



EnVision Centers

Insights from Research on Past Efforts to Promote Self-Sufficiency among HUD-Assisted Households

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Secretary Carson's EnVision Centers initiative aims to help households receiving assistance from the US Department of Housing and Urban Development (HUD) achieve self-sufficiency, enabling them to leave assistance and become homeowners or renters in the private market so HUD can use its resources to help other low-income households.¹ EnVision Centers reflect the "notion that financial support alone is insufficient to solve the problem of poverty" and that it will take a collective partnership to "implement a holistic approach to foster long-lasting self-sufficiency."

EnVision Centers aim to be centralized hubs where HUD-assisted households can access support in four pillars:

1. **Economic empowerment.** Improve economic sustainability for people living in HUD-assisted housing by empowering them with opportunities to improve their economic outlook
2. **Education.** Bring educational opportunities to HUD-assisted housing, which includes partnering with public and private organizations that approach education in nontraditional ways on nontraditional platforms
3. **Health and wellness.** Improve access to health outcomes by individuals and families living in HUD-assisted housing
4. **Character and leadership.** Enable all individuals and families residing in HUD-assisted housing, especially young people, to reach their full potential as productive, caring, and responsible citizens by encouraging participation in volunteer and mentoring opportunities

The initiative will launch with 10 pilot sites and a mobile application to help HUD-assisted households find resources through the EnVision network. HUD will select communities where local government leadership is committed to creating a partnership and a path to advance the initiative's goals and communities where a federal place-based initiative (Promise Zone, Promise Neighborhood, Byrne Grant, or Strong Cities, Strong Communities) or other HUD initiative (Moving to Work, Jobs Plus,

the Family Self-Sufficiency program, or the Resident Opportunities and Self-Sufficiency program) is already in place to promote economic self-sufficiency.

This new initiative can draw upon lessons from nearly 30 years of efforts to use housing assistance as a platform for services to help recipients improve their economic circumstances, including the Family Self-Sufficiency program (FSS), the Resident Opportunities and Self-Sufficiency program (ROSS), Jobs Plus, and smaller targeted efforts, such as the Housing Opportunities and Services Together (HOST) demonstration. The evidence shows these programs have only limited success in helping public and assisted housing residents improve their economic circumstances. Past efforts have revealed the major barriers that many residents face, such as chronic mental and physical health challenges, low levels of literacy, substance abuse, and family members with criminal records. Even people who succeed in programs like FSS and Jobs Plus generally remain very low income, and only a few move on to homeownership or success in the private market. Other research shows that residents who “graduate” from assisted housing because of increased earnings or homeownership struggle in the private market and experience material hardship.

We offer nine recommendations drawn from the evidence on these past efforts that the EnVision Centers could apply to help assisted households move toward self-sufficiency and attain financial stability:

1. Require grantees to provide enhanced case management that uses a strengths-based approach [FSS Escrow Plus, HOST]
2. Use a community-based saturation approach to create a “culture of work” [Jobs Plus]
3. Create strong partnerships between housing agencies and service providers that can bring services on-site in assisted housing developments [HOST, Choice Neighborhoods, ROSS]
4. Use a two-generation approach that integrates workforce services for adults with strong educational supports for children and youth [HOST]
5. Use a trauma-informed approach and address mental health needs [Chicago Family Case Management Demonstration, HOST, Choice Neighborhoods]
6. Partner with federally qualified health centers to provide mental health and wellness services and apply evidence-based models, such as Every Heartbeat Is Life [HOPE VI community services]
7. Engage assisted residents in design and community outreach [Jobs Plus, HOST, tenant patrols, resident councils]
8. Keep expectations realistic by allowing assisted residents time to build assets and address economic challenges [FSS, FSS Escrow Plus]
9. Address benefit cliffs to help assisted residents maintain financial stability while transitioning off assistance [Housing assistance leavers research]

This brief summarizes the history of efforts to use housing as a platform to promote self-sufficiency and the evidence about the effectiveness of these efforts.

Evidence on Housing as a Platform to Support Economic Advancement (Pillars 1 and 2)

Public and assisted housing programs began as real estate programs to provide decent, affordable housing for low-income families. Some developments included community centers or offered space for outside service providers, but housing authorities and HUD did not directly fund or deliver resident services. Beginning in the 1960s, HUD subsidized properties targeted to low-income seniors and people with disabilities, and these developments provided basic services. But until the 1990s, low-income housing was not a platform for delivering services that might address residents' broader needs. As HUD and local housing agencies faced time-limited welfare benefits and the fact that federal housing subsidies cannot serve all households experiencing housing hardship, interest has grown in developing strategies to link HUD-assisted families with services to help them move toward economic independence (Turner, Cunningham, and Popkin 2015).

Services to support crime prevention: CADRE centers. To meet the needs of vulnerable public housing residents and contain the crime that threatened to overwhelm distressed developments, Congress enacted the Public Housing Drug Elimination Program (PHDEP) in 1988. In addition to providing funding for security and public housing authority (PHA) police forces, PHDEP supported small-scale resident service programs, including youth violence prevention programs, midnight basketball leagues, and tenant patrols. CADRE (Combatting Alcohol and Drugs through Rehabilitation and Education) centers, a PHDEP program similar to the new EnVision Centers, were resident-staffed drop-in centers that offered on-site access to information about services and resources. The service component of PHDEP was never formally evaluated, but studies of PHDEP found even the most comprehensive of these programs (e.g., Chicago's Anti-Drug Initiative) had only modest effects on crime and did little to improve conditions for residents or promote changes in well-being (Popkin et al. 2000).

Efforts to help residents move to self-sufficiency. By 1991, nearly one in five public housing residents earned less than 10 percent of the local median income, a different population than policymakers had originally envisioned. At the same time, policymakers debated whether social welfare programs, including housing assistance, discouraged low-income recipients from moving toward self-sufficiency. This debate eventually led to welfare reform and the transition to Temporary Assistance for Needy Families (TANF) and time-limited cash assistance. HUD and local housing agencies were faced with the possibility that an increasing number of residents might have no income and no ability to pay even modest rent while Congress was cutting funding for public housing and vouchers. Policymakers began to focus on whether housing assistance could be a platform for helping participants improve their economic circumstances—that is, could housing agencies help residents address barriers to employment and leave housing assistance?

This policy shift spurred a major expansion of services associated with public and assisted housing, including the Moving to Work Demonstration, the FSS program, the Jobs Plus demonstration, and efforts to help residents transition to homeownership (Turner and Rawlings 2005). More recently, HUD created the ROSS program and the Multifamily Service Coordinator program to provide housing

agencies funding for service coordinators in public and assisted housing to help link residents to employment and educational services.² The largest effort to link housing to supportive services was the community supportive services component of the HOPE VI program (Popkin et al. 2004). That effort continued under the Choice Neighborhoods Initiative and has spurred new innovations, including the HOST demonstration, which involved a partnership of local housing agencies, researchers, HUD, and philanthropic funders (Pendall and Hendey 2013; Popkin and McDaniel 2013; Scott, Popkin, and Simington 2016). HUD intends its new EnVision Centers to build on these earlier efforts and increase the focus on moving housing assistance recipients to self-sufficiency.

The Family Self-Sufficiency program. The FSS program is the largest HUD effort to use housing as a platform for moving public housing residents and housing voucher recipients toward self-sufficiency.³ Even so, the program serves only about 5 percent of voucher holders and an even smaller share of public housing residents. The program was built on two earlier HUD efforts to link housing to employment programs and services, Project Self Sufficiency and its successor, Operation Bootstrap, both of which offered employment and training services to low-income families. Neither effort was rigorously evaluated, but studies of the programs indicated modest success for participants.

Households that participate in FSS enter into a five-year contract with the PHA, which outlines family goals and obligations and the services available to them to help meet those goals. HUD requires every participant contract to include two goals: the head of household must become employed, and no member of the family may receive cash TANF benefits for 12 months before completing the contract. The FSS program's most distinctive feature is the escrow account. If a participant's income rises, the required rent contribution rises as well (because rent is set at 30 percent of income), but the PHA deposits the difference between initial rent and increased rent in an interest-bearing escrow account. The more an FSS participant's income increases, the larger the escrow account grows. With some restrictions, families may draw on their escrow accounts while participating in the program for expenses that will help them achieve interim goals. Participants who voluntarily withdraw or are terminated from the program lose their escrow accounts. Participants who graduate—that is, who are employed and no longer receive TANF cash benefits—receive their escrow funds with no restrictions.

Evidence is mixed about the FSS program's effectiveness in moving recipients to self-sufficiency, especially those who face the biggest barriers. The major concern is that only a minority of FSS participants graduate from the program and withdraw their escrow. A recent study found that after four years, just 21 percent of participants had graduated and received their escrow, 37 percent had left the program without graduating, and the rest were still enrolled. Presumably, some of these participants eventually graduated, which would boost the numbers higher. Participants who did graduate were earning substantially higher incomes and had steady employment. But the evidence on asset building was less clear. Only a handful of participants used their escrow to purchase a home. Most used their accounts to pay for continuing education, pay off debts to improve credit, or purchase a car, all of which could move participants toward economic independence. A rigorous randomized controlled trial of the FSS program is under way, and early results indicated no consistent differences between the

experimental and control groups on key outcomes, such as employment and participation in education and training programs.⁴

New research suggests escrow plus enhanced services may be more effective. The mixed findings from the nonexperimental research combined with the early indicators from the ongoing experimental research suggest that current FSS service delivery is likely to have only modest benefits. In particular, the low graduation rate means most participants cannot meet the program requirements and end up forfeiting their escrow. Given that those who do graduate seem to have generally positive outcomes, a program model that provides more intensive and effective case management could lead to stronger outcomes. Several PHAs are testing “escrow plus” models that include enhanced case management and credit repair. A recent study of an escrow plus model in Lynn, Massachusetts, found that participants experienced gains in income, were less likely to use TANF, and had improved credit scores (Geyer et al. 2017).

Jobs Plus demonstration and expansion. The Jobs Plus demonstration was a comprehensive place-based service model. It was implemented in six public housing developments from 1998 to 2003 to rigorously test the impact of an intensive place-based strategy aimed at addressing persistent barriers to employment for public housing residents. The demonstration took a three-pronged approach to helping public housing residents increase employment and earnings: on-site employment services, income disregards so that increases in employment and earnings did not lead to increased rents, and community supports for work. In sites where all three components were fully implemented, Jobs Plus raised residents’ earnings significantly and was a success. This evidence of effectiveness has generated renewed interest in the Jobs Plus model from policymakers and philanthropic organizations seeking evidence-based service models. The Bloomberg Philanthropies provided \$8 million to fund Jobs Plus programs in 10 sites in New York City and 1 in San Antonio as part of its Young Men’s Initiative. HUD recently provided \$24 million in grants to nine housing authorities to implement new Jobs Plus programs.⁵ These new initiatives aim to expand the Jobs Plus model. HUD is funding an evaluation of the expanded version. The interim report, released in 2017, shows that sites are creating partnerships and implementing new community-based versions of the Jobs Plus model. The Jobs Plus expansion could be a model for EnVision’s self-sufficiency pillars.

Moving to Work demonstration and work requirements. The MTW demonstration is primarily an experiment in deregulation that gives PHAs more discretion about program rules and enables them to use funds originally designated for operating funds, capital improvements, or vouchers more flexibly to pay for activities that help residents move toward self-sufficiency. Thirty-nine PHAs have had this flexibility, and some have experimented with work requirements, time limits, and alternative subsidy formulas. Some of these efforts have been in place for more than a decade, but little rigorous evidence is available about how well they have helped families improve their economic circumstances (Levy, Edmonds, and Simington 2018). The only formal evaluation of an MTW work requirements program, in Charlotte, North Carolina, found that the model, which included enhanced supportive services, increased incomes, but participants did not earn enough to exit assistance.

Place-based models of housing and services: HOPE VI and Choice Neighborhoods. The most ambitious effort to use HUD-assisted housing as a platform for supportive services emerged as part of the transformation of severely distressed public housing that began under the HOPE IV program. HOPE VI's primary goal was to replace these distressed communities with new, mixed-income developments that would offer a better quality of life for residents. But the program also provided substantial funding for both relocation and community supportive services. The original legislation set aside 15 percent of the funding for community service programs and services, such as day care, youth programs, and employment programs. Later rounds of funding changed the requirement to "up to 15 percent," and the average set-aside dropped to about 8 percent. At the same time, HUD increased its attention to resident services, including relocation services, and mandated that services be provided to all original residents, even if they did not return to the original development. The Choice Neighborhoods Initiative, which succeeded HOPE VI, has continued this approach.

The largest study of the impact of the HOPE VI program for the original residents found that most ended up in better housing in safer neighborhoods, whether or not they returned to their revitalized developments, and anxiety and worry among adults declined. But the research found no evidence of gains in employment or educational outcomes. These findings reflect, in part, the high levels of physical and mental health problems among residents of severely distressed public housing, all of which create barriers to employment and school success. The services provided under the HOPE VI community supportive service could not help residents overcome such major barriers.⁶ Like HOPE VI, Choice Neighborhoods requires grantees to offer community supportive services to all original residents, including case management and employment services. Early evidence suggests that Choice Neighborhoods has faced many of the same challenges as HOPE VI.⁷

HOST: Housing as a platform. In response to evidence about the unmet service needs of vulnerable households living in distressed public housing, the Urban Institute has partnered with housing authorities and service providers to test intensive service models.⁸ The Chicago Family Case Management Demonstration targeted 400 households in two housing developments with services that included intensive case management (caseload ratios of 30:1), clinical mental health services, a transitional jobs program, substance abuse services, and financial literacy.⁹ Participants experienced gains in employment and statistically significant reductions in depression and anxiety, and their physical health stabilized. But children, especially older youth, were still struggling and showing signs of distress, including high levels of delinquent and problem behavior.¹⁰

Because of the generally positive findings, the Chicago Family Case Management Demonstration was used as the model for Choice Neighborhoods supportive services. The requirement to provide intensive wraparound services was written into the program's authorizing legislation (Popkin 2007). These findings also informed the design of the HOST demonstration, which tests a whole-family, wraparound model to address intergenerational poverty and disadvantage in public and subsidized housing (Scott et al. 2013). HOST includes a core case management component with low ratios of 30:1. The services help parents confront barriers to self-sufficiency—poor physical and mental health, substance abuse, low literacy and educational attainment, and historically weak connections to the

labor force—while integrating services for children and youth. The HOST demonstration operated in public and mixed-income communities in Chicago, Illinois; Portland, Oregon; and Washington, DC, from 2010 to 2015. Early results from HOST indicated gains in employment and reductions in lease violations for participants. In addition, HOST has offered important lessons for creating partnerships between PHAs and service providers, the challenges of creating two-generation models, and the importance of providing on-site mental health services (Scott, Popkin, and Saxena 2016). Further, the HOST model has shown the benefits of community engagement and meeting residents where they are as an effective tool for helping residents move toward stability and self-sufficiency.

Evidence on Housing as a Platform to Support Health and Wellness (Pillar 3)

Less evidence is available about providing services to support work-ready residents' health and wellness. Housing for seniors and the disabled often includes congregate meals, medication management, and wellness checks. Urban Institute research on HOPE VI showed that residents suffered from high rates of chronic health problems, such as asthma and diabetes, and HUD explored initiatives to partner with federally qualified health centers to provide on-site services to residents dealing with these challenges as part of HOPE VI community supportive services. In addition, HUD formed partnerships with other federal agencies and provided technical assistance and training to encourage grantees to implement such approaches as the National Heart, Lung, and Blood Institute's Every Heart Beat Is Life model (NHLBI 2007). The Chicago Family Case Management Demonstration and HOST included on-site clinical mental health services for adult and youth participants. The Chicago demonstration also offered an on-site substance abuse support group and reserved slots in inpatient treatment centers. This approach might be a model for addressing opioid abuse through the EnVision initiative.

Evidence on Housing as a Platform to Support Character and Leadership (Pillar 4)

Although leadership development has been a component of some public housing initiatives, more research is needed to understand their effectiveness. Some community engagement models support this kind of approach, including tenant patrols and tenant-run “walking school bus” programs. Resident councils also offer tenants opportunities for leadership. Finally, community-based participatory efforts, such as Urban's PASS and teen food literacy programs, have offered opportunities for residents to be community facilitators and community leaders, helping design, implement, and assess solutions for their communities.¹¹

Notes

1. “EnVision Centers,” US Department of Housing and Urban Development, accessed February 13, 2018, <https://www.hud.gov/envisioncenters>.
2. These programs were preceded by the small-scale Family Investment Center and Tenant Opportunities Programs. See 24 C.F.R. §964, “Tenant Participation and Tenant Opportunities in Public Housing,” <http://www.gpo.gov/fdsys/pkg/CFR-2012-title24-vol4/pdf/CFR-2012-title24-vol4-part964.pdf>.
3. HUD also offers funding to support service coordinators for public housing developments (the Resident Opportunity and Self-Sufficiency program). The service coordinator connects residents to employment and educational services. The program has not been rigorously evaluated, but given its low levels of funding and high caseloads, service coordinators alone will not have much impact on residents’ long-term employment or educational outcomes. HUD also supports service coordination for seniors in federally subsidized housing developments that are privately owned (the Multifamily Service Coordinator program), but this program aims to promote stability and well-being rather than self-sufficiency.
4. Early results from the MDRC study of FSS were presented in an Office of Planning, Research, and Evaluation–Social Science Research Council webinar in January 2015. See “Promoting Work in Public Housing: Employment Service Programs,” Self-Sufficiency Research Clearinghouse, accessed February 13, 2018, <https://www.opressrc.org/file/promoting-work-public-housing-employment-service-programs>. In addition, MDRC concludes that results for New York City suggest that FSS by itself does not appear to be effective.
5. HUD is planning an implementation evaluation of this new effort but not another randomized controlled trial.
6. “HOPE VI: Where Do We Go from Here?” Urban Institute, Metropolitan Housing and Communities Policy Center, accessed February 13, 2018, <https://www.urban.org/policy-centers/metropolitan-housing-and-communities-policy-center/projects/hope-vi-where-do-we-go-here>.
7. The problems in Choice Neighborhoods’ service implementation were pronounced in sites funded for multifamily properties where the lead agencies did not have prior experience with HOPE VI.
8. HUD is part of the funder consortium for HOST.
9. “CHA Families and the Plan for Transformation,” Urban Institute, accessed February 13, 2018, <https://www.urban.org/features/cha-families-and-plan-transformation>.
10. “No Simple Solutions: Transforming Public Housing in Chicago,” Urban Institute, accessed February 13, 2018, <https://www.urban.org/nosimplesolutions>.
11. “Making Their Voices Heard: Improving Research through Community Collaboration,” Urban Institute, January 10, 2017, <https://www.urban.org/features/making-their-voices-heard-improving-research-through-community-collaboration>; “Impossible Choices,” Urban Institute, accessed February 13, 2018, <http://apps.urban.org/features/food-insecurity/>.

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Errata

This brief was updated on July 23, 2018, to add funder, boilerplate, and copyright language and to correct a reference on page 3.

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