The CHA Panel Study findings highlight the challenge of connecting CHA residents to the labor market. That challenge is even bigger for the CHA’s “hard to house” residents—those with multiple complex problems, such as serious mental and physical ailments, addiction, domestic violence, and histories of lease violations. The Chicago Family Case Management Demonstration was an innovative effort to test the feasibility of providing wraparound supportive services, including work supports, for vulnerable public housing families (Popkin et al. 2008). The Demonstration—a partnership of the Urban Institute, the CHA, Heartland Human Care Services, and Housing Choice Partners—provided households from the CHA’s Dearborn Homes and Madden/Wells developments with intensive case management services, Transitional Jobs, financial literacy training, and relocation counseling. The Urban Institute conducted a rigorous evaluation, including a baseline and follow-up survey, administrative interviews, focus groups with service providers and program administrators, in-depth resident interviews, and analysis of program and administrative data (see text box on page 9).

The goal of the Demonstration was for residents to be stably housed in better circumstances and to increase their self-sufficiency.2

This brief explores the employment experiences of Demonstration participants, despite an extremely difficult labor market, self-reported employment among working-age Demonstration participants increased, and the Transitional Jobs program contributed to these gains.
including the influence of the intensive case management, participation in the Transitional Jobs program, and the work requirement that CHA began using in 2009. Using a similar methodology as the HOPE VI Panel Study, it examines outcomes for working-age nondisabled Demonstration participants.3

Surprisingly, despite an extremely difficult labor market, self-reported employment increased, a notable divergence from a decade of research on public housing transformation (Briggs, Popkin, and Goering 2010; Levy 2010; Turner, Popkin, and Rawlings 2009). Further, the intensive Transitional Jobs program that was part of the Demonstration appears to have contributed to these employment gains. Yet, despite increases in employment, the economic situation for most CHA families remains tenuous. Although employment increased, earnings did not, and public assistance receipt remained stable. For those who remained unemployed, the Demonstration’s services failed to address a multitude of personal and structural barriers to work.

**Moving Public Housing Residents to Work**

A central goal of the transformation of public housing that began in the 1990s is to help residents become more self-sufficient (Popkin et al. 2004; Turner et al. 2009). Public housing residents face numerous barriers to employment: low educational attainment, poor mental and physical health, limited access to social networks that facilitate job access, and physical isolation from opportunity (Turney et al. 2006). Different initiatives have attempted to help residents overcome these barriers—by relocating residents to higher-opportunity areas, encouraging employment and earnings through alternative rent structures, and providing job training and case management services.

The most successful effort was the U.S. Department of Housing and Urban Development’s (HUD) Jobs-Plus program, which sought to connect public housing residents to employment through employment services, rent incentives, and community support for work. Where Jobs-Plus was properly implemented, residents experienced marked employment and earnings increases (Bloom et al. 2005).

The Moving to Opportunity (MTO) demonstration offered residents from high-poverty public housing developments the chance to move to low-poverty “opportunity” areas in the hope that residents would increase their economic well-being. While MTO participants experienced significant improvements in quality of life, their employment and educational attainment did not improve relative to a control group that received no assistance (Briggs et al. 2010). The results from the five-city HOPE VI Panel Study were similar: respondents moved to safer, lower-poverty neighborhoods, but their employment rates remained stagnant (Levy and Woolley 2007).

Other research has shown that job attachment and retention for low-skilled workers requires a long-term, open-ended service commitment. An evaluation of 12 models in the Employment Retention and Advancement project found successful programs required job search assistance, a stipend for employed former welfare recipients, reemployment assistance, and work site visits (Hendra et al. 2010). Similarly, Project Match, a Chicago-based workforce development program, combined a human development approach with comprehensive pre- and post-employment services for an open-ended period. For their “high advancement” group, earnings jumped 105 percent over 10 years (Herr and Wagner 2009).
Employment Results of the Chicago Family Case Management Demonstration

The CHA’s resident services programs emphasize connecting residents to the labor market. The Demonstration, which built on the CHA’s Service Connector model, included self-sufficiency programs and services along with intensive case management, a Transitional Jobs program, and referrals to GED programs and other continuing education classes at community colleges. Midway through the Demonstration in 2008, the CHA revamped its resident services, renaming its case management system FamilyWorks and increasing the emphasis on helping residents make a final housing choice and find employment. FamilyWorks drew on early findings from the Demonstration by adding clinical case management (Popkin et al. 2010a). This change was followed by the CHA’s 2009 introduction of a new, controversial work requirement as a condition of occupancy across the CHA’s public housing stock. As a part of the requirement, every adult age 18 to 61 (or age 17 and not attending school full time) in a public housing unit is expected to be working or engaging in employment-related activities 15 hours a week in 2009, and 20 hours a week thereafter, unless the authorized adult is exempt or granted Safe Harbor.

Surprising—and Tenuous—Gains in Employment

As discussed above, the only housing-related self-sufficiency program to improve employment among public housing residents was Jobs-Plus, which included specific workforce interventions. Even though the Chicago Family Case Management Demonstration provided employment services, Panel Study findings on persistently high unemployment rates led us to have low expectations for whether the Demonstration’s services could improve outcomes for especially vulnerable residents. Further, the 2008 recession could have outweighed any employment gains, potentially resulting in higher unemployment among the sample. However, the survey results show surprisingly positive findings:

Demonstration participants’ self-reported employment rate increased from 49 percent in 2007 to 59 percent in 2009 (figure 1). In contrast, the CHA Panel Study found no changes in respondents’ levels of employment from 2001 through 2009.

We also assessed Demonstration participants’ changes in employment using administrative data. There, the change in employment is not statistically significant, although the trend is similar. According to the Illinois Department of Employment Security (IDES), Demonstration participants’ employment increased from 23 to 27 percent.

There are at least two possible explanations for the difference between self-reported employment and employment measured by IDES. First, IDES only collects employment information from businesses that register for unemployment insurance, which many small businesses do not (Carlson 1995). Many CHA residents may work for businesses that are not registered with IDES and, therefore, are not counted in this measure. Second, those respondents might hold jobs that are part of the informal economy—a commercial system comprising legal and illegal activities that are not taxed, such as informal child care or braiding hair (Turner et al. 2009; Venkatesh 2006).

In a logistic regression analysis, we examined the factors associated with individuals that gained employment between the two periods. The following characteristics were associated with obtaining employment: having a high school diploma or GED, having a supportive family, and participating in the Demonstration’s Transitional Jobs program. Interestingly, while self-reported employment increased for the Demonstration sample, wages and incomes did not change in the aggregate from 2007 to 2009. Respondents still report an average wage of just over $10 an hour and most households are still living below the poverty level. Further, there is no difference in wages between residents listed as employed in IDES and those that only self-reported as employed, suggesting that there may not be a wage premium associated with formal employment, at least as defined by IDES.

Since wages did not improve, it is not surprising that the reported levels of public assistance receipt remained unchanged as well. In 2009, 37 percent of households received SSI; 68 percent of households received food stamps, and 10 percent of households received Temporary Assistance for Needy Families, roughly the same as in 2007.

Transitional Jobs—a Successful Short-Term Strategy

Demonstration participants were a particularly vulnerable subset of CHA’s resident population, and many had been disconnected from the labor market for years. Even those who were working often lacked the education and skills to help them access anything but the lowest-paying jobs. Heartland designed its Transitional Jobs (TJ) program, part of the CHA’s larger Opportunity Chicago workforce initiative, to serve the hardest to employ. TJ attempts to connect participants to the labor market, relying on intensive employment and interview training, rapid attachment to the workforce, three months of subsidized employment, and continued counseling and advocacy support throughout the first year of employment. For residents with no work experience, the 90-day trial period serves as a glimpse into the responsibilities and benefits of employment,
as Heartland’s TJ coordinator explained in a focus group in December 2009:

“It’s [through] the work experience that folks really realize what it takes to work. They do take those skills with them. That’s a transferable skill – going to work on time. And then understanding “I can make some good money doing this… or some money doing this.”

Heartland incorporated TJ into the Demonstration; TJ staff conducted active outreach to participants, and case managers referred clients to the program and helped support them once they enrolled. Initially, the Demonstration staff underestimated the severity of participants’ barriers to employment. The TJ coordinator reported problems with enrolling residents in the program because they failed the mandatory drug screening and did not meet the 9th grade education level that many employers required (Popkin et al. 2008). The program adapted to the latter challenge by instituting a pilot program focused on improving literacy levels for participants. It also lowered the literacy standards for entry into the program (Popkin et al. 2010a).

Despite these adjustments, Heartland administrators and case managers believe there is still room for improvement. Specifically, several staff noted that the one-week training period is too short to address severe deficiencies in soft skills, such as showing up to work on time, dressing appropriately, and being respectful of supervisors and coworkers. Further, case managers have seen residents become disheartened when they complete TJ and are still unable to find employment, as one case manager explained:

Even though Heartland has a lot of job training programs, [the participants] get tired of going through the same old training again and not finding employment. So they just want to put in an application and go straight to work. They see [TJ] as a waste of their time.

Overall, analysis from the follow-up survey indicates that the TJ program reached a range of participants, including those with the most complex needs. Our typology categorizes residents into three groups: “strivers,” younger residents who mostly have high school degrees and are connected to the labor force; “aging and distressed,” who suffer from high rates of mental and physical illness, lack high school degrees, and have little work experience; and “high risk,” younger residents already showing high rates of chronic illness and labor force disconnection (Theodos et al. 2010). TJ served residents from all three groups, but reached a majority of those categorized as high risk (figure 2).

Transitional Jobs has also helped residents obtain employment. Nearly 60 percent of residents that were not working in 2007 and employed in 2009 participated in TJ. While the program has successfully placed hard-to-employ residents in temporary employment, its ability to push job seekers toward sustained employment is uncertain. Of the households that had participated in TJ during the previous two years, 60 percent were not working in 2009, a much higher rate than the 40 percent that were out of work across our whole sample (Popkin et al. 2010a).

CHA’s Work Requirement: Early Success?

In addition to the TJ services, Demonstration participants had access to an intensive financial literacy program called Get Paid to Save and to the full range of Service Connector (later, FamilyWorks) services for literacy, edu-

Figure 2. Transitional Jobs Participation Rate by Cluster (percent)

Source: 2009 Demonstration sample.
cation, and job readiness and retention. In addition to working or volunteering, engagement in these employment-related services satisfied CHA’s work requirement. Indeed, even though the work requirement began only six months before the 2009 follow-up survey, the policy had already considerably altered nonworking Demonstration participants’ behavior. Among heads of household living in traditional public housing or mixed-income housing and unemployed in 2009, 57 percent said they had looked or applied for a job, 32 percent had enrolled in a job training or education program, 30 percent had volunteered or participated in community service, 66 percent had met with their case managers, and 13 percent had applied for SSI (figure 3). These findings are similar to those from the CHA Panel Study survey, which also took place in summer 2009 (Levy 2010). In interviews, CHA administrators spoke positively about the impact of the work requirement and indicated that they believed the economic downturn had not necessarily derailed employment prospects for CHA residents.

Demonstration Participants Still Face Significant Barriers

Demonstration participants faced many challenges that made obtaining—and sustaining—regular employment challenging. Indeed, many had been disconnected from the labor market for more than a decade. For the aging-and-distressed and high-risk groups, the barriers to employment were particularly pronounced (Popkin et al. 2008; Theodos et al. 2010). Even with the gains described above, employment rates for these public housing residents remain extremely low. Although the Demonstration appears to have improved or at least stabilized participants’ health, rates of chronic physical illness, disability, mental illness, and substance abuse are extremely high (Popkin and Getsinger 2010). Similar to the findings from the Panel

**Figure 3. CHA Work Requirement Impact (percent)**

<table>
<thead>
<tr>
<th>Activity</th>
<th>2009 Demonstration Sample</th>
<th>Source: 2009 Demonstration sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apply for a job</td>
<td>57</td>
<td></td>
</tr>
<tr>
<td>Enroll in education or job training course</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>Volunteer</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>Meet with case manager</td>
<td>66</td>
<td></td>
</tr>
<tr>
<td>Apply for SSI</td>
<td>13</td>
<td></td>
</tr>
</tbody>
</table>

**Figure 4. Employment and Health**

<table>
<thead>
<tr>
<th>Condition</th>
<th>With barrier</th>
<th>Without barrier</th>
<th>Source: 2009 Demonstration sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe mobility problems</td>
<td>43*</td>
<td>61</td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>30**</td>
<td>62</td>
<td></td>
</tr>
<tr>
<td>Poor mental health</td>
<td>50</td>
<td>61</td>
<td></td>
</tr>
</tbody>
</table>

* Difference between those with and without barrier is significant at the $p < .10$ level.

** Difference between those with and without barrier is significant at the $p < .05$ level.
While the rate for whites increased by percentage points a year from 2001 to 2009, we find that chronic health problems remain a barrier to finding and sustaining employment (figure 4).

The limited types of jobs for which Demonstration participants qualify partly explain why these health challenges present such a challenging barrier. The most frequently cited jobs for these respondents are in cleaning services, security, child care, and food service—industries that require physical stamina and in which health benefits and sick leave are rare (Pérez and Muñoz 2001).

Further, the recession that began in 2008 appears to have affected Demonstration participants’ employment prospects, disproportionately damaging prospects for minority workers. Unemployment rates for blacks and Hispanics increased on average by 3.6 percentage points a year from 2007 to 2009, while the rate for whites increased by 2.5 percentage points (Reidenbach and Weller 2010). At the follow-up survey in 2009, over half of working-age Demonstration participants who were not employed cited economic or labor-market reasons (figure 5). Heartland staff believe that the ground-level impact of the recession on residents is undeniable. Low-skilled workers are struggling to compete for jobs, and long-term employment will be a challenge in this economic environment.

The Costs of Moving CHA Residents to Work
There is still some reason for optimism. Despite significant challenges, the intensive case management and work supports appear to have increased employment and successfully engaged even some of the most disconnected participants. However, if the costs of these services outweigh the modest gains for CHA residents, then these findings are of only limited interest.

Our evaluation included a detailed cost analysis for the Demonstration. Table 1 details the take-up, per person cost, and total cost of each employment-related service from March 2008 to September 2009. TJ, because of the three-month wage subsidy (approximately $3,000 total) provided to participants, has the highest per person ($3,402) and total costs ($116,138). These costs are also borne entirely by the Demonstration, whereas GED courses, which are referred out, do not show up in the direct costs. While these costs seem reasonable given the outcomes thus far, a definitive conclusion regarding the effectiveness of training and other investments must be reserved until long-term monitoring reveals whether gains in employment are sustained.

Policy Implications
Given the challenges facing Demonstration participants, we anticipated that even with intensive case management and work supports, we might see no gains in employment rates; in fact, with the recession, we thought we might see decreases. Instead, our follow-up results reveal that, despite an extremely difficult labor market, self-reported employment among working-age Demonstration participants increased, a notable divergence from a decade of HOPE VI research. Further, the intensive Transitional Jobs program appears to have contributed to these employment gains.

However, the Demonstration did not cure all the problems faced by these extremely vulnerable public housing residents. The increase in self-reported employment rate did not translate to higher incomes or less reliance on public assistance, at least during the course of our study. We also have concerns about whether these employment gains will last in this challenging economic climate. And for out-of-work residents, the Demonstration’s services were not enough to lift them over a multitude of personal and structural barriers to work. The experience of the Demonstration—coupling intensive case management with employment services—offers lessons not only for the CHA’s practices, but also for other housing authorities grappling with similar challenges.

- The Transitional Jobs model is extremely promising. Demonstration participants, like many CHA residents, clearly need supports and incentives to help them achieve employment. The Transitional Jobs program appears to be helping even distressed residents achieve this goal, at least in the short term. According to our survey, the majority of residents that gained employment between 2007 and 2009 participated in TJ. However, the program was not as successful at placing residents who were extremely unprepared for the workforce, namely those with literacy levels far below the requirements for entry-level work. Heartland’s experiment with adding literacy
to the TJ program occurred too late in the Demonstration for us to fully evaluate, but the initial results were promising. Further, service providers consistently stated that a one-week training program was not enough to fully address many of the barriers to employment that residents face. And some TJ participants are unable to maintain stable employment after their three-month subsidy period. The CHA should continue funding TJ, while also considering a more intensive training program for the neediest participants that focuses on literacy and developing soft skills.

The findings from the Demonstration have ramifications for housing authorities nationwide. Our results indicate the need for a two-tiered training strategy. The first tier would target a two- to three-week TJ program to residents with the requisite literacy and education for entry-level employment. The second, more intensive program would resemble the revised TJ model and last four to six weeks, with more emphasis on improving literacy.

As the country enters a period of extended high unemployment, public and assisted housing residents need the supports and incentives provided through such programs as Transitional Jobs more than ever. The Demonstration proves that strategic partnerships between housing authorities and service providers are associated with real gains. Yet, answering the question of whether this model is scalable requires replication by housing authorities in other cities.

- **The CHA must rigorously evaluate the impact of the work requirement.** While the CHA did not implement its work requirement for public housing residents until halfway through the Demonstration, it had some effect on the behavior of non-working Demonstration participants. The CHA plans to raise the hours requirement from 15 hours a week to 20, and has hinted that it will expand the work requirement to include voucher holders as well. Given the CHA’s position at the vanguard of innovative public housing workforce strategies, its findings from the first few years of the work requirement will undoubtedly reverberate throughout public housing authorities nationwide.

- **A successful job-training program must address stark mental and physical health barriers to work.** Aside from the economy, the most frequently cited barriers that keep CHA residents from working are health related. Depression, anxiety, and substance abuse preclude working-age individuals from being mentally prepared to hold down a job. Many residents do not have the physical capacity to work because of chronic physical health problems including diabetes, hypertension, and asthma. Stable employment will be difficult to obtain without first addressing these serious health challenges.

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**Table 1. Employment-Related Service Take-Up and Cost**

<table>
<thead>
<tr>
<th>SHARE ENROLLED</th>
<th>FULL COST</th>
<th>DEMONSTRATION COST</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Demonstration</td>
<td>Per person</td>
</tr>
<tr>
<td>GED course</td>
<td>9%</td>
<td>$1,472</td>
</tr>
<tr>
<td>Continuing education course</td>
<td>4%</td>
<td>$166</td>
</tr>
<tr>
<td>Employment skills training</td>
<td>25%</td>
<td>$755</td>
</tr>
<tr>
<td>Financial literacy</td>
<td>23%</td>
<td>$357</td>
</tr>
</tbody>
</table>

Note: Not all services were provided by the Demonstration’s providers. “Full cost” columns detail the costs borne by the Demonstration’s service providers and all external providers. “Demonstration cost” columns represent costs borne by Heartland.
Notes
1. See Popkin, Levy, and Buron (2009) for a full description of the five-site HOPE VI Panel Study research.

2. See Popkin et al. (2010b) for an overview of the Demonstration.

3. Our sample, which consists of adults between 18 and 61 years old who do not receive Supplemental Security Income (SSI) or Social Security Disability Insurance, represents 62 percent of the overall Demonstration sample.


5. A resident may be eligible for an exemption, which he or she receives at annual recertification, or may be approved for Safe Harbor, in which case he or she has 90 days to become compliant with the work requirement. Property managers will continue to recertify a resident’s Safe Harbor status every 90 days to determine continued eligibility throughout fiscal year 2010. For more information, see the CHA’s Admissions and Continued Occupancy Policy at http://www.chicagometropolis2020.org/documents/CHA_Admissions_and_Continued_Occupancy_Policy.pdf.

6. This result is significant at the .05 level.

7. Results from the HOPE VI Panel Study are used to benchmark our findings. But because of the different time frames, different relocation studies, and small sample sizes, we are unable to determine impact or make definitive outcome comparisons.

8. Change in employment was modeled using a multivariate logistic regression; the dependent variable was whether employment status changed from not working to employed between 2007 and 2009. Having a high school degree or GED, having a supportive family, and participating in Transitional Jobs were significant at the .05 level, controlling for physical health, depression, housing assistance, gender, the presence of children in the household, and age.

9. Family support is measured by a scale composed of 13 questions from the Social Support Survey/Family Support Scale. Cronbach’s alpha is 0.73. The response category to questions were strongly agree, somewhat agree, somewhat disagree, and strongly disagree.

10. We found the Transitional Jobs program a significant factor leading to employment for residents with sufficient literacy levels.

References


Chicago Family Case Management Demonstration

The Chicago Family Case Management Demonstration was a partnership of the Urban Institute, the Chicago Housing Authority (CHA), Heartland Human Care Services, and Housing Choice Partners, intended to test the feasibility of providing wraparound supportive services for vulnerable public housing families. The demonstration ran from March 2007 to March 2010, targeting approximately 475 households from the CHA’s Dearborn Homes and Madden/Wells developments with intensive case-management services, transitional jobs, financial literacy training, and relocation counseling.

The Urban Institute evaluated the Chicago Family Case Management demonstration to inform implementation and track outcomes for participants over time. In spring 2007, we conducted a baseline resident survey (n = 331, response rate 77 percent). The survey asked about a range of domains, including housing and neighborhood conditions, service use, mental and physical health, employment and economic hardship, and children’s health and behavior. We conducted a follow-up survey (n = 287, response rate 90 percent) in summer 2009, approximately two years after the rollout of the demonstration. The largest source of attrition between 2007 and 2009 was mortality; we were able to locate, if not survey, nearly all original sample members.

To complement the survey, Urban Institute staff conducted 30 qualitative in-depth interviews (21 adults and 9 adolescents) with participants in summer 2008. We also gathered information from CHA administrative records and case manager reports, including whether residents chose to engage in the demonstration services, whether participants were referred for additional services, and their relocation history. In addition, we assembled secondary data on neighborhood poverty, unemployment, crime, race and other characteristics that we received from the Metro Chicago Information Center. Finally, we conducted a process study to assess the efficacy and cost of the demonstration’s implementation. We conducted in-depth qualitative interviews with case managers, project staff, relocation providers, and CHA administrators, monitored service implementation weekly, and met regularly with Heartland and Housing Choice Partners leadership and CHA staff. We also thoroughly analyzed the costs associated with the intensive services.

The principal investigator for the Chicago Family Case Management Demonstration is Susan J. Popkin, Ph.D., director of the Urban Institute’s Program on Neighborhoods and Youth Development. Funding for the demonstration was provided by the John D. and Catherine T. MacArthur Foundation, the Annie E. Casey Foundation, the Rockefeller Foundation, the Partnership for New Communities, JPMorgan Chase, and the Chicago Housing Authority.

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Photograph © 2010 by Shauna Bittle.

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