workforce Solutions

Michelle.Belitz@co.ramsey.mn.us

651-266-6054

January 2023



PeerTA Resource Library

The screenshot shows a web browser window with the URL `peerta.acf.hhs.gov`. The website header includes the OFA PeerTA logo and navigation links: [About Us](#), [OFA Webinars](#), [Newsletter](#), and [Share](#). Below the header are four main navigation tabs: [TECHNICAL ASSISTANCE](#), [RESOURCE LIBRARY](#) (highlighted with a blue box), [PEER CONNECTIONS](#), and [LEARNING CENTER / UPCOMING EVENTS](#). The main content area features a banner with four resource cards:

- Laying the Foundation**: Trauma-Informed Practices in Temporary Assistance for Needy Families (TANF) Programs
- Tip Sheet**: Applying Trauma-Informed Practices for Temporary Assistance for Needy Families (TANF) Eligibility Workers
- Applying Trauma-Informed Practices**: in Case Management and Supervision
- Tip Sheet**: Applying Trauma-Informed Practices for Temporary Assistance for Needy Families (TANF) Case Workers

Below the banner, the text reads: **PRODUCTS AVAILABLE!** Trauma-Informed Practice. The Office of Family Assistance has developed a set of four resources (two briefs, two tip sheets) to help TANF decision-makers, supervisors, and frontline staff implement trauma-informed practices.

On the right side of the page, there is a vertical button labeled **FEEDBACK SURVEY**.



How to Search for Additional Resources

The screenshot shows a web browser window with the URL `peerta.acf.hhs.gov/search/content?search_api_views_fulltext="mental+health"+families`. The search results page displays 34 items found. On the left, there are filter options: RESET SEARCH, EXPAND ALL, FILTER BY SOURCE, FILTER BY DATE, FILTER BY TOPIC, FILTER BY RECORD TYPE, FILTER BY STATE, and FILTER BY TRIBE. A yellow banner at the top right states: "The resource you are seeking may now be located in the Peer TA Archives, which holds all resources posted three years prior to today. Please [search the archive](#)." Below this is a blue "Results" header. A search bar contains the text "mental health" families and a blue "SEARCH" button. The first result is titled "OFA Webinar: The Whole Family Approach: How TANF Programs Can Engage Customers in Mental Health Services" dated JANUARY, 2023, categorized as "Webinar / Webcast". The description reads: "During the continued recovery from and ongoing response to the COVID epidemic, every member of TANF families has experienced a growing set of challenges to their mental well-being. Amplified socioeconomic issues such as the rising cost of daily expenses, especially food, gas, and housing; difficulties with finding quality and long-term employment; and challenges with access to healthcare continue to place an increased mental burden on low-income families." The second result is titled "Mothers' Mental Health Challenges Predated the COVID-19 Pandemic" dated JANUARY, 2023, categorized as "Report". A vertical "FEEDBACK SURVEY" button is visible on the right side of the page.



A More In-Depth Look at More Resources

The screenshot shows a web browser window with the URL `peerta.acf.hhs.gov/search/content?search_api_views_fulltext="mental+health"+families`. The search results are displayed in a list format. The first result is a report titled "Mothers' Mental Health Challenges Predated the COVID-19 Pandemic" dated January 2023. The second result is a research-to-practice brief titled "Responsible Fatherhood Programs: Children Benefit from a More Integrated Family Approach" dated August 2022. The third result is a dataset titled "2022 KIDS Count Data Book" dated August 2022. A vertical "FEEDBACK SURVEY" button is visible on the right side of the page.

Resource Library | Peer TA Network

peerta.acf.hhs.gov/search/content?search_api_views_fulltext="mental+health"+families

Choose ↓ Pick 3 / Pick 4 / Pic... WorkforceGPS Organizational Logo Job Search | Jobs.Ec... Messaging Topics - The Annie... 2 2 new notification...

Mothers' Mental Health Challenges Predated the COVID-19 Pandemic JANUARY, 2023
Report

The COVID-19 pandemic has been especially challenging for American families with children. The U.S. Surgeon General as well as the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children's Hospital Association declared a children's mental health crisis in late 2021, citing school closures, social isolation, grief over lost community and family members, and challenges accessing needed care as contributing factors.

Responsible Fatherhood Programs: Children Benefit from a More Integrated Family Approach AUGUST, 2022
Research-To-Practice Brief

Nearly 20 million children (almost 1 in 4) live in a home without a resident father. These children are more likely to have social-emotional adjustment problems and failing grades at school, and to become involved in the juvenile justice system. To address the problems that arise from fathers' physical or psychological absence from children's lives, the U.S.

2022 KIDS Count Data Book AUGUST, 2022
Dataset

This year's publication describes how children in America are in the midst of a mental health crisis, struggling with anxiety and depression at unprecedented levels. It presents national and state data across four domains — economic well-being, education, health and family and community — and ranks states in overall child well-being. The report includes pre-pandemic figures as well as more recent statistics, and shares the latest information of its kind available.

FEEDBACK SURVEY



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Family Assistance



Q&A





ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of Family Assistance



Additional Information

- A recording of this webinar will be available shortly on the OFA PeerTA website (<https://peerta.acf.hhs.gov>).
- We would also like to hear from you about future webinar topics. Please send us your ideas by e-mail to peerta@blhtech.com.



ADMINISTRATION FOR
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Office of Family Assistance



Webinar Feedback

Send us your feedback via the survey that will launch when the webinar ends.

Thank you!